



**HAMPSHIRE
FIRE AND
RESCUE
AUTHORITY**

Standards and Governance Committee

Purpose: Noted

Date: **31 January 2019**

Title: **INTERNAL AUDIT RECOMMENDATIONS PROGRESS REPORT**

Report of Chief Fire Officer

SUMMARY

1. This report provides the Standards and Governance Committee with an overview of the work we do to oversee the implementation of internal audit recommendations and their respective actions.
2. It provides an update on those actions that have not been completed within their target date and their status.
3. The Standards and Governance Committee has a key scrutiny role in monitoring the implementation of internal actions.

BACKGROUND

4. The internal audit follow-up process is an important element in our overall approach to risk management and governance. When an action is agreed by managers to address a control weakness, or to make an improvement to the way we work, it is important that the action is then implemented as planned.
5. The internal audit service is provided to the Authority by Southern Internal Audit Partnership (SIAP) at Hampshire County Council. There is an Internal Audit Charter that has been in place since 2014. This, and the Internal Audit Plan, are reviewed and updated annually to reflect changing organisational priorities and needs.
6. The Performance Team maintains a record of audits against the current Internal Audit Plan, noting whether they are in progress or have been completed. The respective managers are responsible for the delivery of actions that fall within their areas of responsibility.

7. Once a final audit report has been issued, the agreed management actions are recorded along with:
 - the priority of the recommendation
 - the target date for implementation
 - the person responsible for the action
8. The Performance Team will ask for confirmation and evidence that an action has been implemented, or if not, when it is expected to be. The response is recorded. Any recommendations that continue to remain outstanding are referred to the relevant Director. Our internal Performance and Assurance Board now keeps an overview of outstanding recommendations.
9. Performance of the implementation of audit recommendations has improved. We do however recognise the need to make further improvements in the speed with which we progress the individual audits at times. We are committed to this and the internal Performance and Assurance Board oversees progress.
10. The table below lists those recommendations that are currently outstanding beyond their agreed target date and of medium (M) or high (H) priority. There is a brief commentary against each to explain the status and any mitigating factors.

Internal Audit Management Actions			
Audit Plan year 2017/18			
Safeguarding			
Undertake a full review of the level of Disclosure and Barring Service (DBS) checks and Barred List checks to be undertaken for each role within Hampshire Fire and Rescue Service.	October 2018 revised to March 2019	H	Subsequent to the audit outcome a wider piece of work has been started to look at DBS checking across HCC and Hampshire Fire and Rescue Service. As part of this project we are reviewing ALL roles within HFRS to determine whether or not they should be DBS checked and, if so, at what level. The legislation that governs DBS checking is complex and it has been necessary for us to seek legal advice on a number of areas that are unclear.
Undertake a full review of the re-checking process and timeframes for each role within Hampshire Fire and Rescue Service.	July 2018 revised to March 2019	H	
Analyse and interrogate the data used to report on the dates and levels of checks recorded against each officer to check for accuracy.	September 2018 revised to March 2019	H	The result of this piece of work will be that the correct level of DBS check will be recorded against ALL position numbers in Hampshire Fire and Rescue Service. This will then identify any gaps where either a check has not been completed, that it has been completed but not recorded, or that it has been completed at the incorrect level, and this will be rectified. The target date for completing any outstanding checks and ensuring these are recorded is 31 March 2019. We aim to identify any gaps by 31 December 2018.
Information Governance			
Information Governance (IG) Policy	July 2018	M	As mentioned at the last Standards and Governance Committee meeting, a policy is written and will be published. The IG policy is incorporated within the Governance and Compliance Policy Statement which is complete and will be published in line with a new process being implemented across the Service.

SUPPORTING OUR SERVICE PLAN AND PRIORITIES

11. Implementation of internal audit recommendations assists the Authority in the improvement planning process, performance management framework, and in compliance with its governance arrangements. This in turn, assists

the Authority in achieving its aim to be the best fire and rescue service in the country.

COLLABORATION

12. The Southern Internal Audit Partnership provide internal audit on behalf of all partners within Shared Services and many other public service organisations.

RESOURCE IMPLICATIONS

13. When agreeing management actions in response to an audit report, the cost of addressing the risk should be considered against the risk materialising. Implementing audit recommendations helps to ensure that the Authority uses its resources efficiently, that key controls are in place and working, and opportunities to achieve value for money are taken.
14. The management of internal audit actions is within current resources.

ENVIRONMENTAL AND SUSTAINABILITY IMPACT ASSESSMENT

15. There are no anticipated positive or negative impacts to the environment or sustainability arising from this report.

LEGAL IMPLICATIONS

16. There are no legal implications arising from this report

EQUALITY IMPACT ASSESSMENT

17. The contents of this report are considered compatible with the provisions of equality and human rights legislation.

OPTIONS

18. The options are to note the progress towards completion of the internal audit recommendations or to not note the progress. Noting the progress will ensure that HFRA receive assurance on the Service's performance regarding compliance with control mechanisms to reduce risk and are able to scrutinise the Service on behalf of Hampshire's communities.

RISK ANALYSIS

19. Failure to implement internal audit recommendations leaves the Authority vulnerable to the consequences of the identified risks and weaknesses in control. The process is an important process within the Authority's risk management arrangements. The updates on progress ensure that Members are fully aware of any problems associated with addressing the issues raised and the priority given to driving down or eliminating specific risks.

CONCLUSION

20. In 2017/18, 5 out of 9 audits were deemed 'limited assurance' and therefore making our overall audit opinion poor. In recognition of this, our teams have

worked hard to ensure actions have been taken to rectify areas in need of improvement. These audits are an integral part of our management of risk, and successfully implemented improvement actions have strengthened our Service.

RECOMMENDATION

21. That the progress made towards the implementation of the internal audit management actions is noted by Hampshire Fire and Rescue Authority Standards and Governance Committee.

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