

**Hampshire Fire and Rescue Authority**

**Standards and Governance Committee**

**Item 11**

**28 June 2012**

**Progress report on the implementation of internal audit management actions**

**Report by the Chief Officer**

**Contact:** Nicki Whitehouse, Acting Performance Review Manager  
Telephone: 023 8062 6828

**1. Summary**

1.1 Since the last Governance Committee meeting on 28 March 2012, managers have agreed action plans for the following internal audit reports,

From the 2011/12 audit plan:

- Insurance and compensation
- Payroll
- External Virtual Private Network (VPN)

1.2 Our progress in implementing internal audit recommendations is detailed in the appendices to this report.

**2. Recommendation**

2.1 That the Committee approves the audit action reports, and progress made towards the implementation of recommendations.

**3. Introduction**

3.1 In March 2008, the Performance Review and Scrutiny Committee agreed that reports on progress in implementing internal audit recommendations and management actions would be presented to this Committee, as it receives regular reports from both internal and external audit. We see the internal audit follow-up process as an important element in our overall approach to risk management and governance. When an action is agreed by managers to address a control weakness, or to make an improvement to the way we work, it is important that the action is then implemented as planned.

**4. Liaison with internal audit and the 'follow up' process**

4.1 The internal audit service is provided to the Authority by Audit Services at Hampshire County Council under a Service Level Agreement. There is an Audit

Strategy (2011 to 2014) in place, and a three year Audit Plan, which have been approved by this Committee.

- 4.2 The Performance Review Team maintains a record of audits against the Audit Plan and whether they are in progress or have been completed.
- 4.3 Once a final audit report has been issued, the agreed management actions are recorded along with:
  - the priority of the recommendation,
  - the target date for implementation, and
  - the person responsible for the action.
- 4.4 When an action date is reached, the Performance Review team will ask for confirmation, and if relevant, evidence that the action has been implemented, or if not, when it is expected to be. The response is recorded. Any recommendations that continue to remain outstanding are referred to the relevant Director.
- 4.5 On occasion, it may be necessary to extend an agreed action date. The Performance Review Team will make a request to the Internal Audit Manager to extend the action date. If there is agreement, we will record the new date, otherwise we will show the action as overdue, and continue to monitor it.
- 4.6 We report our progress towards meeting internal audit recommendations to this Committee to keep Members aware of progress and any emerging risks and issues.

## **5. Contribution to corporate priorities and objectives**

- 5.1 Implementation of internal audit recommendations assists the Authority in the improvement planning process, performance management framework, and in compliance with its governance arrangements. This in turn, assists the Authority in achieving its aim to be the best fire and rescue service in the country.

## **6. Resource implications**

- 6.1 When agreeing management actions in response to an audit report, the cost of addressing the risk should be considered against the risk. Implementing audit recommendations helps to ensure that the Authority uses its resources efficiently at all times, that key controls are in place and working, and that opportunities to achieve value for money are taken.

## **7. People impact assessment**

- 7.1 The proposals in this report are considered compatible with the provisions of the equality and human rights legislation.

## **8. Risk analysis**

- 8.1 Failure to implement any internal audit recommendations clearly leaves the Authority vulnerable to the consequences of the identified risks and weaknesses in control. These progress reports are considered to be an important process within the Authority's Strategic Risk Management Strategy. They ensure that Members are fully aware of any problems associated with addressing the issues raised and the priority given to driving down or eliminating specific risks.

### **Background information (Section 100D of Local Government Act 1972)**

The following documents disclose the facts or matters on which this report, or an important part of it, is based and has been relied upon to a material extent in the preparation of the report:

Internal Audit reports  
Internal Audit Strategy and Plan

- Appendix 1 Internal Audit – agreed management actions since April 2011
- Appendix 2 Internal Audit Recommendations – actions awaiting implementation (audits from the 2010/11 plan and before)
- Appendix 3 Internal Audit Recommendations – actions completed (audits from the 2010/11 plan and before)
- Appendix 4 Internal Audit Recommendations – Glossary of terms