

## **GMCA** Audit Committee

Date: 15 November 2023

Subject: Internal Audit Progress Report

Report of: Sarah Horseman, Deputy Director of Audit and Assurance, GMCA

## PURPOSE OF REPORT

The purpose of this report is to inform Members of the Audit Committee of the progress made on the delivery of the Internal Audit Plan for 2023/24. It is also used as a mechanism to seek approval of changes to the internal audit plan.

## **RECOMMENDATIONS:**

Audit Committee is requested to:

- Consider and comment on the Internal Audit progress report.
- Approve the changes to the Audit Plan (Appendix C)

## CONTACT OFFICERS:

Sarah Horseman, Deputy Director of Audit and Assurance, GMCA sarah.horseman@greatermanchester-ca.gov.uk

Equalities Impact, Carbon, and Sustainability Assessment:  $N\!/\!A$ 

**Risk Management** N/A

Legal Considerations N/A

**Financial Consequences - Capital** 

N/A

# Financial Consequences - Revenue

N/A

Number of attachments included in the report:

## BACKGROUND PAPERS: N/A

| TRACKING/PROCESS   |                                  |    |  |  |
|--|----------------------------------|----|--|--|
| Does this report relate to a m the GMCA Constitution?  | out in                           | No |  |  |
| EXEMPTION FROM CALL IN   | N                                |    |  |  |
| Are there any aspects in this<br>means it should be considere<br>exempt from call in by the rele | d to be<br>evant Scrutiny        | No |  |  |
| Committee on the grounds of  |                                  |    |  |  |
| TfGMC  | Overview & Scrutiny<br>Committee |    |  |  |
| N/A  | N/A                              |    |  |  |

## 1 Introduction

- 1.1 The Internal Audit annual plan for GMCA was presented to the Audit Committee in March 2023 and this set out the planned assurance activity to be conducted during 2023/24 based on our understanding of the organisation's strategic and operational risks.
- 1.2 There are separate audit plans approved by Transport for Greater Manchester (TfGM) and Greater Manchester Police (GMP) / Police and Crime Functions with reporting to their respective Audit, Risk and Assurance Committee (ARAC) and Joint Audit Panel (Police and Crime).
- 1.3 The purpose of this progress report is to provide Members with an update against the GMCA Internal Audit Plan for 2023/24 and summary of final reports presented to Committee.

#### 2 Progress against the Internal Audit Plan 2023/24.

Assurance Framework (CAF).

2.1 Since the last meeting in September 2023, we have finalised and published one report from the 2023/24 plan.

| Audit Report  | Opinion   |
|---|---|
| ICT/Digital – Threat and Vulnerability Assessment   | Limited   |
| This report provided a limited assurance opinion with 4 recom<br>and 2 Medium). These consist of several individual actions and<br>team are currently developing a remediation plan to address th<br>these actions. Full details on the outcome of this work will the<br>Committee as a restricted item in January 2024 once a full ass<br>has taken place. | I the Digital Services<br>ne risks and manage<br>be reported to Audit |
| The review provided an assessment of the effectiveness of th<br>being exercised in relation to threat and vulnerability managem<br>cyber security guidelines and good practice as provided by   | ent with reference to   |

Security Centre (NCSC) cyber essentials and requirements included in the Cyber

2.2 There are several audits planned and underway and reasonable progress is being made by the team to deliver these. We continue to work with Management to review scheduled audit work and minimise the impact on Directorates where possible. Client availability and capacity to support audit work does continue to present some challenges in terms of completing work to agreed timescales. Some planned audit work has been deferred due to changing assurance needs and the reasons for this are contained in this report.

A summary on the status of ongoing audit work is as follows:

| Planning Stage                                 |   |
|--|---|
| GMCA<br>Business<br>Continuity<br>Planning     | Following initial planning discussions with Management an agreement was reached to defer this audit to allow an internal review and strengthening of BCP arrangements within GMCA to be carried out. This work will be supported by the Resilience team that has been brought in-house in the year. Internal Audit will contribute to this review and provide a statement of assurance before the year end. <b>Proposal to defer full audit to 2024/25.</b> |
| ICT Critical<br>System<br>Review<br>(External) | The scope of this audit was agreed in October 2023 and will<br>provide a review of the Gartan Roster application which is<br>categorised as a CF1 application and used by GMFRS for the<br>crewing and mobilisation of firefighters. Fieldwork will commence<br>at the end of November 2023.  |
| Bus Franchise<br>- Governance                  | Initial scoping discussions have taken place to understand the<br>high-level governance structure which oversees the operation of<br>the Bus franchise scheme and understanding GMCA<br>responsibilities in areas of budgetary control, asset management<br>and contract management. Work will take place later in the year to<br>allow the drafting of a formal written protocol in line with the Bus<br>Franchising agreement.                            |
| Trailblazer<br>Readiness                       | Planning discussions have taken place on understanding the approach being taken to preparing for the Trailblazer Devolution Deal which and in particular the single settlement which will come into force 25/26. Alongside trailblazer commitments in individual policy areas. Assurance continues to be sought through regular engagement sessions and involvement in senior leadership workstreams.   |
| Estates<br>Management                          | An initial scoping oping discussion has taken place. A Management<br>workstream review of the Estates function is being carried out and<br>we will seek assurance from this report which is due in November.<br>In the meantime, Internal Audit has agreed to conduct some<br>assurance work over the strategic gateway process which supports<br>the GMFRS transformation programme.   |

| Fieldwork Stage   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| PAM<br>Occupational<br>Health Contract<br>– effectiveness                       | Fieldwork commenced on this audit which aims to provide assurance over the effectiveness of the contract and service.  |  |  |  |  |  |  |  |
| Payroll<br>Compliance   | Fieldwork is ongoing on this audit to provide assurance over payroll controls and processes.   |  |  |  |  |  |  |  |
| GM Waste Fleet<br>Assets  | Fieldwork has commenced with on-site visits to the Contractor Suez during October.   |  |  |  |  |  |  |  |
| Freedom of<br>Information Act<br>(FOIA) and<br>Subject Access<br>Requests (SAR) | This is new planned work to review the arrangements for<br>responding to FOIA requests considering recent high profile data<br>breach cases. Terms of reference has been agreed with fieldwork<br>to commence in early November. |  |  |  |  |  |  |  |
| Anti-Money<br>Laundering<br>Policy review                                       | A review and update of the AML policy and procedures is underway.  |  |  |  |  |  |  |  |

| Reporting Stage   |  |
|---|--|
| Brownfield Housing Fund<br>Grant 2022/23 (Section<br>31/6408) | Letter of certification completed, and Internal Position<br>Statement over Grant Fund Usage (DRAFT) issued to<br>Management – awaiting sign off. |
| GMFRS Station<br>Standards Framework                          | Fieldwork is completed with ten Station visits and a draft audit report is being prepared.   |
| Purchase Cards -<br>Compliance                                | This is new proactive work to examine Pcard compliance. Fieldwork is complete and draft audit report being prepared.                             |

2.3 **Grant Certifications –** There have been no grants requiring certification during this period.

Details of our progress in respect of the 2023/24 Audit Plan is shown in Appendix B.

## 3 Changes to the Internal Audit Plan

- 3.1 In line with the Internal Audit Charter, any significant changes to the approved Internal Audit Plan must be approved by the Audit Committee.
- 3.2 Following initial scoping discussions, we are proposing three changes to the plan this quarter. These are:
  - Defer full audit of Business Continuity Planning until early 2024/25 to allow for an internal review by the recently in-housed Resilience Team. Internal Audit will determine and produce a position statement in the current financial year which will contribute to the Head of Internal Audit Opinion.
  - Defer Supporting Families Audit to 24/25 as the last audit was completed in May 2023. This will be pending agreement by funding body.
  - Add to the plan a series of short compliance audits of key financial processes, including Purchase Card Transactions, Expenses, Gifts and Hospitality etc to be taken in between "full" audits of those systems and processes to ensure ongoing compliance with policies.
- 3.3 A cumulative record of changes to the plan for the current financial year, with the rationale for each, is shown as an **Appendix C** to this report.

## 4 Other Activities

- 4.1 Aside from delivery of the internal audit plan, since the last meeting internal audit have undertaken the following additional activities.
- 4.2 Whistleblowing and Counter Fraud Activities No whistleblowing reports have been received since the last update to Audit Committee. One previously reported case remains under investigation.
- 4.3 **Anti-fraud Training** A new suite of online training is set to go live in early November with three training packages rolled out to staff covering general fraud awareness, Anti-bribery, and Anti-money laundering requirements.
- 4.4 **Anti-fraud Policy** The GMCA Anti-Money Laundering policy and procedures are being updated to ensure these meet the latest regulatory requirements and to assess the level of risk in key activities.
- 4.5 **Senior Leadership Team Engagement** The Assistant Director Audit and Assurance has recently joined the SLT, and we continue to hold quarterly engagement discussions with individual Service Directors to understand emerging risks/issues and to help inform future audit planning.



#### Appendix A - Summary of Internal Audit Reports issued 2023/24

The table below provides a summary of the internal audit work completed. This will inform the annual Internal Audit opinion for the year 2023/24.

| Audit   | Coverage                                     |          |           |        |     |          |      |       |       |
|---|--|----------|-----------|--------|-----|----------|------|-------|-------|
|   |  | Critical | High      | Medium | Low | Advisory | GMCA | GMFRS | Waste |
| Brownfield Housing<br>Fund Grant                | N/A – Internal<br>Position Statement<br>Only | We r     | nade no i | ~      |     |          |      |       |       |
| ICT – Threat and<br>Vulnerability<br>Assessment | Limited                                      | -        | 2         | 2      | ~   | ~        | ~    |       |       |

| Grant Certifications                                     |          |   |  |  |  |  |  |  |  |
|--|----------|---|--|--|--|--|--|--|--|
| BEIS Growth Hub Funding 2022/23                          | Positive | ~ |  |  |  |  |  |  |  |
| Brownfield Housing Fund Grant 2022/23                    | Positive | ✓ |  |  |  |  |  |  |  |
| Local Energy Market:<br>Period October 2021 – March 2023 | Positive | ~ |  |  |  |  |  |  |  |
| Made Smarter Adoption NW 2022-25                         | Positive | ✓ |  |  |  |  |  |  |  |
| GMCA Innovator Accelerator Seedcorn Funding 2022/23      | Positive | ~ |  |  |  |  |  |  |  |
| LAEP to Net Zero £19k 2022/23                            | Positive | ~ |  |  |  |  |  |  |  |

The following tables show definitions for the Assurance Levels provided to each audit report and the ratings attached to individual audit actions.

#### Assurance levels

| DESCRIPTION              | SCORING<br>RANGE | DESCRIPTION  |
|--------------------------|------------------|--|
| SUBSTANTIAL<br>ASSURANCE | 1-6              | A sound system of internal control was found to be in place. Controls are designed effectively, and our testing found that they operate consistently. A small number of minor audit findings were noted where opportunities for improvement exist. There was no evidence of systemic control failures and no high or critical risk findings noted.   |
| REASONABLE<br>ASSURANCE  | 7-19             | A small number of medium or low risk findings were identified. This indicates that generally controls are in place and are operating but there are areas for improvement in terms of design and/or consistent execution of controls.   |
| LIMITED<br>ASSURANCE     | 20-39            | Significant improvements are required in the control environment. A number of medium and/or high-risk exceptions were noted during the audit that need to be addressed. There is a direct risk that organisational objectives will not be achieved.  |
| NO<br>ASSURANCE          | 40+              | The system of internal control is ineffective or is absent. This is as a result of poor design, absence of controls or systemic circumvention of controls. The criticality of individual findings or the cumulative impact of a number of findings noted during the audit indicate an immediate risk that organisational objectives will not be met and/or an immediate risk to the organisation's ability to adhere to relevant laws and regulations. |

# Audit Finding Classification

| Risk<br>Rating | Description/characteristics  | Score |
|----------------|--|-------|
| Critical       | <ul> <li>Repeated breach of laws or regulations</li> <li>Significant risk to the achievement of organisational objectives / outcomes for GM residents</li> <li>Potential for catastrophic impact on the organisation either financially, reputationally, or operationally</li> <li>Fundamental controls over key risks are not in place, are designed ineffectively or are routinely circumvented.</li> <li>Critical gaps in/disregard to governance arrangements over activities</li> </ul>   | 40    |
| High           | <ul> <li>One or more breaches of laws or regulation</li> <li>The achievement of organisational objectives is directly challenged, potentially risking the delivery of outcomes to GM residents.</li> <li>Potential for significant impact on the organisation either financially, reputationally, or operationally</li> <li>Key controls are not designed effectively, or testing indicates a systemic issue in application across the organisation.</li> <li>Governance arrangements are ineffective or are not adhered to.</li> <li>Policies and procedures are not in place</li> </ul>            | 10    |
| Medium         | <ul> <li>Minor risk that laws or regulations could be breached but the audit did not identify any instances of breaches.</li> <li>Indirect impact on the achievement of organisational objectives / outcomes for GM residents</li> <li>Potential for minor impact on the organisation either financially, reputationally, or operationally</li> <li>Key controls are designed to meet objectives but could be improved or the audit identified inconsistent application of controls across the organisation.</li> <li>Policies and procedures are outdated and are not regularly reviewed</li> </ul> | 5     |
| Low            | <ul> <li>Isolated exception relating to the full and complete operation of controls (e.g., timeliness, evidence of operation, retention of documentation)</li> <li>Little or no impact on the achievement of strategic objectives / outcomes for GM residents</li> <li>Expected good practice is not adhered to (e.g., regular, documented review of policy/documentation)</li> </ul>  | 1     |
| Advisory       | Finding does not impact the organisation's ability to achieve its objective but represent areas for improvements in process or efficiency.   | 0     |

## Appendix B – Progress against the Internal Audit Plan 2023/24

The table below shows progress made in delivery of the 2022/23 Internal Audit Plan.

Key: O Not Yet startedImage: ScheduledImage: Image: Image: ScheduledImage: Complete• Complete• Complete• Complete

| Directorate           | Audit Area             | Audit  | Timing | Plan<br>Days | Planning | Fieldwork | Draft<br>Report | Final<br>Report | Audit<br>Committee | Comments                        |
|-----------------------|------------------------|--|--------|--------------|----------|-----------|-----------------|-----------------|--------------------|---------------------------------|
| GMFRS                 | Service<br>Support     | Occupational<br>Health Contract  | Q1     | 20           | •        | o         | 0               | 0               |                    | Fieldwork                       |
| GMFRS                 | Front Line<br>Delivery | Station<br>Standards<br>Framework  | Q2     | 30           | •        | •         | o               | 0               |                    | Draft Report<br>Stage           |
| GMFRS                 | Front Line<br>Delivery | Operational<br>Assurance and<br>Organisational<br>Learning<br>Frameworks | Q2     | 10           | 0        | 0         | 0               | 0               |                    | Preliminary<br>discussions held |
| GMFRS                 | ТВС                    | Block  | Q4     | 30           | 0        | 0         | 0               | 0               |                    | Scope to be agreed in year      |
| Corporate<br>Services | People<br>Services     | Payroll  | Q2     | 30           | •        | 0         | 0               | 0               |                    | Fieldwork                       |

| Directorate                      | Audit Area                   | Audit   | Timing | Plan<br>Days | Planning | Fieldwork | Draft<br>Report | Final<br>Report | Audit<br>Committee | Comments  |
|----------------------------------|------------------------------|---|--------|--------------|----------|-----------|-----------------|-----------------|--------------------|---|
| Corporate<br>Services            | Waste and<br>Recycling       | Fleet Assets –<br>Maintenance                           | Q2     | 30           | •        | ο         | 0               | 0               |                    | Fieldwork                                       |
| Cross Cutting                    | Governance                   | Business<br>Continuity<br>Planning                      | Q2     | 20           | 0        | 0         | 0               | 0               |                    | Full Audit<br>Postponed until<br>2024/25        |
| Corporate<br>Services            | Finance                      | Purchase Card<br>Compliance                             | Q3     | 5            | •        | •         | •               |                 |                    | Draft Report<br>Stage                           |
| Corporate<br>Services            | Finance                      | Corporate<br>Recharge Model                             | Q3     | 20           | 0        | 0         | 0               | 0               |                    | Rescheduled<br>until Q4                         |
| Corporate<br>Services            | People<br>Services           | Recruitment and Attraction                              | Q4     | 30           | 0        | 0         | 0               | 0               |                    | Q4 - Not Started                                |
| Education,<br>Work and<br>Skills | Adult<br>Education<br>Budget | Performance<br>Management                               | Q4     | 30           | 0        | 0         | 0               | 0               |                    | Q4 - Not Started                                |
| Corporate<br>Services            | ICT/Digital                  | Threat and<br>Vulnerability<br>Assessment<br>(External) | Q2     | 5            | •        | •         | •               | •               | November<br>2023   | Delivered by<br>Mersey Internal<br>Audit Agency |

| Directorate             | Audit Area            | Audit                                     | Timing | Plan<br>Days | Planning | Fieldwork | Draft<br>Report | Final<br>Report | Audit<br>Committee | Comments                                       |
|-------------------------|-----------------------|---|--------|--------------|----------|-----------|-----------------|-----------------|--------------------|--|
| Corporate<br>Services   | ICT/Digital           | Critical Business<br>System<br>(External) | Q3     | 5            | •        | ο         | 0               | 0               |                    | Fieldwork                                      |
| Corporate<br>Services   | ICT/Digital           | IT Asset<br>Management                    | Q4     | 5            | 0        | 0         | 0               | 0               |                    | Defer to 2024/25                               |
| Mayoral<br>Priorities   | Governance/<br>Assets | Bus Franchising                           | Q3     | 20           | ۲        | 0         | 0               | 0               |                    | Preliminary<br>Discussions held<br>Defer to Q4 |
| Environment             | Low Carbon            | Net Zero<br>achievement                   | Q3     | 20           | 0        | 0         | 0               | 0               |                    | Not Started                                    |
| Place                   | Land and<br>Property  | Estates<br>Management                     | Q3     | 30           | ۲        | 0         | 0               | 0               |                    | Preliminary<br>Discussions held                |
| Policy and<br>Strategy  | Governance            | Trailblazer<br>Programme<br>Readiness     | Q3     | 30           | ۲        | 0         | 0               | 0               |                    | Preliminary<br>Discussions held                |
| Public Sector<br>Reform | Compliance            | Supporting<br>Families<br>Programme       | Q4     | 10           | 0        | 0         | 0               | 0               |                    | Defer to 2024/25                               |

| Directorate           | Audit Area                       | Audit   | Timing | Plan<br>Days | Planning | Fieldwork | Draft<br>Report | Final<br>Report | Audit<br>Committee | Comments                         |
|-----------------------|----------------------------------|---|--------|--------------|----------|-----------|-----------------|-----------------|--------------------|----------------------------------|
| Cross Cutting         | Programme<br>and Project<br>Mgt. | GMFRS Capital<br>Programme  | Q4     | 30           | 0        | 0         | 0               | 0               |                    | Not Started                      |
| Corporate<br>Services | Grants                           | Mandatory<br>Grant<br>Certifications                              | Q1-Q4  | 60           | 0        | o         | 0               | o               |                    | As required.                     |
| Corporate<br>Services | Grants                           | BEIS Growth<br>Hub Funding<br>2022/23                             | Q1     | -            | •        | •         | •               | •               | September<br>2023  | Completed                        |
| Corporate<br>Services | Grants                           | Local Energy<br>Market:<br>Period October<br>2021 – March<br>2023 | Q1     | -            | •        | •         | •               | •               | September<br>2023  | Completed                        |
| Corporate<br>Services | Grants                           | Brownfield<br>Housing Grant                                       | Q1     | -            | •        | •         | •               |                 |                    | Completed -<br>Awaiting Sign off |
| Corporate<br>Services | Grants                           | Made Smarter<br>Adoption NW<br>2022-25                            | Q2     | -            | •        | •         | •               | •               | September<br>2023  | Completed                        |
| Corporate<br>Services | Grants                           | GMCA Innovator<br>Accelerator<br>Seedcorn<br>Funding 2022/23      | Q2     | -            | •        | •         | •               | •               | September<br>2023  | Completed                        |

| Directorate           | Audit Area | Audit                               | Timing | Plan<br>Days | Planning | Fieldwork | Draft<br>Report | Final<br>Report | Audit<br>Committee | Comments  |
|-----------------------|------------|-------------------------------------|--------|--------------|----------|-----------|-----------------|-----------------|--------------------|-----------|
| Corporate<br>Services | Grants     | LAEP to Net<br>Zero £19k<br>2022/23 | Q2     | -            | •        | •         | •               | •               | September<br>2023  | Completed |
| Total Plan Days       |            |                                     |        | 490          |          |           |                 |                 |                    |           |

| Other Audit Activity          |  | Quarter   |  |
|-------------------------------|--|-----------|--|
| Information Governance        | Deputy Director of Audit and Assurance is a member of the Information<br>Governance (IG) Board and the Serious Information Governance Incident<br>(SIGI) Panel. Ongoing advice, and oversight of IG risks is undertaken through<br>these forums. | All       |  |
| Audit action tracking         | Internal audit monitor and report on a quarterly basis the implementation of agreed audit actions.   | All       |  |
| Counter Fraud Activity        | Maintenance of counter fraud policies, training and organisational awareness as well as response to reports of fraud.  | All       |  |
| Whistleblowing investigations | Receipt and investigation of whistleblowing reports  | As needed |  |
| Ad-hoc advice and support     | Advice and reviews requested in-year in response to new or changing risks and activities.  | As needed |  |
| Contingency days              | Days reserved to address new or emerging risks   | N/A       |  |

#### Appendix C - Changes to the Internal Audit Plan

The internal audit plan is designed to be flexible and can be amended to address changes in the risks, resources and/or strategic objectives. Similarly, management and the board may request additional audit work be performed to address particular issues. In line with Public Sector Internal Audit Standards (PSIAS) the Audit Committee should approve any significant changes to the plan.

This Section records any changes to the current internal audit plan since it was originally approved in March 2023.

| Audit Area   | Audit   | Days | Change<br>requested | Rationale  | Approved<br>by Audit<br>Committee |
|--|---|------|---------------------|--|-----------------------------------|
| Corporate<br>Services:<br>Procurement<br>and<br>Commercial | Social Value<br>Model<br>Subsidy Control<br>Act | 40   | Deprioritise        | Assessed as medium risk, given available resources, focus on audits in high-risk areas.  | Sept 2023                         |
| Corporate<br>Services:<br>Finance                          | BWO access<br>rights                            | 20   | Deprioritise        | Revised IT Audit Plan based on assessment from new IT Audit Provider.  | Sept 2023                         |
| Corporate<br>Services:<br>Information<br>Governance        | Information<br>Governance<br>Processes          | 20   | Deprioritise        | IG is a shared service with TfGM. An IG audit was<br>undertaken at TfGM in 2022/23 which covers the<br>same team, processes and controls. The findings<br>around the control design would therefore be similar.<br>Actions from that audit will be applied to GMCA as<br>well as TfGM and monitored through IG Board –<br>where IA is represented to monitor progress of<br>actions. | Sept 2023                         |
| Waste  | Behavioural<br>Change and                       | 20   | Deprioritise        | Audit of Waste Fleet Assets included in the audit plan,<br>propose to deprioritise this audit for this year to be<br>reconsidered in future plans.   | Sept 2023                         |

| Audit Area                | Audit   | Days | Change<br>requested | Rationale   | Approved<br>by Audit<br>Committee |
|---------------------------|---|------|---------------------|---|-----------------------------------|
|                           | Communication<br>Plan   |      |                     |   |                                   |
| Economy and<br>Strategy   | Shared<br>Prosperity Fund   | 20   | Deprioritise        | Focus for this plan will be on Trailblazer preparedness.  | Sept 2023                         |
| Information<br>Governance | Freedom of<br>Information and<br>Subject Access<br>Request<br>Processes | 15   | Addition            | In response to recent high profile data breaches in other organisations.  | Sept 2023                         |
| ICT/Digital               | IT Asset<br>Management  | 5    | Defer               | Digital Service are unable to support this audit at present due to capacity and resourcing issues.  | Sept 2023                         |
| Governance                | Business<br>Continuity<br>Planning                                      | 20   | Defer               | Request from Management to defer until April 2024 to<br>allow a full internal review of BC policies, systems and<br>processes to take place.  |                                   |
| Public Sector<br>Reform   | Supporting<br>Families<br>Framework                                     | 10   | Defer               | The previous audit was completed in May 2023, as<br>such we propose to defer until 2024/25, however this<br>is dependent on expectations from Government that<br>we undertake work in Q4. |                                   |
| Finance                   | Continuous<br>Auditing  | 20   | Addition            | A series of proactive transactional based audits  |                                   |