

#### Audit Committee 27 September 2012

Internal audit – Review of recommendations

Executive summary and recommendations

At its meeting on 29 September 2011, the Committee agreed that it should receive a paper at each meeting, setting out progress on recommendations from internal audit reports.

Most of the information in the appendix is taken from the wording of the internal audit reports. The exception is the 'update' paragraph in the right-hand column, which provides details of progress. In addition, references to HPC in the internal audit reports have been changed to HCPC, following the change of the organisation's name on 1 August 2012.

#### Decision

The Committee is requested to discuss the paper.

#### **Background information**

Please refer to individual internal audit reports for the background to recommendations.

**Resource implications** 

None

**Financial implications** 

None

**Appendices** 

None

Date of paper

13 August 2012

## Recommendations from internal audit reports 2011-12

Information Security/Data protection (report dated September 2011 – considered at Audit Committee 29 September 2011)

Assurance on effectiveness of internal controls: Substantial Assurance

## **Recommendations summary**

Priority Number of recommendations

**Risk 1:** Electronic data is removed inappropriately by an employee (Data Security – Risk No 17.1)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/responsibility
1	Observation: Staff are asked to sign up to the Information Technology Policy under section 5h of the Employee Handbook. This policy details the responsibilities of the staff and the use of devices such as laptops and PDA's and use of email, telephone calls etc.  Whilst it mentions that information held on USB drives is the property of HCPC, it does not mention HCPC's specific policy in respect of these tools. For example, the responsibilities of Staff	As planned, HCPC should review and update the Information Technology Policy held within the Employee Handbook to ensure it provides more detail on the use of USB data drives.	Housekeeping	A review of the IT Policy is scheduled for 2012-13 financial year. These updates will reflect changes in technology that are rolled out to the organisation over the next few months	2012-13 Financial year  Director of HR /Director of IT  Update: The Director of Information Technology has indicated that his department will aim to get the USB controls in place by 27 September 2012 and the policy change in place by 29 November
	using USB drives, that only encrypted				2012. The policy change

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	drives can be used, what USBs should be used for and the security of these.  We were informed that the Policy is currently being reviewed and should be in place from September 2011.  Risk: Staff are not fully aware of their responsibilities in respect of the use of USB data drives.				is due to be considered by the Finance and Resources Committee on 20 November 2012.
2	Observation: A report was provided by the Head of Business Process Improvement which detailed a review of the Payment Card Industry (PCI) process.  One of the weaknesses identified was where data was taken over the telephone, it was not secure enough to ensure personal data could not be copied. There were also concerns over the security of the PDQ machine for walk in applicants and the arrangements around the collecting of the Section 10 on the International Application Forms which contain credit card details.  HCPC is investing in Semafone in September 2011 which will provide an automatic third party process which will	HCPC should continue to address the issues identified in the recent PCI report.	Housekeeping	This project is in progress, and is currently awaiting action by utilities to transfer specific telephone numbers to new services.	End of year [2011-12]  Director of Finance  Update: The project was implemented in February 2012.

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	remove any staff needing to take responsibility for taking credit card details. The PDQ machine is also going to be moved into a more secure area, and Section 10 details will be held more securely in the interim, but it is intended that this transaction will be dealt with by Semafone also.  Risk: Loss of bank and credit card details.				
3	Observation: Through discussion with the HR Manager, the Director of Operations and the Head of Business Process Improvement there tended to be a view that HCPC did not have a formal leavers checklist in place which ensured that all issued items, such as Blackberry's, ID cards, etc were returned and all appropriate departments such as IT, Payroll, etc were informed in a timely manner.  At the debrief, this was questioned by the Chief Executive and a copy of a checklist was provided which covered most key areas, though it was felt it would benefit from a more formal list of all potential items that should be returned to ensure that nothing could be missed off.	The HR team should review and update the Leaver's checklist to ensure that it covers off all key areas and items that need returning. Once reviewed this should be communicated to managers across the organisation so that they are fully aware of the checklist.	Housekeeping.	The list will be reviewed and updated where required. The list will be circulated to all EMT, CDT and line managers.	November 2011  Director of HR / HR Manager  Update: A new on-line leavers form (including an updated checklist for managers) has been introduced and is now in use across the organisation.

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Risk: Failure to ensure that Leavers do		
not take away items which contain		
personal information.		

Risk 2: Paper record Data Security (Data Security – Risk No 17.2).

	Observation/Risk	Recommendation	Priority	Management	Timescale/
				response	responsibility
4	Observation: Locked document	HCPC should	Housekeeping	The current method of	December 2011
	destruction bins were observed as being	revisit the service		collection used by Iron	
	in place within each department visited.	level agreement		Mountain utilises a	Facilities Manager
	A bag is suspended in each of the bins	with Iron Mountain		large blue "wheelie bin"	
	and confidential documentation is	and ensure this is		transported around the	<b>Update:</b> A new supplier
	placed in the locked bins and emptied	updated to reflect		office buildings to each	has been appointed to
	on a weekly basis by Iron Mountain.	current roles and		location, where the bins	deal with collection and
		responsibilities in		contents are emptied	disposal of confidential
	The service level agreement with Iron	respect of tying		directly into the blue	waste.
	Mountain specifies the responsibilities of	and sealing of the		bin. Bag securing is no	
	both parties. It was noted however that	bags.		longer required. The	
	this states that HCPC staff are			Facilities Manager will	
	responsible for the tying up and sealing			attempt to have the	
	of the bags, but having spoken with staff			SLA updated, although	
	this part of the process is performed by			it is believed to be	
	Iron Mountain. At the time of the audit			generic across all	
	we did not witness the Iron Mountain			clients, and resistance	
	process in practice.			may be incurred.	
	Risk: Confusion over the responsibilities				
	of both parties in the agreement, which				
	could be problematic in the event of any				
	data security arising.				

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5	Observation: The Director for Fitness to	As planned HCPC should look to	Housekeeping	A high level	Next 6 months
	Practise provided us with a document retention policy which is used within	expanding and		organisation wide destruction	Director of
	their team and clearly sets out the	enhancing their		table has existed since	Operations
	timescales for retaining different	current		2005	Operations
	documents.	Destruction (and		2003	Update: At the Audit
	documents.	Retention) Policy		A scheduled updating	Committee on 13 March
	HCPC also has a Destruction (and	to match the style		of policies will produce	2012, it was noted that
	Retention) Policy which was created in	of the document		a document similar to	the current destruction
	2005, when the Freedom of Information	retention policy in		the FTP Retention	and retention policy
	Act came into force. Whilst it provides a	place with Fitness		policy.	would be updated by 1
	high level list of documents held and	to Practise.			July 2012. The policy
	retention dates it has been accepted by			Individual departments	was approved by the
	management that there is a need to	Once completed		are aware of the	Audit Committee at its
	develop a more comprehensive	this policy should		retention requirements	meeting on 21 June
	retention policy on a similar line to the	be agreed with all		relating to their own	2012.
	Fitness to Practise document.	departments and then		areas.	
	Risk: Failure to comply with the Data	communicated to			
	Protection Act by keeping personal	all parties.			
	information beyond timescales which	•			
	the Act deems appropriate.	In addition,			
		consideration for			
		encompassing the			
		FTP document			
		already in			
		existence into this			
		document.			

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6	Observation: Section 8a of the	HCPC should	Housekeeping	Departmental	By April 2012
	Employee handbook provides explicit	consider updating		guidelines require	
	detail on the Office Security Policy.	the Office Security		confidential material to	
		Policy within the		be secured overnight,	Head of BPI &
	Whilst it contains a summary of some of	Employee		however we will look to	Facilities Manager
	the key measures such as locking all	Handbook to		update the employee	(Director of HR)
	room, not divulging access codes etc., it	make explicit		handbook	
	did not include ensuring that sensitive	reference to			<b>Update:</b> The Head of
	information is securely locked in	ensuring that all			Business Process
	cabinets when the office is unmanned.	filing cabinets are			Improvement drafted
		locked when the			wording for the
	It was also noted that there is currently	section			employee handbook
	no 'clear desk policy' in place.	is unmanned.			which was approved by
		Marie a construction of the	11		the Director of Human
	Risk: Loss of personal data due to	When practical the	Housekeeping		Resources and the
	failure to ensure effective office security	organisation			Facilities Manager. The
	processes in place.	should look towards			handbook is due to be
		introducing a			updated during August 2012.
		'clear desk policy'			2012.
		to ensure that all			
		sensitive and			
		personal data is			
		locked away at the			
		end of each day.			
		Once			
		implemented this			
		should be detailed			
		in the Employee			
		Handbook.			

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	is covered on the Human Resources induction checklist for managers.
	Regular induction sessions run by the Secretariat provide a full briefing on the Freedom of Information policy and on requests. As a backup, additional information on both data protection and Freedom of Information is available on the internal employee intranet.

Risk 4: Loss of physical despatched to and held by third party for the delivery of their services (Data Security – Risk No 17.5)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
8	Observation: Applications are entered on to the NetRegulate system on arrival.	As planned, HCPC should consider	Housekeeping	Online applications are already on a project	Ongoing
	Once entered the hard copy applications	the introduction of		list, and will be	Director of
	are picked up by Service Point who will	online applications.		prioritised when a	Operations/EMT.
	scan and copy the documents with one			suitable window in the	
	copy being sent back to HCPC and an			projects schedule	Update: Online
	electronic copy being sent on disk. A			allows.	applications is a project
	copy of the paperwork will be sent on to				on the list of projects for
	assessors for evaluation.			However, we are	future consideration.

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Through discussion with the Head of Registration he confirmed that the current process is not ideal and informed us that HCPC are currently looking at a project to consider introducing online applications. Whilst there would still be a requirement for certain proof of identity documents to be sent through the post, this would significantly reduce the current process which in turn would reduce the risk to potential information security breach.	legally required to provide a paper application route.	These will be discussed at the Executive Management Team in November 2012 to determine prioritisation of projects.
Risk: Ineffective processes resulting in an increased risk of information security breach.		

Follow up of previous recommendations (report dated September 2011 – considered at Audit Committee 29 September 2011)

	Observation/ Risk	Original category	Original management response and update response as of September 2011	Implementatio n date and manager responsible	Status	Comments/ implication	New recommendation
1	Management should complete the steps necessary by September 2011 towards removing	Medium	Agreed. The system changes are required for both PRS and Sage to ensure that the full benefits are realised	Sept 11  Director of Finance	The agreed date for implement ation of the recommen	The implementation date for this recommendation had not yet been reached at the time of carrying out this	Management should complete the steps necessary towards removing the option for individuals to follow manual procedures

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	the option for individuals to follow manual procedures when raising supplier purchase orders.		and to ensure cross product compatibility. This should be implemented in the FY 2011/12, subject to budget approval.		dation has not yet been reached	audit. However, the upgrades required have been delayed until next year. HCPC are currently undergoing several projects involving systems upgrades including major projects relating to Case Management and Fitness to Practice in anticipation of taking over responsibilities relating to GSCC and these have	when raising supplier purchase orders. (Significant)  Updated management comment:  The procurement, requisitions and purchases procedures will be reconsidered to include a revised tendering policy and proposals for the supplier database. This will be completed in November 2012.
2	Council should be provided with details of the number and type of health & safety incidents that have arisen at the HCPC at least once annually.	Low	Agreed.  August 2011 - Recommendation has not yet been implemented.	May 2011. Facilities Manager.	The recommen dation has not yet been implement ed.	been prioritised. Currently, this recommendation has not been implemented.  We were advised HCPC's agenda has been busy with a major focus being preparation for the transfer of regulatory functions from the GSCC to	The Council should be provided with a Health & Safety Report at least annually. This should detail: - health and safety activities over the previous year; and - provide details of the number and type of health and safety incidents and near-

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						the HCPC, currently anticipated to take place on 1st April 2012.  However it is accepted that an annual Health & Safety Report is good practice and it is planned that one will be presented to the Council at the next opportunity.	misses and resulting lessons learned and action plans. (Housekeeping)  Updated management comment: Noted. It is proposed to present a paper at December 2011 Council meeting.  Update: The paper was presented to the December 2011 Council meeting. An annual report on health and safety will be presented to the Council in future.
3	The HCPC's Human Resources (HR) Strategy should be updated to reflect the organisation's current thinking on its human resources requirements, including skills	Medium	Director of Human Resources to update the HR strategy by April / May 2011.	May 2011  Director of Human Resources	Progress has been made on implement ation of the recommen dation	The Human Resources Strategy has been updated to reflect HCPC's requirements including skills and training needs. We were informed the Strategy will be presented to the Finance & Resources	As planned, the updated Human Resources Strategy should be reviewed and approved by the Finance & Resources Committee. (Housekeeping)  The updated Human Resources Strategy was approved by the Finance and Resources

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and training needs.		Committee meeting in September 2011 for approval.	Committee on 7 September 2011 and is on the agenda for the Council meeting on 22 September.
			Update: The strategy was approved by the Council on 22 September 2011.

Partners (report dated September 2011 – considered at Audit Committee 29 September 2011)

Assurance on effectiveness of internal controls: Substantial Assurance

## **Recommendations summary**

Priority Number of recommendations

Risk 3: Health & Safety of Partners (Risk No 6.3)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/responsibility
1	Observation: An health and safety update is verbally delivered by a	HCPC should review its risk	Housekeeping	Health and Safety information provided to	Nov 2011
	member of staff delivering the introduction of a course or hearing.	mitigation controls in relation to		partners is under review and guidance	Partner Manager/ Building Manager/
		Partners to ensure		will be produced and	HR Director

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There are no records as to who receives the update/briefing or a structured format of the content being delivered. Consequently there is no formal record maintained in support of this as a mitigating control on the HCPC Risk Register.	these are clear and can be evidenced in practice.	incorporated into partner induction packs and/or the partner handbook.	Update: A health and safety briefing sheet is now provided to partners at all hearings and training events that they attend
Another mitigating control in the Risk Register is 'Efficient and effective support and communication from the Partner team'. However there is no framework as to what mechanisms this control entails.  Risk: Unclear and\or unambiguous controls within the Risk Register.		This mitigating control in the risk register will be deleted and replaced with 'Effective appraisal and monitoring of reappointment processes'	Oct 2011 Partner Manager/ HR Director  Update: The risk register has been updated

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Core Financial Systems – Payroll (report dated September 2011 – considered at Audit Committee 29 September 2011)

Assurance on effectiveness of internal controls: Substantial Assurance

## **Recommendations summary**

Priority Number of recommendations

**Risk 3:** Financial losses arising from fraud or error, inefficient processing or inappropriate activity (such as ghost employees, payment of staff who no longer work at the Council, authorised payments, etc)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
1	Observation: In review of a sample of 20 'acting-up payments' made in the current financial year it was noted:  - In one case (employee reference 313) an allowance had been correctly calculated and pro-rated for the part of May 2011, however, in June 2011 the pro-rated amount was paid again rather than a full month resulting in an underpayment of £57.68;	The underpayment of £57.68 should be corrected in the next payroll run. Care should be taken to ensure that the correct acting-up allowance is paid.	Housekeeping	Item noted. Correction was made in following month.	N/a
	- of the nine members of staff for which	The Employee	Housekeeping	Noted. Policies have been	N/a.
	the payments related to, six received	Handbook should		reviewed and employee	

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	15% of their employee's salary in their substantive position as stated in the Employee Handbook. In the remaining three cases one member of staff received 20% and two received 5%.  During the audit we were informed that the Acting-Up Allowance policy is currently being reviewed and updated.  Risk: Acting-Up Allowances are not correctly calculated or paid potentially resulting in financial loss and / or reputational damage.	be updated to reflect the practice of acting-up allowances not always being paid at 15% of the salary of the employee's substantive position. In addition, the sections relating to Overtime /TOIL and Redundancy should be updated when these policies are reviewed.		handbook was updated in August 2011.	
2	Observation: Finance receive an HR Pack on a monthly basis which includes the HR Summary spreadsheet and relevant supporting documentation detailing starters; leavers; contractual variations; acting-up allowances; changes to address etc.  Whilst our review confirmed that this information was received by Finance, in a timely manner and before the deadline of the 15th of the month, as there is currently no direct interface	As part of the planned review of the HR system, consideration should be given to a more effective interface between the HR and Payroll systems to avoid duplication in entry of data.	Housekeeping	Project proposal to review HR & partners information systems, including link to payroll to be submitted to Executive team in November 2011. If agreed will form part of 2012/13 project plan.	Director of Finance/ HR Director. Timescales pending outcome of Executive Team meeting November 2011  Update: The project plan and its timing will be discussed at the November 2012 Executive

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between the HR Systems and Sage, the information has to be entered again on to Sage.	Management Team awayday.
It is noted that a review of the HR system is planned to be undertaken.	
Risk: Holding two databases with staff details and duplication of data entry are unlikely to be an efficient use of resources.	
Errors are more likely to arise where data is re-keyed.	

Internal audit report – Corporate governance (report dated February 2012 – considered at Audit Committee 13 March 2012)

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**Risk 5:** Member recruitment problem (with the requisite skills)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
1	Observation: An annual review and appraisal process is carried out for each Council Member by the Chair.  The outcomes of this review helps to determine the future training requirements for Members. Through discussion with the Secretary of the Council we were informed that a log of the skills for each of the Members is maintained by the Chair of the Council, but this tends to be more informally set up and they are not aware of any formal log.	Consideration be given to setting up a central log detailing each Members skills and training undertaken. This could then be used to help identify any potential gaps in required skills and further training requirements.	Housekeeping	Full consideration will be given to the skill set of Council members as part of the restructuring of Council scheduled to take place in July 2013.  Post restructure, Secretariat will take forward this recommendation and maintain a central log.	As part of restructuring process  Secretary to Council.
	In our experience with other organisations we have seen the use of a skills matrix to help record members skills, show potential gaps and help in identifying prerequisite skills needed for future appointments.  Risk: Skill-set requirements for the Council is either limited or not recorded resulting in key subject areas not represented at Council level,				

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	expertise/knowledge gaps and inappropriate future recruitment.				
2	Observation: The Council undertakes a self assessment of the effectiveness of its Governance arrangements.  Whilst we feel this probably provides an accurate assessment of the Council's effectiveness, there is always a risk that some members might be less willing to provide an open and honest appraisal.  In our experience with other organisations, we have seen the use of a simple anonymous survey process, which is circulated to Members for completion and is then collated and the results reported anonymously by the equivalent to the Secretary to the Council.  Risk: Council fails to adequately assess its effectiveness, leading to complacency in its operation.	Consideration is given to enhancing the current annual self assessment of effectiveness of governance through the use of an anonymous survey/questionnai re of Members (perhaps using free survey facilities such as Survey Monkey).  The results should be collated and reported on by the Secretary to the Council with a view to future improvements in governance.	Housekeeping	We are anticipating major change in terms of the governance structures as a result of the restructuring of Council which is due to take place in July 2013.  Full consideration will be given to introducing an enhanced self-assessment of effectiveness of governance once the restructuring has taken place.	Following the restructuring process.  Secretary to Council.
3	Observation: The Council has an Expenses Policy which explicitly details the responsibilities of the Members in respect of all travel claims.	HCPC should ensure that where possible all travel bookings are made well in	Housekeeping	The Secretary to Council will write to Council members reminding them of the expenses policy in relation to travel.	Update: On 26 March 2012, the Secretary to Council sent an e- mail to Council members about the

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The Council has a preferred supplier agreement with Co-Operative Travel for providing train and air travel arrangements for Partners and Members.  A review of a sample of expense claims noted that some had been arranged very close to the actual travel date, and not the two weeks in advance as stipulated in the Policy. It was also noted that some of the actual travel costs charged by Co-Op appeared to be quite excessive. During our review, it was not clear when these arrangements were last subject to market testing.  Risk: Failure to achieve value for money in travel expenses.	advance of the travel date to ensure best rates are achieved.  In addition, consideration to market testing its arrangements with Co-Op travel agents to ensure they provide value for money to the organisation.		A review of the contract with Cooperative Travel will take place during the financial year 2012-2013.	expenses policy in relation to travel.  In relation to the second part of the recommendation, the Finance workplan includes a review of the contract and it is anticipated that this will take place in the last half of the financial year.
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Internal audit report – Core Financial Systems – Purchase Ordering System (report dated February 2012 – considered at Audit Committee 13 March 2012)

Assurance on effectiveness of internal controls: Substantial Assurance

## **Recommendations summary**

Priority Number of recommendations

Risk 2: Purchases of goods and services are not authorised appropriately resulting in financial loss to the Council.

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
1	Observation: Review of the profiles of budget-holders found that they have access to carry out the following tasks on PRS:  - Raise a purchase order; - Approve the purchase order; and - Receipt goods/services.	User profiles should be reviewed to ensure that there is appropriate segregation of duties built-in to	Siginificant	Agreed We will consider the best way to ensure segregation of duties.	Director of Finance  Update:  The following amendments were made with effect from 19 March 2012:
	Review of a sample of 24 purchases processed through PRS found six cases where this had happened.  Given the matching process undertaken	the system.  This could be achieved by changing the user profile of approvers so that			• Departmental Managers (who have authorisation limits of £8000, £10000 & £25000)

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	on invoicing, so long as the invoice matches the purchase order no further authorisation is required.  Risk: Lack of segregation of duties meaning that one person could raise a purchase order to a value within their authorisation limits, authorise the purchase order and 'receipt' the goods/service potentially resulting in errors and/or financial losses to HCPC.	they can no longer raise a purchase order and/or that they can no longer 'receipt' goods/services.			cannot raise purchase orders but can approve and goods receive  • Departmental secondary signatures (who have an authorisation limit of £1000) can raise, approve and goods receive purchase orders  • All other users (who have no signing authority) can raise and goods receive purchase orders
2	Observation: The procedures document 'Procurement Requisitions and Purchases' is a detailed set of procedures which set out the processes for all matters relating to the purchasing system and includes relevant screenprints for illustrative purposes. The procedures are currently in draft format and are being reviewed and updated.	As planned, HCPC should complete the update to the 'Procurement, Requisitions and Purchases' procedure document to ensure it reflects	Housekeeping.	Agreed.  Completion of this procedures document is in hand and this will be finalised and submitted to the Finance and Resources Committee in April for approval.	Update: The procedures document was considered by the Finance and Resources Committee on 19 June.  The procurement, requisitions and

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	Risk: Staff are not aware of how to carry out their responsibilities and/or do so in an inefficient manner.	current practice. Once finalised, this should be communicated to all appropriate staff.			purchases procedures will be reconsidered to include a revised tendering policy and proposals for the supplier database. This will be completed in November 2012.
3	Observation: Amendments to suppliers' details, such as bank account details, will be made as and when notified by the supplier – for example, on an invoice. No additional checks are carried out to confirm that the changes are appropriate and legitimate.  We have seen an increasing incidence of attempted and actual fraud being committed through change of supplier details across the public sector.  Risk: Amendments to supplier details are incorrectly processed potentially resulting in errors in payments to suppliers and/or inappropriate or fraudulent payments being made.	HCPC should amend its procedure for changes to supplier details to ensure any such requests are confirmed through a telephone conversation with the existing contact and/or registered address.	Significant.	We only change suppliers' bank details if changes are confirmed in writing and these confirmations are kept in a file. We will now call or email to check the validity of the request.	Director of Finance.  Update: This recommendation was implemented immediately.
4	Observation: Currently, paper-based/manual purchase orders are completed	PRS should be used for	Housekeeping.	Agreed.	Executive Management Team.
	for some purchases. These may include	purchases		We are including a review	

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the following types of goods: stationery; office services such as key-cutting, florists and minor building maintenance; transcript writer costs; photocopying, scanning and associated costs with photocopying such as stapling, tags and collation; one-off suppliers; and proforma invoices.	of PRS as part of our overall IT strategy for the future, which will cover these issues.	Financial year 2012- 13.
For many of these types of purchases PRS could be used.		
Risk: Not utilising PRS for all purchases leads to inconsistent practices and potentially results in inefficiencies.		

Internal audit report – Risk management (report dated May 2012 – considered at Audit Committee 21 June 2012)

# **Recommendations summary**

Priority Number of recommendations

*Risk 2:* New and emerging risks are not identified or acted on / escalated in a timely and efficient manner.

	Observation/Risk	Recommendation Priority		Management response	Timescale/
					responsibility
1	Observation: The Risk Register is	Consideration should	Housekeeping	The EMT will include in the	Implemented
	presented, discussed and reviewed every	be given to greater		minutes reasons for changes to	February 2012 by

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	six months at Executive Management Team (EMT) meetings, prior to the register being presented to the Audit Committee meeting. The risk register is agreed by the full EMT at this stage.	detail in EMT minutes recording the justification for amendments to the Risk Register.		the risk register.	the Chief Executive & Registrar
	Review of the minutes of EMT meetings confirmed that any changes to risks scoring and/or any new risks being added are clearly recorded. However, there could be more detail provided as to the justification for any such amendments.	, and the second			
	Risk: Decision-making in relation to changes to risk scores, mitigation arrangements and/or the identification of new risks is not clearly recorded.				
2	Observation: The HCPC risk register groups risks under Strategic Risks and risks which are grouped so as to align to Directorates or Departments as identified within respective Annual Work.  Descriptions of risks are brief and there is no description or identification of indicators/warning signs that risks may be crystallising other than through the formal review process of the Register itself by the EMT.	Consideration should be given to identifying 'early warning signals' on the Risk Register, against significant risks, which would 'flag-up' the types of events/occurrences which indicate that the risk is likely to crystallise.	Housekeeping	The EMT would like to examine working examples of such early warning flagging mechanisms, to determine if they are appropriate and workable at HCPC.  We would like Mazars to provide examples from similar sized organisations working in similar areas if possible.	Update: The Executive Management Team gave consideration to this recommendation at their meeting on 28 August 2012. There were concerns in relation to legibility
	Risk: Risks are not clearly defined and	-		Audit Comment We have provided an illustrative	of the risk register and so it was

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understood and early indicators that risk	example of the types of early	decided not to
may be materialising are not recognised.	warning indicators used in other	pursue this
	organisations for consideration.	recommendation.

## Internal audit report – Project management (report dated June 2012 – considered at Audit Committee 21 June 2012)

## **Recommendations summary**

Priority Number of recommendations

Risk 1: Failure to deliver a strategic view of FTP Case Management (Risk 8.9, Council Risk Register).

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
1	Observation: The HCPC Project	Where possible, the	Housekeeping	Although a cost benefit	
	Management Handbook stipulates that	Project Team should		analysis is not performed at	
	once each business case is reported	consider undertaking		the initial prioritisation stage,	
	back, the Portfolio Manager will	an analysis of each		during Initiation of the project a	
	undertake research analysis to establish	project at the post		full budgetary analysis is	
	any potential benchmarking or cost	business case stage.		undertaken and this must be	
	benefits.			approved by EMT before the	
		Feasibility reports		project can move into 'Build'.	
	The Project Portfolio Manager informed	containing cost-		At this point, should EMT	
	us that no such analysis has been carried	benefit or		consider that the project is not	
	out due to limited resources in terms of	benchmarking		worthwhile given the benefits	
	time and staff.	analysis may prove a		expected, the project would not	
		useful tool to EMT		be approved or would be de-	
	Risk: Proper due diligence is not taken	when making a		prioritised.	

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and projects that are unfeasible are approved, resulting in overspends.	decision on project prioritisation.			
Observation: The Project Portfolio Manager will, on an annual basis, circulate a five year list of projects to EMT. To meet the criteria for a major project the project must meet a number of criteria listed in the Project Management Handbook.  On review of minutes of EMT and project briefings, it is not explicit as to how the project has been classified major with respect to meeting the criteria outlined per the handbook.  Risk: It is not clear under what criteria a project is classified major, resulting in potential scrutiny should a project go off course and incorrect allocation of resources.	Consideration be given to explicitly reporting for those projects categorised as 'major' the criteria that have been met within the Project Management handbook.	Housekeeping	The Outline Business Case template has been amended to include a section that documents which qualification criteria have been met.	Completed.
Observation: Issues logs are regularly produced for the Project Management Team meetings.  The log should include the issue, its priority, the date of completion and whether the issue has been resolved.  On inspection of the most recent issues log for the FTP project it was apparent	Issues entered into issue logs are consistently graded by significance with clear reference made to which are the major issues to be included within the exception report.	Housekeeping.	All projects initiated in financial year 2011/12 onwards use a template designed in November 2011 which incorporates this recommendation.	Completed.

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that not all issues had been graded with regard to their significance. Furthermore, it was not immediately clear which issues had been closed.		
Risk: Issues are deemed complete when appropriate action has not been taken, resulting in recurring problems		

Risk 2: Failure to successfully open the Social Worker register (8.12, Council Risk Register)

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4	Observation: The Social Worker register is classed as a statutory project, and as such is immediately determined as a major project and therefore is not required to have a business case. This is stated in the HCPC Projects Listing document. It was noted, however, that this is not mentioned within the Project Management Handbook.	Point two on the Project listing document cover sheet, outlining what necessitates a major project, should be included in the Project Management Handbook.	Housekeeping.	This has now been included in the Handbook.	Completed.
	Risk: New users following the handbook incorrectly classify a statutory project as departmental and not major, resulting in potential non-rolling out of said project.				

Risk 3: Major Project Cost Over-runs (15.3, Council Risk Register).

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Observation/Risk				Recomm	endation	Priority	Management response	Timescale/
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					responsibility
5	Observation: Statutory projects such as the GSCC register do not require a Business Case to be prepared; as such we did not find any document outlining: the project background; project definition; project approach; project team; budget risks; quality plan; or communications plan.  Whilst we can appreciate not requiring a business case, we feel that the project should contain a Project Brief document which sets out the key elements mentioned above.  Risk: Planning issues, with staff unsure of responsibilities and unable to reference a document that clearly outlines the project plan.	HCPC should consider the use of Project Briefs for statutory projects. These should include; - project background; - project definition; - project approach; - project team; - budget risks; - quality plan; and - communications plan.	Housekeeping	All statutory projects will go through the standard project initiation process and will have a Project Initiation Document compiled – in line with all other projects.	
6	Observation: Budgets are set for each project and are outlined in the Project Brief.  A Contingency is built into each budget. This tends to be set using historical costs, supplier contingency quotes and experience from previous projects. The budget is agreed by the Project Manager and the relevant department, and approved through EMT and the Finance	Consideration is given to separating out the contingency costs out of the overall budget in each project to provide greater transparency.  This would also allow the Project Manager to be more explicit about quantifying the precise	Housekeeping	All project budgets will have a specific contingency line included.	

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	and Resources Committee.  However the contingency is not explicitly separated out or reported on as such.  Risk: Lack of transparency means EMT could make decisions not knowing the full picture.	amount allocated to contingency.			
7	Observation: On discussion with the Portfolio Manager we noted that HCPC does not currently undertake an annual analytical review process that collates all projects together and clearly outlines how many have over/under spent or which have met/not met deadlines among other key data.  This was something the Portfolio Project Manager was planning to do, but limited resources has made it difficult to do  Risk: Major trends in overspending and un-timeliness are overlooked, resulting in recurring problems for future projects.	The Project Management team should endeavour to create an annual end of year overall project summary including key data such as: number of projects overspent/underspent; number of deadlines met/not met; departments where deadlines/budgets are met/not met.	Housekeeping	All projects undergo a Project End process. This analyses how a project performed against Time, Cost and Quality. At the end of the financial year – if resources permit – a report will be written to collate all project end report findings.	
8	Observation: Once a project is closed it is no longer monitored by the Project Management Team. The Head of Business Process Improvement has the responsibility for reporting any benefits realised through the 'Near Miss' report.	The Project Management team should log the findings from the Near Miss reports, and informal departmental feedback on closed projects that	Housekeeping	At the end of each project a full project review is undertaken and the success of the project is measured against Cost, Time and Quality. The findings of this review are summarised by	

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Whilst the Project Management Team does get some informal feedback on the success of the project, more formal feedback on completed projects would be beneficial to the Project Management team and should be reviewed for learning lessons moving forward on future projects.

Risk: Useful feedback is not given to the Project Management team resulting in lessons not being learnt and issues repeating themselves in future projects. relate to the project management process, as best practice for learning lessons for future projects. the Project manager in the End Project Report. The report will also assess the effectiveness of the project management processes throughout the life of the project. Therefore all lessons to be learned from the project are captured at this stage and are fed through to future projects.

With regards to the ongoing performance of the product created by the project, this is monitored by the EMT on a monthly basis through the management information pack.

Near Miss reports relate to issues that arise within the business and would rarely be relevant in feeding back lessons learned to the Project Management team.

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