



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 15 March 2023

Report title: Internal Audit Report – Update on Progress of Audit Management Actions

Lead Member: Councillor David Carroll

Report sponsor: Mark Hemming – Director of Finance and Assets

Author and contact: Maggie Gibb – Chief Auditor,
Maggie.Gibb@buckinghamshire.gov.uk, 01296 387327

Action: Noting.

Recommendations: That Members note the progress on the Annual Internal Audit Plan.

Executive summary: The purpose of this paper is to update Members on the progress of the implementation of audit actions as at 10 February 2023.

Any further progress against outstanding actions will be verbally presented to the Overview and Audit Committee at the meeting on 15 March 2023.

In total there are 96 audit actions to report on the status of which are classified as follows:

Implemented – 79/96 (82%)

In-progress - 5/96 (5%)

Past Due date (In-progress) – 12/96 (13%)

Internal Audit continues to actively monitor implementation of all outstanding audit actions throughout the year.

Financial implications: The audit work is contained within the 2022/23 budget.

Risk management: There are no risk implications arising from this report.

Legal implications: There are no legal implications arising from this report.

Privacy and security implications: There are no privacy and security implications arising from this report.

Duty to collaborate: Not applicable.

Health and safety implications: There are no health and safety implications arising from this report.

Environmental implications: There are no environmental implications arising from this report.

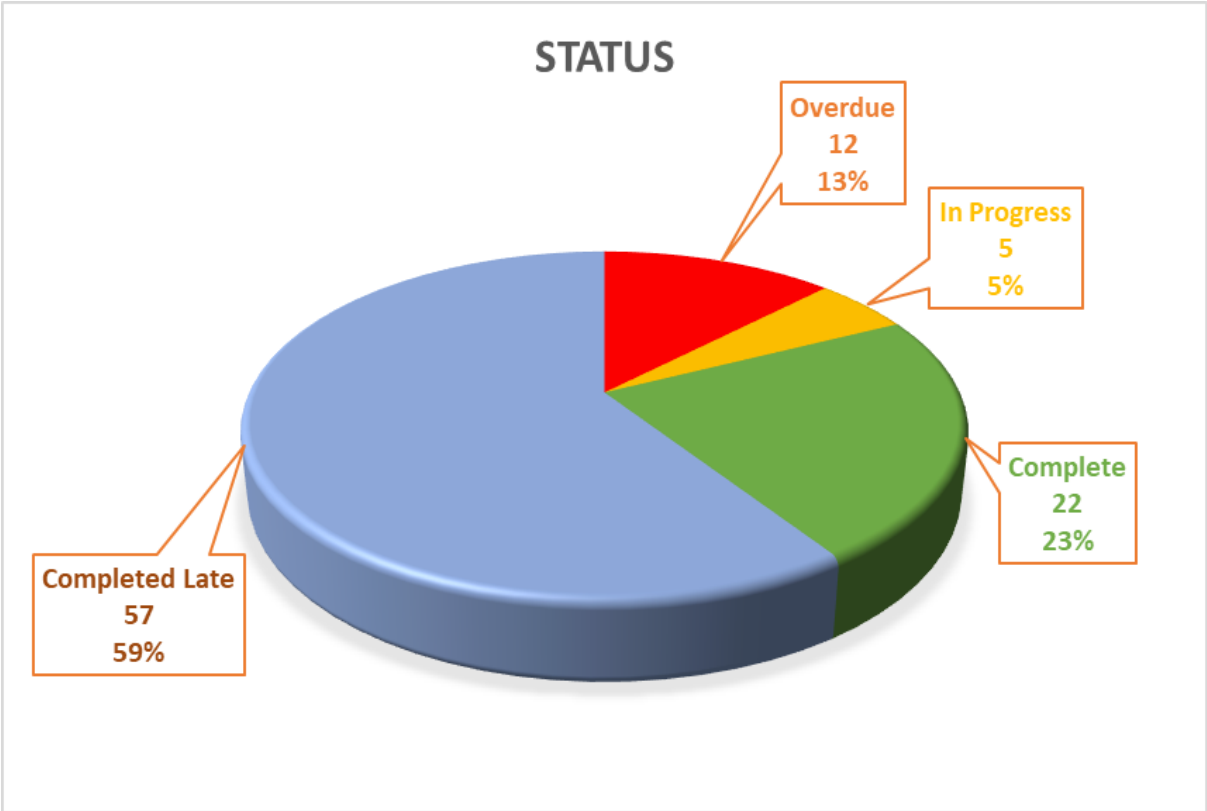
Equality, diversity, and inclusion implications: There are no equality and diversity implications arising from this report.

Consultation and communication: Not applicable.

Background papers:

Appendix	Title	Protective Marking
A	Status of Audit Management Actions – February 2023	Not applicable

Appendix A – Status of Audit Management Actions





BMKFA Overdue Audit Management Actions

Audit Title & Management Action	Description	Due Date	Priority	Action Progress	Latest Note
<p>BMKFA 2021 2110 Asset Management System (5) Recording of Assets – Overdue tests</p>	<p>Finding: Fire crews must undertake regular stock checks and tests of equipment at fire stations and on appliances (vehicles). The frequency of these tests and inventory checks depends on the individual asset's testing schedule, usually dictated by the PIT number assigned to the asset. Results of tests and inventory checks should be recorded on Redkite by crews using either a handheld scanner or computer. Review of the report of tests due at Beaconsfield Fire Station run from Redkite found that 286 of the 288 tests listed had passed the due date as of 12 November, with one due date listed as being 13 February 2014 and 118 listed as having due dates of 2019 or earlier. A similarly high number of overdue tests were noted for Aylesbury Fire Station as of 3 November 2020. All 179 tests were overdue when viewed against the listed due date. Through discussion with the Station Commander, we were unable to establish whether these tests had been carried out or whether this was a system issue or data quality issue. A sample of 20 assets listed on Redkite was examined to confirm whether equipment tests and inventory checks were carried out promptly and accurately recorded on Redkite. The period covered was from November 2019 to November 2020. Of the 20 assets tested:</p> <ul style="list-style-type: none"> • In 11 cases, assets were not tested in line with the frequency required by tests loaded onto Redkite. • In four cases, the most recent test was not carried out within a timely manner of the previous test. • In one case, no inventory checks or tests had been carried out since March 2018. In two other cases, an inventory was carried out promptly. However, no tests were carried out on the equipment since 2018 or earlier. In one of these cases, the most recent test was listed as being carried out in October 2014. • One asset was not found during an inventory check. <p>Risk: If tests are not carried out periodically and promptly in line with the testing schedule loaded into Redkite for the asset, there is a risk that defective or missing equipment is not detected, increasing the risk that equipment is obsolete or unsafe or that stock levels are not sufficient.</p> <p>Action: Review of testing frequencies and recording of all equipment on Red Kite. Additional training for the operational crew in the recording of tests.</p>	<p>30-Jul-2021</p>	<p>High Priority</p>	<p>99%</p>	<p>Update from Station Commander R&D 24/01/2023</p> <p>Equipment manuals have been updated and crossed checked against the corresponding asset management system to ensure information is correct across all formats</p> <p>These manuals have been uploaded to the intranet.</p> <p>As new equipment in introduced equipment manuals will be created and uploaded.</p> <p>Action completed, though pending evidence.</p>
<p>BMKFA 1819 1947 Project Management BLH (2) The Hub Performance</p>	<p>Finding During the Audit it was confirmed that the HUB have had difficulties with technical support; which has had an impact of the timeliness of design work, changes or updates and which in turn has led to delays in providing information that is required by Kingeree – the construction firm. The Quantity Surveyor maintains a schedule of delays caused by the HUB and the associated costs. It was confirmed that any financial implications that arise as a result of the HUB's poor performance could potentially be recoverable. However Audit found that whilst these potentially recoverable costs are reflected in the Budget Monitoring Financial Statements, they are not separately identified as attributable to any party as this will be the subject of negotiation between all parties depending on final outcomes at the conclusion of construction. The risk of HUB poor performance has been recorded in the risk register. It was confirmed that the Director for the HUB Professional Services has been made aware of potentially</p>	<p>31-Oct-2019</p>	<p>Medium Priority</p>	<p>90%</p>	<p>Update from Director of Finance and Assets 23/01/22:</p> <p>Work to substantiate the value of the claim is ongoing.</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Progress	Latest Note
	<p>recoverable costs and the issues that were causing poor performance have been addressed.</p> <p>Risk Where the impact of poor performance is not completely and accurately reflected in the budget and/or risk register, this may lead to project overspend as the budget will not be forecasting all expected costs.</p> <p>Action The necessary actions to deal with potential financial loss arising from delays on the part of HUB have already been addressed during 2018 and a significant improvement has been seen. The current delay in the construction programme (5-6 weeks) has not altered for some months. Both the HUB and Kingerlee have a responsibility to mitigate any delay as much as possible and with some 8 months of construction still to take place at the time of writing (Feb 2019) they must both maintain the opportunity to do so. Only at post construction and during the period when the final account will be negotiated and agreed, will any financial loss due to delays or failures be attributed. The Director of HUB's parent company (Integral UK Ltd) has been in discussions with both DFA and Property Manager and he is well aware of the potential claim the Authority may have in due course. The financial statements produced by the QS do show all costs (i.e. worst case) but do not at this stage set out which potentially claimable costs are attributable to which parties. The Authority's officers will continue to maintain dialogue with senior representatives at both the HUB and Kingerlee over any potential situation (either worsening or improving) that may lead to a claim.</p>				
BMKFA 2021 2119 GDPR (4) Retention and Destruction	<p>Finding: The Records Retention and Disposal Information Asset Register procedure states that information stewards are responsible for ensuring the timely archiving and/or destruction of records and advising the Information Owners where it is believed a retention timescale should be amended following legislation or business needs. The Information Governance and Compliance Manager is responsible for maintaining and reviewing records management processes. The retention schedules for departments and stations are defined within the ROPA. The Authority relies on stewards to ensure that electronic data is disposed of per the retention schedule. However, there is no mechanism in place to ensure this takes place.</p> <p>Risk: If no adequate processes are in place to ensure lawful retention schedules and/or destruction of electronic records, there is a risk of accidental and/or unlawful alteration, destruction, or authorised personal data disclosure.</p> <p>Action: Agreed. A mechanism to review data disposals in line with the retention schedules will be formalised and monitored.</p>	31-Dec-2021	Medium Priority	<input type="text" value="80%"/>	<p>Update from Director of Legal & Governance 26/01/2023</p> <p>With the agreement put in place with the preferred provider on 11/1/2023, it is intended that this will be progressed as a project to commence Q4/Q1.</p>
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (3) Implementation Strategy and Project Delivery - Project Implementation	<p>Finding Examination of the BMKFA Delivery Plan found that it included:</p> <ul style="list-style-type: none"> • an initial project plan; • use of resources; • project management; • a design release schedule and • an Indicative Procurement Timetable. <p>However, from a review of the design release schedule, we found that there were 18 activities that did not have the actual release dates recorded, of which 12 activities did not have a supplementary note to give a clear indication as to why the target design release date was not met and what the related construction issue may be.</p>	30-Nov-2022	Medium Priority	<input type="text" value="0%"/>	<p>Update from Director of Finance & Assets 23/01/2023</p> <p>Evaluation paused pending further work on potential claim.</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Progress	Latest Note
n Process	<p>Risk If a clear project implementation process is not documented, there is a risk that project objectives, including time scales and budgets, are not met, leading to financial loss to the Fire Authority.</p> <p>Action The design release schedule was the responsibility of the main contractor, and due to the nature of the project, target deadlines for some activities were added as the project progressed. The "learning points" document produced by the previous Director of Finance and Assets highlighted that there may be more suitable methods of engaging a main contractor (e.g., design and build) in the future. This will be considered within a formal "lessons learned" report (see also findings 7 and 8).</p>				
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (8) Lessons Learnt	<p>Finding Examination of documentation found that the former Director of Finance and Assets produced a 'Blue Light Hub – Learning Points' document. This details project learning points from its initiation to February 2020. Following the completion of the Blue Light Hub build and transition of BMKFA, SCAS and TVP staff members, no formal lessons learned activity has occurred at the time of testing.</p> <p>Risk If a formal lessons learned activity is not undertaken and reported on, there is a risk that insights and learning from the project are lost.</p> <p>Action Following publication of this audit report, a formal "lessons learned" report will be presented to the Portfolio Management Office, Senior Management Board and the appropriate Member Committee.</p>	30-Nov-2022	Medium Priority	0%	<p>Update from Director of Finance & Assets 23/01/2023:</p> <p>Not yet commenced. Revised due date 30 November 2023.</p>
BMKFA 2122 2228 PMO Assurance (1) PMO Key Performance Indicators	<p>Finding The Head of Transformation, Technology and PMO confirmed that the Authority does not currently have KPIs in place to report against concerning the PMO but confirmed that this was something they would be interested in implementing.</p> <p>Risk If there are no KPIs in place, the authority could miss identifying instances of poor performance and fail to address problems leading to repeated mistakes in future projects.</p> <p>Action KPIs for the PMO will be developed and these will be reported to the Senior Management Team periodically.</p>	30-Jun-2022	Medium Priority	83%	<p>Update from Head of Technology, Transformation & PMO, 02/02/2023:</p> <p>Two PMO measures continue to be presented through our governance process.</p> <p>Work continues to provide the next level of detail for PMO.</p>
BMKFA 2122 2228 PMO Assurance (2) The PMO's Standardisation of Project Processes	<p>Finding The Head of Transformation, Technology, and PMO provided the Authority's guidelines around a project's process to ensure consistent and effective delivery. This included a detailed PMO presentation, a project life-cycle and various templated documents available for project managers. Furthermore, evidence was provided of an eLearning package and a page on the Fire Authority's intranet for PMs to review, explaining the process. In its design, the PMO's outlined a clear framework for consistency and successful delivery of projects. However, testing a sample of projects commencing after the PMO's creation outlined inconsistencies in the process they should follow and discrepancies regarding which documentation was completed for each project. The findings are as follows:</p> <ul style="list-style-type: none"> • 1/3 projects is without a completed project mandate; • 2/3 projects are without a completed business case; • 1/3 project is without a completed PID; • 3/3 projects are without a completed risk register which is key to reviewing the risks and controls in place within a project; • 3/3 projects are without a completed project plan, resulting in a lack of progress monitoring during the life 	30-Jun-2022	Medium Priority	70%	<p>Update from Head of Technology, Transformation & PMO, 02/02/2023:</p> <p>Project Management eLearning package is ready to roll out. Launch plan to be agreed.</p> <p>A KPI relating to following project process is captured in the draft KPI's in action BMKFA 2122 2228 PMO Assurance (1) PMO Key Performance Indicators.</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Progress	Latest Note
	<p>of a project;</p> <ul style="list-style-type: none"> • 3/3 projects are without a highlight report that updates management on key areas such as managing risks and their impact; and • 3/3 projects are without evidence of stakeholder communication for any of the projects that have commenced after creating the Authorities PMO function, despite stakeholders being outlined within the early project documentation. <p>Furthermore, we were informed that Property capital projects do not follow the process outlined within the PMO's lifecycle document. Consequently, they did not have evidence of the key documentation such as mandates, PID, business case and risk registers. These are key documents for successful project delivery and should be evident across all types of projects.</p> <p>Risk If project managers fail to follow the standardised process set out by the PMO and neglect certain documentation which should be completed, best practice will not be consistently followed throughout the Authority. This could result in the failure to deliver projects to the standard expected.</p> <p>Action 1. Launch Project Management e-Learning package. 2. Document a Property capital project process. 3. Introduce a PMO KPI relating to following the project process as part of finding 1.</p>				
BMKFA 2122 2228 PMO Assurance (3) Projects Over Budget/Time Request Approval	<p>Finding The Head of Transformation, Technology and PMO confirmed that the Authority does not currently have an official process for extensions and instead held informal conversations with project managers. They encourage RAG ratings for updates within a project regarding budgets and timescales. However, going beyond estimated figures does not require approval. We were informed that this was due to the PMO being in its infancy.</p> <p>Risk If there is no formal process to request additional budget requirements and timescale extensions, the budget may be exceeded without the Authority's notice and approval, putting unnecessary pressure on the Authority's overall budget.</p> <p>Action Refresh and relaunch the change control process relating to projects.</p>	30-Jun-2022	Medium Priority		<p>Update from Head of Technology, Transformation & PMO, 30/01/2023:</p> <p>The training has been delayed linked to BMKFA 2122 2228 PMO Assurance (2) The PMO's Standardisation of Project Processes</p>
BMKFA 2122 2234 Procurement Governance and Compliance (7) Contract Performance Monitoring	<p>Finding We tested a sample of five procurements and noted that in two cases where procurements were conducted in partnership, the contracts required performance monitoring meetings no less than every six months. However, we found that in one case (TW Pumping Appliances), no such meetings had taken place since the procurement team of the lead authority, Oxfordshire County Council was no longer extant. In the remaining case (Water Hygiene Monitoring & Related Services), we were provided with certificates showing the performance of the contract by the supplier, but no formal meetings were taking place.</p> <p>Risk If predetermined meetings are not adhered to, the Authority will have limited oversight regarding the performance of a contract. Subsequently, it may be exposed to non-compliant suppliers/service providers, meaning the Authority does not achieve value for money.</p> <p>Action Performance monitoring meetings should be undertaken by the contract owner rather than the Procurement Team. Guidance on managing the performance of contracts will be included in procurement guidance to be disseminated to other departments (see also Finding 1).</p>	30-Sep-2022	Medium Priority		<p>Update from Procurement Manager 27/01/2023</p> <p>Management Framework 2022-2025 published.</p> <p>Contract Management Training Package completed and available to all staff from March 2023</p> <p><i>Action completed per feedback, though still pending evidence</i></p>

Audit Title & Management Action	Description	Due Date	Priority	Action Progress	Latest Note
BMKFA 2122 2228 PMO Assurance (5) Centralised System	<p>Finding The Head of Transformation, Technology and PMO confirmed there was no centralised system for the storage of project documentation. There was evidence of a project dashboard, presented on an excel spreadsheet, which summarised the progress of all projects underway and in the review stage. This stated some key dates, the names of PMs and progress updates. However, there is no evidence of a system where documents can be accessed for each project. This would be beneficial from an audit trail perspective and allow PMs to follow previous projects' processes and learn from their mistakes.</p> <p>Risk Without a centralised system to store and access project documentation, there are missed opportunities to share important lessons learned across the organisation and avoid re-occurrences.</p> <p>Action Review the options available and launch a centralised system to store/review/access project documentation.</p>	30-Sep-2022	Low Priority	0%	<p>Update from Head of Technology, Transformation & PMO, 02/02/2023:</p> <p>This has not yet been started but will be part of the scope of reviewing our Performance management system requirements</p>
BMKFA 2122 2234 Procurement Governance and Compliance (6.1) Compliance with CSO 8.1 (c)	<p>Finding In two cases where the procurement was conducted under a partnership, a comparative assessment was made for the applicants regarding technical competence and financial health. However, no evaluation was made of the health and safety record of the potential service providers as per Standing Order 8.1(c) "Where the total value of the contract is more than £50,000, Officers must ensure that potential candidates are asked to provide sufficient detail to check their health and safety record".</p> <p>Risk If CSOs related to the assessment of a contractor's health and safety standards are ignored, The Authority may procure services from suppliers with health and safety standards below that expected or required by the Authority, potentially leading to non-compliance with standards that the Authority is required to adhere to.</p> <p>Action Standing Orders to be reviewed and guidance on the updated Orders and compliance to be added to guidance to be issued to Officers.</p>	30-Sep-2022	Low Priority	99%	<p>Update from Procurement Manager 27/01/2023</p> <p>Revised Standing Orders relating to Contracts approved by the Fire Authority December 2022.</p> <p>Published to the organisation December 2022.</p> <p>Procurement Guidance Training Package completed and available to all staff by March 2023.</p> <p><i>Action completed per feedback, though still pending evidence.</i></p>
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (7) Monitoring of Project Benefits	<p>Finding The Director of Finance and Assets and the Property Manager established that there are no formal processes to monitor the continued benefits of the project since the transition of the three services. The Director of Finance and Assets informed us that the Portfolio Management Office will assess strategic level views.</p> <p>Risk If project benefits are not monitored there is a risk that stakeholders are not aware of the improvements resulting from the project, and additionally whether, or not, the expected project benefits have been met.</p> <p>Action This will be included within a formal "lessons learned" report (see also findings 3 and 8).</p>	30-Nov-2022	Low Priority	0%	<p>Update from Director of Finance & Assets 23/01/2023:</p> <p>Evaluation paused pending further work on potential claim.</p>