

#### NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

#### **GOVERNANCE & AUDIT COMMITTEE**

#### 12th October 2023

Report of the Chief Accountant Technical & Governance (Head of Internal Audit) – Diane Mulligan

Matters for Information

Wards Affected: All Wards

**Internal Audit Update Report** 

#### 1. Purpose of the Report

The purpose of this report is to provide details of the internal audit work undertaken since the last Governance & Audit Committee meeting in June 2023.

### 2. Executive Summary

Since the last committee meeting a total of 16 reports have been issued and 6 Post Audit Reviews have been undertaken.

Appendix 1 of this report details the formal audit reports issued, appendix 2 gives details of progress against the plan for 23-24 and appendix 3 provides a response from the Head Finance in relation to Report No. 24 - Procurement Cards Non Compliance.

#### 3. Background

One of the terms of reference of this Committee is to 'monitor internal (and) external audit performance'. In order to comply with this requirement to monitor the in-house service, an update is given below outlining internal audit work undertaken since the Governance & Audit Committee meeting held on 16th June 2023.

In addition, information is provided for members on the current position regarding staffing issues within the team.

#### 4. Staffing Issues

At the last Governance & Audit Committee there were no staffing issues to report, however since then there have been a substantial number of days lost to sickness. Three members of the team are currently on sick leave and one member of the team has resigned and left the authority.

During this quarter 92 days have been lost to sickness, this together with the auditor vacancy will have a detrimental effect on the achievement of the plan and it is intended to bring a revised audit plan to members for approval to the next committee meeting in January 2024. At this time we will be in a better position to gauge the impact of the sickness and vacancy on the plan.

#### 5. Audit Work Undertaken

Since the last committee meeting a total of 15 formal reports have been issued, as at 30<sup>th</sup> September 2023, in line with normal reporting processes.

#### Final Reports Issued

6 Primary Schools
Neath Register Office
Creditors
National Fraud Initiative (NFI) – Council Tax Reduction Scheme to Pensions
National Fraud Initiative (NFI) – Duplicate Creditor Invoice Payments
Officer Declarations

Procurement Card Non Compliance
Glamorgan Further Education Trust Fund Independent Examination
General Primary School
1 private item

In addition to the audits undertaken which resulted in the issue of a formal report the following work has also been undertaken:

- The Audit Manager has attended the fortnightly meetings of the Social Services Quality Practice Strategic Group.
- The Audit Manager has attended the Social Care Case Management Platform Project Board meetings.
- The Audit Manager and Senior Auditor are undertaking investigations in line with the Authority's Disciplinary Policy and Processes.
- The Senior Auditor has attended the Itrent System (Payroll & HR)
   Project Board meetings.
- The Audit Manager had attended the Leisure Insourcing Project Board meetings.
- 2 special investigations are in progress
- Staff have continued to provide advice to staff from across the Authority.
- 6 Post Audit Review has been undertaken, details are provided below.

#### 6. Post Audit Reviews Undertaken & Recommendations Tracking

There have been no issues identified with recommendations not being implemented.

Audit Report Title	Number of recommendations made	Issues identified during Post audit Review
Trem y Mor (Day &	3	All recommendations
Respite Centre)		have been implemented
St Josephs RC School and	2	All recommendations
Sixth For Centre		have been implemented
Ysgol Bae Baglan	1	All recommendations
		have been implemented
Tonnau Primary School	3	All recommendations
		have been implemented
Dwr Y Felin	4	All recommendations
Comprehensive School		have been implemented
Rhodes House Behavioural	2	All recommendations
Support Services		have been implemented

### 7. Financial Impacts

No implications.

### 8. Integrated Impact Assessment

There is no requirement to undertake an Integrated Impact Assessment as this report is for monitoring/information purposes.

### 9. Valley Communities Impacts

No implications.

## 10. Workforce Impacts

No implications.

### 11. Legal Impacts

No implications.

#### 12. Risk Management Impacts

The work of Internal Audit is key in relation to ensuring compliance with internal controls. This work forms part of the Council's overall risk management arrangements.

#### 13. Consultation

There is no requirement for external consultation on this item.

#### 14. Recommendations

That members note the content of the report and appendices.

#### 15. Appendices

Appendix 1 – Audit Reports Issued.

Appendix 2 – Audit Plan Monitoring.

Appendix 3 – Response from Chief Finance Officer relating to Report No 24

#### **Officer Contact:**

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Report Ref	Report Subject & Responsible Head of Service	Report Conclusion	Assurance Rating
R12	Head of Legal & Democratic Services - Neath Register Office	Overall good controls were found to be in place in relation to the areas examined. Some enhancements have been recommended to strengthen the controls already in place.  Positive findings were found in the areas of customer service, accessibility of the service, budgetary control, the setting of fees, income collection, financial reconciliation, refunds, approved premises, staff training and data security.  Recommendations were made regarding the payment of overtime and additional hours, controlled stationery, travel claims and driver declaration forms.	Reasonable
R13	Private Item		
R14	Head of Education - YGG Trebannws	Good controls were found to be in place in relation to all areas tested. A recommendation was made in relation to Unofficial Funds, which once implemented will enhance the good controls already in place.  The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.	Substantial
R15	Head of Education - Cymer Afan Primary School	Good controls were found to be in place in relation to all areas tested. A recommendation was made in relation to Unofficial Funds, which once implemented will enhance the good controls already in place.	Substantial

Report Ref Report Subject & Responsible Head of Service		Report Conclusion	Assurance Rating
		The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.	
R16	Head of Education - Baglan Primary School	Robust controls were found to be in place in relation to all areas tested. An area of particularly good administration was observed in relation to the Health & Safety record keeping at the school. The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.	Substantial
R17	Chief Finance Officer - Creditors	Improved controls are required in relation to the monitoring of credit notes. Recommendations have been made to enhance controls in this area.	Reasonable
R18	Head of Education - Ysgol Carreg Hir	Robust controls were found to be in place in relation to all areas tested.  The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.	Substantial
R19	Head of Education - Melin Primary School	Good controls were found to be in place in relation to all areas tested other than Procurement Cards and the Unofficial Fund. Recommendations have been made which when implemented will address the issues identified.	Reasonable

Report Ref Report Subject & Responsible Head of Service		Report Conclusion	Assurance Rating	
		The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.		
R20	Head of Education - YGG Cwmllynfell	Good controls were found to be in place in relation to all areas tested, other than Procurement Cards and Corporate Governance. Recommendations have been made which when implemented will address the issues identified.  The school was found to be complying in full with current DBS guidance in relation to the staff sample audited, in addition all governors at the school had the required DBS disclosure in place.	Reasonable	
R21	Chief Finance Officer - NFI Council Tax Reduction Scheme to Pensions	102 matches were reported. In 101 instances investigated there were no issues identified. In 1 instance a pension had not been declared by the claimant within their universal credit application. This instance has been referred by the Fraud Officer to the DWP via the NFI system for further investigation. Until a response is received from the DWP it is not possible to make any alteration to the CTRS claim.  Robust processes are operating within the Housing Benefit team in relation to the administration of CTRS.	Not Applicable	
R22	Chief Finance Officer - NFI	Information was provided by NFI in relation to 51 possible duplicate creditor invoice payments. No instances of fraud were suspected.	Not Applicable	

Report Ref Report Subject & Responsible Head of Service		Report Conclusion	Assurance Rating
	Duplicate Creditor Invoice Payments  The work undertaken identified that 8 duplicate/incorrect creditor invoice payments totalling £25,584 have been made that had not otherwise been detected. The relevant officers have been informed and it is now their responsibility to obtain a refund.  18 duplicate/incorrect creditor invoice payments totalling £551,11 were also identified. These have already been identified as part of routine internal financial/budget reconciliations or by the Vendor confirming they have received an incorrect payment/no payment where expected. Full refunds have already been received in relation to these.		
R23	Chief Executive - Officers Declarations	Overall, the findings from this audit were positive. Minor issues were identified and recommendations have been made relating to a revision of the Employee Code of Conduct.	Reasonable
R24			Limited

Report Ref Responsible Head of Service		Report Conclusion	Assurance Rating
		issue not being communicated properly to relevant staff or whether staff have failed to act on any communications.  As a result going forward an email will be sent by Internal Audit to the cardholders, authorisers and applicable Heads of Service of all cards that repeatedly appear on non-compliance reports. The email will inform them the number of times they have appeared on the reports and warn them that further non - compliance will result in the Procurement Card being suspended in the first instance.	
R25	Chief Finance Officer - Glamorgan Further Education Trust Fund Independent Examination	The examination brought to light no issues which gave reasonable cause to believe that in any material respect the requirements to keep accounting records in accordance with the Charities Act 2011 and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 2011 Act were not met. Or to which, in the Auditor's opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.	Substantial
R26	Head of Education General Primary School Report	This report confirms that the number of recommendations made in school audit reports has reduced compared to reports issued in previous years. This indicates that increased controls have been put in place by schools thus reducing the potential risks in all areas audited.	Reasonable

#### **Assurance Categories:**

<u>Substantial Assurance</u> - Substantial assurance is provided in relation to the effectiveness of the internal controls operating at the time of the audit.

<u>Reasonable Assurance</u> - Reasonable assurance is provided in relation to the effectiveness of the internal controls operating within the service which will be further enhanced by the implementation of the agreed recommendations. <u>Limited Assurance</u> - Limited assurance is provided in relation to the effectiveness of the internal controls operating within the service audited. The Head of Service is required to provide a written response to the Governance & Audit Committee on actions taken to address the issues raised during the audit.

<u>No Assurance</u> - Following the audit no assurance can provided in relation to the internal controls operating within the service audited and the Head of Service will be required to attend this committee to advise members of what actions they have taken to address the failings identified during the audit.

Audit Plan Item	Risk Rating	Quarter 1 position as at 31 <sup>st</sup> May 2023	Quarter 2 position as at 30 <sup>th</sup> September 2023
Ethics – Members(carried	М		Audit paused due to
forward from 22/23)			resource issues
Decarbonisation	Н		
Payroll	Н		
Council Tax	L		
Housing Benefits	L		
National Non-Domestic	М		
Rates			
Debtors	L		
Creditors (monthly checks)	М	Ongoing	Ongoing
Creditors	М		Audit complete and
			report issued
Risk Management	М		
Direct Payments	Н		Audit complete and draft
(added from contingency			report issued
budget)			
Capital Programme	Н		The Audit Manager has
			attended meetings of the
			Capital Programme
			Steering Group
Licencing	М	Audit in planning stage	In progress
Accident Reporting	Н		Audit in planning stage

# Appendix 2 – Audit Plan Monitoring at 30<sup>th</sup> September 2023

Performance Management	М		
Framework			
Cyber Security	Н		
Glamorgan Education Trust	M		Independent Examination
Grant & any other grants			completed & opinion
received			produced
Primary Schools	M	4 schools audited	6 schools audited
Comprehensive Schools	Н	1 school audited	
Safe Recruitment in	M		
Comprehensive Schools			
Music Service	M		
(carried forward from			
22/23)			
Health & Safety/Accident	Н		
Reporting in schools			
Schools admissions	Н		
Leisure Services Insourcing	Н	Steering group meeting	Steering group meetings
		attended.	attended
Waste Transfer Station	Н		Audit in planning stage
Waste Costs	Н		
Stores	Н		
South Wales Trunk Road	M		Audit in progress
Agency – Payment			
Processes			

City Deal Projects	Н		
Sandfields Business Centre	Н		
Empty Properties	М		
In-house domiciliary care	Н		
provision			
Supported Living	Н		
Arrangements			
Follow up on use of respite	M		Audit paused due to
care (carried forward from			resource issues
22/23)			
3 <sup>rd</sup> Party Top-ups (clients in	M		
residential or nursing care)			
Harm Outside the Family	M		
(carried forward from			
22/23)			
Disabled Facilities Grants	M	Audit in planning stage	Audit in progress
Homelessness to include	Н		
youth homelessness			
Community Independence	M	Audit in progress	Audit complete and draft
Team			report issued
Procurement Cards	Н		Audit complete and
			report issued
Officers Declarations	M		Audit Complete and
			report issued
			-

# Appendix 2 – Audit Plan Monitoring at 30<sup>th</sup> September 2023

National Fraud Initiative (NFI)	Н	Reports being reviewed	2 reports issued
Special Investigations &	Н	3 in progress	1 completed and 2 in
Whistleblowing			progress
Staff Association/Lottery	Not	Advice has been given and	Advice has been given and
	applicable	bonus draws attended.	bonus draws attended.
Vision Impaired West	Not		
Glamorgan	applicable		
FOI requests	Not	All received have been	All received have been
	applicable	answered	answered
Attendance at working	Not	Various attended	Various attended
parties & task & finish	Applicable		
groups			
Advice & Guidance	Not	Ongoing	Ongoing
requests	applicable		

Appendix 3 – Response from Chief Finance Officer relating to Report No 24

To: Governance & Audit Committee

Subject: Internal Audit Report No 24 – Procurement cards non compliance

All recommendations made within the report are accepted.

Whilst the e-procurement team within corporate service have the strategic responsibility for the provision of procurement cards to authorised users, coding of the monthly transaction lies with the departmental card holder.

Internal Audit copied the report to all Directors, Heads of Service card holders and authorisers in order to make them aware of the issue raised and their responsibilities with regard procurement card purchases. All cardholder's authorisers and Heads of service who had appeared on the non-compliance reports 5 or more times in the period tested were also contacted informing them of the number times they appeared on the non-compliance reports and warning that further non-compliance will result in suspension of their procurement card.

Internal audit will continue to receive and monitor non-compliance reports and the e-Procurement Business Improvement Team will be informed when a card appears repeatedly on non-compliance reports. A decision will then be made whether to suspend the card or to email a warning to the cardholder and authoriser that the card will be suspended if there are any further instances of non-compliance.

Huw Jones Chief Finance Officer