ISLE OF	ANGLESEY COUNTY COUNCIL
COMMITTEE:	
DATE:	23 FEBRUARY 2015
TITLE OF REPORT:	PROGRESS REPORT ON INTERNAL AUDIT 01 APRIL 2014 – 31 DECEMBER 2014
PURPOSE OF REPORT:	FOR INFORMATION
REPORT BY:	AUDIT MANAGER
ACTION:	N/A

### 1. INTRODUCTION

- **1.1** The Operational Plan for 2014-15 was presented to and accepted by the Audit Committee at its meeting held on 10 April 2014. The Plan was produced in consultation with the External Auditor, the Section 151 Officer and various meetings and communications with Heads of Service.
- **1.2** The following report summarises the work of the Internal Audit Section up to the 31 December 2014 and gives a summary for each of the final reports issued since the last Audit Committee.
- **1.3** Final reports which result in a 'Red Assurance' opinion will be subject to a Follow Up review which will include an audit opinion on the progress of management in implementing the recommendations categorised as High and Medium within the original final report. The results of the Follow Up review will be presented to the next Audit Committee.
- **1.4** There were no reviews in the previous period which resulted in a 'Red Assurance' opinion. The results of the Follow Ups of two previously reported Red opinion reports are included within this report.
- **1.5** The Internal Audit Service uses a Risk Based approach wherever possible but may use System Based, Key Controls, Establishment or Advisory reviews if these approaches are more appropriate.
- **1.6** The individual final reports are available to members of this Committee, in confidence, on request to the Audit Manager.

### 2. REPORTS ISSUED SINCE LAST UPDATE REPORT

Listed below are the Final Internal Audit Reports issued since the last progress report to Committee along with a summary of the results of each review.

2.1.1 Logical Access Controls & Segregation of Duties - Follow Up - A review of the Council's arrangements for Logical Access Controls and Segregation of Duties within applications was undertaken in Quarter 2 2014-15 and resulted in

a Red Assurance Internal Audit opinion. The review was the first overall review of this area which was undertaken in response to weaknesses in controls identified by Internal Audit through its review of individual application reviews. The original final report was issued in September 2014 and included seven recommendations categorised as 'High'; six as 'Medium' and two as 'Low' category.

We consulted with the relevant stated responsible officers for implementation within the report and assessed the progress of implementation for each recommendation.

Taking account of the issues identified in the report and in line with our methodology for providing assurance on the progress of implementation, in our opinion management has demonstrated **'little progress'** in implementing actions agreed to address the audit recommendations within the original agreed timescales.

We found that there were five High category and six Medium category recommendations assessed as yet to be implemented at the time of the review; however we were informed that the implementation of four High category and three Medium category recommendations was 'ongoing', or that there were plans to implement the recommendations as part of a restructure within the Finance Service.

We have reiterated recommendations where these have not yet been implemented. In addition, we have made new recommendations where appropriate.

**Opinion:** Management has made 'little progress' in implementing the recommendations in the original report and our opinion of the control arrangements in place in this area therefore remains as 'Red Assurance'.

2.1.2 Third Sector Scheme – Follow Up - We were informed by the Corporate Director Community that following a presentation of a Report on the Code of Practice for the Third Sector by herself, and the receipt of the Internal Audit Report on compliance with the scheme, the Senior Leadership Team mandated the 151 Finance Officer and Corporate Director to commission actions to strengthen practice.

A terms of reference for this work was endorsed by the Penaethiaid (November 2014) and additional capacity has been identified to work with the Finance Service and Heads of Service to progress agreed actions.

The Corporate Director Community reported that an outline draft report was presented at the Third Sector Liaison Committee on the 16 January 2015 and that a final draft report to the Penaethiaid and SLT is scheduled for February 2015. The time frame has been amended taking account of the need to commission external capacity to complete the task. This final report will include:

- Information re investment in the Third Sector;
- An analysis, based on sampling, of compliance with the Code with reference to commissioning & procurement;
- Recommendations about systems and responsibilities to be adopted by the Council. It is anticipated that this will include the identification of a named officer within finance to oversee financial arrangements with the Third Sector and, revision of the policy relating to grants / SLAs
- Recommendation of an operational framework to be formally adopted by the IACC and Third Sector (Medrwn Mon) noting acceptance and monitoring compliance with the Code.

The Corporate Director Community anticipates that this work will be completed by end of March 2015.

**Opinion:** From the information provided to Internal Audit we have assessed that 'good progress' is being made in addressing the issues raised in the original Internal Audit Report.

2.1.3 Talnet – Partnership Agreement - TalNet is jointly funded by Anglesey County Council, Gwynedd Council and Conwy County Council providing services to the Counties' libraries including provision and maintenance of computerised systems, ordering, cataloguing and distribution service, provision of performance information and arrangements for inter-library loans. Anglesey County Council provides financial services to TalNet and TalNet staff are employed by Anglesey County Council.

The key findings from this review were:

Design of control framework

- The CIVICA purchasing module is currently not used by TalNet for ordering services; a bespoke electronic ordering system is used by all three authorities.
- Reconciliation of orders, invoices and credit card payments are being conducted by TalNet as well as by the IOACC Finance Service.
- TalNet cannot fully utilise the modules within the CIVICA financial system due to lack of policies and procedures.

Application of and compliance with control framework

 Credit card expenditure has not been charged to the other local authorities due to general delays in coding credit card expenditure.

**Opinion:** An overall GREEN/AMBER audit opinion resulted from the review with five Low category recommendations being agreed with management.

2.1.4 Maritime Diesel – A review of the arrangements in place for the sale, billing and payment of maritime diesel was undertaken. The Council provides facilities for the purchase of maritime diesel as a service to commercial fishermen and small to medium sized commercial craft. The diesel is bought in 18000 litre vehicles and is stored within storage tanks at Holyhead Fish Dock and Amlwch harbour. Holyhead Fish Dock has three tanks of 56,000 litres capacity, but only one in is currently in use. Amlwch Harbour has one tank of 25,000 litres capacity.

The key findings from this review were:

- The current supplier of maritime diesel to the Council we understand to have been used by Maritime for a number of years without going out to the market or complying with Contract Procurement Rules by procuring fuel through a recognised framework agreement.
- There is no procedure for the dipping of fuel tanks, or other measurement of tank levels, before and after deliveries to verify the amounts being delivered. The external fuel gauges at both the Holyhead and Amlwch sites were inoperable at the time of Audit field visits and Audit was informed that that had been so for some time.
- There was no procedure for the regular checking of fuel levels by dipping, or any other means, and no use of the cumulative pump record of issues to reconcile to the spreadsheet record of fuel issued. Without prompt and

regular reconciliation there is an increased risk that errors and inaccuracies go undetected.

- There is 18000 litres of fuel contained in a tank at Holyhead after being wrongly placed in this tank. Arrangements need to be made to transfer this fuel to the tank currently in use.
- The documents produced by the SAGE system and issued to customers purport to be official 'invoices' which under Financial Procedure Rues they are not. The documents are also not compliant with the Council's Financial Procedure Rule 4.8.5.2.1 which requires segregation of duties between the calculating, checking and recording of debts and the collection of such debts.
- There are clear differences between the record of fuel issue and the income recorded as received for these issues. The differences show additional income over and above the forecast return on expenditure.
- There is no procedure for the regular reconciliation of fuel issue records to income records to ensure that all amounts have been invoiced or collected. Audit identified 11/77 issues from Amlwch for which a debtor invoice or payment could not be matched to the income record.

**Opinion:** This was an advisory review which resulted in the identification of a number of control weaknesses which have been communicated to management for action.

**2.1.5** Homelessness - An audit of Homelessness was undertaken as part of the approved internal audit periodic plan for 2013/14. The Council, in accordance with the requirements of the Homelessness Act 2002, has developed a homelessness strategy that recognises the recent transition towards homelessness prevention and reflects the aims of the Welsh Government at the time the strategy was adopted.

Homelessness services now focus on prevention through early identification and intervention, helping people address the causes of threatened homelessness at the earliest possible opportunity and ensuring that a housing options and assessment framework is in place that takes account of all aspects affecting someone's accommodation, beyond, and in addition to, housing needs, so that appropriate services can be accessed to develop sustainable solutions. The key findings from this review were:

Design of control framework

- Key aspects of Homelessness procedures need enhancing to reflect the increase in focus on homelessness prevention and administrational changes including the new combined assessment form, the use of the Orchard, and introduction of the new CIVICA electronic payment system.
- Lack of evidence to support monitoring of length of stay in Bed and Breakfast accommodation and checks to validate Bed and Breakfast payments; no systematic check of Housing Benefits payments made to the Council's holding account to ensure full recovery of rent payments where appropriate and validity of all benefit payments received.

Application of and compliance with control framework

- The Homelessness strategy has not been formally reviewed since 2007 and therefore pre-dates the Welsh Government's 'Ten Year Plan 2009-2019'. There is a requirement to review the strategy every 5 years.
- Elements of key duties of the vacant posts of Accommodation Officer and Housing Options Manager were not reassigned in the period under review to

ensure that the service is able to fully maintain the expected internal controls in the areas covered by these staff.

 Some instances of lack of evidence on the Homelessness application file to support the application decision, enquires and actions undertaken and some inconsistency in application of procedures.

**Opinion:** An overall RED/AMBER audit opinion resulted from the review with seven Medium and seven Low category recommendations being agreed with management.

**2.1.6 Sports Development** - The Council receives grants relating to sports development from a number of different agencies. This review considered only those grants funded by the Sport Wales. In 2013/14 the value of these grants was approximately £310,558.

The Sports Development Section has drawn up a plan entitled 'Local Authority Partnership Agreement 2013/17' between Sport Wales and Ynys Mon which details the planned activities to be funded through Sports development grants.

The review found that there were robust arrangements in place to deal with Sports Development grants and no significant recommendations were made.

**Opinion:** An overall GREEN audit opinion resulted from the review with one Medium and one Low category recommendation being agreed with management.

**2.1.7 Teacher's Payroll -** An audit of Teachers' Payroll was undertaken as part of the approved internal audit periodic plan for 2014/15.

The Teachers' payroll is maintained on Payroll 100. Payroll 100 comprised of 2592 live paid records as at 5 August 2014, these included teachers as well as non-teachers. In June 2013 supply teachers previously maintained on Payroll 600 were transferred to Payroll 100. Over £29m was paid through Payroll 100 in the financial year 2013/14. Between April 2013 and July 2014 there were 147 new starters processed on Payroll 100 and 154 leavers. The key findings from this review were:

The Auditor identified control weaknesses which were also reported in previous annual key controls Payroll Review from 2012/13 and 2013/14. The two main weaknesses found from previous reports where relevant to this review were:

- There is currently no procedure for the regular verification of establishment to Payroll by Budget Holders confirming on at least an annual basis that a review of the current staff structure and pay grades has been undertaken to verify the accuracy and completeness of the information held on the integrated HR and Payroll system.
- There are no reports detailing permanent amendments to Payroll standing data produced and reviewed on a regular basis to ensure that only valid changes are actioned and give assurances that all changes are correctly applied.

#### Design of control framework

- There is no procedure for verification of establishment to Payroll on a regular basis.
- There is no 'duplicates' report run systematically for NI and bank account details on the Payroll - Testing of duplicate National Insurance numbers on the Payroll identified instances of duplicate live records and an employee paid on two pay references on Payroll 100 in the same month.

 Amendment reports are not run and reviewed by an independent officer on a periodic basis.

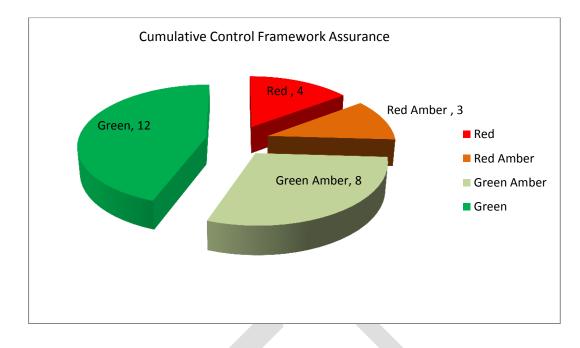
#### Application of and compliance with control framework

- Supporting documents including timesheets, amendments, starters and leavers forms could not be located within Payroll in all instances of audit testing. Payroll has been notified of the instances where no supporting documents could be found at the time of the audit review.
- Pension deductions for seven employees were incorrectly applied due to manual amendments to the system affecting the full time equivalent salary recorded; the error had been identified in relation to one of the employees and the contributions corrected as appropriate.
- Previous pension re-banding reports were only generated when pension bands were amended. Reports are now said to be checked on a monthly basis from September 2014 onwards.
- The audit found no significant errors in the sample testing undertaken in relation to timesheets/claims submitted which are processed by HR Education and uploaded for automatic interface to the Payroll system on a monthly basis.
- Exception reports had been produced for timesheets and variance reports were seen to be checked for fixed pay elements of Payroll 100.
- There were no errors identified in relation to the set-up of new starters, actioning amendments to the Payroll records and terminating leavers on the Payroll, however it was seen that notional amendments to the system occurring in a particular month and relating to a specific adjustment to pay had affected the notional full time equivalent pay for the months following. This in turn affected the parameters for instance pensions and / or possible other deductions where it should not. As a result incorrect banding of pensions has been applied to those affected by this change and /or incorrect deductions have been taken.

**Opinion:** An overall RED/AMBER audit opinion resulted from the review with one High; two Medium and three Low category recommendations being agreed with management.

- **2.1.8** Schools Key Controls Audit Finance and Governance Two Final report from audit work at the Council's primary schools were completed in the period. The review resulted in GREEN/AMBER and GREEN audit opinions respectively. Recommendations to strengthen internal control weaknesses identified have been made with the Headteachers concerned.
- **2.2** Summary of Outcomes of Reports Issued to Date since the 01 April 2014 we have issued seven final reports from the Internal Audit Operational Plan 2013-14; and twenty eight from the 2014-15 plan. To date therefore a total of thirty five final reports has been issued in 2014-15.

A summary of the grades given for the 27 final reports issued from the 2014-15 Plan with RAG opinions is shown in the pie chart below:



This pie chart will be updated cumulatively in each subsequent Internal Audit Progress Report and will therefore provide an indicator of the audit opinion of the overall control framework which will be reported in the Annual Report of the Chief Audit Executive.

To date of the 27 Final reports issued from the 2014/15 Internal Operational Plan 74% have resulted in a positive assurance opinion (Green or Green Amber) and 26% in a negative opinion (Red or Red/Amber).

Scheduled Review Title	Service Area	Current Status
Logical Access Controls – Follow Up	Corporate	FINAL
Third Sector Scheme – Follow Up	Corporate	FINAL
TalNet	Partnership	FINAL
Maritime Fuel	Community	FINAL
Homelessness	Housing	FINAL
Sports Development	Community	FINAL
Teachers' Payroll	Education	FINAL
Ysgol Pentraeth	Education	FINAL
Ysgol Llangoed	Education	FINAL
Creditors	Finance	Work in Progress
Debtors	Finance	Work in Progress
Main Accounting System	Finance	Work in Progress
Cashiers	Finance	Work in Progress

## **3** INTERNAL AUDIT FORWARD WORK PROGRAMME

National Non Domestic Rates	Finance	Work in Progress
Council Tax	Finance	Work in Progress
Information and Decision Flows Mapping	Finance	Work in Progress
Highways Rechargeable Works	Highways	Work in Progress
Housing Rents	Housing	Work in Progress

## 4. REFERRALS

- **4.1** During the course of the year the Internal Audit Section is required to carry out work on matters which come to light during the programmed audit work, or matters which are brought to its attention by other Departments, or work which other Departments request the Internal Audit Section to carry out. Work may also be requested by the External Auditor to provide information or to assist in the provision of information. Some of these referrals result in the issue of formal audit reports whilst others will be recorded in File Notes (e.g. where the allegation / information is found to be incorrect and therefore there is nothing to report, or the amount of work is not sufficient to warrant a full audit report or the matter is covered by an External Auditor's report).
- **4.2** A number of File Notes have been produced in the period to date in 2014/15. None of the work resulting in a File Note has identified any evidence of fraud or irregularity.
- **4.3** As previously reported to the Audit Committee one referral from 2012/13 is being investigated by the Police. The Internal Audit Team received a draft statement from the Police which was completed and returned in August 2014. The Committee will be informed of the outcome of this case in due course.
- **4.4** The Committee has previously been made aware of an attempted Creditor related fraud against the Council and others. On 25 January 2015 the Internal Audit Service received a response by email from the Police concerning this referral. The response is provided below for Members information:

Your particular report has undergone a proportionate investigation in line with West Midlands Police Fraud allocation and investigation policy and it has been decided that no further investigation will take place at this time. The policy does not have a financial threshold but focuses our resources on vulnerable victims and those offenders posing most risk, harm, and threat to the public. We also take into account any viable leads, likelihood of conviction to the criminal standard, and resources available.

### 5. **RECOMMENDATION TRACKING**

- 5.1 For reporting to this Committee only recommendations made since 01-04-2012 have been included in the recommendation tracking analysis.
- 5.2 The percentage implementation rate at 14 January 2015 was 61% of 'High' and 'Medium' recommendations having been recorded as implemented. The performance in relation to recommendations other than those in Education is 79% (Figures as at 14-01-15).

Internal Audit is liaising on an ongoing basis with the Education Service on improvements to the process for the reporting of implementation rates within schools.

- 5.3 A graph showing the breakdown of recommendation implementation by Service is provided at Appendix A.
- 5.4 The Audit Committee has requested a more detailed breakdown of outstanding High category Internal Audit recommendations and a table of all such recommendations including the responsible officer for each is provided at Appendix B.

### 6. ONGOING AUDIT CONCERNS

- 6.1 A report on progress made on the previously reported areas of Internal Audit concern was presented to the Committee by the Deputy Chief Executive at its September 2014 meeting. The areas will continue to be a concern for Internal Audit until all significant recommendations have been implemented and assurance can be provided that the frameworks and systems are in place; have been embedded; are robust and are effective. The current position on these areas is provided below.
  - <u>Business Continuity</u> Recommended actions to strengthen controls in this area have been collated from a number of assurance provider reports, including those of Internal Audit and have been included in a Corporate Information Management Action Plan. Progress on arrangements is now being made on a North Wales basis.
  - <u>Risk Management</u> The Council is in the process of developing its Risk Management Framework and embedding risk management in the organisation. The Corporate Risk Register is still in development and a regular reporting regime is to be implemented.
  - <u>Information Management</u> The Information Commissioner's Office has undertaken a review in this area and identified similar issues and control weaknesses to those identified by the WAO, PWC and Internal Audit in previous reports. A draft follow up report from the Information Commissioner's Office is being considered.
  - **Governance** Issues relating to non-compliance with key corporate policy and procedure have again been identified in 2014-15, for example in relation to corporate procurement; ICT Security; Third Sector Scheme; etc. The Council has stopped the use of its electronic policy compliance and sign off of policies system which recorded users as having read, understood and agreed to abide by policies. Without such record of sign off it is more difficult to show that the policies have been adequately disseminated to relevant staff. A report concerning these issues was issued in 2011-12, and again in the Logical Access report in October 2014; however a number of key recommendations remained unimplemented.
  - <u>Corporate Procurement Framework</u> Management has restructured and strengthened the Procurement Team. New Contract Procedures Rules are to be introduced and implemented. A review of Procurement arrangements has been included in the Internal Audit operational Plan for 2015/16 to provide assurance that the changes made have led to increased compliance with procurement regulation, policy and procedure.

• <u>Partnerships Framework</u> - The Council does not have a formal Partnership Framework in place to provide assurance that all partnerships have adequate governance, management and performance arrangements in place to meet their stated objectives and that they provide value for money in relation to the Council's financial and other resources invested in them.

A follow up of the Internal Audit review of Partnership Arrangements issued in June 2013 is take place in quarter 4 of 2014/15.

 <u>Schools Recommendation Implementation</u> – There is a continuing issue with regards to schools implementing internal audit recommendations. These recommendations relate to financial and governance issues within schools which should be of concern to Head Teachers and to the Education Department.

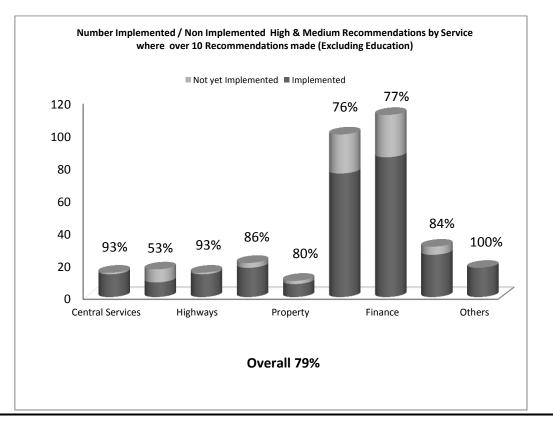
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#### **APPENDIX A**

Recommendation Tracking Table –<u>Non Education</u> High & Medium Recommendations Created Since 01-04-2012 Progress Table: % implemented / non implemented of high and medium category recommendations by service where over 10 recommendations made But excluding Education; which total at the end of the period was **79%** of all such recommendations.

In our opinion therefore based on the self assessed data in the Progress Table above the Council has made 'good progress' in the period in implementing High and Medium categorised Internal Audit recommendations.

NB it should be noted that the increased implementation rate is the result of data cleansing of recommendations by Internal Audit and the amendment of a number of target dates for implementation due to recommendations 'being partly implemented' with some work ongoing or where the assigned 'responsible officer' for implementation has changed.



# High Category Internal Audit recommendations Outstanding as at 14 January 2015 FOR AUDIT COMMITTEE REPORT

Ref	IA Report	Recommendation Summary	Creation Date	Implem'n Target date	Responsible Officer	Current Status	Comments	RAG
1	Business Continuity 1812.12/13	To ensure that the recommendations made in the Business Continuity Report 1812 12/13 are actioned.	07/10/2014	31/12/2014	Transformation	Being Implemented	Since 1st July 2014, the Emergency Planning function for the Council has been undertaken via the North Wales Emergency Planning Service. Awaiting update on position with Business Continuity Plan.	Green /Amber
2	System Controls - Logical Access and Segregations of Duties 1961.14/15	Once the revised ICT Security policy and compliance software is in place a grace period of two weeks is given to new starters to approve the policies before their access is revoked.	07/10/2014	31/03/2015	Technical Services Manager	Within target date		Green
3	System Controls - Logical Access and Segregations of Duties 1961.14/15	New starter forms authorising requests for starters to be granted access to the Council's network should be stored appropriately in a consistent manner such that they can be located upon request	07/10/2014	31/12/2014	Technical Services Manager	Not Implemented – changed the date for implementation to 28/02/2015	Included in follow up review January 2015	Red
4	System Controls - Logical Access and Segregations of Duties 1961.14/15	The Payroll and Human Resources system groups and access rights should be reviewed to ensure that an appropriate segregation of duties is maintained so that those processing payroll cannot create and amend establishment records and create users on the system and vice versa for Human Resources employees	07/10/2014	31/12/2014	Human Resources Services Manager / Head of Resources	Not Implemented - requested that the date be changed to 31/03/2015	This is currently being reviewed by the Interim Accountancy Manager - Included in follow up review January 2015	Red
5	System Controls - Logical Access and Segregations of Duties 1961.14/15	ICT should receive assurance that ICT assets sent for destruction have been destroyed, by what means and when. ICT should maintain a disposal register and reconcile	07/10/2014	31/12/2014	Technical Services Manager	Implemented	Included in follow up review January 2015	Green

		this to the records of destruction received from the relevant contractor.						
6	System Controls - Logical Access and Segregations of Duties 1961.14/15	In line with best practice and the Council's Financial Procedure Rules the following segregation of duties should be applied in the following Council financial systems: including; Asset Register ; Debtors; ledger; cash receipting; and Payroll.	07/10/2014	31/12/2014	Head of Resources	Not Implemented – requested a date change to 28/02/2015 & 31/03/2015	Included in follow up review January 2015	Red
7	System Controls - Logical Access and Segregations of Duties 1961.14/15	All users access should be set to automatically disable after there has been no access to the network after three months or a lesser period determined by ICT.	07/10/2014	31/03/2015	Technical Services Manager	Within target date		Green
8	Third Party Assurance 1736 11/12	Review and implement recommendations in the Third Party Assurance Report 1736.11/12	07/10/2014	31/12/2014	Head of Service - Policy	Head of Service – Policy -	HofS informed us that he is to discuss with the Programme and Business Planning Manager	Green / Amber
9	Risk Management Report 1766.11/12	Review, co-ordinate/ implement the Risk management Report 1766.11/12	07/10/2014	31/12/2014	Insurance and Risk Manager	Superseded by present consultation		N/A
10	Partnership Framework 1874.13/14	Assign responsible officers to implement recommendations reported in the Partnership framework report 1874.13/14 with deadline dates	07/10/2014	31/12/2014	Chief Executive	New implementation date 28 November 2015	A Project Mandate has been produced entitled – Partnership Reviews. Project to start April 2015 and scheduled to last for seven months.	Green/ Amber
11	Corporate Policies Report 1761.11/12	Review and implement the Corporate Policies Report 1761 11/12	07/10/2014	31/12/2014	Monitoring Officer	Implementation date amended to 30 June 2015.	Work on policies is ongoing with responsibility now with the Monitoring Officer.	Green/ Amber
12	System Controls - Logical Access and Segregations of Duties 1961.14/15	The Council should ensure that it maintains a record for all users that evidences that they have received access to, read, understood and agreed to abide by all key ICT policies including the ICT Security (once approved) and Acceptable Usage Policies	07/10/2014	31/03/2015	Business Planning and Programme Manager	Within target date		Green
13	Corporate	To ensure that all	07/10/2014	31/12/2014	Procurement Officer	Being	The Procurement team has	Green/

	Procurement 1825 12/13	recommendations in the Corporate Procurement Report 1825.12/13 are actioned				implemented	been restructured and new staff taken on. Update on current position for next Audit Committee.	Amber
14	System Controls - logical access and segregations of duties 1961.14/15	Formal documented procedures covering the notification, authorisation and setting up and removal of users from the network should be produced and implemented. Such procedures should cover temporary staff including contractors, agency and self-employed staff. The role of ICT, Human Resources, Payroll and Services in this process should be clearly stated.	07/10/2014	31/12/2014	Technical Services Manager	Implemented	Included in follow up review January 2015	Green
15	Diesel Stocks - Gaerwen Depot 2014/15	The control framework in place for the monitoring of fuel stocks at the Gaerwen Depot should be reviewed in light of the amount of additional fuel required to be written off over and above that directly related to the three incidents reported to the Police	11/12/2014	31/01/2015	Fleet & Driver Manager	Response from Fleet & Driver Manager - implemented		Green
16	Third Sector Scheme 1953 14/15	Review the Third Sector Scheme Recommendations for implementation	07/10/2014	24/12/2014	Communities Director	Communities Director	See update in this report -	Green
17	Creditors Follow up 1941.13/14	Formal written instructions detailing all the processes and procedures involved with creditor payments should be produced and issued. Procedure should cover the roles and responsibilities of central creditors and services for each stage of processing	13/05/2014	31/03/2015	Performance & Management Support	Within target date		Green
18	Main Accounting 1892.13/14	ICT Services should continue to proceed towards SAN to SAN backup of the Finance server to a suitable off site location as per previous recommendations. Finance Services should take ownership of their systems and	13/05/2014	31/12/2014	Business Continuity Manager	Date revised to 29/08/2015	Response from Business Continuity Manager – this has gone to tender and still ongoing to select a supplier after scoring – going to question them.	Green/ Amber

		data and should ensure that their financial systems are being appropriately backed up and that regularly restores of system and data are conducted						
19	Teachers Payroll 1969.2014/15	A comprehensive check of the pension re-banding report should be completed by Payroll to ensure that all pension bands are correctly applied. Incorrect pension bands applied should be amended, and contributions re-calculated and back dated as appropriate.	11/12/2014	31/01/2015	Interim Accountancy Manager	Implementation date updated to 30 June 2015.	To be followed up as part of Payroll review 2014-15 currently WIP.	Green / Amber

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