AUDIT BOARD

Date: 12th December 2013

THE INTERNAL AUDIT MONITORING REPORT OF THE SERVICE MANAGER OF THE WORCESTERSHIRE INTERNAL AUDITSHARED SERVICE.

Councillor Roger Hollingworth
Yes
Sam Morgan, Financial Services Manager
All Wards
No
Non–Key Decision
-

1. <u>SUMMARY OF PROPOSALS</u>

- 1.1 To present:
- the monitoring report of internal audit work and performance as at 31stOctober 2013;

2. <u>RECOMMENDATIONS</u>

2.1 The Board is asked to RESOLVE that the report be noted.

3. <u>KEY ISSUES</u>

Financial Implications

3.1 There are no direct financial implications arising out of this report.

Legal Implications

3.2 The Council is required under Regulation 6 of the Accounts and Audit Regulations 2011 to "undertake an adequate and effective internal audit of its accounting records and of its system of internal control in accordance with the proper practices in relation to internal control".

Service / Operational Implications

3.3 The involvement of Members in progress monitoring is considered to be an important facet of good corporate governance, contributing to the internal control assurance given in the Council's Annual Governance Statement.

AUDIT BOARD

Date: 12th December 2013

This section of the report provides commentary on Internal Audit's performance for the period 01st April 2013to 31stOctober 2013 against the performance indicators agreed for the service. Also included is the completion and reporting of 2012-2013 audits for information.

AUDIT REPORTS ISSUED/COMPLETED SINCE THE LAST REPORT:

2013/14 AUDITS COMPLETED AS AT 31st OCTOBER 2013

Bromsgrove Urban Rural Transport (BURT) ~ Community Transport

The review was a health check audit concentrating on specific areas of the Community Transport system including effective reporting, overall management arrangements are satisfactory, key systems are backed up and staff are appropriately trained. The review found there is a good working relationship and generally sound system of internal control in place. The contract is managed effectively but it was noted that there could be some improvement with regard to the Client's responsibilities and the Service Level Agreement which will result in enhanced performance monitoring of this contract.

Assurance Level: Significant Final Report issued: 10th October 2013

Development and Building Control

The review was a full systems audit concentrating on the receipt, payment and processing of Building Control applications as operated by Bromsgrove District Council for all three partners as at the time of audit. The audit did not cover the Service Level Agreement for the North Worcestershire Building Control Service. The review found generally there is a sound system of control in place and there were no significant delays in the processing of building control applications and all income was traced to the relevant financial ledgers. In addition there is regular monitoring of performance including the number of applications processed and level of work load per Building Control officer. The one high priority recommendation reported relates to the lack of a financial charging statement in accordance with the Building (Local Authority Charges) Regulations 2010. It should be noted however that although this is a requirement under the regulations it no longer forms part of the final account process as with previous years.

Assurance Level: Significant Final Report issued: 29th October 2013

AUDIT BOARD

Date: 12th December 2013

Summary of Assurance Levels:

Audit	Assurance Level
2013/2014	
BURT ~ Bromsgrove Urban Transport Travel	Significant
Community Transport	
Building Control	Significant

2012/13 AUDITS NEARING COMPLETION 31st OCTOBER2013

<u>Shared Service ~ (Shared Service/Transformation Savings and Clarity of Reporting to the Members)</u>

The audit of the Corporate Governance (Shared Service/Transformation Savings and Clarity of Reporting to the Members) was requested by the members of the Shared Services Committee to review the accuracy of the savings and the clarity of the information provided to the committee. It was carried out in accordance with the Worcestershire Internal Audit Shared Service Audit Plan for Bromsgrove District Council for 2012/13.

This audit had reached draft report stage but in discussion the s151 Officer requested further work to be undertaken in this area. The audit, therefore, is progressing and will be reported in the near future.

As the above audit remains in progress an assurance level will be allocated on completion.

2013/14 AUDITS IN PROGRESS AS AT 31st OCTOBER 2013

<u>S106's(currently progressing through fieldwork stage)</u>

The review is a full system audit concentrating on S106 Agreements from the point the agreement is signed and will cover the S106 Agreements in place at the time of the audit. The review will not cover the reasoning behind or procedures undertaken to obtain agreement to a S106 Agreements.

<u>Housing and Council Tax Benefits</u>(currently progressing through fieldwork stage) The review is a full system audit concentrating on areas including overpayments occurring as a result of Local Authority error, emergency loan payments, fraud identification, assessment and recovery, and, reconciliations of Benefits including Council Tax and general ledger entries.

Date: 12th December 2013

<u>NNDR</u>(currently progressing through clearance stage)

The review is a full system audit concentrating on areas including empty property monitoring and billing, reconciliations from the NNDR system to feeder systems (i.e. Cash Receipting, Benefits system and Financial ledger), effective procedures are in place to ensure all new build is monitored and brought into valuation at the earliest possible date, accounts with credit balances are regularly reviewed and appropriate action taken, prompt recovery action is taken in accordance with agreed recovery timetable and procedures, and, system access is appropriate.

<u>Council Tax</u>(currently progressing through clearance stage)

The review is a full system audit concentrating on areas including regular reconciliations from Council Tax system to feeder systems (i.e. Cash Receipting, Benefits system and Financial ledger), empty properties are monitored and billed promptly, accounts with credit balances are regularly reviewed and appropriate action taken, effective procedures are in place to ensure all new build is monitored and brought into valuation at the earliest possible date, prompt recovery action is taken in accordance with agreed recovery timetable and procedures, and, systems access is appropriate.

<u>Debtors</u>(currently progressing through fieldwork stage)

The review is a full system audit concentrating on the debtors system from the point where the invoice is raised to entry into the main ledger. The audit will not look at the cash collection procedures as this will be covered in a separate audit.

<u>Creditors</u>(currently progressing through fieldwork stage)

The review is a full system audit concentrating on the Creditor System including areas of segregation, supplier details, reconciliations, system access and requirements of the HMRC's Real Time information reporting are met in relation to any payments made to sub-contractors. The audit will not cover the procurement process.

<u>ICT</u>(currently progressing through fieldwork stage)

The review is a full systems audit concentrating on the controls in operation by IT Services to provide measures of success including ICT helpdesk functionality since the merging of the Redditch Borough Council and Bromsgrove District Council, the control around the starters and leavers from the point where network access is requested, and, whether there is effective and efficient control around the disposal of IT equipment. The audit will not cover the starters and leavers procedures followed by Human Resources, or, the controls around the acquisition of IT equipment as this is covered under Procurement.

AUDIT BOARD

Date: 12th December 2013

3.4 AUDIT DAYS

Appendix 1 shows that progress continues to be made towards delivering the Internal Audit Plan and achieving the targets set for the year. As at 31st October 2013 a total of 107days had been delivered against a target of 300 days for 2013/14.

Appendix 2 shows the performance indicators for the service. These indicators were agreed by the Board on the 14th March 2013 for 2013/14.

Appendix 3 shows a summary of the 'high' and 'medium' priority recommendations for those audits that have been completed and final reports issued.

Appendix 4 provides the Board with an analysis of audit report 'Follow Ups' that have been undertaken to monitor audit recommendation implementation progress by management.

3.5 OTHER KEY AUDIT WORK

Much internal audit work is carried out "behind the scenes" but is not always the subject of a formal report. Productive audit time is accurately recorded against the service or function as appropriate. Examples include:

- Governance for example assisting with the Annual Government Statement
- Risk management
- Transformation review providing support as a critical review
- Dissemination of information regarding potential fraud cases likely to affect the Council
- Drawing managers' attention to specific audit or risk issues
- Audit advice and commentary
- Internal audit recommendations: follow up review to analyse progress
- Day to day audit support and advice for example control implications, etc.
- Networking with audit colleagues in other Councils on professional points of practice
- National Fraud Initiative.
- Investigations

Recruitment

3.6 Due to natural turnover WIASS currently has two establishment posts vacant; a reduction from the three previously reported and it is hoped that this will further be reduced to one by the middle of December. Close monitoring of resource is continuing using current management information to assist the delivery of the Partner's plans in relation to forecasted demand for the remainder of the year.

AUDIT BOARD

Date: 12th December 2013

WIASS is committed to delivering all audits as indicated in the 2013/14plan for Bromsgrove District Council and will continue to take active steps to achieve this using agency staff where required. The current projection is that of no extra cost to Bromsgrove District Council.

Customer / Equalities and Diversity Implications

3.7 There are no implications arising out of this report.

4. **RISK MANAGEMENT**

The main risks associated with the details included in this report are:

- failure to complete the planned programme of audit work within the financial year; and,
- the continuous provision of an internal audit service is not maintained.

These risks are being managed via the 4Risk risk management system within the Finance and Resources risk area.

5. <u>APPENDICES</u>

Appendix1 ~ Internal Audit Plan delivery 2013/14Appendix2 ~ Key performance indicators 2013/14Appendix3 ~ 'High' and 'Medium' priority recommendations summary with
finalised reportsAppendix4 ~ Follow up summary

6. BACKGROUND PAPERS

Individual Internal Audit reports.

7. <u>KEY</u>

N/a

AUTHOR OF REPORT

Name:Andy Bromage
Service Manager - Worcestershire Internal Audit Shared ServiceE Mail:andy.bromage@worcester.gov.ukTel:01905 722051

APPENDIX 1

Delivery against Internal Audit Plan for 2013/14 <u>1st April 2013 to 31stOctober 2013</u>

Audit Area Core Financial Systems (*Note 1)	2013/14 PLANNED DAYS 87	DAYS PLANNED TO THE END OF QUARTER 3(31 st December 2013) 87	DAYS USED TO 31/10/13 21
Corporate Audits	68	24	9
Other Systems Audits (*Note 2)	109	67	57
TOTAL	264	178	87
Audit Management Meetings	15	12	11
Corporate Meetings / Reading	5	4	3
Annual Plans and Reports	8	6	0
Audit Board Support	8	6	5
Other chargeable	0	0	1
TOTAL	36	28	20
TOTAL	300	206	107

*Note 1

Core Financial Systems are audited in quarters 3 and 4 in order to maximise the assurance provided for Annual Governance Statement and Statement of Accounts. We are planning to undertake this work in Q3 this year.

*Note 2

A number of the budgets in this section are 'on demand' e.g. consultancy, investigations so the requirements can fluctuate.

AUDIT BOARD

Date: 12th December 2013

KEY PERFORMANCE INDICATORS 2013/14

APPENDIX 2

The indicators provide the Board with an overall assessment in respect of reports delivered by the Internal Audit Shared Service as well as Corporate factors including the number of 'high' priority recommendations which may lead to an added overall corporate risk factor perspective.

	КРІ	Trend requirement	2012/13 Year End Position	2013/14 Position (as at October 2013)	Frequency of Reporting
1	No. of 'high'priority recommendations	Downward	8	1	Quarterly
2	No. of moderate or below assurances	Downward	3	0	Quarterly
3	No. of customers who assess the service as 'excellent'	Upward	2	3	Quarterly
4	No. of audits achieved during the year	Per target	Target = 21 Delivered = 20 (1x ongoing)	Target = 15(minimum) Delivered =4	Quarterly

WIASS considers it operates within, and conforms to, the Public Sector Internal Audit Standards 2013.

Definition of Audit Opinion Levels of Assurance

Opinion	Definition
Full Assurance	The system of internal control meets the organisation's objectives; all of the expected system controls tested are in place and are operating effectively.
	No specific follow up review will be undertaken; follow up will be undertaken as part of the next planned review of the system.
Significant Assurance	There is a generally sound system of internal control in place designed to meet the organisation's objectives. However isolated weaknesses in the design of controls or inconsistent application of controls in a small number of areas put the achievement of a limited number of system objectives at risk.
	Follow up of medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.
Moderate Assurance	The system of control is generally sound however some of the expected controls are not in place and / or are not operating effectively therefore increasing the risk that the system will not meet its objectives. Assurance can only be given over the effectiveness of controls within some areas of the system.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.
Limited Assurance	Weaknesses in the design and / or inconsistent application of controls put the achievement of the organisation's objectives at risk in many of the areas reviewed. Assurance is limited to the few areas of the system where controls are in place and are operating effectively.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.
No Assurance	No assurance can be given on the system of internal control as significant weaknesses in the design and / or operation of key controls could result or have resulted in failure to achieve the organisation's objectives in the area reviewed.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.

AUDIT BOARD_____

Date: 12th December 2013

Definition of Priority of Recommendations

Priority	Definition
H	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives.
	Immediate implementation of the agreed recommendation is essential in order to provide satisfactory control of the serious risk(s) the system is exposed to.
м	Control weakness that has or is likely to have a medium impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation within 3 to 6 months is important in order to provide satisfactory control of the risk(s) the system is exposed to.
L	Control weakness that has a low impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation is desirable as it will improve overall control within the system.

Date: 12th December 2013

APPENDIX 3

'High' & 'Medium' Priority Recommendations Summary

Ref.	Priority	Finding	Risk	Recommendation	Management Response and Action Plan
		ove Urban Rural Transport (BUF	RT) 2013		
	ance: Signi				
		view was a health check audit cond nt arrangements are satisfactory, k			
1	M	 Service Level Agreement Internal Audit identified that the following areas of the Service Level Agreement are not fully complied with: Review meetings with the Service Provider are only carried out half yearly however the Service Level Agreement states they should take place quarterly. In accordance with the Service Level Agreement the Service Provider should provide annual audited income and expenditure accounts to the Council but this is not happening. 	Risk of poor performance leading to financial loss and reputational damage to the Council.	place quarterly as per the	Regular communication is held with the service provider via telephone and email contacts, this is in addition to the half yearly review meetings. In future quarterly meetings are to be held. Whilst finances are discussed annually with the service provider, in error the audit accounts were not requested in 2012/13. This request has now been made to the service provider. Responsible Manager : Acting Head of Community Services
					Implementation date: November 2013

AUDIT BOARD

Date: 12th December 2013

2	М	Quarterly review minutes			
		As the review meetings with the Service Provider are not minuted there is lack of evidence to support the decisions made and any issues discussed.	Risk of challenge leading to possible financial loss and reputational damage.	To ensure that quarterly meetings with the Service Provider are formally minuted including evidence of issues discussed, funding position and any other related action taken.	Follow up actions arising from review meetings have been via email correspondence. In the future minutes of these meetings, with actions, will be produced and distributed to the service provider. Responsible Manager : Acting Head of Community Services Implementation date : October 2013
	ng Control : ance: Signi				
by Bro	omsgrove Di				g Control applications as operated ce Level Agreement for the North
1	Н	There is no clear demonstration that Bromsgrove Council are breaking even on fee charging income for Building Control Services.	Risk of non compliance with the Building (Local Authority Charges) Regulations 2010 leading to reputational damage.	Bromsgrove Council to satisfy themselves that they are acting in accordance with the Building (Local Authority Charges) Regulations	Responsible Manager:FinancialServicesManager/BuildingControlManagerImplementation date:

AUDIT BOARD_____

Date: 12th December 2013

AUDIT BOARD

Date: 12th December 2013

Full Finalised Reports Issued

Worcestershire Internal Audit Shared Service



Final Internal Audit Report

Bromsgrove Urban and Rural Transport (BURT) 2013/14 10th October 2013

Distribution:

Kevin Dicks

Chief Executive Officer

- : Deputy Chief Executive Officer & Executive Director (Leisure, Environment and Community Services
- Jayne Pickering

Judith Willis

Sue Hanley

: Acting Head of Community Services

Executive Director (Finance and Resources)



AUDIT BOARD

Date: 12th December 2013

- 1.1 The audit of the Bromsgrove Urban and Rural Transport (BURT) community transport service was carried out in accordance with the Worcestershire Internal Audit Shared Service Audit Plan for Bromsgrove District Council for 2013/14 as approved by the Audit Board on 14th March 2013. The audit was a risk based systems audit of BURT funded by Bromsgrove District Council.
- 1.2 The Community Transport Service for Bromsgrove District Council is provided by Royal Voluntary Services (previously known as Women's Royal Voluntary Services (WRVS) and funded by Bromsgrove District Council.
- 1.3 The Community Transport Service assists residents of Bromsgrove District who are unable to make essential journeys by conventional transport, both because of personal mobility/disability difficulties and because of the non availability of a suitable service. The bus is adapted for wheelchair users.
- 1.4 The amount of Funding awarded to Royal Voluntary Services (RVS) by Bromsgrove District Council is £15,444 per annum. This is given out in two payments during the year. The payment dates are 1st April and 1st of September.
- 1.5 A Service Level Agreement is in place which sets out the responsibilities of the Client (Bromsgrove District Council) and the Service Provider (Royal Voluntary Services).
- 1.6 This audit was a risk based review undertaken by Fiona Ziro in July and August 2013.

1. Audit Scope and Objectives

- The review assessed whether the following control objectives of BURT were being achieved:
 - There is an effective reporting system in place with timescales and responsibilities outlined to ensure that Bromsgrove District Council is working to the agreed Service Level Agreement.
 - The overall management arrangements are satisfactory.
 - Key systems are backed up, staff have been suitably trained and access rights for staff are appropriate.

AUDIT BOARD

Date: 12th December 2013

- The review was a health check audit and concentrated on BURT as funded by Bromsgrove District Council at the time of the audit, covering the period from the 1st of April 2013 to 31st July 2013.
- The audit did not cover the service provider's (RVS) responsibility.

2. Audit Opinion and Executive Summary

From the audit work carried out we have given an opinion of **significant assurance** over the control environment in this area. The level of assurance has been calculated using a methodology that is applied to all Worcestershire Internal Audit Shared Service audits and has been defined in the "Definition of Audit Opinion Levels of Assurance" table in Appendix A. However, it should be noted that statements of assurance levels are based on information provided at the time of the audit in respect of the specific audit objectives. Where there is no specific reference to an audit objective in the findings and recommendations table at point 4 below, recipients of this report can take reassurance that a reasonable level of assurance was determined during audit testing for those objectives.

We have given an opinion of **significant assurance** in this area because there is generally sound system of internal control in place and the contract is managed effectively. However following an internal audit walkthrough of the Service Level Agreement in relation to the Client's responsibilities (Bromsgrove District Council) it was noted that there are some areas where improvement could be made. Recommendations have been made below to help enhance the performance monitoring of this contract. Following discussions with both the Client (Bromsgrove District Council) and the Service Provider (RVS) it is evident that there is a good working relationship between the two.

The recommendations identified during the audit have been prioritised according to their significance / severity in the table below. We have used this prioritisation to inform our audit opinion. The definitions for high, medium and low priority are set out in the "Definition of Priority of Recommendations" table in Appendix B.

Priority	Number of Recommendations
High	0
Medium	2
Low	0

AUDIT BOARD Date

Date: 12th December 2013

3. Detailed Findings and Recommendations

The issues identified during the audit have been set out in the table below along with the related risks, recommendations, management responses and action plan. The issues identified have been prioritised according to their significance / severity. The definitions for high, medium and low priority are set out in the "Definition of Priority of Recommendations" table in Appendix B.

Ref.	Priority	Finding	Risk	Recommendation	Management Response and Action Plan
Issues	s brought for	ward from previous audit		•	
No iss	ues were bro	ught forward from previous audits.			
New n	natters arisir	ng			
1	М	Service Level Agreement			
		 Internal Audit identified that the following areas of the Service Level Agreement are not fully complied with: Review meetings with the Service Provider are only carried out half yearly however the Service Level Agreement states they should take place quarterly. In accordance with the Service Level Agreement the Service Provider should provide annual audited income and expenditure accounts to the Council but this is not happening. 	Risk of poor performance leading to financial loss and reputational damage to the Council.	place quarterly as per the	Regular communication is held with the service provider via telephone and email contacts, this is in addition to the half yearly review meetings. In future quarterly meetings are to be held. Whilst finances are discussed annually with the service provider, in error the audit accounts were not requested in 2012/13. This request has now been made to the service provider. Responsible Manager : Acting Head of Community

AUDIT BOARD_____

Date: 12th December 2013

Ref.	Priority	Finding	Risk	Recommendation	Management Response and Action Plan
					Services Implementation date: November 2013
2	М	Quarterly review minutes As the review meetings with the Service Provider are not minuted there is lack of evidence to support the decisions made and any issues discussed.	possible financial loss and	meetings with the Service Provider are formally minuted including evidence	review meetings have been via email correspondence. In the future minutes of these meetings, with actions, will be

APPENDIX A

Definition of Audit Opinion Levels of Assurance

Opinion	Definition
Full	The system of internal control meets the organisation's objectives; all of the expected system controls tested are in place and are operating
Assurance	effectively.
	No specific follow up review will be undertaken; follow up will be undertaken as part of the next planned review of the system.
Significant	There is a generally sound system of internal control in place designed to meet the organisation's objectives. However isolated
Assurance	weaknesses in the design of controls or inconsistent application of controls in a small number of areas put the achievement of a limited
	number of system objectives at risk.
	Follow up of medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be
	undertaken as part of the next planned review of the system.
Moderate	The system of control is generally sound however some of the expected controls are not in place and / or are not operating effectively
Assurance	therefore increasing the risk that the system will not meet its objectives. Assurance can only be given over the effectiveness of controls
	within some areas of the system.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations
	will be undertaken as part of the next planned review of the system.
Limited	Weaknesses in the design and / or inconsistent application of controls put the achievement of the organisation's objectives at risk in many
Assurance	of the areas reviewed. Assurance is limited to the few areas of the system where controls are in place and are operating effectively.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations
	will be undertaken as part of the next planned review of the system.
No	No assurance can be given on the system of internal control as significant weaknesses in the design and / or operation of key controls could
Assurance	result or have resulted in failure to achieve the organisation's objectives in the area reviewed.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations
	will be undertaken as part of the next planned review of the system.

AUDIT BOARD_____

Date: 12th December 2013

APPENDIX B

Definition of Priority of Recommendations

Priority	Definition
Н	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives.
	Immediate implementation of the agreed recommendation is essential in order to provide satisfactory control of the serious risk(s) the system is exposed to.
М	Control weakness that has or is likely to have a medium impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation within 3 to 6 months is important in order to provide satisfactory control of the risk(s) the system is exposed to.
L	Control weakness that has a low impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation is desirable as it will improve overall control within the system.

AUDIT BOARD

Date: 12th December 2013

Worcestershire Internal Audit Shared Service



Final Internal Audit Report

Building Control 2013/14

29th October 2013

Distribution: Ruth Bamford – Head of Planning and Regeneration Adrian Wyre – Building Control Manager Sam Morgan – Financial Services Manager Amanda De Warr – Head of Customer Access and Financial Support



AUDIT BOARD

Date: 12th December 2013

1. Introduction

- 1.1 The audit of the Building Control system was carried out in accordance with the Worcestershire Internal Audit Shared Service Audit Plan for Bromsgrove District Council for 2013/14 as approved by the Audit Board on 14th March 2013. The audit was a risk based systems audit of the Building Control system operated by Bromsgrove District Council.
- 1.2 North Worcestershire Building Control Shared Service is responsible for the provision of the Council's building control service and is hosted by Bromsgrove District Council. Other participating partners are Redditch Borough Council and Wyre Forest District Council.
- 1.3 All income is receipted and retained by the relevant participating partner other than partnership income; this is retained by the business in accordance with the collaborative legal agreement.
- 1.4 This audit was carried out by Mandy Crowther during the months of July and August 2013.

2. <u>Audit Scope and Objectives</u>

- 2.1 The review assessed whether the following control objectives of the Building Control system were being achieved:
 - There is a formal process in place for the setting of Building Control fees for all partners; fees and charges are approved by the relevant Council and published on the Councils' websites;
 - Fees and charges are reviewed on an on going basis to ensure they remain competitive and cover the actual cost of processing applications including inspections etc;
 - Applications are not processed unless the correct fee is received. All income is controlled and banked promptly;
 - Adequate records are maintained for each application, including details of inspections carried out;
 - A consistent approach is applied to "site specific" quotations and a clear audit trail maintained;
 - There are sufficient management processes in place to ensure performance is regularly monitored and appropriate action taken where needed.
- 2.2 The review was a full systems audit that concentrated on the above areas of the Building Control system for the period 1st April 2013 to the end of June 2013.
- 2.3 The audit did not cover a review of the Service Level agreement in place for this service.

AUDIT BOARD

Date: 12th December 2013

3. <u>Audit Opinion and Executive Summary</u>

From the audit work carried out we have given an opinion of **significant assurance** over the control environment in this area. The level of assurance has been calculated using a methodology that is applied to all Worcestershire Internal Audit Shared Service audits and has been defined in the "Definition of Audit Opinion Levels of Assurance" table in Appendix A. However, it should be noted that statements of assurance levels are based on information provided at the time of the audit in respect of the specific audit objectives. Where there is no specific reference to an audit objective in the findings and recommendations table at point 4 below, recipients of this report can take reassurance that a reasonable level of assurance was determined during audit testing for those objectives.

We have given an opinion of **significant assurance** as generally there is a sound system of control in place. Audit testing highlighted no significant delays in the processing of building control applications and all income was traced to the relevant financial ledgers. In addition there is regular monitoring of performance including the number of applications processed and level of work load per Building Control officer. However one high priority recommendation has been made regarding the lack of a financial charging statement in accordance with the Building (Local Authority Charges) Regulations 2010. It should be noted however that although this is a requirement under the regulations it no longer forms part of the final account process as with previous years.

The recommendations identified during the audit have been prioritised according to their significance / severity in the table below. We have used this prioritisation to inform our audit opinion. The definitions for high, medium and low priority are set out in the "Definition of Priority of Recommendations" table in Appendix B.

Priority	Number of Recommendations		
High	1		
Medium	1		
Low	1		

AUDIT BOARD Date: 12th

Date: 12th December 2013

4. Detailed Findings and Recommendations

The issues identified during the audit have been set out in the table below along with the related risks, recommendations, management responses and action plan. The issues identified have been prioritised according to their significance / severity. The definitions for high, medium and low priority are set out in the "Definition of Priority of Recommendations" table in Appendix B.

Ref.	Priority	Finding	Risk	Recommendation	Management Response and Action Plan
Issue	s brought fo	rward from previous audit	•	•	
There	were no issu	es brought forward in relation to the a	rea under review.		
New r	natters arisi	ng			
1	Н	There is no clear demonstration that Bromsgrove Council are breaking even on fee charging income for Building Control Services.	Risk of non compliance with the Building (Local Authority Charges) Regulations 2010 leading to reputational damage.	satisfy themselves that they are acting in accordance with	Responsible Manager:FinancialServicesManager/BuildingControlManagerImplementation date:To be addressed at FinalAccount closedown for 13/14.Agreed.
2	М	Whilst reviewing payments receipted by the Cashiers it was noted that they do not always record the applicants name/address.	Unable to identify/prove payment in the event of challenge leading to possible financial loss.		Responsible Manager: Head of Customer Access and Financial Support Implementation date: 21 st October 2013

AUDIT BOARD_____

Date: 12th December 2013

Ref.	Priority	Finding	Risk	Recommendation	Management Response and Action Plan
					All staff advised that name and address details must be entered for all payments not linked to an account. Extra training provided where necessary. Monitoring to take place and individual issues to be discussed with staff ongoing.
3	L	The North Worcestershire Building Control Shared Service Administration team are supplied with a daily cash receipting list of all building control payments receipted in Bromsgrove. This is used to check that all income has been charged to the correct financial code.	Financial miscoding leading to financial loss to the service/partner.	The Cashiers to supply the North Worcestershire Building Control Shared Service Administration team with a daily cash receipting list of all building control payments for reconciliation purposes.	Responsible Manager:Head of Customer Access andFinancial SupportImplementation date:21 st October 2013Daily report to be produced andemailed.
		Wyre Forest District Council carries out internal checks.			

AUDIT BOARD

APPENDIX A

Definition of Audit Opinion Levels of Assurance

Opinion	Definition
Full	The system of internal control meets the organisation's objectives; all of the expected system controls tested are in place and
Assurance	are operating effectively.
	No specific follow up review will be undertaken; follow up will be undertaken as part of the next planned review of the system.
Significant	There is a generally sound system of internal control in place designed to meet the organisation's objectives. However isolated
Assurance	weaknesses in the design of controls or inconsistent application of controls in a small number of areas put the achievement of
	a limited number of system objectives at risk.
	Follow up of medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.
Moderate	The system of control is generally sound however some of the expected controls are not in place and / or are not operating
Assurance	effectively therefore increasing the risk that the system will not meet its objectives. Assurance can only be given over the
	effectiveness of controls within some areas of the system.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority recommendations will be undertaken as part of the next planned review of the system.
Limited	Weaknesses in the design and / or inconsistent application of controls put the achievement of the organisation's objectives at
Assurance	risk in many of the areas reviewed. Assurance is limited to the few areas of the system where controls are in place and are
	operating effectively.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority
	recommendations will be undertaken as part of the next planned review of the system.
No	No assurance can be given on the system of internal control as significant weaknesses in the design and / or operation of key
Assurance	controls could result or have resulted in failure to achieve the organisation's objectives in the area reviewed.
	Follow up of high and medium priority recommendations only will be undertaken after 6 months; follow up of low priority
	recommendations will be undertaken as part of the next planned review of the system.

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APPENDIX B

Definition of Priority of Recommendations

Priority	Definition
н	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives.
	Immediate implementation of the agreed recommendation is essential in order to provide satisfactory control of the serious risk(s) the system is exposed to.
М	Control weakness that has or is likely to have a medium impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation within 3 to 6 months is important in order to provide satisfactory control of the risk(s) the system is exposed to.
L	Control weakness that has a low impact upon the achievement of key system, function or process objectives.
	Implementation of the agreed recommendation is desirable as it will improve overall control within the system.

APPENDIX 4

Follow Up

Planned Follow Ups:

In order to continue to monitor progress of implementation, 'follow up' in respect of audit reports is logged The table provides an indication of the action taken against those audits and whether further follow up is planned. Commentary is provided on those audits that have already been followed up and audits in the process of being followed up to the end of September 2013. Exceptions will be reported to the Committee.

For some audits undertaken each year follow-ups may not be necessary as these may be undertaken as part of the full audit. Other audits may not be time critical therefore will be prioritised as part of the overall work load.

Follow up in connection with the core financials is undertaken as part of the routine audits that are being performed during quarter 3.

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Audit	Date Final Audit Report Issued	Responsible Officer	Date to be 1st Followed up	2nd	<u>3rd</u>
	133000		High and Medium Priorities 6mths after final report issued as long as implementation date has passed	High and Medium Priorities still outstandin g 3mths after previous follow up as long as implement ation date has passed	High and Medium Priorities still outstanding 3mths after previous follow up as long as implement ation date has passed
2012-13 Audits					
Housing Benefits	20th June 2013	Benefits Manager	Follow up in 13/14 audit		
NDR	22nd May 2013	Revenue Services Manager	Follow up in 13/14 audit		
Council Tax	22nd May 2013	Revenue Services Manager	Follow up in 13/14 audit		
Budgetary Control & Strategy	26th April 2013	Financial Services Manager	Follow up in 13/14 audit		
Treasury Management	13th November 2012	Financial Services Manager	Follow up in 13/14 audit		

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Debtors	3rd January			
	2013	Financial Services Manager	Follow up in 13/14 audit	
Creditors	1st March			
	2013	Financial Services Manager	Follow up in 13/14 audit	
Asset	21st March			
Management	2013	Financial Services Manager	Follow up in 13/14 audit	
ICT inc. project	26th February			
auditing	2013	ICT Operations Manager	Follow up in 13/14 audit	
Shared Services	Draft report	Executive Director (Finance &	Extended scope \sim agreed and	
Shared Services	stage	Corporate Resources)	being delivered	
Governance inc	20th May			
Procurement	2013	Financial Services Manager	Nov-13	
Mauliata	21st March			
Markets	2013	Head of Planning Services	Sep-13	
Data				
Management -		PA to Chief Executive and Office Services		
Post opening	1st May 2013	Manager	Nov-13	
Street Scene				
inc abandoned				
vehicles, fly	7th January			
tipping, etc.	2013	Head of Environmental Services	Aug-13	
•• ••	26th April			
Cemeteries	2013	Head of Environmental Services	Oct-13	
Parks & Open				
Spaces	18th March			
(Sanders Park)	2013	Capital Project & Greenspace Manager	Sep-13	
Regulatory				
Service/Environ	2 nd August	Regulatory Services Shared Service		
mental Health	2013	Manager	Feb-14	
	2013			
2013-14 Audits				
	29th October			
Building Control	2013	Building Control Manager	Apr-14	

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Community	10th October			
Transport	2013	Acting Head of Community Services	Apr-14	