

SHROPSHIRE FIRE AND RESCUE AUTHORITY INTERNAL AUDIT ANNUAL REPORT 2018/19

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1. Summary

This annual report provides members with details of the work undertaken by Internal Audit for the year ended 31 March 2019. It reports on progress against the annual audit plan. It also provides the Head of Audit's opinion on the overall adequacy and effectiveness of the organisation's governance, risk management, and control processes when considering the Public Sector Internal Audit Standards or Guidance, as required by the Accounts and Audit Regulations 2015.

Final performance has been good with 100% of the revised plan being delivered and a bespoke piece of work looking at the use of credit cards was started and will be reported on in 2019/20.

Seven audit reports were issued during the year resulting in two good, three reasonable and two limited assurances being made. A limited assurance opinion was given in respect of the Financial System Review and Recommendation Follow Up. Specific details of the concerns raised in each of these audits are detailed in **Appendix A** and paragraphs 5.10 to 5.12 in this report.

These assurances are provided on the basis that management carry out the actions they have agreed in respect of the recommendations made to address any weakness identified and improvements suggested. The Committee should ensure that they are receiving appropriate assurance from managers that action plans are being implemented.

A total of 66 recommendations have been made in the seven audit reports issued in the year. No fundamental recommendations have been made during 2018/19. Based on the work completed, the areas attracting limited assurance for newly adopted systems that are yet to be embedded and the partial delivery of previous recommendations I have reached the following opinion:

Based on the work undertaken and management responses received; I can offer reasonable assurance for the 2018/19 year that the Authority's framework for governance, risk management and internal control processes is sound and working effectively.

Generally, risks are well managed but some areas require the introduction of, compliance with or improvement to internal controls to ensure the achievement of the Authority's objectives. 2018/19 has been a challenging year given the level of key fundamental line of business system changes delivered (financial

and human resources) and the embedding of these continues. Alongside the challenge to continue to deliver savings and increased efficiency.

2. Recommendations

The Committee are asked to consider and endorse, with appropriate comment;

- a) Performance against the Audit Plan for the year ended 31 March 2019.
- b) Reasonable assurance can be provided that the system of governance, risk management and internal control is operating effectively and can be relied upon when considering the Annual Governance Statement for 2018/19.
- c) The Head of Audit's reasonable year end opinion on the Authority's internal control environment for 2018/19 based on the work undertaken and management responses received.

REPORT

3. Risk Assessment and Opportunities Appraisal

- 3.1 The delivery of a risk based Internal Audit Plan is an essential part of ensuring probity and soundness of the Authority's financial, governance and risk management systems and procedures and is closely aligned to the Authority's risk register. The Plan is delivered in an effective manner; where Internal Audit independently and objectively examines, evaluates and reports on the adequacy of its customers control environments as a contribution to the proper, economic, efficient and effective use of resources. It provides assurances on the governance, risk management and internal control systems, by identifying areas for improvement or potential weaknesses and engaging with management to address these in respect of current systems and during system design. Failure to maintain robust internal controls create an environment where poor performance, fraud, irregularity and inefficiency can go undetected leading to financial loss and reputational damage.
- 3.2 The recommendations contained in this report are compatible with the provisions of the Human Rights Act 1998 and the Accounts and Audit Regulations 2015. There are no direct environmental, equalities or climate change consequences of this proposal.
- 3.3 Internal Audit customers are consulted on the service that they receive, feedback from which is included in this report and continues to be positive.

4. Financial Implications

- 4.1 The Internal Audit plan is delivered within approved budgets; the work of Internal Audit contributes to improving the efficiency, effectiveness and economic management of the Authority.

5. Background

- 5.1 This report is the culmination of the work of the Internal Audit team during 2018/19 and seeks to:
- Provide an opinion on the adequacy of the risk management, control and governance arrangements;
 - Inform the annual review of the effectiveness of its system of internal control that informs the Annual Governance Statement by commenting on the nature and extent of significant risks; and
 - Inform the review of an effective Internal Audit by providing performance data against the plan.
 - Confirm to the Audit and Performance Management Committee that the Audit service has been delivered free from interference throughout the year.
- 5.2 The requirement for Internal Audit derives from local government legislation, including section 151 of the Local Government Act 1972 which requires the Authority to make arrangements for the proper administration of its financial affairs. Proper administration includes Internal Audit. More specific requirements are detailed in the Accounts and Audit Regulations 2015, in that “A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance”.
- 5.3 The Public Sector Internal Audit Standards (PSIAS) define the scope of the annual report on internal audit activity. The annual report must incorporate an annual internal audit opinion on the overall adequacy and effectiveness of the organisation’s framework of governance, risk management and control. This annual report provides information to support that assessment and that an effective Internal Audit is established at Shropshire Fire and Rescue Service, in accordance with the requirements of the 2015 Accounts and Audit Regulations. The Internal Audit Service is provided by Shropshire Council. In June 2019, a paper was presented to Shropshire Council’s Audit Committee which provided assurance on the effectiveness of the Internal Audit service, against the PSIAS. Shropshire Fire and Rescue Service can take assurance from this report.
- 5.4 Internal Audit operates a strategic risk based plan. The plan is reviewed each year to ensure that suitable audit time and resources are devoted to reviewing the more significant areas of risk, this results in a comprehensive range of audits undertaken in the year, to support the overall opinion on the control environment. The plan was revised with officers from the Fire Authority during the year to provide detailed support and review in respect of the transfer of payroll services to Telford and Wrekin Council and the implementation of the new finance system to replace the current one, SAMIS.

Annual Internal Audit Opinion from Internal Audit Work undertaken during 2018/19

- 5.5 It is the responsibility of Shropshire and Wrekin Fire and Rescue Authority to develop and maintain the internal control framework. In undertaking its work, Internal Audit has a responsibility under the Public Sector Internal Audit Standards to deliver an annual internal audit opinion and report. The annual internal audit opinion will conclude on the overall adequacy and effectiveness of the authority's framework of governance, risk management and internal control. This opinion plays a key part in informing the Authority's Annual Governance Statement and enabling the Audit and Performance Management Committee to deliver their annual assurance statement to the Fire and Rescue Authority (FRA).
- 5.6 The results of individual audits, when combined, form the basis for the overall opinion on the adequacy of the Authority's internal control systems. No system of internal control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give that absolute assurance. The work of Internal Audit is intended only to provide reasonable assurance on controls based on the work undertaken. In assessing the level of assurance to be given, I have considered:
- No limitations were placed on the scope of the audits and the internal work during the year was revised to cover the transformation risks in respect of the new HR and finance systems being implemented.
 - The Authority has seen the implementation of fundamental line of business systems within human resources and finance. In addition, IT infrastructure changes have been necessary to support the business in this transition. These systems are in their infancy and initial reviews have highlighted some weaknesses to be addressed in both areas to provide the same level of internal assurance as previously held in these fundamental areas.
 - From other audit work undertaken during the year, in respect of recommendations outstanding from 2017/18, the review found that 14 of the 22 recommendations raised remained unaddressed as resources were diverted to the implementation of the new systems.
 - No fundamental recommendations were raised during the financial year.
- 5.7 These assurances are provided on the basis that management carry out the actions they have agreed in respect of the recommendations made to address any weakness identified and improvements suggested.
- 5.8 ***Based on the work undertaken and management responses received; I can offer reasonable assurance for the 2018/19 year that the Authority's framework for governance, risk management and internal control processes is sound and working effectively.***
- Generally, risks are well managed but some areas require the introduction of, compliance with or improvement to internal controls to ensure the achievement of the Authority's objectives. 2018/19 has been a challenging year given the level of key fundamental line of business system changes delivered (financial and human resources) and the embedding of these continues. Alongside the challenge to continue to deliver savings and increased efficiency.***

Key Assurances provided during 2018/19

5.9 Audit assurance opinions are awarded on completion of audit reviews reflecting the efficiency and effectiveness of the controls in place, opinions are graded as follows:

Good	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is a sound system of control in place which is designed to address relevant risks, with controls being consistently applied.
Reasonable	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is generally a sound system of control but there is evidence of non-compliance with some of the controls.
Limited	Evaluation and testing of the controls that are in place performed in the areas examined identified that, whilst there is basically a sound system of control, there are weaknesses in the system that leaves some risks not addressed and there is evidence of non-compliance with some key control.
Unsatisfactory	Evaluation and testing of the controls that are in place identified that the system of control is weak and there is evidence of non-compliance with the controls that do exist. This exposes the Authority to high risks that should have been managed.

Audit assurance opinions delivered in 2018/19

Audit	Good	Reasonable	Limited	Direction of Travel
Payroll System		✓		Weakened ¹
Financial System Review			✓	Weakened ²
Risk Management and Business Continuity	✓			No Change
Corporate Governance	✓			No Change
General Recommendation Follow up			✓	No Change ³
Assets		✓		No Change
IT Systems Project Review		✓		New Area
Total for year				
➤ numbers	2	3	2	
➤ percentage	29%	42%	29%	

5.10 Two good, three reasonable and two limited assurances were issued during the financial year. There have been no unsatisfactory assurances issued in the financial

¹ The 2017/18 payroll report provided good assurance.

² The 2017/18 audit covered the implementation of the new financial management system and so whilst this is a new area the current position represents a weakening of the overall control environment in respect of financial systems compared to areas previously audited.

³ The areas reviewed under the general recommendation follow up are different year on year but the rating reflects the facts that recommendations remain outstanding for in excess of 12 months.

year. A summary of these reports is included in **Appendix A**. In each case positive responses have been received by management and will be followed up next year to determine whether satisfactory improvements have been made.

- 5.11 The Financial System Review audit raised significant concerns in the following areas: budget monitoring; procedures in respect of the new creditors system; timeliness of invoicing and VAT arrangements. In addition to the significant issues identified a further 24 requires attention recommendations were issued across the breadth of the finance system control environment. Positive action plans have been received from managers confirming that the issues in respect of VAT have been resolved and that the other issues will be addressed as part of an overall improvement plan for strengthening the systems controls and procedures in respect of the new financial system.
- 5.12 The Recommendation Follow up Audit tracked the 22 recommendations raised in 2017/18 across several areas, including financial systems and partnership working. The audit concluded that 14 recommendations remained outstanding of which five were considered significant. Two significant recommendations related to the processing of mileage and expense claims and management have confirmed that the position will be addressed as part of an overall improvement plan for strengthening the new financial system's controls and procedures. The other three significant recommendations related to the Authorities processes in respect of partnership working. Management have confirmed that these weaknesses were being addressed by a new Brigade Order and Partnership Register from May 2019. This will be reviewed as part of the 2019/20 follow up work.
- 5.13 The Internal Audit team has achieved 100% of the revised plan being delivered.
- 5.14 Audit recommendations are also an indicator of the effectiveness of the Authority's internal control environment and are rated according to their priority:

Best Practice (BP)	Proposed improvement, rather than addressing a risk.
Requires Attention (RA)	Addressing a minor control weakness or housekeeping issue.
Significant (S)	Addressing a significant control weakness where the system may be working but errors may go undetected.
Fundamental (F)	Immediate action required to address major control weakness that, if not addressed, could lead to material loss.

- 5.15 Recommendations are rated in relation to the audit area rather than the Authority's control environment, for example, a control weakness deemed serious in one area which results in a significant or fundamental recommendation may not affect the Authority's overall control environment. Similarly, several significant recommendations in a small number of areas would not result in a limited opinion if most of areas examined were sound, consequently, the number of significant recommendations in the table below will not necessarily correlate directly with the number of limited assurance opinions issued. Any fundamental recommendations resulting from a control weakness in the Authority's control environment would be reported in detail to the Audit and Performance Management Committee.

- 5.16 A total of 66 recommendations have been made in the seven audit reports issued in the year; these are broken down by audit area in the table below.

Audit opinion and recommendations made on 2018/19 audits

System	Level of Assurance Given	Number of Recommendations made				Total
		BP	RA	S	F	
Payroll System	Reasonable	0	7	2	0	9
Financial System Review	Limited	0	24	6	0	30
Risk Management & Business Continuity	Good	0	0	0	0	0
Corporate Governance	Good	0	5	0	0	5
General Recommendation Follow up	Limited	0	9	5	0	14
Technical Assets	Reasonable	0	2	1	0	3
IT System Project Review	Reasonable	0	3	2	0	5
Totals		0	50	16	0	66
Percentage		0%	76%	24%	0%	100%

- 5.17 It is management's responsibility to ensure that accepted audit recommendations are implemented within an agreed timescale. Except for annual audits where recommendations are revisited as a matter of course; remaining recommendations are followed up annually by obtaining an update from management on progress made and performing sample testing.
- 5.18 No recommendations have been rejected by management during 2018/19.

Audit Performance

- 5.19 Audit Performance is demonstrated by measuring achievement against the plan, ensuring compliance against the Public Sector Internal Audit Standards (PSIAS), and evaluating improvements made over the last twelve months. A public report of effectiveness against the PSIAS is made annually to the Shropshire Council, June Audit Committee. Shropshire Council Audit Service are also externally reviewed every five years for compliance with the PSIAS and passed the review undertaken by CIPFA in November 2016. The effectiveness of Internal Audit is further reviewed through the Finance Audit and Risk Committee's delivery of its responsibilities and direct from customers as they provided responses to surveys sent out after each audit.

Reporting

- 5.20 All Internal Audit work is reviewed by a senior auditor to ensure it complies with Internal Audit's standards and that the recommendations made are supported by the work undertaken before any audit reports are issued. This is a fundamental part of ensuring audit quality and that clients receive reports which are both informative, useful and add value to their work processes and procedures.

- 5.21 All audit assignments are subject to formal feedback to management. Draft reports are issued to the managers responsible for the area under review for agreement to the factual accuracy of findings and recommendations. After agreement, a formal implementation plan containing management's agreed actions and comments is issued to relevant officers. Follow up reviews capture evidence of implementation of recommendations.

Quality Assurance/Customer Feedback Survey

- 5.22 A customer feedback survey form is sent out with the all audits completed. These provide key feedback on the quality of audit service in relation to several areas, including:
- Pre-auditing arrangements;
 - Post audit briefing;
 - Audit coverage/scope of the audit;
 - Timeliness of production of the report;
 - Accuracy and clarity of report;
 - Practicality of recommendations;
 - Professionalism of approach;
 - Communication skills and
 - Timeliness of report to your business.
- 5.23 The surveys are a key part of ensuring the work meets our client expectations and that the quality of audit work is maintained. The results have been analysed over the last year and the percentage of responses are identified in the table below:

Customer Feedback Survey Forms - percentage of excellent and good responses

Item Being Scored	2018/19
Pre-audit arrangements	100%
Post-audit briefing	100%
Audit coverage/scope of the audit	100%
Timeliness of production of report	100%
Accuracy and clarity of report	100%
Practicality of recommendations	100%
Professionalism of approach	100%
Communication skills	100%
Timeliness of report to your business	100%
Number of forms returned	1

- 5.24 Overall the results are pleasing, showing services delivered at a high level. Whilst the number of surveys is low, there continues to be open communication between officers of the Fire Service and Internal Audit to ensure that both the audit plan and delivery remain up to date and valid to the service. Therefore, based on the level of open communication we are satisfied that there is opportunity for any concerns regarding the service to be raised as appropriate. The information from the surveys is used both

to improve techniques overall within the team and at annual performance appraisals to identify future development focus relating to individual skills or competences.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

- Proposed 2018/19 Internal Audit Programme - Audit and Performance Management Committee on 7 December 17
- Public Sector Internal Audit Standards
- Accounts and Audit Regulations 2015.

Appendices

Appendix A - Summary of Findings from Fire Authority Audit Reports 2018/19

APPENDIX A**Summary of Findings from Fire Authority Audit Reports 2018/19**

- 1 Payroll System** - This area is reviewed on an annual basis. The audit concentrated on key controls in the following areas in both the previous and replacement system:
- There are procedures and policies available to relevant officers which comply with Brigade Orders and National Joint Council guidance.
 - The Officers who receive payroll payments exist and are employed by the Service.
 - Starters and leavers are actioned accurately and in a timely manner.
 - Payment claims submitted by Officers are checked, authorised and are accurately processed.
 - Permanent and temporary variations to Officer's contracts are valid, authorised, and processed accurately.
 - The payroll payments made to Officers are correct, processed accurately and made on a timely basis.
 - Management Information is produced in an accurate and timely manner and is subject to review.

There is generally a sound system of control in place but there is evidence of non-compliance with some of the controls.

Two significant recommendations were raised during the audit:

- 1) The Fire Service Rota system needs to be updated as part of the service transformation, in order that banked shifts can be marked as paid once they have been processed and paid as overtime.

The rota for banked shifts should be updated to show the number of hours worked.

- 2) The process with FB76 retained fire-fighter claims needs to be reviewed to ensure that the report provided by the Authorities Payroll provider is checked for accuracy. This should be a sample check rather than having to check the whole report. The update to Fire Service Rota should be progressed as soon as possible.

Assurance Level: Reasonable

- 2 Financial System Review** – Elements of the finance system are reviewed on an annual basis. This audit reviewed both the previous and current financial systems following the decision to implement a new system during the financial year. The 2018/19 audit concentrated on key controls in the following areas:
- There is effective revenue and capital budget setting, preparation and monitoring.
 - The correct creditors are paid the correct amounts at the correct time.
 - Income is complete and is collected on a timely basis as expected.
 - There are appropriate banking reconciliations and arrangements.
 - There are appropriate general ledger reconciliations and controls.

Whilst there is basically a sound system of control in place, the system contains weaknesses which leave some risks unaddressed and there is evidence of non-compliance with some key controls.

Six significant recommendations were raised because of the audit:

- 1) The issues regarding the allocation of costs associated with employees which are not direct payroll costs e.g. travel, subsistence, medical checks etc should be resolved. It should be decided if the previous policy to post these to central costs e.g. fleet, occupational health etc is continued or whether the posting is to be to the service area. There should then be a clear check each month to ensure that the individual cost centres agree to the overall budget report.
- 2) It should be ensured that the budget reports are reviewed in detail and narratives or explanations for budget variances are included on the budget reports.
- 3) Brigade Orders and finance procedures should be updated to reflect the new system and processes. This will need to take place as soon as the system is properly embedded into the organisation.
- 4) The system for workshop/technical ordering, whereby copies of orders are not sent to suppliers, should be formally documented and approved. This should include the requirement to log all order numbers given to suppliers, and to ensure that suppliers are provided with a copy of the Fire Authority's terms and conditions on at least an annual basis, or whenever there is an update to the standard terms and conditions of supply.
(Updated from recommendation made and agreed in 2016/17 and 2017/18).
- 5) Invoices should be raised promptly as a charge becomes known.
(As previously recommended and agreed in the Debtors audit 2017/18).
- 6) The VAT arrangements should be resolved with HMRC and a VAT return should be made on a timely basis.

Assurance Level: Limited

- 3 Risk Management and Business Continuity** - This area is reviewed on an annual basis. The audit concentrated on key controls in the following areas:
- Statements of Assurance are prepared and signed on an annual basis.
 - Corporate risks are recorded in a suitable format in the Risk Register.
 - Departmental Risks are recorded in a suitable format in the Risk Register.
 - Risks are regularly reviewed and the Risk Register is updated as appropriate.
 - Management and members are kept informed of the processes in place for the management of risk.
 - There is a process to identify the critical service areas which if not delivered would cause disruption to operations.
 - A business continuity plan has been prepared which details the actions to be taken to allow recovery from an incident.

No significant recommendations were raised.

There is a sound system of control in place which is designed to address relevant risks, with controls being applied consistently.

Assurance Level: Good

- 4 Corporate Governance** - This area is reviewed on an annual basis. The audit concentrated on key controls in the following areas:
- To ensure recommendations raised in the 2017/18 Corporate Governance Report have been implemented as agreed.
 - To review the evidence of compliance against the seven principles set out in the code.

No significant recommendations were raised.

There is a sound system of control in place which is designed to address relevant risks, with controls being applied consistently.

Assurance Level: Good

- 5 General Recommendation Follow Up** - This area is reviewed on an annual basis and picks up outstanding recommendations not covered in the current years plan. The audit concentrated on key controls in the following areas:
- Creditors and Procurement Card Follow Up 2017/18 in relation to procurement cards.
 - Fraud and Corruption 2017/18 in relation to MyView Travel and Subsistence.
 - Partnerships 2017/18
 - Payroll 2017/18
 - Budget Strategy 2017/18
 - Recommendation Follow up 2017/18 in relation to Firefighters Pensions.

Whilst there is basically a sound system of control in place, the system contains weaknesses which leave some risks unaddressed and there is evidence of non-compliance with some key controls.

The audit found that 14 of the 22 recommendations raised in 2017/18 and not picked up in other work remained outstanding of which five were considered significant. The significant recommendations raised in the audit were:

- 1) All mileage claims should contain sufficient evidence of journeys undertaken to allow management authorisation and an independent verification as required. It should be ensured that the claims include clear details of the start location and all locations visited during the journey this should include the postcodes of home, work base and destination locations where applicable. It should be ensured that the claims are completed in sufficient detail to allow the authorising Officer to identify that the shortest route had been taken for the journey. Where this is not the case it should be ensured that details are recorded on the claim to explain why the shortest route has not been taken (e.g. avoiding Town Centre during rush hour). Consideration should be given to an appropriate periodic independent management review of all mileage claims made to ensure that the claims are being made in accordance with the policy.
(As previously recommended and agreed in the Fraud and Corruption Audit 2017/18 and originally recommended in 2016/17).
- 2) Consideration should be given to an appropriate periodic independent management review of all mileage claims made to ensure that private mileage deductions are being made in accordance with the policy.

(Updated from previous recommendations in the Fraud and Corruption Audit 2017/18 and originally recommended in 2016/17).

- 3) Consideration should be given to the way in which new partnership agreements are approved to ensure that approval is obtained prior to entering into a partnership. This should be included in the guidance provided to officers.
(As previously recommended and agreed in the Partnership Audit 2017/18).
- 4) Consideration should be given to the information required at the start of individual partnership arrangements and this should be included in the partnership register. If the Authority wants to take a different approach to collaborative working this should be formally documented and recorded separately for transparency.
(As previously recommended and agreed in the Partnership Audit 2017/18).
- 5) Agreements should be held for all partnerships that the Authority has entered into. These should be signed by all parties and include the responsibilities of all partnership organisations.
(As previously recommended and agreed in the Partnership Audit 2017/18).

These items will be picked up as part the General Recommendation Follow up audit in 2019/20.

Assurance Level: Limited

6 Technical Services Assets - This audit was postponed in 2017/18 at the request of management and brought forward into the current plan. The audit concentrated on key controls in the following areas:

- There are appropriate policies and procedures in place governing the use of Officer Command Response Vehicles by the Fire Authority.
- There are appropriate controls in place for monitoring the forces requirements in terms of the number of lease cars required.
- There are appropriate purchasing arrangements in place in respect of command response vehicles.
- There are appropriate controls in place to monitor the command response vehicles that the Fire Authority has in place.
- There are appropriate contracts in place with the registered users to protect both the Fire Authority and the registered user.
- There are appropriate controls in place for the maintenance, insurance and taxation of the vehicles.
- There are appropriate controls in place to calculate business and private use of vehicles.
- There are appropriate controls in place to ensure that users details are passed to payroll for the calculation of any salary deductions and taxation.
- There are appropriate controls in place to ensure that vehicles are disposed of at a time to maximise future resale value.

There is generally a sound system of control in place but there is evidence of non-compliance with some of the controls.

The audit raised three recommendations, one was considered significant:

- 1) Management should ensure that all user agreements are the correct ones for the type of use by the officer, they are signed and dated by the officer at the time the vehicle becomes operational and include details of the vehicle.

Assurance Level: Reasonable

- 7 IT System Project Review** - This area was added into the plan due the changes required in the implementation of the new finance and HR systems.
- To ensure that the recommendations rated significant in the 2017/18 audit have been implemented as per the original management responses.
 - Appropriate project structures are in place to deliver the new finance and HR systems.
 - Appropriate project governance arrangements are in place, to provide management with a suitable framework to make project decisions.
 - Suitable project controls are in place to ensure that the project is subject to adequate scrutiny.
 - Project resources are carefully considered to ensure that the project is successfully completed on time and within budget.
 - The project is appropriately scoped and the requirements are clearly specified.
 - Communication is direct and efficient to allow effective decision making.

There is generally a sound system of control in place but there is evidence of non-compliance with some of the controls.

Three significant recommendations were raised because of the audit:

- 1) Considerations relating to the IT resource following the Hereford and Worcester strategic alliance review should be finalised as soon as possible. All posts identified within the IT structure should be recruited to as soon as possible.
- 2) As recommended in 2017/18, a review of the administrative tasks over the IT infrastructure should be undertaken and this should be refined to ensure that upgrades/patches are applied in a scheduled and controlled manner. This should include appropriate scheduling of the retirement of old operating nearing support cessation date.
- 3) In the absence of detailed technical specifications for both the Finance and Payroll implementations, a detailed review should be undertaken to ensure both systems are configured in line with the Information Security Policy and current best practice.

Assurance Level: Reasonable