



DEVON & SOMERSET FIRE & RESCUE AUTHORITY

M. Pearson
CLERK TO THE AUTHORITY

To: The Chair and Members of the Audit &
Performance Review Committee

(see below)

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AUDIT & PERFORMANCE REVIEW COMMITTEE

Monday, 7 September, 2020

A meeting of the Audit & Performance Review Committee will be held on the above date, **commencing at 2.00 pm by Video Conference via Cisco Webex** to consider the following matters.

M. Pearson
Clerk to the Authority

PLEASE NOTE This meeting will be livestreamed on the Devon & Somerset Fire & Rescue Service YouTube channel. This can be accessed by following the link below and then clicking on the Videos and Livestream buttons:

<https://www.youtube.com/dsfireupdates>

SUPPLEMENTARY AGENDA No. 1

PLEASE REFER TO THE NOTES AT THE END OF THE AGENDA LISTING SHEETS

- 6 a Audit & Review 2019-20 Year-end Report (Pages 1 - 10)
Report of the Director of Governance & Digital Services (APRC/20/14) attached.

MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

Membership:-

Councillors Healey MBE (Chair), Brazil, Buchan, Clayton, Napper, Prowse (Vice-Chair) and Saywell

NOTES

1.	<u>Access to Information</u> Any person wishing to inspect any minutes, reports or lists of background papers relating to any item on this agenda should contact the person listed in the “Please ask for” section at the top of this agenda.
2.	<u>Reporting of Meetings</u> Any person attending a meeting may report (film, photograph or make an audio recording) on any part of the meeting which is open to the public – unless there is good reason not to do so, as directed by the Chair - and use any communication method, including the internet and social media (Facebook, Twitter etc.), to publish, post or otherwise share the report. The Authority accepts no liability for the content or accuracy of any such report, which should not be construed as representing the official, Authority record of the meeting. Similarly, any views expressed in such reports should not be interpreted as representing the views of the Authority. Flash photography is not permitted and any filming must be done as unobtrusively as possible from a single fixed position without the use of any additional lighting; focusing only on those actively participating in the meeting and having regard also to the wishes of any member of the public present who may not wish to be filmed. As a matter of courtesy, anyone wishing to film proceedings is asked to advise the Chair or the Democratic Services Officer in attendance so that all those present may be made aware that is happening.
3.	<u>Recording of Meetings</u> Given the social distancing measures introduced in response to the Covid-19 pandemic, Authority meetings will be held virtually and livestreamed on the Devon & Somerset Fire & Rescue Service YouTube channel. The meetings may also be recorded for subsequent viewing on the YouTube Channel. Any such recording does not constitute the official, Authority record of the meeting.
4.	<u>Declarations of Interests at meetings (Authority Members only)</u> If you are present at a meeting and you are aware that you have either a disclosable pecuniary interest, personal interest or non-registerable interest in any matter being considered or to be considered at the meeting then, unless you have a current and relevant dispensation in relation to the matter, you must: <ul style="list-style-type: none">(i) disclose at that meeting, by no later than commencement of consideration of the item in which you have the interest or, if later, the time at which the interest becomes apparent to you, the existence of and – for anything other than a “sensitive” interest – the nature of that interest; and then(ii) withdraw from the room or chamber during consideration of the item in which you have the relevant interest. If the interest is sensitive (as agreed with the Monitoring Officer), you need not disclose the nature of the interest but merely that you have an interest of a sensitive nature. You must still follow (i) and (ii) above. Where a dispensation has been granted to you either by the Authority or its Monitoring Officer in relation to any relevant interest, then you must act in accordance with any terms and conditions associated with that dispensation. Where you declare at a meeting a disclosable pecuniary or personal interest that you have not previously included in your Register of Interests then you must, within 28 days of the date of the meeting at which the declaration was made, ensure that your Register is updated to include details of the interest so declared.
5.	<u>Part 2 Reports</u> Members are reminded that any Part 2 reports as circulated with the agenda for this meeting contain exempt information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). Members are also reminded of the need to dispose of such reports carefully and are therefore invited to return them to the Committee Secretary at the conclusion of the meeting for disposal.
6.	<u>Substitute Members (Committee Meetings only)</u> Members are reminded that, in accordance with Standing Order 37, the Clerk (or his representative) must be advised of any substitution prior to the start of the meeting. Members are also reminded that substitutions are not permitted for full Authority meetings.
7.	<u>Other Attendance at Committees (Standing Order 38)</u> Any Authority Member wishing to attend a meeting of a Committee of which they are not a Member should contact the Democratic Services Officer (see “please ask for” on the front page of this agenda) in advance of the meeting to obtain details of the Webex meeting invitation.

Agenda Item 6a

REPORT REFERENCE NO.	APRC/20/14
MEETING	AUDIT & PERFORMANCE REVIEW COMMITTEE
DATE OF MEETING	SEPTEMBER 2020
SUBJECT OF REPORT	AUDIT & REVIEW 2019-20 YEAR END REPORT
LEAD OFFICER	DIRECTOR OF GOVERNANCE AND DIGITAL SERVICES
RECOMMENDATIONS	<i>That the report be noted.</i>
EXECUTIVE SUMMARY	<p>Attached for consideration and discussion is the 2019–20 year end Audit & Review report. This report sets out progress that was made against the approved 2019-20 Internal Audit Plan, and updates on additional review work undertaken.</p> <p>Internal Audit activities across the Devon & Somerset Fire & Rescue Service (“the Service”) are managed through a shared service agreement that sees Audit & Review and the Devon Audit Partnership (DAP) work together to deliver the Internal Audit Plan. Additionally this includes an overview of key assurance activities completed by other teams who contribute to the audit plan, such as Information Assurance, Operational Assurance, and Safety Assurance.</p> <p>The report provides an overview of the assurance tracking process and the current high priority recommendations that remain as ‘open’ on the assurance tracker.</p>
RESOURCE IMPLICATIONS	Nil.
EQUALITY RISKS AND BENEFITS ASSESSMENT (ERBA)	Not applicable.
APPENDICES	<p>A. Internal Audit Planning Process</p> <p>B. Security Events</p>
LIST OF BACKGROUND PAPERS	<p>Audit & Review 2019-20 Plan</p> <p>Audit & Review Service Policy</p>

1. INTRODUCTION

- 1.1. The 2019-20 Internal Audit Plan was approved by this Committee at its meeting held on the 10 May 2019. The Plan sets out the combined scope of internal audit work to be completed by Audit & Review and the Devon Audit Partnership, and other assurance providing functions. The Audit planning process is shown in **Appendix A**.
- 1.2. Audit & Review and the Devon Audit Partnership are accountable for the delivery of the Plan and the policy includes the requirement to report progress to this Committee at least three times per year.
- 1.3. The key objective of this report is to provide the Committee with a progress report against the Plan.
- 1.4. The report includes the assurance statements for all audits that work progressed on during 2019-20.
- 1.5. The report also includes an overview of the assurance tracking process and the current high priority recommendations that remain as 'open' on the assurance tracker.

2. ASSURANCE STATEMENTS

- 2.1. One of the key roles of Internal Audit is to provide independent assurance as to how effectively risks are managed across the organisation.
- 2.2. The following assurance statements have been developed to evaluate and report audit conclusions:

★★★★ High Standard

The system and controls in place adequately mitigate exposure to the risks identified. The system is being adhered to and substantial reliance can be placed upon the procedures in place. Only minor recommendations aimed at further enhancing already sound procedures.

★★★ Good Standard

The systems and controls generally mitigate the risk identified but a few weaknesses have been identified and / or mitigating controls may not be fully applied. There are no significant matters arising from the audit and the recommendations made serve to strengthen what are mainly reliable procedures.

★★ Improvements Required

It is felt there are a number of instances where controls and procedures do not adequately mitigate the risks identified. Existing procedures need to be improved in order to ensure that they are fully reliable. Recommendations have been made to ensure that organisational objectives are not put at risk.

★ Fundamental Weakness Identified

The risks identified are not being controlled and there is an increased likelihood that risks could occur. The matters arising from the audit are sufficiently significant to place doubt on the reliability of the procedures reviewed, to an extent that the objectives and/or resources of the Authority may be at risk, and the ability to deliver the service may be adversely affected. Implementation of the recommendations made is a priority.

3. PROGRESS AGAINST THE 2019-20 PLAN

- 3.1. The 2019-20 Internal Audit Plan has been assigned to the Audit & Review Manager, the Information Assurance Manager, the IT Security Officer, the Operational Assurance Manager, the Organisational Safety Manager, and the Risk & Insurance Manager.
- 3.2. To increase clarity on progress, audit phases have been added to Risk Based Audits. The below is the position for each subject at financial year-end.

Assurance Area	Progress	Assurance statement / Update
Operational Assurance	This is an area requiring continuous ongoing review to ensure compliance and organisational improvement	Operational Assurance continued throughout the duration of 2019-20, with Operational Learning from incidents being reported, collected and shared. The reporting of Operational Assurance is currently under review, to ensure that the information provided is more reflective of the findings of this process.
Data Protection / GDPR	This is an area requiring continuous ongoing review to ensure compliance and organisational improvement	The GDPR compliance plan and gap analysis has been regularly monitored to inform the Service of any high risk areas of non-compliance. Data retention is an area for improvement and is now a key consideration for all in-house development projects. How data retention is managed within external and legacy systems require further scrutiny to ensure GDPR principles are complied with.
ISO 27001 (Information Security Standard) Alignment	In Progress	Re-mapping of ISO27001 Baseline Control Set against legal and other compliance standards has progressed well, with the introduction of a maturity model to better measure compliance and information security. The annual IT Health Check remedial action plan has been agreed and good progress made to address high and medium risks.

Assurance Area	Progress	Assurance statement / Update
National Fraud Initiative	In Progress	<p>This is a mandatory initiative for public sector organisations, and is owned by the Cabinet Office.</p> <p>As at year end, 439 (85%) of the 515 records returned, have been reviewed and no fraudulent activity has been identified within these.</p>
Health & Safety Culture Audit	Planning phase	<p>This audit is in the planning phase to understand the role that Health & Safety plays in the organisational culture, at all levels, in all areas. Plans are currently under review as this requires a wider organisational approach, to ensure findings are as meaningful as possible. The use of external specialists in this area is under consideration.</p>
Digital Transformation project process audit	Complete	<p>★★★ Good Standard</p> <p>The 'Programme and Project Governance Framework' has created a more traditional waterfall approach, with the product development stage being agile. Overall, the framework approach was well defined, structured and applied, and capable of delivering effective solutions aligned to business and user needs.</p>
Safeguarding Review	Draft Report	<p>★★ Improvements Required</p> <p>This is a review of the work that the Safeguarding team complete, to understand how well their work is understood across the Service, and how appropriately they are positioned within the Service.</p> <p>A draft report has been produced and is under review, however, due to changes in the team management, it has not yet been possible to agree an action plan, which is required to finalise the report.</p>
Key Financial Systems Audit	Complete	<p>★★★ Good Standard</p> <p>Overall the control environment relating to our key financial systems in generally good. A number of recommendations have been made, this includes introducing independent authorisation for journal entry into the General Ledger and ensuring amendment to supplier bank details are independently checked.</p>

Assurance Area	Progress	Assurance statement / Update
Payroll Audit	Final Report	<p>★★★ Good Standard</p> <p>The standard of accuracy and the controls in place are of a good standard. Due to the small size of the team, it is difficult to ensure full separation of duties, however, the Service accepts this risk.</p>
Fleet Review	Final Report	<p>★★ Improvements Required.</p> <p>Although this is the same overall rating as the report conducted in 2018-19, the auditor has specified that there is a positive direction of travel. Actions are all in progress but will take time to embed before benefits can be seen.</p>
Cultural Audit (2018-19)	Final Report	<p>★★ Improvements Required</p> <p>The report has been finalised subsequent to the previous report. Further work will be completed during 2019-20 based on the outcome of this report, and “task and finish” groups are to be established to understand issues more thoroughly. Areas which will be looked into include empowerment, decision making, and Bullying & Harassment.</p>

3.3. Within the audit plan for 2019-20, 1,123 Assurance days were approved. Within the year, 954 days were used (based on available resource). This is calculated as follows:

	Days Approved	Days Used
Audit & Review days (Internal)	200	69
Devon Audit Partnership (DAP) days - Risk Based Audit	32	32
Devon Audit Partnership (DAP) days - Key Financial Systems	35	35
Information Assurance	158	120
IT Security days	105	105
Operational Assurance	330	330
Organisational Safety & Assurance	330	330
Total Assurance Days	1123	954

3.4. The under-use of Audit & Review days is due to the Audit & Review manager post being filled at 0.5 capacity until 28/10/2020, and then the post being unfilled during the Audit & Review manager’s secondment into another role. Additional admin support was brought on board to assist with the work in this period.

3.5. The under-use of Information Assurance days is due to a vacant post within the team from 01/10/2020 until the end of the financial year.

Action Planning

- 3.6. All issues have been discussed with the Lead Officers and Audit & Review are pleased to report that suitable action plans have been agreed to improve the management of any risks identified.
- 3.7. All agreed actions are captured and monitored through the assurance tracking process (see below) and, where relevant, will be reflected in either department or strategic plans.

4. WHAT HAPPENS WITH AUDIT & REVIEW RECOMMENDATIONS

- 4.1. The Audit & Review Assurance Tracking system records all recommendations and agreed actions coming out of key assurance activities. The system tracks recommendations at the following assurance levels:
- External reviews (including External Audit)
 - Annual Statement of Assurance
 - Internal Audit (Audit & Review and Devon Audit Partnership)
 - EFQM
 - Peer Review
 - ICT Health Checks
 - Security Events
- 4.2. The Assurance Tracker is available to all employees through the Service Information Point (SIP) and will be made available to the public in the future to fall in line with the Fire & Rescue National Framework document.
- 4.3. A quarterly update procedure has been embedded that sees the export and distribution of outstanding recommendations to service managers to provide an update. This has been aligned to the Corporate Planning process to ensure outstanding recommendations are reviewed alongside departmental plans.
- 4.4. Updates are being focussed on the higher priority items, however the trend in all priority of overdue items, continues to decrease, despite an increase in the overall volume of actions.
- 4.5. The overdue actions are largely linked to longer term project work that remain on-going and are monitored through the assurance tracking process.
- 4.6. Additionally, open actions have been superseded by changes to the Service structure, digital transformation and other actions. Further work is ongoing to ensure that actions that have been superseded are documented and recorded as closed.

5. CONCLUSION

- 5.1. Based on the work completed to date in this year and knowledge from previous years, the systems in operation within the Service continue to demonstrate a good level of internal control.

- 5.2. Both Audit & Review and the Devon Audit Partnership would wish to use this report to thank all staff who have worked with them in delivering the audit programme and the willingness to positively engage in the audit process.
- 5.3. The progress made against the agreed Audit Plan will be reported back to this Committee at regular intervals.

MIKE PEARSON
Director of Governance & Digital Services

Appendix A : Internal Audit Planning Process

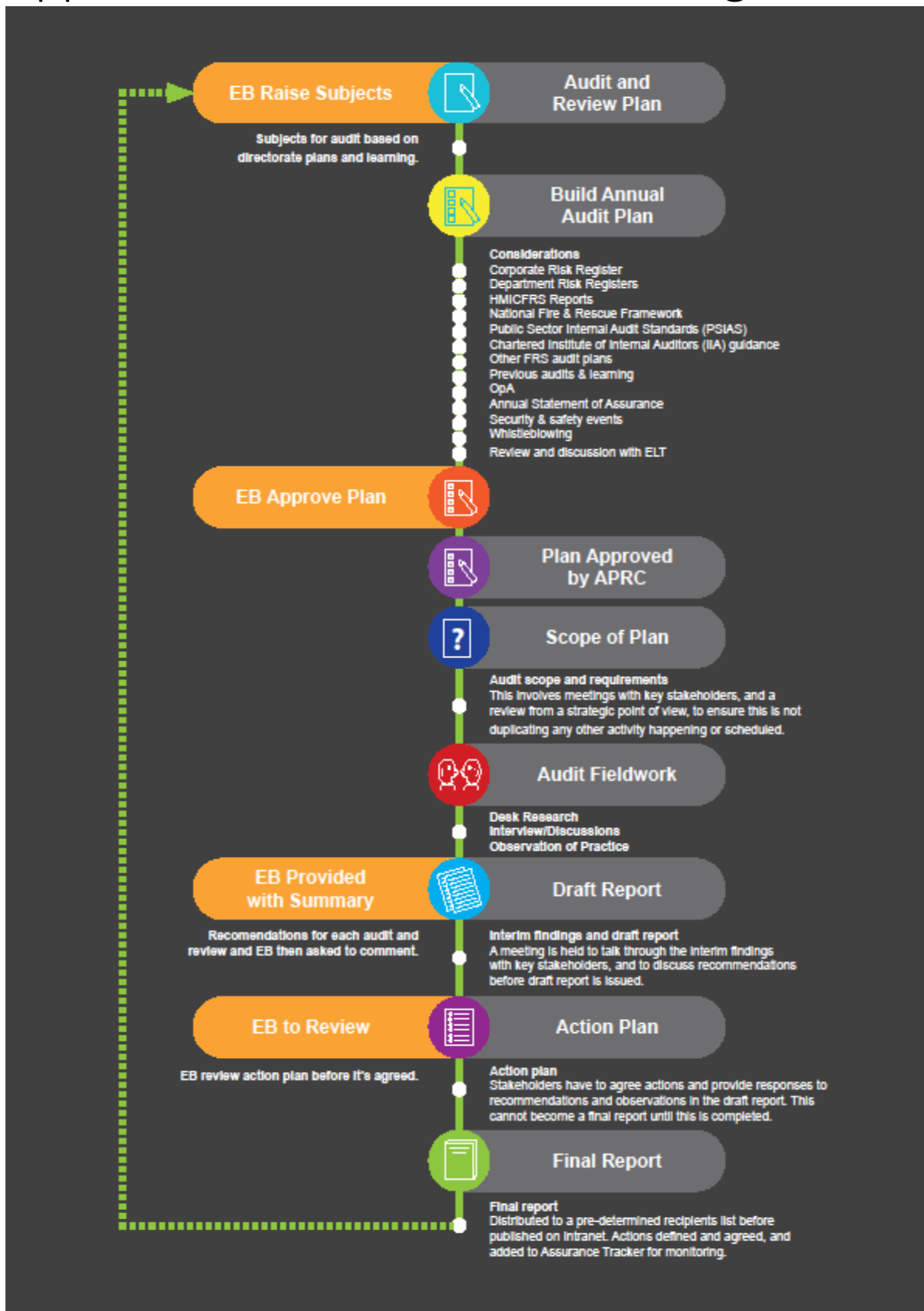


Figure 1: Internal Audit process

Appendix B: Security Events

Security Events

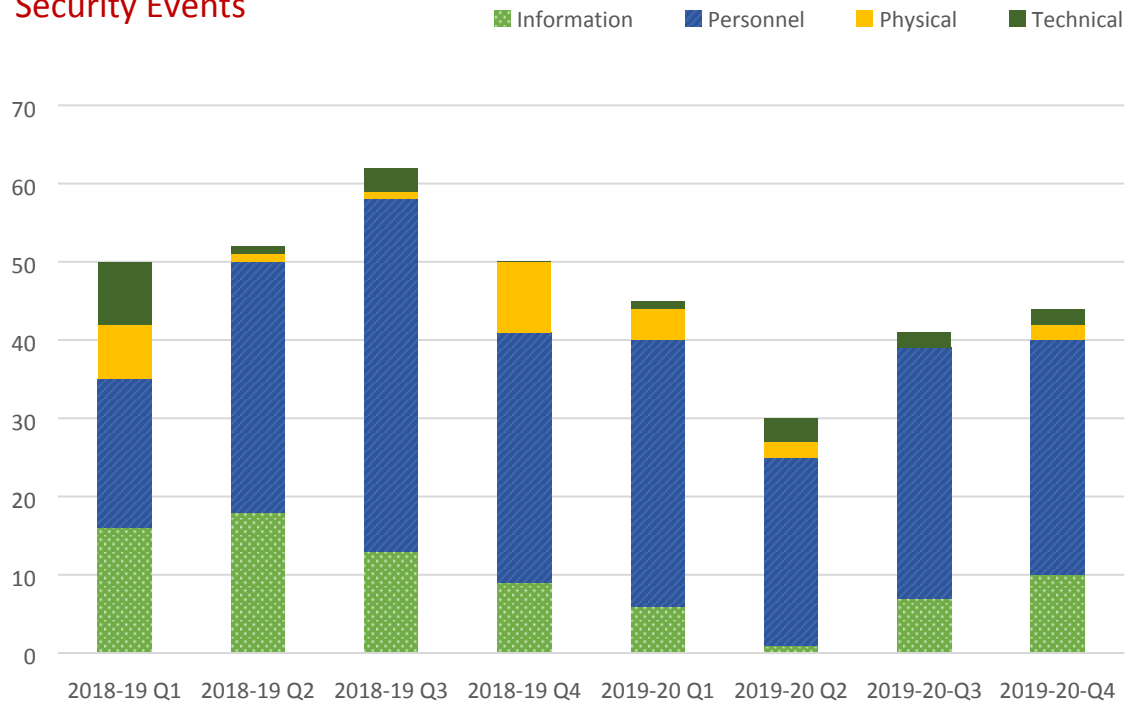


Figure 2: Security Events by Type, by Quarter

Service security event categories are aligned to HMG Security policy framework.

Information Security events include data breaches, emails sent to incorrect recipients, or information left on printers.

Personnel Security events include people not displaying appropriate ID cards on DSFRS sites, or losing alerters, or mobile telephones.

Physical Security events involve doors or windows being left open, or physical break-ins at premises.

Technical Security events are problems relating to our technical systems for managing information.

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