

**Internal Audit Update to
Governance and Scrutiny
Committee**

27th November 2017

For information and discussion



1. Introduction

This report provides a progress update on the delivery of the Internal Audit Plan for 2017/18 as approved by the Fire Authority on 17th March 2017. Comprehensive reports detailing findings, recommendations and agreed actions are provided to the organisation, and are available to Committee Members on request. In addition a consolidated follow up position will be reported periodically to the Committee.

2. Key Messages for Governance and Scrutiny (GAS) Committee Attention Audit Plan Progress

Since the previous meeting of the GAS Committee the following work has been completed:-

- GAS Committee – Workshop Outcomes Review.

Please note that the workshop outcomes review has been included as a separate agenda item. The 2017/18 Internal Audit activity is attached at **Appendix 1** which provides a strategic overview and profiled timeline for agreed reviews. **Appendix 2** provides the categorisation of assurance levels and risk ratings and **Appendix 3** confirms performance against plan.

3. Work in Progress

The following pieces of work are in progress and will be reported to Committee following completion:

Work In progress

- **Organisational Learning and Engagement** – Fieldwork in progress.
- **Training** – Planning meeting held, Terms of Reference in development.
- **Cyber Security** – Terms of Reference agreed, awaiting agreement to commence fieldwork.
- **Mobile Computing** – Terms of Reference agreed, awaiting agreement to commence fieldwork.

4. Recommendations

- GAS Committee notes Internal Audit progress against the 2017/18 plan (**Appendix 1 refers**).



Internal Audit Control Schedule 2017/18

Appendix 1

Review Title/Ref	Delivery Timescale				Date Issued	Opinion	Outcomes/Comments
	Q1	Q2	Q3	Q4			
Finance & Resources							
Combined Financial Systems				●			Review to cover a range of identified key controls across the main financial systems. This will build upon the cumulative assurance gained from the previous cyclical audit programme. Discussions will be held with External Audit to confirm coverage and ensure complementary working.
Performance							
Data Quality & Sharing			●				To review the processes for data quality and information sharing across the organisation and with external partners to ensure appropriate accuracy, regulatory compliance and security.
Operational Compliance							
IT Healthcheck		●					To review the robustness of the organisation's IT infrastructure to provide assurance on the design, adequacy and operation of key operational and management arrangements, to maintain the confidentiality, integrity and availability of information assets and ensure resilience against cyber risks.
Mobile Computing		●					To review the fitness for purpose and effectiveness of implemented mobile computing solutions.
Training			●				To review arrangements to deliver and manage statutory and mandatory training to ensure competence of all staff.
Governance, Risk & legality							
Organisational Learning & Engagement	●						A review of the organisation's arrangements to engage with stakeholders and partners to gather and share good practice and to ensure an



Review Title/Ref	Delivery Timescale				Date Issued	Opinion	Outcomes/Comments
	Q1	Q2	Q3	Q4			
							appropriate cultural environment to facilitate service delivery and change.
Strategic							
Follow up	●	●	●	●			To provide assurance regarding management's implementation of agreed actions and to align with internal management follow-up processes



Appendix 2: Assurance Definitions and Risk Classifications

Level of Assurance	Description
High	Our work found some low impact control weaknesses which, if addressed would improve overall control. However, these weaknesses do not affect key controls and are unlikely to impair the achievement of the objectives of the system. Therefore we can conclude that the key controls have been adequately designed and are operating effectively to deliver the objectives of the system, function or process.
Significant	There are some weaknesses in the design and/or operation of controls which could impair the achievement of the objectives of the system, function or process. However, either their impact would be minimal or they would be unlikely to occur.
Limited	There are weaknesses in the design and / or operation of controls which could have a significant impact on the achievement of the key system, function or process objectives but should not have a significant impact on the achievement of organisational objectives.
No	There are weaknesses in the design and/or operation of controls which [in aggregate] have a significant impact on the achievement of key system, function or process objectives and may put at risk the achievement of organisational objectives.

Risk Rating	Assessment Rationale
Critical	Control weakness that could have a significant impact upon, not only the system, function or process objectives but also the achievement of the organisation's objectives in relation to: <ul style="list-style-type: none"> • the efficient and effective use of resources • the safeguarding of assets • the preparation of reliable financial and operational information • compliance with laws and regulations.
High	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives. This weakness, whilst high impact for the system, function or process does not have a significant impact on the achievement of the overall organisation objectives.
Medium	Control weakness that: <ul style="list-style-type: none"> • has a low impact on the achievement of the key system, function or process objectives; • has exposed the system, function or process to a key risk, however the likelihood of this risk occurring is low.
Low	Control weakness that does not impact upon the achievement of key system, function or process objectives; however implementation of the recommendation would improve overall control.



Appendix 3: Contract Performance

The primary measure of your internal auditor's performance is the outputs deriving from work undertaken. The plan has also been discussed with lead officers to determine the appropriate timing of individual work-streams to accommodate Trust priorities, availability, mandatory requirements and external audit views.

General Performance Indicators

The following provides some general performance indicator information to support the Committee in assessing the performance of Internal Audit.

Element	Status	Summary
Progress against plan	Green	There have been some delays in the commencement of planned reviews, we are working closely with management to ensure agreed reviews will commence in due course. We will continue to work closely with management to ensure the remaining reviews are delivered in line to provide a robust Head of Internal Audit Opinion.
Timeliness	Green	There have been some delays in the commencement of planned reviews, we are working closely with management to ensure agreed reviews will commence in due course. We will continue to work closely with management to ensure the remaining reviews are delivered in line to provide a robust Head of Internal Audit Opinion.
Qualified Staff	Green	MIAA Audit Staff consist of: <ul style="list-style-type: none"> • 65% Qualified (CCAB, IIA etc.) • 35% Part Qualified
Quality	Green	MIAA operate systems to ISO Quality Standards. Triennial review by External Audit was positive.

