Joint Audit & Governance Committee 23<sup>rd</sup> March 2023



# ADUR & WORTHING

Key Decision: No

Ward(s) Affected: N/A

### INTERNAL AUDIT PROGRESS REPORT REPORT BY THE HEAD OF INTERNAL AUDIT

### **Executive Summary**

### 1. Purpose

1.1 This report provides an update on Internal Audit progress and key findings to the Committee.

#### 2. Recommendations

#### 2.1 Recommendation One

That the report be received and progress against the 2022-23 Internal Audit Plan and implementation of Internal Audit recommendations be noted.

#### 2.2 Recommendation Two

That Members consider whether there are further updates from officers on particular issues that they would like provided at the next meeting.

### 3. Context

### 3.1 Background

### <u>Progress</u>

Each quarter, a report is produced for the Joint Governance Committee (Committee) which details the Internal Audit Section's performance against the Annual Internal Audit Plan as well as a summary of work carried out in the period. Internal Audit Services to the Councils, including the role of the Head of Internal Audit is outsourced to Mazars LLP.

Attached as Appendix A is the Internal Audit Progress Report.

#### 4 Issues for Consideration

#### 4.1 Follow-Up of Housing Recommendations

As reported in November 2022 to the Committee, the Councils' Housing Service has been undergoing a Transformation Project since January 2020. Housing Management have confirmed that the actions required to address outstanding audit recommendations will be taken as part of this project and agreement was made between the Director for Digital, Resources and Sustainability, the Chief Financial Officer, previous Head of Internal Audit, and Head of Housing and Transformation Manager that an "amnesty" on the follow up of outstanding housing recommendations will be implemented to allow the Transformation Project to be completed.

All outstanding housing recommendations have therefore been removed from our ongoing progress reporting. Once the Transformation Project is complete a detailed follow-up will be completed to confirm the implementation of all of these recommendations which is aimed to start in Q4 of 2023/24.

#### 5 Engagement and Communication

**5.1** Internal Audit hold monthly meetings with the Chief Financial Officer on progress against the plan. Issues arising and potential plan changes are discussed both at these meetings and whenever necessary.

#### 6 Financial Implications

**6.1** There may be financial implications regarding implementing internal audit recommendations depending on the nature of the area and recommendations made. However, any such implications are considered by Management as part of the consideration of the recommendations raised. Some audit recommendations are also designed to improve value for money and financial control.

#### 7. Legal Implications

7.1 There are no legal matters arising as a result of this report.

#### **Background Papers**

None

#### **Officer Contact Details:**

Sarah Gobey Chief Financial Officer, Adur & Worthing Councils sarah.gobey@adur-worthing.gov.uk

Graeme Clarke Head of Internal Audit, Partner, Mazars LLP graeme.clarke@mazars.co.uk

Juan Fosco Internal Audit Manager, Mazars LLP juan.fosco@mazars.co.uk

### 1. Economic

**1.1** Matter considered and no issues identified.

### 2. Social

2.1 Social Value

Matter considered and no issues identified.

### 2.2 Equality Issues

Matter considered and no issues identified.

### 2.3 Community Safety Issues (Section 17) Matter considered and no issues identified.

### 2.4 Human Rights Issues

Matter considered and no issues identified.

### 3. Environmental

Matter considered and no issues identified.

### 4. Governance

Internal Audit identifies weaknesses in the control environment. Therefore, implementing recommendations improves the control environment and hence the risk management.

### Appendix A





Adur District & Worthing Borough Councils Internal Audit Progress Report March 2023 Appendix A



### mazars

| 01 Introduction  | 1  |
|--|----|
| 02 Internal Audit Progress   | 1  |
| 03 Audit Reports Issued  | 2  |
| 04 Follow-Ups  | 3  |
| A2 Outstanding Housing Recommendations                               | 8  |
| A3 Outstanding Priority 1 Recommendations (Past Implementation Date) | 17 |
| A4 Definitions of Assurance  | 20 |
| A5 Statement of Responsibility                                       | 21 |
| Contacts   | 22 |

### Contents

#### Disclaimer

This report ("Report") was prepared by Mazars LLP at the request of Adur District & Worthing Borough Councils (Councils), and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently, no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The Report was prepared solely for the use and benefit of the Councils, and to the fullest extent permitted by law, Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk. Further details are provided in Appendix A5, "Statement of Responsibility"

### **01** Introduction

Internal Audit is required to provide a quarterly report on progress and key findings to the Joint Audit and Governance Committee (Committee).

This report covers internal audit activity and performance since our last report to the Committee in November 2022 and includes:

- An update on progress in delivering the 2022/23 Plan;
- A summary of audit reports issued and high priority recommendations raised; and
- An update on follow-up activity and any recommendations outstanding for implementation.

### 02 Internal Audit Progress

The Committee considered and approved the 2022/23 Internal Audit Plan (Plan) on 22 March 2022.

The Plan provided for 27 internal audits totalling 515 days, including 55 days for IT audits, 45 days for Contract audit and 40 days for management which includes the Head of Internal Audit role. The audits in the Plan comprised a mixture of key financial systems, service-specific (operational and financial), corporate-wide, and IT reviews.

Since our last report presented in November 2022, the following Plan changes have been made:

- Invoicing of Housing Services Housing Repairs (Contractors) Added to the Plan at the request of the Head of Housing and in agreement with the CFO. However, this audit did not start in Q4 as planned due to the Housing Transformation Programme taking place and the team's resources being constrained. This audit has been deferred to the 2023/24 IA Plan.
- Invoicing of Housing Services EATA Added to the Plan at the request of the Head of Housing and in agreement with the CFO. However, this audit did not start in Q4 as planned due to the Housing Transformation Programme taking place and the team's resources being constrained. This audit has been deferred to the 2023/24 IA Plan
- Councils response and impacts of Welfare Reform & Cost of Living: The Director of Communities requested to focus on Discretionary Housing Payments. These payments are managed by the Councils' Revenues Team who are in their busiest season including annual billing. This audit has been deferred to the 2023/24 IA Plan

The impact of the changes above (and those previously reported to the Committee) mean that the Plan now contains 20 reviews totalling 382 days.

| Audit Status                            | Number of reviews | Percentage % |
|---|-------------------|--------------|
| Finalised/complete                      | 6                 | 31%          |
| Draft report                            | 4                 | 21%          |
| Fieldwork complete & audit under review | 2                 | 11%          |
| Fieldwork in progress                   | 5                 | 26%          |
| Not yet started                         | 2*                | 11%          |
| Total                                   | 19                | 100%         |

The table below provides a summary of current progress relevant to the 2022/23 Plan:

\*Risk Management (start date 6 March 2023) and Adur Leisure Contract Management (start date 13 March 2023)

For reference, additional detail of the audits, progress and timings, is included in Appendix A1 of this report.

### 03 Audit Reports Issued

We have four categories by which we classify internal audit assurance over the processes we examine: Full, Satisfactory, Limited or None.

### mazars

Adur District and Worthing Borough Councils – IA Progress Report – March 2023

Internal Audit categorises recommendations as Priority 1, 2 or 3 to differentiate between the types of recommendation made. These categories give management an indication of the importance and urgency of implementing the recommendations. Details on our Assurance Definitions are contained within Appendix A4.

The table below lists the internal audits for which final reports were issued since our last report to the Committee.

| Internal Audit Title               | Assurance Level | Plan Year | Previously Reported in Annual Report $\sqrt{I}$ X |
|------------------------------------|-----------------|-----------|---|
| Fire Safety – Commercial Provision | Satisfactory    | 2022/23   | Х   |
| Recruitment and Selection          | Satisfactory    | 2022/23   | Х   |
| Self-Isolation Grants              | Full            | 2022/23   | ×   |

No Priority 1 recommendations were raised in these reports. Further details of the recommendations raised in each of these reports can be found in the summary briefing provided separately to Members.

### 04 Follow-Ups

Since the last Committee meeting, the Councils' Audit App has continued to be populated with new recommendations from finalised internal audit reports.

Follow-up audits are undertaken to ensure that all the recommendations/issues raised have been successfully resolved according to the action plans agreed with the service managers. The Councils' target for internal audit recommendations/issues to be resolved at the time of the follow-up is 100% for priority 1 recommendations/issues and 80% for all priority 2 & 3 recommendations/issues.

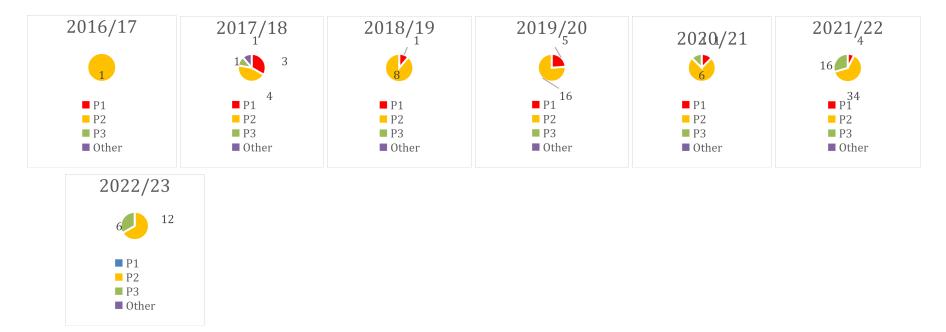
| Performance Objective | Torgot |         |         | Per     | formance (to c | date)   |         |         |
|-----------------------|--------|---------|---------|---------|----------------|---------|---------|---------|
|                       | Target | 2016/17 | 2017/18 | 2018/19 | 2019/20        | 2020/21 | 2021/22 | 2022/23 |

| Percentage of Priority 1 actions implemented         | 100% | 100% | 92% | 94% | 71% | 75% | 0%  | 0% |
|--|------|------|-----|-----|-----|-----|-----|----|
| Number of Priority 1 recommendations (for reference) |      | 17   | 37  | 18  | 17  | 4   | 4   | 0  |
| Percentage of all actions implemented                | 80%  | 100% | 94% | 95% | 81% | 86% | 17% | 5% |

Specific details on follow-up performance are included in the briefing note provided separately to Members.

#### Outstanding Recommendations by Priority Level (including Housing)





In addition to monitoring management updates on progress within the Audit App, Internal Audit can undertake spot checks to confirm that recommendations are being implemented in practice. A Follow Up Protocol is in place which contains a procedure to escalate recommendations that have not been implemented as agreed to this Committee where necessary.

As at production of this report, which includes recommendations from the finalised reports detailed above, there are 120 recommendations due for follow-up (split 14 P1, 81 P2, 24 P3 and 1 other), of these 59 are overdue (split 10 P1, 41 P2, 7 P3 and 1 other).

Within these 120 recommendations are 31 which relate to Housing and which, as detailed in paragraph 4.1 of the covering report, these are being progressed through the Housing Transformation Project and which will actively be monitored until completion of that project. These 31 recommendations, detailed within Appendix A2 of this report, are split 8 P1, 22 P2 and 1 P3 and 30 are overdue (7 P1, 22 P2 and 1 P3).

Further detail of the three overdue Priority 1 recommendations (excluding Housing) is included in Appendix A3 of this report.

### A1 Current Status – 2022/23 Plan

| Audit area   | Progress                       | Assurance Opinion | Recommendations |        |     |  |  |
|--|--------------------------------|-------------------|-----------------|--------|-----|--|--|
| Auuit area   | Flogress                       | Assurance Opinion | High            | Medium | Low |  |  |
| Community Infrastructure Levy  | Final                          | Satisfactory      | -               | 1      | 1   |  |  |
| Housing Complaints   | Draft                          |                   |                 |        |     |  |  |
| Recruitment and Selection  | Final                          | Satisfactory      | -               | 3      | 2   |  |  |
| Self-Isolation Grants  | Final                          | Full              | -               | -      | -   |  |  |
| Information Governance   | Draft                          |                   |                 |        |     |  |  |
| Commercial Waste   | Draft                          |                   |                 |        |     |  |  |
| Fire Safety – Commercial Provision   | Final                          | Satisfactory      | -               | 4      | 2   |  |  |
| BEIS Grants - Post Assurance Plan work   | Work complete                  | N/A - Advisory    | -               | -      | -   |  |  |
| Creditors  | Draft                          |                   |                 |        |     |  |  |
| Key controls testing – continuous testing                                      | In Progress                    |                   |                 |        |     |  |  |
| Governance of Property Disposals   | Work complete and under review |                   |                 |        |     |  |  |
| Economic Development - Small Business<br>Growth Grants & Apprenticeship Grants | Work complete and under review |                   |                 |        |     |  |  |
| Safety of Commercially Leased Buildings  | In Progress                    |                   |                 |        |     |  |  |
| Markets  | Work complete and under review |                   |                 |        |     |  |  |
| Risk Management  | Starts 6 March<br>2023         |                   |                 |        |     |  |  |
| Invoicing of Housing Services – Emergency & Temporary Accommodation            | Postponed to 2023/24 Plan      |                   |                 |        |     |  |  |
| Councils' response and impacts of Welfare<br>Reform, Cost of Living, Covid-19  | Postponed to 2023/24 Plan      |                   |                 |        |     |  |  |



| Audit area   | Brogroop   | Assurance Opinion |      | Recommendations |     |
|--|--|-------------------|------|-----------------|-----|
| Audit area   | Progress   | Assurance Opinion | High | Medium          | Low |
| Carbon Reduction Programme                                       | Postponed to 2023/24 Plan                                      |                   |      |                 |     |
| Invoicing of Housing Services – Housing<br>Repairs (Contractors) | Postponed to 2023/24 Plan                                      |                   |      |                 |     |
| Civica/Connect HR system   | Postponed to<br>2023/24 Plan –<br>Reported in<br>November 2022 |                   |      |                 |     |
| Supply of Affordable housing                                     | Postponed to<br>2023/24 Plan –<br>Reported in<br>November 2022 |                   |      |                 |     |
| Workforce Planning   | Postponed to<br>2023/24 Plan –<br>Reported in<br>November 2022 |                   |      |                 |     |
|  |  | Contract Audit    |      |                 |     |
| Condition Surveys contract - vertical audit                      | Audit Cancelled -<br>Reported in<br>November 2022              |                   |      |                 |     |
| Fire Door Contract Management                                    | In Progress  |                   |      |                 |     |
| Adur Leisure Contract management                                 | Starts 13 March<br>2023  |                   |      |                 |     |
| Energy Supplier - Procurement & Contract<br>Management           | Postponed to<br>2023/24 Plan –<br>Reported in<br>November 2022 |                   |      |                 |     |



| Audit area                    | Progress   | Assurance Opinion |      |        |     |
|-------------------------------|--|-------------------|------|--------|-----|
|                               | Flogiess   |                   | High | Medium | Low |
| Planned Maintenance Programme | Postponed to<br>2023/24 Plan –<br>Reported in<br>November 2022 |                   |      |        |     |
|                               |  | IT                |      |        |     |
| Device Management             | Final  | Satisfactory      | -    | 4      | 3   |
| Applications Development      | Draft  |                   |      |        |     |
| Digital Strategy              | Postponed to 2023/24 Plan                                      |                   |      |        |     |
| То                            | tal  | -                 | 12   | 8      |     |



### A2 Outstanding Housing Recommendations

Housing Recommendations are being addressed as part of Housing Transformation project - no further follow-up agreed until this project is completed.

| Audit Title                               | Audit Plan Year | Recommendation   | Priority         | Original<br>Deadline | Revised<br>Deadline |
|---|-----------------|--|------------------|----------------------|---------------------|
| Rent Collection and Collection of Arrears | 2017/18         | 3.2 An alternative solution to the regular<br>payment of housing benefit into the Rent's<br>suspense account for Worthing Emergency<br>Housing before it is allocated out by the<br>Cashiers, should be established.   | P3 - Minor Issue | 31/03/2018           | 31/03/2023          |
| Leaseholder Charges                       | 2017/18         | <ul> <li>3.1 The Council should document a Leasehold Management Policy, which outlines the legislative framework (and timescales) within which it is required to operate for the various leasehold functions and services that it provides. The policy should:</li> <li>Outline any local policy decisions in respect of the management of leaseholders, recovery of charges etc. and detail how these requirements will be achieved;</li> <li>Clearly state how the Council will deal with major repair costs, including outlining the statutory processes that have to be completed and the timescales to ensure the recovery of costs (e.g. invoice or issue S20B notice within 18 months of cost being incurred; and</li> <li>State at what level the cost of repairs will be pursued (e.g. minor costs above the £250 legislative rate may not be cost effective for the Council to pursue where there are only a few leaseholders, but if</li> </ul> | P1 - Major Issue | 30/09/2018           | 31/03/2023          |



| Audit Title | Audit Plan Year | Recommendation   | Priority                | Original<br>Deadline | Revised<br>Deadline |
|-------------|-----------------|--|-------------------------|----------------------|---------------------|
|             |                 | there were several then the costs and<br>effort would be worth it). Once<br>documented, the Policy should be<br>approved by the relevant senior<br>management, member and Committee.   |                         |                      |                     |
|             |                 | 3.5 Once the Council's policy re leasehold management has been agreed, and procedures have been reviewed and updated, training should be provided to all relevant staff on how processes should be undertaken, particularly in relation to major works. Evidence should be retained to support training provided, to whom and when.  | P2 - Important<br>Issue | 30/06/2018           | 31/7/2023           |
|             |                 | 3.32 The Council's Policy in respect of options<br>available to leaseholders for payment of major<br>works should be reviewed, approved by ADC<br>Executive and then consistently applied.   | P1 - Major Issue        | 31/03/2019           | 31/05/2023          |
|             |                 | 3.33 Once the Major Works Payment Policy<br>has been decided the Council should review<br>how implementing payment<br>loans/arrangements will for major works will be<br>achieved. An agreed process, which reflects<br>policy requirements should be effected to<br>ensure that any future loans/arrangements are<br>correctly actioned. Legal Services and Finance<br>should be involved in any discussions to<br>ensure that all legal and financial requirements<br>are met The agreed process should be<br>formalised in a documented procedure which<br>details the forms that need to be completed,<br>by whom and when and how supporting<br>information/documentation should be retained. | P1 - Major Issue        | 31/03/2019           | 30/09/2023          |
|             |                 | 3.34 Where leaseholders request additional time to pay their invoices, a process should  | P2 - Important<br>Issue | 31/03/2019           | 31/03/2023          |



| Audit Title                       | Audit Plan Year | Recommendation   | Priority                | Original<br>Deadline | Revised<br>Deadline |
|-----------------------------------|-----------------|--|-------------------------|----------------------|---------------------|
|                                   |                 | exist for assessing their affordability. Once<br>decided, the method for accessing affordability<br>should be included within the Major Works<br>Payment Options Policy recommended in 3.32<br>above.  |                         |                      |                     |
| Gas Safety Inspections            | 2017/18         | 3.1 The Council should have a documented,<br>approved policy which sets out its' objectives<br>and legal obligations, and how these will be<br>achieved, in respect of the servicing of gas<br>installations within its' properties.   | P2 - Important<br>Issue | 30/09/2018           | 22/12/2022          |
|                                   |                 | 3.2 Documented procedures should be<br>developed to detail all processes undertaken<br>in respect of gas servicing. Once developed,<br>these procedures should be reviewed and<br>updated regularly and subject to version<br>control.   | P2 - Important<br>Issue | 30/09/2018           | 31/03/2023          |
|                                   |                 | Procedures should be made available to all relevant staff within a central location.   |                         |                      |                     |
| Housing Repairs (Matsoft Process) | 2018/19         | 3.8 The process for making variations to works should be documented within a procedure and be available to all relevant staff.   | P2 - Important<br>Issue | 31/03/2021           | 31/03/2023          |
|                                   |                 | 3.12 Adur Homes Post Inspection requirements should be documented within a Policy.   | P2 - Important<br>Issue | 31/03/2021           | 22/12/2022          |
|                                   |                 | <ul> <li>3.23 1) The reporting element of the Mats system should be expanded to include the facility for a report on varied jobs to be created. Once established, this report should be run on a regular basis and reviewed by management in order to monitor the overall level and value of variations.</li> <li>2) Furthermore, management should investigate why the Mats system contains jobs</li> </ul> | P2 - Important<br>Issue | 30/09/2021           | 31/03/2023          |



| Audit Title                            | Audit Plan Year | Recommendation   | Priority                | Original<br>Deadline | Revised<br>Deadline |
|--|-----------------|--|-------------------------|----------------------|---------------------|
|  |                 | awaiting variation authorisation, which were<br>created as long ago as July 2018 and take<br>corrective action to cancel/close these jobs.   |                         |                      |                     |
|  |                 | 3.24 Adur Homes' management should discuss with Digital how the system can be enhanced to require post inspection of repair projects costing over £1,000.  | P1 - Major Issue        | 30/09/2021           | 22/12/2022          |
|  |                 | 3.25 Once agreed the requirements of the Inspection Policy will need to be built into the Mats system.   | P2 - Important<br>Issue | 30/06/2021           | 22/12/2022          |
|  |                 | 3.29 Enhancement of the Mats system is required to enable reporting of PIs once agreed.  | P2 - Important<br>Issue | 30/09/2021           | 22/12/2022          |
| Rent in Advance/Rent Deposit<br>Scheme | 2019/20         | 3.2 The RiA/DG process should be reviewed<br>and the documented procedure updated to<br>reflect the necessary process requirements for<br>this scheme only.  | P2 - Important<br>Issue | 30/06/2020           | 30/11/22            |
|  |                 | In addition, the process to be followed if the applicant is only going to claim DHP should be recorded in a separate procedure.  |                         |                      |                     |
|  |                 | Once updated/generated documented procedures should be dated and be made available to all relevant staff and any procedural changes should be highlighted to staff.                                    |                         |                      |                     |
|  |                 | 3.3 Every form used in the RiA/RD process<br>which is used to collect the personal data of<br>the client (and/or their family members) needs<br>to be reviewed and a relevant privacy notice<br>added. | P1 - Major Issue        | 30/06/2020           | 30/11/22            |
|  |                 | Furthermore, where personal data is collected and recorded within forms and the Councils   |                         |                      |                     |



| Audit Title                     | Audit Plan Year | Recommendation   | Priority                | Original<br>Deadline | Revised<br>Deadline |
|---------------------------------|-----------------|--|-------------------------|----------------------|---------------------|
|                                 |                 | are relying on a client's consent to process the information then the relevant consent(s) need to be obtained.   |                         |                      |                     |
|                                 |                 | The Housing Needs Manager should liaise with the Councils' Senior Information Governance Officer (SIGO) in order to effect this.   |                         |                      |                     |
|                                 |                 | 3.11 Relevant debt recovery actions should be taken in respect of all outstanding RiA Debts.   | P2 - Important<br>Issue | 30/06/2020           | 31/03/2023          |
|                                 |                 | Housing Management should be provided by<br>Exchequer Services, with details of those<br>agreements were debts are not being repaid,<br>as agreed, in order that they are aware of such<br>outstanding issues.   |                         |                      |                     |
|                                 |                 | 3.12 Performance targets should be set,<br>monitored and reported on a regular basis to<br>senior management & Members.  | P2 - Important<br>Issue | 31/03/2020           | 31/03/2023          |
| Regulatory Compliance - Housing | 2019/20         | 3.1 The Council should reconcile the different<br>regulatory compliance schedules and<br>timetables with other Council property<br>systems, (such as the property terrier, housing<br>management system etc.) to ensure that all<br>and every single housing property is included<br>in the different regulatory compliance<br>schedules and timetables used to ensure<br>compliance with the various legislative<br>requirements. | P2 - Important<br>Issue | 01/06/2021           | 31/08/2023          |
|                                 |                 | 3.2 All regulatory documents should be retained in a central location (Google Drives).   | P2 - Important<br>Issue | 30/09/2020           | 31/08/2023          |
|                                 |                 | Documents known to be held in other locations should be moved to the central repository.   |                         |                      |                     |

| Audit Title | Audit Plan Year | Recommendation  | Priority                | Original<br>Deadline | Revised<br>Deadline |
|-------------|-----------------|---|-------------------------|----------------------|---------------------|
|             |                 | Staff should be reminded of this requirement<br>and advised not to retain documents in any<br>other area, particularly within local drives.   |                         |                      |                     |
|             |                 | 3.4 Adur Homes should review when the last<br>Asbestos management surveys were<br>undertaken and urgently progress any<br>outstanding ones.   | P1 - Major Issue        | 01/12/2020           | 31/08/2023          |
|             |                 | Furthermore, the outcomes of the surveys<br>should be recorded and monitored and a<br>monitoring process should be effected to<br>ensure that assessments are undertaken<br>every 12 months.                                      |                         |                      |                     |
|             |                 | 3.5 The Electrical Testing spreadsheet should<br>continue be reviewed and updated to ensure it<br>accurately reflects those properties where an<br>inspection has been undertaken with<br>completion dates and outcomes recorded. | P2 - Important<br>Issue | 01/10/2020           | 31/08/2023          |
|             |                 | As noted in rec 3.2 above, certificates obtained from inspections should then be retained in a centralised location.  |                         |                      |                     |
|             |                 | 3.6 The Council should ensure that appropriate processes are in place to ensure compliance with the LOLER.  | P2 - Important<br>Issue | 01/03/2021           | 31/08/2023          |
|             |                 | An internal monitoring record should be developed to ensure that all lifts are maintained/inspected every 6 or 12 months in accordance with requirements.   |                         |                      |                     |
|             |                 | Results of these inspections and/or<br>maintenance visits should be centrally<br>maintained and recorded to allow for any<br>remedial actions to be undertaken in line with   |                         |                      |                     |

| Audit Title                                      | Audit Plan Year | Recommendation  | Priority                | Original<br>Deadline | Revised<br>Deadline |
|--|-----------------|---|-------------------------|----------------------|---------------------|
|  |                 | recommendations and/or legislation timescales.  |                         |                      |                     |
|  |                 | 3.7 Management should monitor and record<br>the outcomes of inspections and/or<br>maintenance visits to ensure any rectification<br>needed is identified. Management should also<br>ensure that any rectifying actions undertaken<br>address the issues originally identified/raised. | P1 - Major Issue        | 01/11/2020           | 31/08/2023          |
|  |                 | Where applicable, any documentation (inspection reports, new certificates etc) received which support the completion of rectification works should be retained.   |                         |                      |                     |
|  |                 | Rectification of recommended actions and/or<br>issues identified should be performed in a<br>timely manner and/or in line with established<br>timescales (i.e. recommended by specialists or<br>legislation).   |                         |                      |                     |
|  |                 | 3.8 Adur Homes should expand the compliance reports produced for the H&S Board to include complete and detailed information for all relevant areas, such as lift safety compliance.   | P2 - Important<br>Issue | 01/12/2020           | 31/08/2023          |
|  |                 | This should include any non-compliances in order that immediate follow-up can occur.  |                         |                      |                     |
| Contract Management and<br>Procurement - Housing | 2019/20         | 2.1 (i) The Contracts Register should be reviewed for completeness and brought up to date.  | P1 – Major Issue        | 31/12/2022           | 31/08/2023          |
|  |                 | (ii) A timetable of all contracts that are greater<br>than £100,000 and due to terminate should be<br>produced and the tender evaluation panel and<br>evaluation criteria should be timetabled for<br>agreement and documenting in accordance<br>with the Joint Councils CSOs.        |                         |                      |                     |

| Audit Title                                | Audit Plan Year | Recommendation  | Priority                | Original<br>Deadline | Revised<br>Deadline |
|--|-----------------|---|-------------------------|----------------------|---------------------|
|  |                 | (iii) The Joint Councils CSOs should be<br>updated to stipulate that initial evaluations<br>undertaken by individual tender evaluation<br>panel members should be retained on file.   |                         |                      |                     |
| Tenancy Management                         | 2019/20         | 2.1 (i) The Tenancy Strategy should be reviewed and updated regularly (i.e. every three years).   | P2 - Important<br>Issue | 31/03/2022           | 30/04/2023          |
|  |                 | (ii) Once updated and finalised the new Tenancy Strategy should be made available to all staff and updated on the Adur & Worthing Councils website.   |                         |                      |                     |
|  |                 | 2.2 Once generated, documented procedures should be dated and be made available to all relevant staff. Procedures should be reviewed and updated annually.  | P2 - Important<br>Issue | 31/03/2022           | 31/12/2022          |
|  |                 | (ii) The 'maximising rental income' procedure<br>should also be subject to regular reviews and<br>updated.  |                         |                      |                     |
|  |                 | 2.3 (i) Management should develop a mechanism to record and maintain appeals processes documentation.   | P2 - Important<br>Issue | 31/03/2022           | 31/03/2024          |
|  |                 | (ii) Considerations should also be given to<br>undertake spotchecks ensuring compliance<br>with the process described, including an<br>independent review of appeals cases.   |                         |                      |                     |
| Rent Collection and Recovery of<br>Arrears | 2020/21         | 3.2 The rent collection procedure should be<br>updated to reflect the current actions being<br>taken to collect arrears. This should include<br>following the suggested actions on Orchard as<br>well as alternative actions taken when Orchard<br>suggested actions are not considered<br>appropriate. | P2 - Important<br>Issue | 30/02/2021           | 31/12/2022          |



| Audit Title         | Audit Plan Year | Recommendation   | Priority                | Original<br>Deadline | Revised<br>Deadline |
|---------------------|-----------------|--|-------------------------|----------------------|---------------------|
| Leaseholder Charges | 2020/21         | <ul> <li>2.2 Minimum leaseholder service standards, to which the Council commits, should be set and the Leasehold Team should devise KPIs based on the service standards, to allow the standard of service to be more easily monitored and measured.</li> <li>Furthermore, the service standards should be documented within the Leaseholders Handbook.</li> </ul> | P2 - Important<br>Issue | 31/12/2021           | 30/05/2023          |
|                     |                 | 2.3 The Council should agree an approach to the way in which leaseholder observations, responses and correspondence are held.  | P2 - Important<br>Issue | 31/12/2021           | 31/12/2023          |



### A3 Outstanding Priority 1 Recommendations (Past Implementation Date)

#### Disaster Recovery 2021/22 - (Final Issued July 2022)

A recommendation related developing a Disaster Recovery Plan is overdue which had an implementation date of December 2022. Members can see details related to this in the briefing reports provided to Members.

#### **Governance of Property Purchases – (Final Issued November 2022)**

| Recommendation<br>(Reference & content)  | Findings and Risk as outlined in<br>Final Audit Report  | Agreed Action, Comments &<br>Original Implementation<br>deadline  | Follow Up Comments                                      | Proposed<br>Completion<br>Date |
|--|---|---|---|--------------------------------|
| <ul> <li>2.1 All files relating to property acquisition must be stored in a central location, such as the MATS system that the AMP</li> <li>suggests. Access to this information should then be restricted to relevant officers only.</li> <li>Staff should be reminded that all documentation relating to property acquisitions should only be stored centrally and should not be kept within their email account.</li> <li>Consideration should be given to the introduction of a generic email address which can be used by the Estates Team to receive information relating to commercial property acquisitions so that this issue of documentation being held in individual officers' email archives can be negated.</li> </ul> | We were not provided with<br>documentation requested in respect of<br>six of eight property acquisitions since<br>2019/20 that we selected for testing.<br>We were therefore not able to perform<br>testing to establish whether the<br>purchases were conducted in line with<br>the governance requirements laid down<br>in the CPIF.<br><i>Risk</i> : Non-compliance with the formal<br>governance approach can lead to<br>inappropriate purchases,<br>mismanagement of funds and loss of<br>reputation for the Councils. | Head of Major Projects and<br>Investments – Agreed.<br>Audit Comment – a completion<br>timescale of 31 <sup>st</sup> January 2023<br>has been added so that<br>implementation of actions can be<br>monitored. | No comments received in the IA<br>App. Raised with CLT. | 31/03/2023                     |

| Workspaces AW Accommodation | Review 2021/22 - (Final | Issued November 2022) |
|-----------------------------|-------------------------|-----------------------|
|                             |                         |                       |

| Recommendation<br>(Reference & content)  | Findings and Risk as outlined in<br>Final Audit Report  | Agreed Action, Comments &<br>Original Implementation<br>deadline   | Follow Up Comments | Proposed<br>Completion<br>Date |
|--|---|--|--------------------|--------------------------------|
| Project Managers should be provided<br>with access to all relevant<br>documentation relating to the project<br>that they are managing, especially<br>when they take over management<br>from a predecessor.<br>Furthermore, the Councils should<br>ensure that sufficient handover occurs<br>where project managers change<br>during delivery of a key projects, in<br>order that corporate knowledge is<br>retained. | Key documents that were requested<br>were not made available for the audit as<br>the new Project Manager could not<br>provide them.<br><i>Risk</i> : Where key documentation cannot<br>be provided or is not available, the<br>governance of the project cannot be<br>demonstrated. | Head of Major Projects and<br>Investments – Accept that<br>requested documentation was not<br>provided. The Councils' policy<br>which states the data<br>management and information<br>management requirements on<br>development projects for all<br>project managers should be<br>complied with.<br>Audit Comment – The issue of<br>central retention of project<br>documentation was raised in the<br>Project Management Final report<br>issued In June 2021 and a priority<br>1 recommendation raised. This is<br>being addressed by revision to<br>the Project Management<br>Framework (PMF) that will require<br>Project Managers need to allow<br>access for stakeholders to access<br>project information and this<br>should be achieved by creating a<br>shared google document. |                    | 31/03/2023                     |
|  |   | Heads of Service should ensure<br>that this requirement is<br>communicated to all project<br>managers and compliance<br>confirmed.   |                    |                                |
|  |   | An implementation timescale has been added in order that   |                    |                                |



| Recommendation<br>(Reference & content) | Findings and Risk as outlined in<br>Final Audit Report | Agreed Action, Comments &<br>Original Implementation<br>deadline   | Follow Up Comments | Proposed<br>Completion<br>Date |
|---|--|--|--------------------|--------------------------------|
|   |  | assessment of whether project<br>documentation is being managed<br>in accordance with the PMF is<br>being achieved.<br>Deadline: 31 <sup>st</sup> January 2023 |                    |                                |



### A4 Definitions of Assurance

| Definitions of Assurance Levels |  |   |  |  |
|---------------------------------|--|---|--|--|
| Level                           | Desci  | ription   |  |  |
| Full                            | There is a sound system of control designed to a being consistently applied.   | achieve the system objectives and the controls are  |  |  |
| Satisfactory                    | While there is a basically sound system, there are weaknesses that put some of the system objectives at risk, and/or there is evidence that the level of non-compliance with some of the controls may put some of the system objectives at risk. |   |  |  |
| Limited                         | Weaknesses in the system of controls are such as to put the system objectives at risk, and/or the level of non-compliance puts the system objectives at risk.  |   |  |  |
| No                              | Control is generally weak, leaving the system open to significant error or abuse, and/or significant non-compliance with basic controls leaves the system open to error or abuse.  |   |  |  |
|                                 | Definitions of Recommendations   | ;   |  |  |
| Priority                        | Definition   | Action required   |  |  |
| Priority 1 (Fundamental)        | Major issues for the attention of senior<br>management and the Joint Governance<br>Committee.  | Remedial action must be taken urgently and within an agreed timescale.                      |  |  |
| Priority 2 (Significant)        | Other recommendations for local management action.   | Remedial action should be taken at the earliest opportunity and within an agreed timescale. |  |  |



### A5 Statement of Responsibility

We take responsibility to the Councils for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made.

Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk

### Contacts

#### **Graeme Clarke**

Partner, Mazars graeme.clarke@mazars.co.uk

#### Juan Fosco

Manager, Mazars juan.fosco@mazars.co.uk

Mazars is an internationally integrated partnership specialising in audit, accountancy, advisory, tax and legal services<sup>\*</sup>. Operating in over 95 countries and territories worldwide, we draw on the expertise of 47,000 professionals – 30,000 in Mazars' integrated partnership and 17,000 via the Mazars North America Alliance – to assist clients of all sizes at every stage in their development.

\*Where permitted under applicable country laws.

#### www.mazars.co.uk

