Stevenage Borough Council
Audit Committee

11 June 2019

Shared Internal Audit Service –
Progress Report

Recommendation

Members are recommended to:
a) Note the Internal Audit Progress Report
b) Note the Status of Critical and High Priority
Recommendations

Contents

1 Introduction and Background

Purpose of Report

1.1   To provide Members with:

   a) The progress made by the Shared Internal Audit Service (SIAS) in delivering the Council's 2019/20 Internal Audit Plan as at 17 May 2019.
   b) The findings for the period 1 April 2019 to 17 May 2019.
   c) The proposed amendments required to the approved Internal Audit Plan.
   d) The implementation status of previously agreed audit recommendations.
   e) An update on performance management information as at 17 May 2019.

Background

1.2   Internal Audit's Annual Plan for 2019/20 was approved by the Audit Committee at its meeting on 19 March 2019. The Audit Committee receive periodic updates against the Annual Internal Audit Plan.

1.3   The work of Internal Audit is required to be reported to a Member Body so that the Council has an opportunity to review and monitor an essential component of corporate governance and gain assurance that its internal audit function is fulfilling its statutory obligations. It is considered good practice that progress reports also include proposed amendments to the agreed Annual Internal Audit Plan.

2 Audit Plan Update

Delivery of Audit Plan and Key Audit Findings

2.1   As at 17 May 2019, 8% of the 2019/20 Audit Plan days have been delivered (calculation excludes contingency days that have not yet been allocated).

2.2   No final reports have been issued for audits from the 2019/20 Audit Plan. The following 2018/19 final reports and assignments have been issued or completed in the period since the last Audit Committee:

Audit Title	Date of Issue	Assurance Level	Number of Recommendations
Debtors	March 2019	Good	One Low/Advisory
Payroll	March 2019	Good	Two Low/Advisory
Housing Rents	March 2019	Good	None
Community Safety	March 2019	Satisfactory	One High, One Medium, One Low/Advisory
TSS Improvement	March 2019	Limited	Two High, Three Medium

Plan – Governance			
Repairs & Voids Service Follow up	April 2019	Satisfactory	One Low/Advisory
Main Accounting	April 2019	Satisfactory	Six Low/Advisory
Cyber Security Follow up	April 2019	NA	Two High, One Medium, Two Low/Advisory
Incident Management Follow up	April 2019	NA	Three High, One Medium
Digital – Connecting to our Customers	May 2019	Satisfactory	Two Medium, One Low/Advisory

2.3   The table below also summarises the position with regard to 2019/20 projects as at 17 May 2019. Appendix A provides a status update on each individual project within the 2019/20 Internal Audit Plan. Details of indicative start dates for the individual projects are also shown in Appendix C.

Status	No. of Audits at this Stage	% of Total Audits
Final Report Issued	0	0%
Draft Report Issued	0	0%
In Fieldwork/Quality Review	3	8%
In Planning/Terms of Reference Issued	5	14%
Allocated	6	17%
Not Yet Allocated	22	61%
Deferred/Cancelled	0	0%

Total	36	100%

Proposed Audit Plan Amendments

2.4   There has been no change to the Audit Plan since it was approved on 19 March 2019.

Critical and High Priority Recommendations

2.5   Members will be aware that a Final Audit Report is issued when it has been agreed ("signed off") by management; this includes an agreement to implement the recommendations that have been made.

2.6   The schedule attached at Appendix B details any outstanding Critical and High priority audit recommendations.

Performance Management

2.7   The 2019/20 annual performance indicators were approved at the SIAS Board meeting in March 2019. Targets were also agreed by the SIAS Board for the majority of the performance indicators.

2.8   The actual performance for Stevenage Borough Council against the targets that can be monitored in year is set out in the table below:

Performance Indicator	Annual Target	Profiled Target	Actual to 17 May 2019
1. Planned Days – percentage of actual billable days against planned chargeable days completed	95%	10% (34/345 days)	8% (28/345 days)
2. Planned Projects – percentage of actual completed projects to draft report stage against planned completed projects	95%	3% (1/36 projects)	0% (0/36 projects)
3. Client Satisfaction – percentage of client satisfaction questionnaires returned at 'satisfactory' level	100%	100%	100% (3 received) Note (1)
4. Number of Critical and High Priority Audit Recommendations agreed	95%	95%	None made at the time of writing this report

Note (1) – the 3 received in 2019/20 relate to 2018/19 projects.

APPENDIX A - PROGRESS AGAINST THE 2019/20 AUDIT PLAN

2019/20 SIAS Audit Plan

AUDITABLE AREA	LEVEL OF ASSURANCE	RECS				AUDIT PLAN DAYS	LEAD AUDITOR ASSIGNED	BILLABLE DAYS COMPLETED	STATUS/COMMENT
		C	H	M	LA				
Key Financial Systems – 74 days									
Main Accounting System (General Ledger)						8	No	0	Not yet allocated
Debtors						6	No	0	Not yet allocated
Creditors						10	No	0	Not yet allocated
Treasury Management						6	No	0	Not yet allocated
Payroll						10	No	0	Not yet allocated
Council Tax						6	No	0	Not yet allocated
NDR						6	No	0	Not yet allocated
Housing Benefits						6	No	0	Not yet allocated
Cash and Banking						6	No	0	Not yet allocated
Housing Rents						10	No	0	Not yet allocated
Operational Audits – 128 days									
Health and Safety						10	No	0.5	In planning
Sickness Absence Management						10	No	0	Not yet allocated
Facilities Management						6	No	2.5	In fieldwork
Rechargeable Works						10	No	2.0	ToR issued
Insurance						6	Yes	2.5	In fieldwork
Garage Investment Programme						10	No	0	Not yet allocated
Cemeteries						6	Yes	2.5	In fieldwork
Herts Home Improvement Agency						2	No	0	Not yet allocated
Town Centre Regeneration – SG1						12	No	0	Not yet allocated
Queensway/Marshgate Redevelopment						12	No	0	Not yet allocated
Recycling						10	No	0	Allocated
Stevenage Museum						6	Yes	1.5	ToR issued

AUDITABLE AREA	LEVEL OF ASSURANCE	RECS				AUDIT PLAN DAYS	LEAD AUDITOR ASSIGNED	BILLABLE DAYS COMPLETED	STATUS/COMMENT
		C	H	M	LA				
Homelessness Reduction Act						10	Yes	0	Allocated
Land Charges						8	No	0	Not yet allocated
Safeguarding						10	Yes	1.5	In planning
Procurement, Contract Management and Project Management – 30 days									
Major Refurbishment Contract						10	No	0	Not yet allocated
Procurement						10	Yes	1.5	In planning
Housing Development Schemes						10	No	0	Not yet allocated
Risk Management and Governance – 12 days									
Risk Management						6	No	0	Not yet allocated
Corporate Governance						6	No	0	Not yet allocated
IT Audits – 24 days									
IT Service Shared Service Agreement						6	Yes	0	Allocated
Cyber Security Follow-up						6	Yes	0	Allocated
Information Management						6	Yes	0	Allocated
Project Management						6	Yes	0	Allocated
Shared Learning and Joint Reviews – 8 days									
Shared Learning						4	No	0	Through year
Joint Reviews – tbd						4	No	0	Through year
Ad Hoc Advice – 3 days									
Ad Hoc Advice						3	No	0.5	Through year
Follow-up Audits – 10 days									
CCTV						5	No	0	Not yet allocated
Street Cleansing						5	No	0	Not yet allocated
Completion of 18/19 Projects – 10 days									
Various						10	Yes	2.5	In progress
Contingency – 5 days									

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AUDITABLE AREA	LEVEL OF ASSURANCE	RECS				AUDIT PLAN DAYS	LEAD AUDITOR ASSIGNED	BILLABLE DAYS COMPLETED	STATUS/COMMENT
		C	H	M	LA				
Contingency						5	No	0	Not yet allocated
Strategic Support – 46 days									
Annual Report and Head of Internal Audit Opinion 2018/19						3	Yes	3.0	Complete
Audit Committee						12	Yes	0.5	Through year
Client Liaison						10	Yes	0.5	Through year
Liaison with External Audit						1	Yes	0.5	Through year
Monitoring						10	Yes	1.0	Through year
SIAS Development						5	Yes	5.0	Through year
2020/21 Audit Planning						5	Yes	0	Allocated
SBC TOTAL		**0**	**0**	**0**	**0**	**350**		**28**	

APPENDIX B – IMPLEMENTATION STATUS OF CRITICAL AND HIGH PRIORITY RECOMMENDATIONS

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
1.	CCTV (joint review) 2018/19.	We recommend that the governance framework for the overall CCTV Partnership is reviewed and confirmed as being fit for purpose, or changed as necessary, and is clearly understood by all parties, including the respective roles and responsibilities of the relevant Members and Officers.	We will draft a governance framework for the overall CCTV arrangements to include: - Governance for Hertfordshire CCTV Partnership - Governance for Hertfordshire CCTV Partnership Ltd. - Governance lines between the Partnership and the Company - Member roles and responsibilities -Officer roles and responsibilities These will be consulted on and agreed by the CCTV Joint Executive and the Company Board of Directors.	CCTV Joint Executive and Company Board of Directors.	1 December 2018. Revised to 31 May 2019.	January 2019. Recommended to the CCTV Joint Executive on 22 January 2019 that a detailed options paper will be put the CCTV Executive Group at its meeting on 10 April 2019. March 2019. On track. May 2019. The Joint Executive did not meet as planned on 10 April 2019. The Draft Framework will now be presented to the Joint Executive on 5 June 2019.	Not yet implemented – continue to monitor.
2.	CCTV (joint review) 2018/19.	We recommend that an appropriate new Partnership Agreement between the current four CCTV Partner Authorities is drawn up and executed. It should clearly include the	We will prepare an updated CCTV Partnership Agreement drafted through the CCTV Officer Management Board to be signed by all four Partner Authorities.	CCTV Officer Management Board.	31 March 2019. Revised to 30 September 2019.	January 2019. On track. March 2019. On track. May 2019.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		specific roles and responsibilities of the Partner Authorities. It should also clearly state the relationship the Partner Authorities have with Hertfordshire CCTV Partnership Ltd. and the function of that company in respect of the overall CCTV Partnership.				In progress.	
3.	CCTV (joint review) 2018/19.	We recommend that the current Shareholders' Agreement for the Company is reviewed to ascertain if it remains fit for purpose and, if so, that the terms are fully complied with.	The Company Directors' will consider this recommendation through their Shareholder Representatives in light of future considerations relating to the future of Hertfordshire CCTV Partnership Ltd.	Company Board of Directors.	31 March 2019.	January 2019. On track. March 2019. On track. May 2019. A review of the shareholder agreement has been undertaken and will be presented to the Joint Executive on 5 June 2019.	Not yet implemented – continue to monitor.
4.	CCTV (joint review) 2018/19.	We recommend that appropriate revised / new Terms of Reference for the CCTV Joint Executive and the CCTV Officer Management Board are drawn up and formally agreed.	Terms of Reference will be updated for the CCTV Joint Executive and a Terms of Reference will be created for the CCTV Officer Management Board.	CCTV Joint Executive and CCTV Officer Management Board.	31 March 2019.	January 2019. On track. March 2019. On track. May 2019. Draft Revised Terms of	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
						Reference to be presented at the Joint Executive on 5 June 2019.	
5.	CCTV (joint review) 2018/19.	We recommend that, once agreed, the revised/new Terms of Reference for the CCTV Joint Executive and the CCTV Officer Management Board are revised / added in the Constitutions for each of the four Partner Authorities, together with the updated Member/Officer representation for both groups.	New Terms of Reference will be submitted for formal incorporation into constitutional arrangements for the four Partner Authorities.	Each of the four Partner Authorities.	31 July 2019.	January 2019. On track. March 2019. On track. May 2019. On track pending approval at the Joint Executive on 5 June 2019.	Not yet implemented – continue to monitor.
6.	CCTV (joint review) 2018/19.	We recommend that a new five-year Business Plan for the overall CCTV Partnership is drawn up and agreed. As a minimum, the plan should be monitored on a monthly basis in terms of achievements against projections and it should be the subject of a full review and refresh annually to cover the next five years ahead on a rolling basis. Besides financial projections, it	We will develop a new five-year rolling Business Plan (with monthly monitoring and full annual reviews) for the overall Hertfordshire CCTV Partnership based on decisions about the future direction of Hertfordshire CCTV Partnership Ltd.	CCTV Joint Executive and Company Board of Directors.	31 July 2019.	January 2019. On track. March 2019. On track. May 2019. Stevenage BC has allocated a new accountant to support the CCTV Partnership - a recharge schedule has been produced and agreed by the CCTV Officer Management	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		should include non-financial aims and targets that should be monitored, reviewed and refreshed on the same basis.				Board - In-year budget forecasts for the CCTV budget are now being produced by Stevenage BC and shared with the partnership authorities - the ownership and status of each camera has been established to inform budget setting for 2019/20 and the legal review - CCTV company is revising its 5 year business plan Following future member decisions on the company and status of various cameras, the CCTV Officer Management Board will ensure that from 2019/20 onwards, detailed annual budgets will be drawn up within the context of an overall direction of travel for the CCTV Partnership for the coming five years.	
7.	CCTV (joint review) 2018/19.	We recommend that all reporting arrangements for the Partner Authorities are formally reassessed, agreed and documented to ensure	Authority reporting arrangements to be included as part of a revised Partnership Agreement, Shareholder Agreement and	CCTV Joint Executive, CCTV Officer Management Board and Company Board of	31 July 2019. Revised to 30 September 2019.	January 2019. On track. March 2019. On track.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		there is complete clarity and transparency of expectations and understanding across all interested parties regarding the need, responsibility, frequency, timing, content, format and distribution of each report required.	Terms of Reference as necessary.	Directors as appropriate.		May 2019. This will be captured as part of the partnership agreement. Revised deadline is 30 September 2019.	
8.	Cyber Security 2017/18.	The Council must define its position regarding its ability to identify and manage devices that are connecting to its IT network. A solution must be able to manage devices that have physically connected to the Councils' IT networks. Devices that have connected to the network should be reviewed and, where they are found to have not been authorised, they should be removed. The solution should include the use of personal devices to connect to the IT network.	This will be resolved with the correct solution not only for devices but also for ports on all devices that need to be restricted.	Strategic ICT Partnership Manager.	31 March 2019.	January 2019. This is a new addition and the management response opposite is therefore the latest comment. March 2019. On track. May 2019. The Intune solution which is part of Microsoft 365 will be implemented this year and used to control mobile devices. Network solutions are being investigated by the security & network team.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		Furthermore, management should put arrangements in place to monitor network access on a regular basis.					
9.	Cyber Security 2017/18.	Management should perform a full review of the Councils' perimeter firewall rules and, where necessary, remove inactive or unnecessary rules unless explicitly required. The 'Any' rules should be replaced with port object groups that contain an explicit set of ports as required for the rule. Management should also ensure that all users that have access and can make changes to any of the Councils' external firewall rules have individual accounts and should put arrangements in place for monitoring all configuration changes. Furthermore, management should establish a record of how all firewalls, both	The majority of the council's firewalls need replacing and part of that work will require the correct configuration and management. ICT Partnership Manager has been tasked to restructure the ICT department and as part of that to have dedicated security and network staff to resolve and maintain control of these areas.	Strategic ICT Partnership Manager.	31 March 2019.	January 2019. This is a new addition and the management response opposite is therefore the latest comment. March 2019. On track. May 2019. Replacement of Firewalls will take place following procurement from April 2020. Firewalls are being evaluated and recorded by the Security & network team.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		internal and external, have been configured and should review the rules for appropriateness on a routine basis.					
10.	Community Safety 2018/19.	a) The Council should ensure that a community safety referral form, action plan and risk assessment are in place for all relevant cases, in order to mitigate any potential delays in escalating the cases. In addition, monthly spot checks should be conducted on a sample of cases for quality assurance purposes to ensure that the required documents are in place. b) Action plans should clearly outline all actions agreed, communication intervals and milestones for delivery, so they can be entered into the ReACT system. In instances where a referral form and an action plan are not required, the reason should be	Training has commenced with other departments and attendance at Team Meetings to highlight the importance of the Referral Form, Action Plan and Risk Assessment. Dip sampling of cases will be completed by the Senior Community Safety & Partnerships Officer on a monthly basis to ensure that the referral pack is in place. A step on ReACT will be introduced so officers put a reason in for not having an Action Plan or Risk Assessment (this is usually in police cases). Due to the Paperless Project we have introduced in the department, letters	Community Safety Manager and Senior Community Safety and Partnerships Officer.	30 April 2019. Commencing April 2019 and ongoing. 30 April 2019. Implemented.	<u>May 2019.</u> This is a new addition and the management response opposite is therefore the latest comment.	Partially implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		clearly recorded in ReACT. c) Satisfaction surveys or telephone feedback surveys should be sent to the relevant individuals after each case closure in order to ensure sufficient feedback is collected and can be used to monitor and improve performance.	are not sent out. We have introduced a case step that requires the officer to telephone/email or send a letter to introduce themselves as the Officer dealing with the case. Coaching has been introduced for team members to emphasise the importance of surveys and the importance of service improvement. As part of the local Performance Indicators a target of 15 surveys a month has been introduced to other teams. Team members are attending other team meeting on a rolling program to highlight the work of the team and the importance of having the referral and the implications if we don't have the referral, action plan or risk assessment.		Commenced March 2019 and ongoing. Commenced February 2019 and ongoing. Commenced March 2019 and ongoing.		
11.	TSS Improvement Plan – Governance.	Management should complete the review of the IT policies and	Meta - compliance must be fully implemented first to	ICT Strategic Partnership Manager.	Creation - April - August 2019 Deployment -	May 2019. This is a new addition and the management	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		tailor them to the needs of both Councils. The purchased IT policy software should be deployed without any further delay and the policies should be made available to all members of staff. Management should track and monitor staff attestation and responses. Furthermore, management should review and, where necessary, revise the Service's IT procedures so that they are consistent across both Councils. The procedures should be documented and communicated to all members of staff.	assure acceptance and compliance from staff and this cannot be rolled out till Azure-AD project is finalized. This project has been assigned to Project Manager Roxanne Owedele. Time-line as follows: Azure AD - end of May Implementation of Meta - Compliance – end of July Deployment of polices as written on intranet - as completed Deployment of policies via Meta-Compliance two a month – Final completion November During that period policies will be confirmed and placed on the intranet, with a number that must be written or amended. To get staff fully compliant will require roll-out of Meta - Compliance. There are two classifications, policies and		November	response opposite is therefore the latest comment.	

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
			protocols; policies are documents which all staff need to adhere to and protocols are internal polices for ICT staff only.				
			Policies:				
			Acceptable Usage Policy – Written and gone to HR for consultation				
			Data Protection Policy – Completed and on intranet				
			Mobile Device Policy – In draft security team to approve				
			ICT Monitoring Policy - Security team to write				
			ICT Remote Working Policy - Security team/MGT team to write				
			Social Media Policy – Completed and on intranet				
			Data sharing policy (Contractors) - Security team to write				
			Protocols:				
			Security Breach response Protocol - Security team to write				
			Change Control Protocol – In draft				

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12.	TSS Improvement Plan – Governance.	Representatives from both Councils should agree a shared set of expectations for how technology will be used to achieve their respective strategic objectives. These expectations should form the basis for a defined IT Strategy for the Shared IT Service, which should include as a minimum: The expectations for the levels of service to be provided The metrics for monitoring the performance of the Shared IT Service. The performance of the Service should be reviewed on a routine basis by the ICT Partnership Board and measured against the defined metrics and key performance indicators.	ICT strategy & Roadmap are being written in collaboration with Microsoft Navigator consultancy project.	ICT Strategic Partnership Manager.	August 2019.	May 2019. This is a new addition and the management response opposite is therefore the latest comment.	Not yet implemented – continue to monitor.
13.	Cyber Security follow up 2018/19.	Management should establish a network access control to block unknown or unauthorised devices from connecting to the	The Council has created a Security & Network Team who has been tasked to look at security / network tools. There	ICT Strategic Partnership Manager.	Network Tools July 2019. Intune October 2019.	May 2019. This is a new addition and the management response opposite is therefore the latest	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		Council's IT network. This should include restricting the ability to physically connect to the IT network. Where there is a demonstrable need for a device to connect to the IT network, the Service should require: The purpose for the connection has been recorded Appropriate security controls have been enabled on the device connecting to the IT network The period of time that the device will require the connection All connections are approved before being allowed to proceed. Devices connected to the IT network should be reviewed on a routine basis.	is also a planned upgraded Office 365 and in particular Intune to manage all mobile (non-network connected) devices. The plan is to ensure that only known devices are allowed to access Council systems.			comment.	
14.	Cyber Security follow up 2018/19.	There should be a record of the configuration of the Council's firewalls, which includes but is not limited to: The purpose of all of	The Council has created a Security & Network Team who have been tasked to look at replacing the entire Firewall (and switch) estate. As	ICT Strategic Partnership Manager.	November 2019.	May 2019. This is a new addition and the management response opposite is therefore the latest comment.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		the rules The expected configuration and activity for each rule The member of staff that requested and approved the rule The configuration of the firewall should be reviewed on a routine basis. The Service should develop a Firewall rule policy to provide the list of controls that are required to secure firewall implementations to an approved level of security.	part of this work all firewall configurations will need to be reviewed and recorded.				
15.	Incident Management follow up 2018/19.	Management should update the Council's IT disaster recovery plan to include the procedure for establishing all IT services at a single data centre. A complete IT Disaster Recovery scenario test on all applications and systems should take place to provide assurance that recovery could happen within the expected time frame.	We have started a project to install a secondary Microware link between our data centres. This will give us a resilient link where either can be down, and connectivity remains. Also, with our upgrade to horizon VDI, we are installing hardware which will allow either site to run 100% of capacity allowing the complete downing of one site	ICT Strategic Partnership Manager.	August 2019 – Microwave Link. October 2019 - VDI upgrade.	<u>May 2019.</u> This is a new addition and the management response opposite is therefore the latest comment.	Not yet implemented – continue to monitor.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		The Service should document the results of the test to determine the further actions required to improve the efficacy of the plan.	for upgrade work but will of course allow for full capacity in the event on one data centre being of offline.				
16.	Incident Management follow up 2018/19.	Management should update the Council's IT disaster recovery plan to include the procedure for establishing all IT services at a single data centre. A complete IT Disaster Recovery scenario test on all applications and systems should take place to provide assurance that recovery could happen within the expected time frame. The Service should document the results of the test to determine the further actions required to improve the efficacy of the plan.	Also, with our upgrade to horizon VDI, we are installing hardware which will allow either site to run 100% of capacity allowing the complete downing of one site for upgrade work but will of course allow for full capacity in the event on one data centre being of offline.	ICT Strategic Partnership Manager.	August 2019 – DR review. October 2019 - VDI upgrade.	May 2019. This is a new addition and the management response opposite is therefore the latest comment.	Not yet implemented – continue to monitor.
17.	Incident Management follow up 2018/19.	Management should define the processing capacity threshold at which it is no longer possible for a data centre to operate as	The UPS provision has been designed to cover the servers in the data centre only during the small time period required for	ICT Strategic Partnership Manager.	Completed.	May 2019. This is a new addition and the management response opposite is therefore the latest comment.	Implemented.

No.	Report Title	Recommendation	Management Response	Responsible Officer	Implementation Date	History of Management Comments	SIAS Comment (17 May 2019)
		the single data centre. This should be monitored and, where exceeded, appropriate action should be taken.	the generator to kick into action. Staff will lose access to their monitor for that period but due to the VDI provision will not lose any work. This has been tested as normal, but we also had a recent small power outage which caused the generator to kick in and was shown to work as configured.				

APPENDIX C – AUDIT PLAN ITEMS (APRIL 2019 TO MARCH 2020) – INDICATIVE START DATES AGREED WITH MANAGEMENT

Apr	May	Jun	July	Aug	Sept
2018/19 Audits Requiring Completion **(In progress)**	Safeguarding **(In planning)**	Homelessness Reduction Act (Allocated)	Land Charges (Not yet allocated)	Street Cleaning (follow up) (Not yet allocated)	Herts Home Improvement Agency (Not yet allocated)
Insurance **(In fieldwork)**	Procurement **(In planning)**	Recycling (Allocated)	Sickness Absence Management (Not yet allocated)	CCTV (follow up) (Not yet allocated)	IT Shared Service Agreement (Allocated)
Cemeteries **(In fieldwork)**	Facilities Management **(In fieldwork)**	IT Project Management (Allocated)			Town Centre Regeneration – SG1 (Not yet allocated)
Stevenage Museum **(ToR issued)**	Rechargeable Works **(ToR issued)**	Health and Safety **(In planning)**			Garage Investment Programme (Not yet allocated)
Oct	**Nov**	**Dec**	**Jan**	**Feb**	**Mar**
Housing Development Schemes (Not yet allocated)	Council Tax (Not yet allocated)	Payroll (Not yet allocated)	Risk Management (Not yet allocated)	Corporate Governance (Not yet allocated)	
Major Refurbishment Contract (flat blocks) (Not yet allocated)	Business Rates (Not yet allocated)	Debtors (Not yet allocated)	Housing Rents (Not yet allocated)	IT Cyber Security (follow up) (Allocated)	
Queensway/Marshgate Redevelopment (Not yet allocated)	Housing Benefits (Not yet allocated)	Creditors (Not yet allocated)	Main Accounting (Not yet allocated)		
Cash & Banking (Not yet allocated)	IT Information Management (Allocated)	Treasury Management (Not yet allocated)			

Assurance Level	Definition
Good	The design and operation of the internal control framework is effective, thereby ensuring that the key risks in scope are being well managed and core objectives will likely be achieved. There are minor reportable audit findings.
Satisfactory	The internal control framework is largely working well in managing the key risks in scope, with some audit findings related to the current arrangements.
Limited	The system of internal control is only partially effective, with important audit findings in key areas. Improvement in the design and/or operation of the control environment is necessary to gain assurance risks are being managed to an acceptable level, and core objectives will be achieved.
No	The system of internal control has serious gaps, and controls are not effective in managing the key risks in scope. It is highly unlikely that core objectives will be met without urgent management intervention.

Priority Level		Definition
Corporate	**Critical**	Audit findings which, in the present state, represent a serious risk to the organisation as a whole, i.e. reputation, financial resources and / or compliance with regulations. Management action to implement the appropriate controls is required immediately.
Service	**High**	Audit findings indicate a serious weakness or breakdown in control environment, which, if untreated by management intervention, is highly likely to put achievement of core service objectives at risk. Remedial action is required urgently.
	Medium	Audit findings which, if not treated by appropriate management action, are likely to put achievement of some of the core service objectives at risk. Remedial action is required in a timely manner.
	Low / Advisory	Audit findings indicate opportunities to implement good or best practice, which, if adopted, will enhance the control environment. The appropriate solution should be implemented as soon as is practically possible.