

For Publication

Bedfordshire Fire and Rescue Authority
Corporate Services Policy and Challenge Group
13 September 2018
Item No. 10

REPORT AUTHOR: ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)

SUBJECT: AUDIT AND GOVERNANCE ACTION PLANS MONITORING REPORT

For further information on this report contact: Karen Daniels
Service Assurance Manager
Tel No: 01234 845013

Background Papers:

- Action Plans contained in Internal and External Audit Reports
 - Action Plan contained in the Annual Governance Statement 2017/18
 - Minutes of the Audit Committee dated 5 April 2012
-

Implications (tick ✓):

| | | | | |
|-----------------|-------|---|------------------------|---|
| LEGAL | | | FINANCIAL | ✓ |
| HUMAN RESOURCES | | | EQUALITY IMPACT | |
| ENVIRONMENTAL | | | POLICY | ✓ |
| CORPORATE RISK | Known | ✓ | OTHER (please specify) | |
| | New | | CORE BRIEF | |

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To report on progress made to date against current action plans arising from internal and external audit reports and from the Fire Authority's 2018/19 Annual Governance Statement.

RECOMMENDATION:

That Members acknowledge progress made to date against the action plans and consider any issues arising and endorse the recommendation to extend the completion date.

1. Introduction

- 1.1 The Members of the Audit and Standards Committee previously endorsed that the Committee should receive monitoring reports at each of its meetings advising of progress against current action plans arising from internal and external audit reports, and the Authority's Annual Governance Statement.
- 1.2 In their meeting on 5 April 2012, Members of the Audit and Standards Committee agreed that progress on the action plans be reported to each meeting of the appropriate Policy and Challenge Group and action point owners report progress by exception to the Audit and Standards Committee. This is the second report to the Corporate Services Policy and Challenge Group for the year 2018/19.

2. Monitoring Report of Actions Arising from Internal and External Audit Reports

- 2.1 The monitoring report of progress made to date against agreed actions arising from internal and external audit reports is attached as Appendix A.
- 2.2 The monitoring report covers, in order, the following:
 - Outstanding actions from internal and external audit reports, including those reports received during 2018/19 and those from previous years, which have a proposal to extend the original completion date.

- Outstanding actions from internal and external audit reports, including those reports received during 2018/19 and those from previous years, which are on target to meet the original or agreed revised completion date.
- Completed actions which are subject to a subsequent or follow up audit. These will remain on the report until this follow-up audit is completed.
- Completed actions that are of a Low risk and do not require a follow-up audit. These will be removed from the report once they have been reported as completed to the Policy and Challenge Group.
- Any actions that have been superseded by new actions. (Actions are removed from the report once they have been reported as superseded to the Policy and Challenge Group.)

2.3 There *one* request to extend the original completion date.

3. Monitoring Report of Actions Arising from the Authority's Annual Governance Statement

- 3.1 The monitoring report of progress made to date against actions arising from the Authority's Annual Governance Statement is attached as Appendix B.
- 3.2 The monitoring report covers the actions within the 2017/18 Annual Governance Statement (if applicable) which was formally adopted by Members of the Audit and Standards Committee, on behalf of the Authority, at their meeting on 6 July 2018, as part of the 2017/18 Statement of Accounts.
- 3.3 There are no requests to extend the original completion date.

4. Priority Grades

4.1 The Service Audit Outcomes in Appendix A have a priority grading system. The table below explains the key to the priority grades:

| | | |
|---|--------|--|
| RSM (formerly Baker Tilly & RSM Tenon) | High | Recommendations are prioritised to reflect RSMs assessment of risk associated with the control weaknesses. |
| | Medium | |
| | Low | |

5. Organisational Risk Implications

5.1 The actions identified within internal and external audit reports and the Annual Governance Statement represent important improvements to the Authority's current systems and arrangements. As such, they constitute important measures whereby the Authority's overall management of organisational risk can be enhanced.

5.2 In addition, ensuring effective external and internal audit arrangements and the publication of an Annual Governance Statement are legal requirements for the Authority and the processes of implementation, monitoring and reporting of improvement actions arising therefore constitute an important element of the Authority's governance arrangements.

ZOE EVANS

ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)

Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2018 from earlier reports)

APPENDIX A

| URN | Auditing Body & Source | Audit Area and Responsible Manager | Priority | Agreed Action | Progress Report to Date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|-----------------|---|--|----------|--|---|------------------------------|--|
| RM (17/18) 5 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | The Service will introduce formal risk management training for risk owners and other key staff. | <i>Due to the Service restructure and the HMICFRS, we have not yet implemented this action.</i> A request is made to extend the completion date to 31/12/2018 | Original Aug 18 | In Progress |
| FM (17/18) 2.1a | RSM Follow Up June 18: Final Report (17/18) | Stocks and Inventory Head of Operational Support | Medium | The Authority will ensure that the review and update of all OP numbers is completed to ensure they relate to the correct item and the correct shelf space in stores. The Technical Support Manage will ensure an interim stoke take is performed on all stock held by the Technical department to ensure accuracy and evidence of this will be retained | A review of stock and its location is currently being undertaken. Where needed stock and OP numbers are being relabelled | Original Dec 19 | In Progress |
| RM (17/18) 3 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Medium | The Corporate Risk Register will be updated to encompass the following fields: • Mitigating controls; • Assurances against controls; and • Gaps in controls / assurances. | The Corporate Risk Register (in Abriska) has been updated to encompass the following fields: • Mitigating controls; (Linked Controls) • Assurances against controls; and (Maturity Defined and Justified Proposed Maturity Defined and Justified) • Gaps in controls / assurances. | Original August 18 | Completed – To be confirmed by follow up audit |

Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2018 from earlier reports)

APPENDIX A

| URN | Auditing Body & Source | Audit Area and Responsible Manager | Priority | Agreed Action | Progress Report to Date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|---------------|---|--|----------|--|---|---------------------------|--|
| RM (17/18) 4 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Medium | A review of all risk scores will be undertaken in line with the following definitions: <ul style="list-style-type: none"> • Inherent risk - the risk that an activity would pose if no controls or other mitigating factors were in place; and • Residual risk - the risk that remains after controls and other mitigating factors are taken into account | A review of all risk scores will be undertaken in line with the following definitions: <ul style="list-style-type: none"> • Absolute risk - the risk that an activity would pose if no controls or other mitigating factors were in place; and • Inherent risk - some risk controls in place, and action plan to address further risk. • Residual risk - the risk that remains after controls and other mitigating factors are taken into account | Original Aug 18 | Completed – To be confirmed by follow up audit |
| RM (17/18) 9b | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Medium | Where updates and assurances against risks are reported as part of Corporate Risk Register reports to the Policy and Challenge Groups and the Audit and Standards Committee, risk scores will also be included for review as to whether they require revising. | Completed - CMT will ensure they do this in there Review and monitor section for PCG reports. | Original May 18 | Completed – Subject to follow up audit |
| RM (17/18) 1 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | The Service Assurance Framework will be updated to ensure that there is clear linkage between business continuity, information security and risk management | The Service Assurance Framework has been updated to nure that there is a clear linkage between business continuity, information security and risk management | Original May 18 | Completed – No follow up audit required |

Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2018 from earlier reports)

APPENDIX A

| URN | Auditing Body & Source | Audit Area and Responsible Manager | Priority | Agreed Action | Progress Report to Date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|--------------|---|--|----------|---|---|---------------------------|--|
| RM (17/18) 2 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | When updating the Service Assurance Framework with content from the Corporate Risk Management Policy / Risk Management Service Order, the following additional information will be included: <ul style="list-style-type: none"> • Key risk definitions; • Minimum frequency for risk reviews by risk owners; • Escalation process for new/emerging risks identified by staff; and • Risk appetite statement (clearly identifying the level of risk the Service are willing to tolerate) | The Service Assurance Framework has been updated with the following additional information:- Key risk definitions; <ul style="list-style-type: none"> • Minimum frequency for risk reviews by risk owners; • Escalation process for new/emerging risks identified by staff; and • Risk appetite statement (clearly identifying the level of risk the Service are willing to tolerate) | Original May 18 | Completed – No follow up audit required |
| RM (17/18) 6 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | The Risk Champion review of the Corporate Risk Register will be undertaken on at least a quarterly basis to check key areas, including: <ul style="list-style-type: none"> • Whether actions have responsible owners and due dates assigned; • Whether actions are completed in line with their due date (or reasoning has been provided where they are overdue); and • Whether risks are reviewed in | A full report is discussed at CMT on a quarterly basis (September, December, March and April) and this is reflected in the Agenda and Minutes. | Original May 18 | Completed – No follow up audit required |

Monitoring Report of Actions Arising from Audit Reports
 (incorporating any actions outstanding at 31 March 2018 from earlier reports)

APPENDIX A

| URN | Auditing Body & Source | Audit Area and Responsible Manager | Priority | Agreed Action | Progress Report to Date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|--------------|---|--|----------|--|---|---------------------------|--|
| | | | | line with their review date. Where there is non-compliance with the above, this will be escalated by the Risk Champion accordingly | | | |
| RM (17/18) 7 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | Where new risks are reported to the Corporate Management Team (CMT), the proposed risk scoring will also be reported to ensure appropriate oversight prior to the risk being added to the Corporate Risk Register. | This action is acknowledged and accepted and can only be completed when a new risk has been identified. | Original May 18 | Completed – No follow up audit required |
| RM (17/18) 8 | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | The Terms of References of the Corporate Management Team and Service Delivery Leadership Team will be updated to include the following information: <ul style="list-style-type: none"> • Accountability lines; • Reporting lines (both up and down); • Quorum; • Review frequency of the ToR; • Meeting arrangements; and • Membership. | Service Delivery Leadership Team and CMT Terms of Reference have been updated to include:- <ul style="list-style-type: none"> • Accountability lines; • Reporting lines (both up and down); • Quorum; • Review frequency of the ToR; • Meeting arrangements; and • Membership. | Original May 18 | Completed – No follow up audit required |

**Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

APPENDIX A

| URN | Auditing Body & Source | Audit Area and Responsible Manager | Priority | Agreed Action | Progress Report to Date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|----------------|---|--|----------|---|---|---------------------------|--|
| RM (17/18) 9a | RSM Apr 18: Final Report (17/18) | Risk Management Head of Service Development & Assurance | Low | The Terms of References of the Policy and Challenge Groups and the Audit and Standards Committee will be updated to include a next review date/review frequency | The Terms of References of the Policy and Challenge Groups and the Audit and Standards Committee have been updated to include a next review date/review frequency | Original May 18 | Completed – No follow up audit required |
| FM (17/18) 1.1 | RSM Follow Up June 18: Final Report (17/18) | Fleet Management Head of Operational Support | Low | The Authority will update the Repair and Maintenance Policy and Health and Safety Policy to include a requirement for monthly reviews of the logbooks | The Authority has updated the Repair and Maintenance Policy and Health and Safety Policy to include a requirement for monthly reviews of the logbooks | Original Dec 18 | Completed – No follow up required |

Monitoring Report of Actions Arising from 2017/18 Annual Governance Statement

| No | Issue | Source | Planned Action | Progress to date | Timing For Completion | Status ('Not Started', 'In Progress' or 'Completed') |
|----|-----------------------------------|--|---|--|-----------------------|--|
| 1 | Medium Term Budget/CRMP | Assurance Statements | To continue to address the medium term funding gap. | Budget work for the 2019/20 budget has commenced, with the normal timetable leading up to budget setting in February 2019. The budget gap will again be forecast as part of the budget setting process, which updates the position annually. | Mar 2019 | In Progress |
| 2 | Review of Authority Effectiveness | All actions from the 2017/18 Review of Authority Effectiveness Action Plan to be completed during 2018/19 and formally reviewed by Members as part of the following year's process | All actions from the 2017/18 Review of Authority Effectiveness Action Plan to be completed during 2018/19 and formally reviewed by Members as part of the following year's process. | A review of effectiveness paper will be presented to the Audit and Standards Committee on 25 September 2018 | Mar 2019 | In Progress |