

Audit Committee, 17 June 2015

Internal audit schedule for 2015-16

Executive summary and recommendations

Introduction

Grant Thornton's internal audit programme for 2015-16 was approved by the Audit Committee at the March meeting. Grant Thornton have now agreed dates for each audit with the respective EMT sponsors and have set those out in the attached paper, together with the Committee meeting to which each audit report would be presented.

Decision

The Audit Committee is asked to discuss and approve the attached detailed audit schedule.

Background information

See Grant Thornton's plan, attached

Resource implications

None

Financial implications

Internal audit fees £38,523 plus VAT per annum, increasing by no more than CPI.

Appendices

Grant Thornton's internal audit schedule 2015-16

Date of paper

10 June 2015



Health & Care Professions Council (HCPC)

Internal Audit Plan and Timetable

Internal Audit Year 2015/16

June 2015

Introduction

Following approval of the internal audit plan for the financial year 2015/16, we have consulted with management on the appropriate timing of the individual assignments.

This document sets out the outline timetable for undertaking and reporting the outcomes of internal audit assignments to the Committee.

Grant Thornton LLP June 2015

Audit	Summary question	Associated risks (indicative)	Scope (indicative)	Fieldwork stage (planning to be 4-6 weeks in advance of fieldwork stage)	Targeted Audit Committee reporting date
Review of the registration project (design phase)	Is the registration project (design stage) appropriately focused on defining the business improvements to be secured, the 'to be' business process state and how the technology is expected to support the 'to be' business process (and associated roles and responsibilities)?	 current disconnect between net regulate and finance system continues (in some form), resulting in a missed opportunity to realise efficiencies, reduce data inconsistency risk and realise more joined up and insightful management information the new 'IT system' dictates business process, creating new data and delivery risks skewed balance between short term 'fixes' and longer term 'future proofing' 	Proposed review will have a forward looking focus, working with project sponsor and team, assessing the 'design stage' before the next decision stage - Primary focus is likely to be on how the design stage work has defined future required business process (and user requirements), focusing on making 'to be' business processes lean & cost effective and how the design has been informed by current business processes (internally and at other regulators) - understand how effectively project governance & resourcing has worked in practice for the design stage and any lessons to take into next stage - drawing on our own experience from other regulators	w/c 3 rd August 2015	September 2015
Overarching coherence of key planning models	Is the current way of planning and modelling through separate but integrated models (registrant numbers, fitness to practice, income, five year financial model & business planning) coherent, appropriate and consistent with best practice?	- changes to individual models makes their integration/feed more challenging, creating risks of errors and omission - maintaining separate models with localised knowledge of structure, changes and how they work creates risk if key staff with detailed knowledge leave HCPC - overall approach is not efficient	A spreadsheet modelling specialist will: - assess the design and operation of how the different models are structured, feed each other etc to deliver the information required to plan and control the HCPC business - compare the overall approach of having the separate planning tools, with what we have seen at other relevant clients with similar challenges of being reliant on accurate demand planning.	tbc	November 2015

receiving, assessing and responding to complaints about HCPC's customer service rollation to HCPC's customer service, not fitness to practice) Does HCPC use complaints about HCPC's customer service, not fitness to practice) Does HCPC use complaints elevels coherent and robust? Does HCPC use complaints elevels coherent and robust? Does HCPC use complaints effectively as a learning/improvement process? Does HCPC use complaints effectively as a learning/improvement process? Does HCPC use complaints effectively as a learning/improvement process? Does HCPC use complaints effectively as a learning/improvement consistently, promptly and effectively as a learning/improvement process for changes to regulatory regime) more accessible (ie use of more varied channels), does our practical process for requesting feedback, analysing responses and providing a balanced, representative and evaluative summary to EMT and Council remain robust? Solution about HCPC's customer service in complaints about HCPC's customer service, lookes not have adequated to the complaints of the complaints of the complaints of the complaints of the complaints and responsibilities and practical process for determining at what level within HCPC the response to complaints be created, quality reviewed etc evaluating how past complaints have been dealt with in practice. The review will assess both the design and operation of the consultation process. Specifically this will include understanding: Informs final policy decisions The review expected to operate to maximise the access to stakeholder from last 2/3 years). The case study cases will be selected from last 2/3 years). The case study cases will be selected in consultation with Director of Policy and Standards. We will be mindful of not subtract to the decisions being consulted upon.	Audit	Summary question	Associated risks (indicative)	Scope (indicative)	Fieldwork stage (planning to be 4-6 weeks in advance of fieldwork stage)	Targeted Audit Committee reporting date
consultation process (for changes to regulatory regime) more accessible (ie use of more varied channels), does our practical process for requesting feedback, analysing responses and providing a balanced, representative and evaluative summary to EMT and Council remain robust? follow up audit core financial controls consultation process. Specifically this will include understanding: consultation process. Specifically this will include understanding: - how consultation process is approached to maximise the access to stakeholders different communication mediums provide - the end to end process as it is 'expected to operate' - how selected completed consultations were completed (case study examples to be selected in consultation with Director of Policy and Standards. We will be mindful of only selecting those cases where stakeholder feedback would have been expected to significantly influence the decisions being consulted upon. follow up audit core financial controls framed or not sufficiently tailored for the communication medium understanding: - how consultation process. Specifically this will include understanding: - how consultation process as it is 'expected to operate' - how selected completed consultations were completed (case study examples to be selected in consultation with Director of Policy and Standards. We will be mindful of only selecting those cases where stakeholder feedback would have been expected to significantly influence the decisions being consulted upon. follow up audit core financial Timing needs to support annual NAO work around financial statement assurance. Jan/Feb 2016 March 2016	complaints (in relation to HCPC's	receiving, assessing and responding to complaints about HCPC's customer service levels coherent and robust? Does HCPC use complaints effectively as a learning/improvement	service standards to be expected from HCPC' creates a perception amongst stakeholders that HCPC does not have adequate systems to drive continuous improvements - 'process' is not adequately defined in cross organisational terms, resulting in complaints not being dealt with	 information communicated externally on 'how to complain' on customer service (note: scope does not include fitness to practice related concerns) internal HCPC roles and responsibilities and practical process for receiving (via different communication mediums), assessing and responding to complaints triaging process for determining at what level within HCPC the response to complaints be created, quality reviewed etc evaluating how past complaints have been dealt with 		March 2016
core financial controls Timing needs to support annual NAO work around financial statement assurance. Jan/Feb 2016 March 2016 March 2016		consultation process (for changes to regulatory regime) more accessible (ie use of more varied channels), does our practical process for requesting feedback, analysing responses and providing a balanced, representative and evaluative summary to EMT and Council	framed or not sufficiently tailored for the communication medium important responses get missed, misinterpreted or not adequately reflected in the overall analysis of feedback that	The review will assess both the design and operation of the consultation process. Specifically this will include understanding: - how consultation process is approached to maximise the access to stakeholders different communication mediums provide - the end to end process as it is 'expected to operate' - how selected completed consultations were completed (case study examples to be selected from last 2/3 years). The case study cases will be selected in consultation with Director of Policy and Standards. We will be mindful of only selecting those cases where stakeholder feedback would have been expected to significantly influence the	January 2016	March 2016
controls	follow up audit					
	controls	Timing needs to support annual N	IAO work around financial statement assurance.			



© 2015 Grant Thornton UK LLP. All rights reserved.

"Grant Thornton" means Grant Thornton UK LLP, a limited liability partnership.

Grant Thornton UK LLP is a member firm within Grant Thornton International Ltd ('Grant Thornton International'). Grant Thornton International and the member firms are not a worldwide partnership. Services are delivered by the member firms independently.

This publication has been prepared only as a guide. No responsibility can be accepted by us for loss occasioned to any person acting or refraining from acting as a result of any material in this publication