REPORT REFERENCE NO.	APRC/19/17		
MEETING	AUDIT & PERFORMANCE REVIEW COMMITTEE		
DATE OF MEETING	13 NOVEMBER 2019		
SUBJECT OF REPORT	AUDIT & REVIEW 2019-20 PROGRESS REPORT		
LEAD OFFICER	DIRECTOR OF GOVERNANCE & DIGITAL SERVICES		
RECOMMENDATIONS	That the report be noted.		
EXECUTIVE SUMMARY	Attached for consideration and discussion is the 2019–20 Q2 Audit & Review report. This report sets out progress to date against the approved 2019-20 Internal Audit Plan, and updates on additional review work undertaken.		
	The report provides assurance statements for the audits completed to date and records the progress against the approved Internal Audit Plan.		
	Internal Audit activities across 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. The report provides an overview of the assurance tracking process and		
	the current high priority recommendations that remain as 'open' on the assurance tracker.		
RESOURCE IMPLICATIONS	Nil.		
EQUALITY RISKS AND BENEFITS ASSESSMENT (ERBA)	Not applicable.		
APPENDICES	 Internal Audit Planning Process Security Events Operational Assurance Learning Points Identified By Category 		
LIST OF BACKGROUND PAPERS	Audit & Review 2019-20 Plan Audit & Review Service Policy		

1. INTRODUCTION

- 1.1 The 2019-20 Internal Audit Plan was approved by this Committee at its meeting held on the 10th 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 1**.
- 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 completed 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

In our opinion 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.

Assurance	Progress	Assurance statement / Update
Area		
Operational Assurance	This is an area requiring continuous	For the period 1 July 2019 – 30 September 2019; a total of 449 incidents were monitored.
	ongoing review to ensure compliance and organisational improvement	75 of these incidents identified learning, resulting in 136 learning points being submitted, broken down as such; Safety Critical = 3 (1 vehicle related incident and 2 equipment-related incidents; all Safety Critical events are currently being actioned). Area of Concern = 105 Notable Practice = 28
		Learning points have been referred to the relevant teams to action. Trend analysis carried out by the OpA Department and incorporated into quarterly bulletin for organisational learning.
		113 Programmed Officer Visits were completed, 50 of which by Flexi Officers on targeted themes. These visits are to enhance learning identified through trend analysis, national learning and learning from other FRS.
		An overview of the number of learning points identified can be viewed in Appendix 3.
Data Protection / GDPR	This is an area requiring continuous ongoing review to ensure compliance and organisational improvement	A GDPR internal audit in 2018-19 identified a good standard of GDPR governance and improvements required for organisational compliance. Recommendations have been received and an action plan has been agreed.
ISO 27001 (Information Security	In Progress	Good progress has been made in Q2 with gathering evidence for alignment against ISO27001. The annual IT Health Check, for assurance of technical controls, has been

Assurance Area	Progress	Assurance statement / Update
Standard) Alignment		completed and the results are due for review in Q3.
National Fraud Initiative	In Progress	This is a mandatory initiative for public sector organisations, and is owned by the Cabinet Office. By the end of Q2 2019-20, 298 (58%) of the 515 records returned, have been reviewed and no fraudulent activity has been identified within these.
Fleet Review	Final Report	★★ Improvements Required. 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.
H&S Culture Audit	Planning phase	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.
Digital Transformation project process audit	In Progress	This audit is to review the process for development of our in-house ICT systems, but looking predominantly at how the project teams work with ICT development teams, and the end users of the systems. The fieldwork on this has been completed and we are awaiting receipt of the draft report.
Safeguarding Review	In Progress	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. A draft report has been produced and is under review.
Service Delivery / Operational Training Audit	In Progress	This is a review of how well our operational training actually prepares employees for the reality of the incident ground. This includes factors such as whether firefighters can/should challenge instructions they are given at incidents, the tempo they are required to work at and how they address each other and senior officers at incidents. The fieldwork on this has been completed and we are awaiting receipt of the draft report.

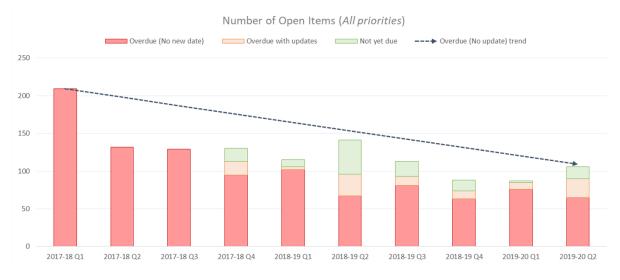
Action Planning

3.3 All issues have been discussed with the Lead Officers and Audit & Review is pleased to report that suitable action plans have been agreed to improve the management of any risks identified.

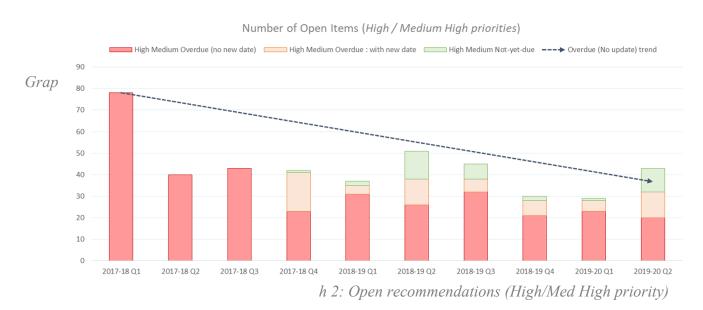
3.4 All agreed actions are captured and monitored through the assurance tracking process (see paragraph below) and, where relevant, will be reflected in either department plans (if tactical) or the Change & Improvement Plan (if strategic).

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);
 - European Foundation for Quality Management (EFQM);
 - Peer Review;
 - ICT Health Checks; and
 - 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. As at October 2019, refer to illustrated Graph 1 and Graph 2 below.
- 4.5 The overdue actions are largely linked to longer term project work that remains on-going and these 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.



Graph 1: Open recommendations (all priorities)



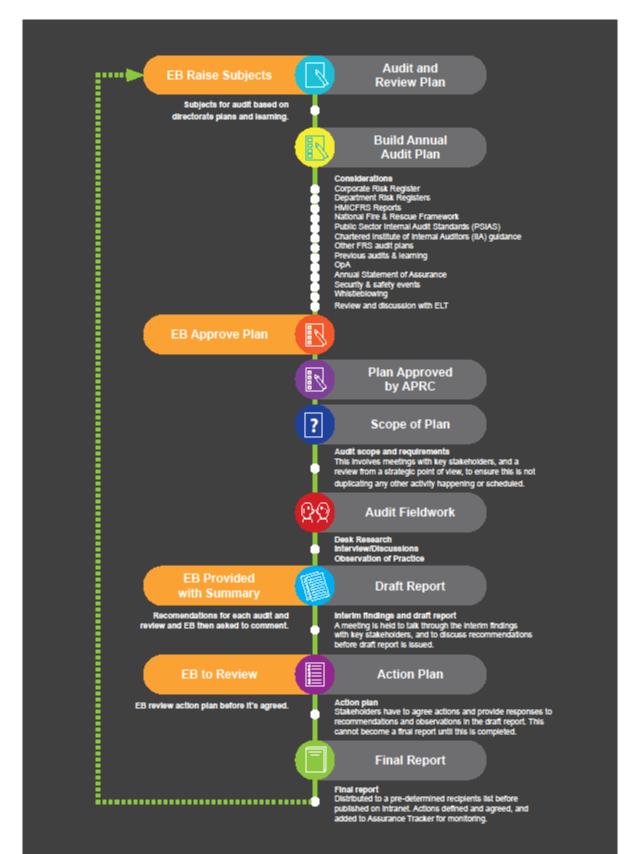
5. <u>CONCLUSION & RECOMMENDATIONS</u>

- 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

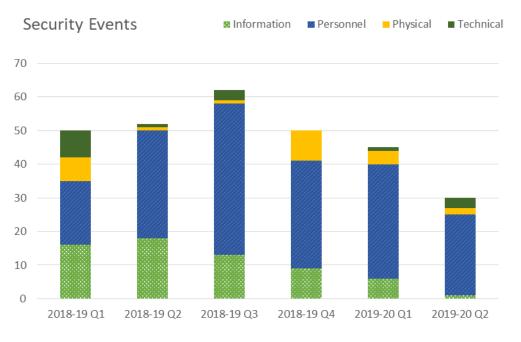
APPENDIX 1 TO REPORT APRC/19/17

INTERNAL AUDIT PLANNING PROCESS



APPENDIX 2 TO REPORT APRC/19/17

SECURITY EVENTS



Security Events (by type) by Quarter

Our 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.

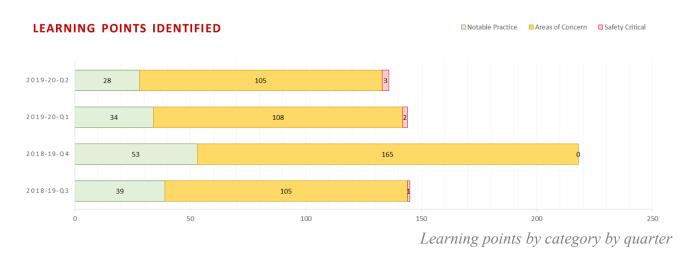
Personnel Security events include people not displaying appropriate ID cards on DSFRS sites, or losing alerters, or mobile telephones.

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.

APPENDIX 3 TO REPORT APRC/19/17

OPERATIONAL ASSURANCE LEARNING POINTS IDENTIFIED BY CATEGORY



2019-20 - Q2: The Operational Assurance team are currently reviewing their systems and processes for identification and classification of learning points, which will have an impact on the future trend reporting.