

London Borough of Croydon Internal Audit Report for the period

1 April to 30 November 2014

This report has been prepared on the basis of the limitations set out on page 16.

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Internal Audit activity

- 1. During the first eight months of the 2014/15 financial year the following work has been delivered:
 - 60% of the 204/15 planned audit days has been delivered
 - 73 planned audits (excluding ad hoc and fraud work) commenced, either by setting up the files, attending scope meetings or by performing the audits. This was made up of:-
 - 44 system audits commenced and/or were completed;
 - 19 probity audits commenced and/or were completed; and,
 - 10 computer audits commenced and/or were completed.

In addition:

- 5 new ad hoc or fraud investigations commenced and/or were completed.

Internal Audit Performance

- 2. To help ensure that the internal audit plan supported the Risk Management Framework and therefore the Council Assurance Framework, the 2014/15 internal audit plan was substantially informed by the risk registers. The 2014/15 internal audit plan was approved by the former Audit Advisory Committee on 25 March 2014.
- 3. Work on the 2014/15 audit plan commenced in April 2014 and delivery is now well advanced.
- 4. Table 1 details the performance for the 2014/15 audit plan against the Council's targets. At 30 November 2014 Internal Audit had delivered 60% of the planned audit days. While the year to date performance in terms of draft reports issued is slightly behind target, it should be recognised that this follows a similar pattern to previous years where 100% of the plan has been delivered in-year. Internal Audit is well placed to complete the Audit Plan by year end as required.

Table 1: Performance against target

Performance Objective	Annual Target	Year to Date Target	Year to Date Perform ance	Perform ance
% of planned 2014/15 audit days delivered	100%	60%	60%	>
Number of 2014/15 planned audit days delivered	1131	679	681	>
% of 2014/15 planned draft reports issued	100%	47%	36%	▼
Number of 2014/15 planned draft reports issued	97	46	35	▼
% of draft reports issued within 2 weeks of exit meeting with the Client	85%	85%	90%	•
2014/15 % of priority one recommendations implemented at the time of the follow up audit	90%	90%	80%	•
2014/15 % of all recommendations implemented at the time of the follow up audit	80%	80%	82%	•
2013/14 % of priority one recommendations implemented at the time of the follow up audit	90%	90%	86%	•



Performance Objective	Annual Target	Year to Date Target	Year to Date Perform ance	Perform ance
2013/14 % of all recommendations implemented at the time of the follow up audit	80%	80%	85%	A
2012/13 % of priority one recommendations implemented at the time of the follow up audit	90%	90%	97%	•
2012/13 % of all recommendations implemented at the time of the follow up audit	80%	80%	91%	•
% of qualified staff engaged on audit	40%	40%	34%	▼

Audit Assurance

5. Internal Audit provides four levels of assurance as follows:



The systems of internal control are sound and achieve all systems objectives and that all controls are being consistently applied.

The systems of internal control are basically sound, there are weaknesses that put some of the systems objectives at risk and/or there is evidence that the level of non-compliance with some of the controls may put some of the system objectives at risk.

(*Note - Substantial assurance is provided on School audits.)

Weaknesses in the systems of internal control are such as to put the systems objectives at risk, and/or the level of non-compliance puts the system objectives at risk.

The system of internal control is generally weak leaving the system open to significant error or abuse and /or significant non-compliance with basic controls leaves the system open to error or abuse.

6. Table 2 lists the audits for which final reports were issued for the first eight months from 1 April to 30 November 2014. Details of the key issues arising from these reports are shown in Appendix 1.

Table 2: Final audit reports issued from 1 April 2014

Audit Title	Risk Level	Assurance Level	Planned Year
Non-school audits			
Multi Agency Safeguarding Hub (MASH)	High	Limited	2014/15
Direct Payments	High	Limited	2014/15
Establishment Control	High	Satisfactory	2014/15
Programme and Projects Management West Croydon Interchange	High	Satisfactory	2014/15
Schools Recruitment	High	Satisfactory	2014/15
Disabled Facilities Grants	High	Satisfactory	2014/15
Express Electoral Registration Application	High	Satisfactory	2014/15
Abandoned Vehicles	High	Satisfactory	2014/15
Contract Management Framework	High	Satisfactory	2014/15
Treasury Management	High	Full	2014/15



Audit Title	Risk Level	Assurance Level	Planned Year
School audits			
Coningsby PRU	Medium	Limited	2014/15
Cotelands Centre PRU	Medium	Limited	2014/15
Monks Orchard	Medium	Limited	2014/15
Moving On PRU	Medium	Limited	2014/15
Park Hill Junior	Medium	Limited	2014/15
Phil Edwards PRU	Medium	Limited	2014/15
Regina Coeli Catholic Primary School	Medium	Limited	2014/15
Thomas More	Medium	Limited	2014/15
Heavers Farm Primary	Medium	Substantial	2014/15
St Mary's Catholic High School	Medium	Substantial	2014/15

Follow-up audits - effective implementation of recommendations

- 7. During 2014/15, in response to the Council's follow-up requirements, Internal Audit has continued following-up the status of the implementation of the 2010/11, 2012/13 and 2013/14. Follow ups on 2014/15 audits have also commenced.
- 8. Follow-up audits are undertaken to ensure that all the recommendations raised have been successfully implemented according to the action plans agreed with the service managers. The Council's target for audit recommendations implemented at the time of the follow-up audit is 80% for all priority 2 & 3 recommendations and 90% for priority 1 recommendations, (the target for Priority 1 recommendations was increased from 85% to 90% at the June 2014 General Purposes and Audit Committee meeting).

Porformance Objective	Torqui	Performance (to date*)					
Performance Objective	Target	2010/11	2011/12	2012/13	2013/14	2014/15	
Percentage of priority one recommendation implemented at the time of the follow up audit	90%	100%	100%	97%	89%	82%	
Percentage of all recommendations implemented at the time of the follow up audit	80%	88%	93%	91%	85%	80%	

^{*} The follow ups for 2010/11 and 2011/12 are now complete. The results of those 2012/13, 2013/14 and 2014/15 audits that have been followed up are included in Appendixes 2, 3, and 4 respectively.

9. Appendix 2 shows the follow-up audits of 2012/13 audits undertaken to date and the number of recommendations raised and implemented. 91% of the total recommendations were found to have been implemented and 97% of the priority 1 recommendations which have been followed up have been implemented. The outstanding priority 1 recommendation is detailed below:



Audit Title	Executive Director Responsible	Risk Level	Assurance Level	Summary of priority 1 recommendations
St Mary's Catholic High School	Paul Greenhalgh	Medium	Limited	A recommendation was raised as increments were noted to the Head Teachers pay that did not appear to be in accordance with the Teachers Pay and Conditions document. The School has not yet demonstrated that this is satisfactorily resolved. It should; however, be noted that a new head teacher has subsequently been appointed at the School. The school was re- audited on request of the new Head teacher on 8 October 2014. The above recommendation is; however, still in the process of being addressed.

10. Appendix 3 shows the follow-up audits of 2013/14 audits undertaken to date and the number of recommendations raised and implemented. 85% of the total recommendations were found to have been implemented and 89% of the priority 1 recommendations which have been followed up have been implemented. The outstanding priority 1 recommendations are detailed below:

Executive Director Responsible	Risk Level	Assurance Level	Summary of priority 1 recommendations
Hannah Miller	High	Limited	A recommendation was raised as the process of selecting service users to visit had not been formalised and a number of these visits were outstanding. While the follow up process has confirmed that outstanding visits have been conducted, the process of selection for future visits to conduct, is still being resolved.
Paul Greenhalgh	Medium	Limited	A recommendation was raised as there was no evidence of a health clearance check on the personnel files for two new starters. The response received to the follow up stated that 'the School has continued to ensure all new members of staff complete Health questionnaires and are referred to OHS as required". A copy of the health check clearances has been requested by Internal Audit, but not yet provided.
			A recommendation was raised relating to DBS checks for staff and, although the response received stated 'Both these individuals have been chased up and their original DBS certificates presented to the school for inclusion in the records.', the numbers of the relevant DBS checks requested by Internal Audit as part of the follow up process and assurance of implementation have not yet been provided.
			A recommendation was raised as instances had been identified where petty cash expenditure was not in line with the 'Guidance for schools relating to the acceptable use of school (public) monies'. The response received stated, "Any petty cash used for expenditure that should be paid for from private funds will be reimbursed immediately". Confirmation that funds have been reimbursed has been sought by Internal Audit, but not yet provided. While the School has stated that the above recommendations have been implemented, supporting evidence in this regard is still being
	Director Responsible Hannah Miller Paul	Director Risk Level Hannah Miller High Paul Medium	Director Responsible Hannah Miller High Limited Paul Medium Limited

11. Appendix 4 shows the follow-up audits of 2014/15 audits undertaken to date and the number of recommendations raised and implemented. 82% of the total recommendations were found to



have been implemented and 80% of the priority 1 recommendations which have been followed up have been implemented. The outstanding priority 1 recommendation is detailed below:

Audit Title	Executive Director Responsible	Risk Level	Assurance Level	Summary of priority 1 recommendation
Monks Orchard School	Paul Greenhalgh	Medium	Limited	A recommendation was raised relating to tendering for building work. Although the follow up asserted that the Schools Finance Procedures had been updated to make this clear, this document has not yet been approved by the governors, or seen by Internal Audit.



Appendix 1 - Key issues from 2014/15 finalised audits

Audit Title	Risk Level	Assurance Level & Number of Issues	Summary of key issues raised.
Non School Audits			
Multi Agency Safeguarding Hub (MASH)	High	Limited (Three Priority 1 and eight Priority 2 recommendations)	A priority 1 recommendation was raised due to the MASH core partners only being co-located for two out of five days a week at the time of the audit. Access to two core partner's databases was not available on one of the two fully functional MASH days for the week commencing 16th June 2014, resulting in no contribution from these partners on this day.
			A priority 1 recommendation was raised due to examination of five MASH intelligence forms identifying that three had not been completed within the required 3 days, with the longest process time being eight working days.
			A further priority 1 recommendation was raised due to the children's service contact centre missing 18% of phone calls received in June 2014.
			Since the issue of the audit report a detailed action plan has been progressed and additional resource has been dedicated in the contact centre which appears to have significantly reduced the level of missed calls.
Direct Payments Abandoned Vehicles	High	Limited (Three Priority 1 and two Priority 2 recommendations raised)	A priority 1 recommendation was raised due to four out of a sample of five recent AIS Payment and Commitment Forms examined not being passed to the Direct Payments Team for payment processing in a timely manner, with the longest delay being 10 months. A priority 1 recommendation was raised due to discussion establishing that monthly checks are undertaken on changes made to bank account details on Swift for their accuracy and validity by obtaining the supporting evidence. However, these checks being retrospective are not sufficient to prevent payments being made to inappropriate accounts. A further priority 1 recommendation was raised due to a large backlog of outstanding quarterly returns that had not been returned by the clients at the time of the audit. Examination of the files for a sample of ten selfmanaging direct payments clients, noted that a quarterly return was not available for four clients in Quarter 2 2013/14 and for two clients in Quarter 3 2013/14. Furthermore, of the quarterly returns obtained from sample testing, four were not evidenced as checked. No priority 1 recommendations raised.
Abandoned vehicles	riigii	(Two Priority 2 recommendations)	
Programme and Projects Management West Croydon Interchange	High	Satisfactory (One Priority 1 and one Priority 3 recommendations)	No priority 1 recommendations raised.
Schools Recruitment	High	Satisfactory (Six Priority 2 and one Priority 3 recommendations raised)	No priority 1 recommendations raised.
Disabled Facilities Grants	High	Satisfactory (Six Priority 2 and nine Priority 3 recommendations)	No priority 1 recommendations raised.



Audit Title	Risk Level	Assurance Level & Number of Issues	Summary of key issues raised.
Non School Audits			
Multi Agency Safeguarding Hub (MASH)	High	Limited (Three Priority 1 and eight Priority 2 recommendations)	A priority 1 recommendation was raised due to the MASH core partners only being co-located for two out of five days a week at the time of the audit. Access to two core partner's databases was not available on one of the two fully functional MASH days for the week commencing 16th June 2014, resulting in no contribution from these partners on this day.
			A priority 1 recommendation was raised due to examination of five MASH intelligence forms identifying that three had not been completed within the required 3 days, with the longest process time being eight working days.
			A further priority 1 recommendation was raised due to the children's service contact centre missing 18% of phone calls received in June 2014.
			Since the issue of the audit report a detailed action plan has been progressed and additional resource has been dedicated in the contact centre which appears to have significantly reduced the level of missed calls.
Contract Management Framework	High	Satisfactory (Five Priority 2 and two Priority 3 recommendations)	No priority 1 recommendations raised.
School Audits			
Monks Orchard	Medium	Limited (Three Priority 1, three Priority 2 and five Priority 3 recommendations)	A priority 1 recommendation was raised due to instances where DBS checks were more than three years old. (It was highlighted by the School that the application process had been delayed as Strictly Education had run out of forms).
			A priority 1 recommendation was raised relating to tendering for building work.
			A further priority 1 recommendation was raised as the school's laptops had not been encrypted to safeguard data.
Park Hill Junior	Medium	Limited (Two Priority 1, four Priority 2 and three Priority 3 recommendations)	Priority 1 recommendations were raised due to sample testing identifying that for a number of the transactions tested purchase orders had been raised subsequent to the receipt of the respective invoices and that goods/services received checks were not always evidenced.
Regina Coeli Catholic Primary	Medium	Limited (Four Priority 1, six	A priority 1 recommendation was raised due to one IEB member not documented as DBS checked.
		Priority 2 and ten Priority 3 recommendations)	A priority 1 recommendation was raised due to sample testing establishing that purchase orders were not consistently produced in advance of the corresponding invoice being received or evidenced as appropriately approved. This issue was also identified and reported during the previous audit in July 2013 as a Priority 1 recommendation with no action fully taken.
			A priority 1 recommendation was raised due to sample testing establishing that the person evidencing that the goods/services had been conducted was not always independent from the person authorising the invoice. This issue was also identified and reported during the previous audit in July 2013 as a Priority 1 recommendation.
			A further Priority 1 recommendation was raised due to sample testing establishing that invoices are not always being authorised in accordance with the Finance Policy and Procedures Manual. This issue was also identified and reported during the previous audit in July 2013 as a



Audit Title	Risk Level	Assurance Level & Number of Issues	Summary of key issues raised.
Non School Audits			
Multi Agency Safeguarding Hub (MASH)	High	Limited (Three Priority 1 and eight Priority 2 recommendations)	A priority 1 recommendation was raised due to the MASH core partners only being co-located for two out of five days a week at the time of the audit. Access to two core partner's databases was not available on one of the two fully functional MASH days for the week commencing 16th June 2014, resulting in no contribution from these partners on this day. A priority 1 recommendation was raised due to examination of five MASH intelligence forms identifying that three had not been completed within the required 3 days, with the longest process time being eight working days. A further priority 1 recommendation was raised due to the children's service contact centre missing 18% of phone calls received in June 2014. Since the issue of the audit report a detailed action plan
			has been progressed and additional resource has been dedicated in the contact centre which appears to have significantly reduced the level of missed calls.
			Priority 1 recommendation but no action fully taken.
Thomas More Catholic School	Medium	Limited (Four Priority 1, fourteen Priority 2 and seven Priority 3 recommendations)	A priority 1 recommendation was raised due to references not being held on the personnel files, for two of the sample of three new starters examined. A priority 1 recommendation was raised due to List 99 checks not evidenced as undertaken for two out of the sample of three new starters examined. Further examination of central DBS register identified that: The DBS form number was not evident for a member of staff, and DBS renewal was required for 17 members of staff and whilst evidence of the application being sent was obtained for all cases, the clearance certificates had not been seen by the School. A priority 1 recommendation was raised due to orders had not being raised for 9 out of the sample of 15 transactions examined. A further priority 1 recommendation was raised as a school debit card was held at the time of the audit.
Phil Edwards PRU	Medium	Limited (One Priority 1,three Priority 2 and seven Priority 3	A priority 1 recommendation was raised due to sample testing identifying for a number of the transactions tested that a goods/services received checks were not always evidenced.
Coningsby PRU	Medium	Limited (One Priority 1, four Priority 2 and seven Priority 3 recommendations)	A priority 1 recommendation was raised due to sample testing identifying that a number of purchase orders did not have a goods/services received check evidenced.
Moving On PRU	Medium	Limited (One Priority 1, seven Priority 2 and five Priority 3 recommendations)	A priority 1 recommendation was raised as two references had not been obtained for two of the new starters sampled prior to their start dates.
Cotelands Centre PRU	Medium	Limited	A priority 1 recommendation was raised as the School's



Audit Title	Risk Level	Assurance Level & Number of Issues	Summary of key issues raised.
Non School Audits			
Multi Agency Safeguarding Hub (MASH)	High	Limited (Three Priority 1 and eight Priority 2 recommendations)	A priority 1 recommendation was raised due to the MASH core partners only being co-located for two out of five days a week at the time of the audit. Access to two core partner's databases was not available on one of the two fully functional MASH days for the week commencing 16th June 2014, resulting in no contribution from these partners on this day. A priority 1 recommendation was raised due to examination of five MASH intelligence forms identifying that three had not been completed within the required 3 days, with the longest process time being eight working days. A further priority 1 recommendation was raised due to the children's service contact centre missing 18% of phone calls received in June 2014. Since the issue of the audit report a detailed action plan has been progressed and additional resource has been dedicated in the contact centre which appears to have significantly reduced the level of missed calls.
		(One Priority 1, eleven Priority 3 and five Priority 3 recommendations)	laptops had not been encrypted to safeguard data.
Heavers Farm Primary	Medium	Substantial (Four Priority 2 and three Priority 3 recommendations)	No Priority 1 recommendations were raised.
St Mary's Catholic High School	Medium	Substantial (Fifteen Priority 2 and five Priority 3 recommendations)	No Priority 1 recommendations were raised

Appendix 2 - Follow-up of 2012/13 audits (with outstanding recommendations only)

Financial	Audit Followed-up	Executive	Risk Level	Assurance Level	Total	Impl	emented
Year	Audit Followed-up	Director Responsible	RISK Level	& Status	Raised	Total	Percentage
Non Schoo	ol Audits						
2012/13	LGfl2 Fronter	Nathan Elvery	High	Limited (2 nd follow up in progress)	7	3	57%
2012/13	Building Control	Jo Negrini	High	Satisfactory (2 nd follow up in progress)	2	1	50%
2012/13	Highways	Jo Negrini	High	Satisfactory (Superseded by 2014/15 audit)	4	3	75%
2012/13	E-GENDA Application	Nathan Elvery	High	Satisfactory (3 rd follow up in progress)	5	2	40%
2012/13	Contender Windows Operating System (computer audit)	Nathan Elvery	High	Satisfactory (2 nd follow up in progress)	4	3	75%
		rom audits that h	ave had resp	oonses	240	221	92%
Non Schoo	ol Audits Sub Total:				19	19	100%
School Au					l l		
2012/13	St Mary's Catholic High School	Paul Greenhalgh	Medium	Limited (4 th follow up in progress)	22	17	78%
	School Audits 2/13				314	286	92%
School Au	dits Sub Total:				18	17	95%
			•	oonses	554	504	91%
Priority 1 F	Recommendations from audits	that have had res	sponses		37	36	97%



Appendix 3 - Follow-up of 2013/14 audits

Financial	Audit Followed-up	Executive Director	Risk Level	Assurance Level &	Total	Implemented	
Year	Audit Followed-up	Responsible	KISK Level	Status	Raised	Total	Percentage
Non Schoo	ol Audits						
2013/14	Creditors	Nathan Elvery	High	Limited (2 nd follow up in progress)	4	3	75%
2013/14	Community Care Payments	Paul Greenhalgh	High	Limited (No further follow ups planned)	2	2	100%
2013/14	Non Comensura Interims & Consultants	Nathan Elvery	High	Limited (2 nd follow up in progress)	6	3	50%
2013/14	Academies Conversion	Paul Greenhalgh	High	Limited (No further follow ups planned)	11	11	100%
2013/14	Unaccompanied Minors (Asylum Seekers)	Paul Greenhalgh	High	Limited (No further follow ups planned)	17	15	89%
2013/14	Brokerage	Paul Greenhalgh	High	Limited (4 th follow up in progress)	8	6	75%
2013/14	Vehicle Removals	Jo Negrini	High	Limited (No further follow ups planned)	6	5	83%
2013/14	Pay and Display Cash Collections	Jo Negrini	High	Limited (No further follow ups planned)	10	10	100%
2013/14	Environmental Enforcement	Jo Negrini	High	Limited (No further follow ups planned)	4	4	100%
2013/14	Fuel Management	Jo Negrini	High	Limited (No further follow ups planned)	8	7	88%
2013/14	Waste Collection	Jo Negrini	High	Limited (No further follow ups planned)	6	5	83%
2013/14	Facilities Management	Nathan Elvery	High	Limited (No further follow ups planned)	3	3	100%
2013/14	Reroofing Monks Orchard Primary School	Jo Negrini	High	Limited (No further follow ups planned)	5	4	80%
2013/14	Biking the Borough	Jo Negrini	High	Limited (2nd follow up in progress)	4	2	50%
2013/14	Cash and Banking	Nathan Elvery	High	Satisfactory (No further follow ups planned)	4	4	100%
2013/14	Housing Benefits	Nathan Elvery	High	Satisfactory (No further follow ups planned)	4	4	100%



Financial	Audit Followed-up	Executive Director Risk L	Risk Level	Assurance Level &	Total	Implemented	
Year	Addit i ollowed-up	Responsible	IXISK LEVEI	Status	Raised	Total	Percentage
2013/14	Main Accounting	Nathan Elvery	High	Satisfactory (1 st follow up in progress)	3	-	-
2013/14	Pensions	Nathan Elvery	High	Satisfactory (No further follow ups planned)	2	2	100%
2013/14	Payments to Schools	Nathan Elvery	High	Satisfactory (No further follow ups planned)	3	3	100%
2013/14	Payroll	Nathan Elvery	High	Satisfactory (No further follow ups planned)	4	4	100%
2013/14	Towards a Tipping Point	Nathan Elvery	High	Satisfactory (No further follow ups planned)	1	1	100%
2013/14	Corporate Governance	Nathan Elvery	High	Satisfactory (1 st follow up in progress)	3	-	-
2013/14	Information Management	Nathan Elvery	High	Satisfactory (2nd follow up in progress)	3	1	33%
2013/14	Programme and Project Management	Nathan Elvery	High	Satisfactory (3rd follow up in progress)	5	1	20%
2013/14	Recharging	Nathan Elvery	High	Satisfactory (1 st follow up in progress)	3	-	-
2013/14	Red File Scheme	Nathan Elvery	High	Satisfactory (No further follow ups planned)	7	7	100%
2013/14	Gifts and Hospitality	Nathan Elvery	High	Satisfactory (1st follow up in progress)	5	-	-
2013/14	School Places – Prediction and Management	Paul Greenhalgh	High	Satisfactory (No further follow ups planned)	4	4	100%
2013/14	Data Quality – DASHH - Social Care	Paul Greenhalgh	High	Satisfactory (2nd follow up in progress)	7	2	28%
2013/14	Housing Tenancy	Jo Negrini	High	Satisfactory (No further follow ups planned)	4	4	100%
2013/14	Public Health Transition of Financial Management	Nathan Elvery	High	Satisfactory (No further follow ups planned)	6	6	100%
2013/14	Waste Disposal (Contract Management)	Jo Negrini	High	Satisfactory (No further follow ups planned)	3	3	100%
2013/14	Community Infrastructure Levy	Jo Negrini	High	Satisfactory (No further follow ups planned)	2	2	100%
2013/14	Social Fund Reform	Nathan Elvery	High	Satisfactory (No further follow	4	4	100%



Financial	Audit Followed-up	Executive Director	Risk Level	Assurance Level &	Total	lmp	olemented	
Year	Addit Followed up	Responsible	Table 20101	Status	Raised	Total	Percentage	
				ups planned)				
2013/14	E-mail	Nathan Elvery	High	Satisfactory (2nd follow up in progress)	2	1	50%	
2013/14	LiquidLogic Pre- Implementation Review	Paul Greenhalgh	High	Satisfactory (3rd follow up in progress)	10	6	60%	
2013/14	Metacompliance Application	Nathan Elvery	High	Satisfactory (No further follow ups planned)	5	4	80%	
2013/14	Microsoft Office 2010 Upgrade Project	Nathan Elvery	High	Full (No further follow ups planned)	3	3	100%	
2013/14	Procurement – Strategy, Governance and Communication	Nathan Elvery	High	Satisfactory (2nd follow up in progress)	3	0	0%	
2013/14	South Norwood Country Park	Jo Negrini	High	Satisfactory (No further follow ups planned)	7	7	100%	
2013/14	Public Services (Social Value) Act 2012	Nathan Elvery	High	Satisfactory (No further follow ups planned)	1	1	100%	
	ol Audits Sub Total: ndations and implementation t	rom audits that h	ave had res	ponses	185	154	83%	
	ol Audits Sub Total: Recommendations from audits	that have had re-	sponses		27	26	96%	
School Au							1	
2013/14	Thornton Heath Children's Centre	Paul Greenhalgh	Medium	No (No further follow ups planned)	24	23	96%	
2013/14	Kensington Avenue Primary	Paul Greenhalgh	Medium	No (Now superseded by 2014/15 audit)	38	25	66%	
2013/14	Edenham High School	Paul Greenhalgh	Medium	No (No further follow ups planned)	33	32	98%	
2013/14	All Saints' C of E High School	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	18	17	95%	
2013/14	Greenvale Primary	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	26	21	81%	
2013/14	Regina Coeli	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	27	23	86%	
2013/14	Archbishop Tension's C of E High School	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	21	19	91%	
2013/14	Bensham Manor	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	26	23	89%	



Financial	Audit Followed-up	Executive Director	Risk Level	Assurance Level &	Total	lmp	lemented
Year	Audit Followed-up	Responsible	RISK Level	Status	Raised	Total	Percentage
2013/14	Virgo Fidelis Convent Senior School	Paul Greenhalgh	Medium	Limited (2 nd follow up in progress)	17	6	36%
2013/14	St Aidan's Catholic Primary	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	16	14	88%
2013/14	St Chad's	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	11	10	91%
2013/14	St Giles'	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	16	16	100%
2013/14	Gresham Primary	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	10	8	80%
2013/14	Forestdale Primary	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	20	20	100%
2013/14	Rowdown Primary	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	19	18	95%
2013/14	Selsdon Primary and Nursery	Paul Greenhalgh	Medium	Substantial (1 st follow up in progress)	13	0	-
2013/14	St Joseph's Federation	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	12	11	91%
2013/14	St Peter's Primary School	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	18	15	84%
2013/14	Woodside Primary School and Children's Centre	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	8	8	100%
2013/14	Beckmead	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	9	9	100%
2013/14	St Nicholas	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	14	13	93%
2013/14	Red Gates School	Paul Greenhalgh	Medium	Substantial (No further follow ups planned)	5	5	100%
	dits Sub Total: ndations and implementation fi	rom audits that h	ave had res	ponses	388	336	87%
School Audits Sub Total: Priority 1 Recommendations from audits that have had responses						39	87%
	ndations and implementation for		•	oonses	573	490	85%
Dulanita 4 D	Recommendations from audits	that have had re-	enoneoe		73	65	89%



Appendix 4 - Follow-up of 2014/15 audits

Financial	Audit Followed-up	Executive Director	Risk Level	Assurance Level &	Total	Implemented	
Year	Addit i ollowed-up	Responsible	IXISK LEVEI	Status	Raised	Total	Percentage
Non Schoo	l Audits						
2014/15	Direct Payments	Paul Greenhalgh	High	Limited (1st follow up in progress)	5	-	-
2014/15	Abandoned Vehicles	Jo Negrini	High	Satisfactory (1 st follow up in progress)	2	-	-
	ol Audits Sub Total: Indations and implementation t	rom audits that h	ave had res _l	ponses	0	0	0%
	ol Audits Sub Total: Recommendations from audits	that have had res	sponses		0	0	0%
School Aud							
2014/15	Monks Orchard	Paul Greenhalgh	Medium	Limited (3rd follow up in progress)	11	8	73%
2014/15	Park Hill Junior	Paul Greenhalgh	Medium	Limited (1 st follow up in progress)	9	-	-
2014/15	Regina Coeli Catholic Primary	Paul Greenhalgh	Medium	Limited (1 st follow up in progress)	20	-	-
2014/15	Thomas More Catholic School	Paul Greenhalgh	Medium	Limited (1st follow up in progress)	25	-	-
2014/15	Coningsby Pru	Paul Greenhalgh	Medium	Limited (1 st follow up in progress)	12	-	-
2014/15	Cotelands	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	10	10	100%
2014/15	Moving On Pru	Paul Greenhalgh	Medium	Limited (No further follow ups planned)	13	12	93%
2014/15	Phil Edwards Pru	Paul Greenhalgh	Medium	Limited (1 st follow up in progress)	11	-	-
2014/15	Heavers Farm	Paul Greenhalgh	Medium	Satisfactory (1 st follow up in progress)	7	-	-
2014/15	St Mary's Catholic High	Paul Greenhalgh	Medium	Satisfactory (1 st follow up in progress)	20	-	-
	dits Sub Total:	rom audits that h	ave had resi	ponses	34	30	88%
School Aud	dits Sub Total:				5	4	80%
<u> </u>	ndations and implementation		•	ponses	34	30	82%
Duianita 4 D	Recommendations from audits	that have had res	nonses		5	4	80%



Statement of Responsibility

We take responsibility for this report which is prepared on the basis of the limitations set out below.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices. We emphasise that the responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by us should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud. Our procedures are designed to focus on areas as identified by management as being of greatest risk and significance and as such we rely on management to provide us full access to their accounting records and transactions for the purposes of our work and to ensure the authenticity of such material. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system.

Mazars Public Sector Internal Audit Limited

London

December 2014

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