INTERNAL AUDIT FOLLOW UP OF RECOMMENDATIONS REPORT

Oxford City Council

2025/2026

IDEAS | PEOPLE | TRUST

Agenda Item 11

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SUMMARY

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2023/24	Total Recs	H	M	L	To follow up	Previously complete		Complete		In progress		Overdue		Not Due	
						H	M	H	M	H	M	H	M	H	M
Income Generation	1	1	-	-	1	-	-	-	-	-	-	1	-	-	-
Building Control	4	-	3	1	3	-	1	-	1	-	-	-	1	-	-
Recruitment and Retention	6	-	5	1	5	-	1	-	1	-	-	-	3	-	-
Selective Licensing	3	-	3	-	3	-	2	-	-	-	-	-	1	-	-
Data Analytics	4	1	1	2	2	-	1	-	-	-	-	1	-	-	-
Total	18	2	12	4	14	-	5	-	2	-	-	2	5	-	-

2024/25	Total Recs	H	M	L	To follow up	Previously complete		Complete		In progress		Overdue		Not Due	
						H	m	H	M	H	M	H	M	H	M
Accounts Payable	7	-	3	4	3	-	-	-	2	-	-	-	-	-	1
Risk Management	4	-	4	-	4	-	-	-	2	-	2	-	-	-	-
Data Protection	5	1	3	1	4	-	-	-	-	1	1	-	-	-	2
Total	16	1	10	5	11	-	-	-	4	1	3	-	-	-	3

SUMMARY

2023/24

Please find below a summary of the status of implementation of recommendations arising from reports issued in 2025/2026.

▶ One high recommendation remains overdue relating to the Income Generation audit, this is due to delays in the procurement process. See Page 9 for details.

▶ One high recommendation for Data Analytics has made progress however, we will continue to monitor this recommendation until it is fully embedded into Council processes. There is an audit ongoing that is likely to provide updated recommendations in this area. See Page 9 for details.

▶ Three medium recommendations for Recruitment and Retention are now classed as overdue and will continue to be followed up ahead of the next Audit and Governance Committee meeting – See Pages 9 - 10. One recommendation for this review was completed since the last follow up. See Page 4 for details.

▶ Two medium recommendations relating to Building Control and Selective Licensing have now missed two implementation dates and are therefore classed as overdue; a further revised implementation date has been provided (see Pages 9 – 10 for details). One recommendation for Building Control has been implemented - See Page 4 for details.
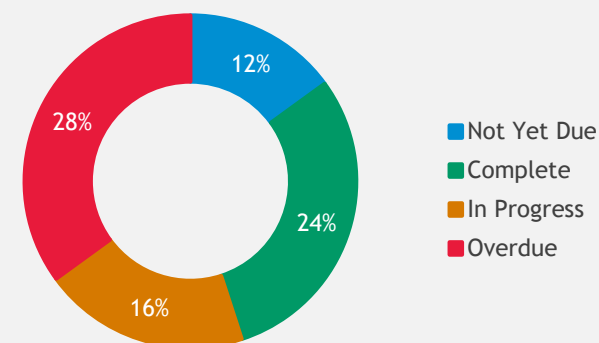
2024/25

Please find below a summary of the status of implementation of recommendations arising from reports issued in 2025/2026.

▶ Two of the four recommendations due for the Risk Management audit were completed (see Page 6), two remain in progress with partial completion (see Page 7). Two recommendations relating to Accounts Payable have been fully implemented – See Page 5 for details.

▶ Two recommendations relating to Data Protection have had the initial implementation dates revised (see Page 8).

▶ We will include further recommendations for 2024-25 as internal audit reports are finalised and agreed with management.

REQUIRED AUDIT COMMITTEE ACTION:

We ask the Audit Committee to note the progress against the recommendations.

Cumulative implementation on reports with outstanding recommendations

- 12% Not Yet Due
- 24% Complete
- 16% In Progress
- 28% Overdue

RECOMMENDATIONS: COMPLETE

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2023-24 **Building control**	1a. The current building control policies should be updated following changes to legislation in April 2024 and communicated to both the Application and Building Control Team. 1b. The building control policies should be subject to annual review and approval and a committee/group to review the policy should be identified. 1c. The contents of management meeting discussions should be reported to staff at an operational level to ensure they are up to date with current processes. 1d. A newsletter should be circulated to the Team where changes to processes or policies have been applied.	M	Courtney Bennet, Building control Team Manager	~~31/10/2024~~ 31/01/2025	**Management Comments** 1a. Policies are now up to date. Notifications about updates to procedures and policies are sent via Teams and mentioned in the Weekly Team meeting if required. 1b. A document control procedure has been implemented to manage the creation, review, and approval of policies. The Building Control Management Team will be responsible for conducting policy audits and review meetings. 1c. Staff are regularly updated through weekly Building Control team meetings. Corporate management information is disseminated to all staff weekly via a 'Connected Council newsletter' that is posted on the Corporate Sharepoint site. 1d. Notifications about changes to policies and procedures are communicated through Teams channels and email to ensure all staff are informed. We do have a 'Newsletter' folder on the Building Control Sharepoint where we save newsletters from Planning and Regulation, BSR, LABC. **Internal Audit Comments** Evidence to support the management comments was reviewed and sufficient to support the recommendation therefore this recommendation will be removed from the follow up tracker as a result.
2023-24 **Recruitment and Retention**	4a. A. To review the use of ITrent and the ability to automate the shortlisting process allowing Hiring Managers to complete shortlisting directly through the system. 4b. To conduct a training session for Hiring Managers which outlines the stages of the recruitment process and provides clarity of their responsibilities within the recruitment process	M	Gail Malkin, Head of People	~~31/12/2024~~ 28/02/2025	**Management Comments** The system is now being used for shortlisting. A hiring manager network has been set up and training and guidance offered. **Internal Audit Comments** We have reviewed shortlisting guidance available via the intranet to demonstrate to staff how to complete shortlisting via the system. This recommendation will be removed from the follow up tracker as a result.

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AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2024-25 **Accounts Payable**	1a. Transactions processed via BIF files, ODS or Hews Grey must have assurance of goods receipt incorporated into the approval or the Council should undertake a walkthrough of their systems to gain assurance that goods are receipted prior to payment. 1b. The Council should investigate whether Agresso can block future dates for goods receipt and inform all staff of the correct procedure for processing goods receipt via Agresso. 1c. The Council should discuss with ODS whether they should have approved purchase orders prior to invoicing for all transactions rather than the retrospective approach. 1d. Investigation should be undertaken to ensure approvers within the Agresso workflow are correct and reconcile to the manual Agresso approvers list.	M	Gaynor Didcock, Acting Team Leader	31/01/2025	**Management Comments** 1a. The majority of OX BIF's are not for delivered items, therefore there is no need for assurance of receipt, if we are paying a specific invoice via BIF It will be where the system has failed or there has been an error. We have therefore decided that we have changed the signature line on to each BIF (except where for refunds or Grant payments), saying goods/services received. 1b. Agresso is unable to block future dates for goods receipt. New training is in progress for Agresso which will include goods receipt. 1c. All Purchase order for DS have PO raised before. Works orders are not possible, as they work to an estimate until the job is complete, the invoice is sent to the approver, who in turn approves then resends to Business Support who will then raise the PO. The invoice is then sent to AP to process at exactly the correct amount, as QL will only accept the exact amount. 1d. The Council have confirmed with IT that an email is being sent to Agresso Access with details of any changed relating to starters/Leavers/Movers. **Internal Audit Comments** We have had sight of the template which demonstrates a required signature for goods receipt described in 1a as well as the email process with IT outlined in 1d. This recommendation will be removed from the follow up tracker as a result.
2024-25 **Accounts Payable**	2a. The Council should work with the IT team to ensure automatic reporting is available as soon as possible, once available this should be run monthly and reported to the Head of Finance and the Corporate Management Team (CMT). 2b. In the meantime, the Council should look into manual reporting of the most important KPIs such as the total amount of payables made by their due date to ensure the Council have the funds to pay these according to their payment terms.	M	Phil McGaskill, Revenues Service Delivery Manager	31/01/2025	**Management Comments** The Council have worked with IT to fix the reporting module and report KPIs to CMT on a regular basis as well as via a Smartsheet that is shared with directors. **Internal Audit Comments** The Council have provided CMT minutes to demonstrate KPI reporting. This recommendation will be removed from the follow up tracker as a result.

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AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2024-25 Risk Management	2a. The Council should implement a risk appetite statement within the strategy that details the level of risk the Council is willing to accept and how that is linked with the tolerance level of the Council. 2b. The Council should consider implementing risk appetites within each service area to account for the degree of risk service area is willing to accept. 2c. The risk appetite should be clearly outlined within both the Councils Corporate and Service risk registers to enable it to remain of priority when assessing risks	M	Roger Martin, Insurance, Risk Management and Business Continuity Manager	01/07/2025	**Management Comments** 2a. The Council agreed to implement a risk appetite statement, and this is incorporated in the new Risk Management Strategy and Toolkit. What is defined as a low, medium and high-risk appetite is shown on page 9, and the different risk appetites for each category of risk are shown on pages 9 to 12. 2b. The Council has agreed on risk appetites for different risk categories. It is believed that this works better than a single appetite across the whole service. The service will face a variety of different types of risk e.g. finance, regulatory compliance etc and there will be a different risk appetite for each according to category. 2c. The council's comments on the BDO report said, "It is not accepted that the risk appetite statement should be included in risk registers; it should be defined in the risk management strategy and then risk registers aligned to that definition. The Risk Management Group and Audit and Governance Committee are best placed to provide the challenge to the assessments to ensure that risk assessments align with the agreed strategy" **Internal Audit Comments** Where recommendations have been accepted and implemented evidence of completion has been reviewed this includes the risk appetite statement and corporate risk register. This recommendation will be removed from the follow up tracker as a result.
2024-25 Risk Management	4a. The Council should develop a work plan for when the Risk Management Group meeting will take place and what service risk registers will be discussed. This should include a calendar of when specific service areas will present their risk register for a deep dive. 4b. The Risk Management Group terms of reference should also be reviewed on a periodic basis.	M	Roger Martin, Insurance, Risk Management and Business Continuity Manager	01/07/2025	**Management Comments** The Council now has a work plan for when service risk registers will be reviewed by the Risk Management Group. The first "deep dive" took place in May 2025. This was Housing and Property & Assets. The terms of reference have been reviewed and will be reviewed again on an annual basis. **Internal Audit Comments** Both the terms of reference and meeting minutes of the deep dive were reviewed to evidence completion of this recommendation. This recommendation will be removed from the follow up tracker as a result.

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RECOMMENDATIONS: IN PROGRESS

These recommendations have been marked as In Progress as they have not been implemented by their original date; a revised date has been provided.

AUDIT	RECOMMENDATIONS MADE	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2024-25 **Risk Management**	1a. The Council should review the title, description, cause and consequence columns of the corporate and service risk registers to ensure that they provide enough information to clearly understand the risk. 1b. The Council should consider adding in additional columns to the risk register which outlines what corporate priorities and categories the risk aligns with.	M	Roger Martin, Insurance, Risk Management and Business Continuity Manager	~~01/07/2025~~ 15/07/2025	**Management Comments** The council has been undertaking a comprehensive review of the Corporate Risk Register. This includes a review of the title, description, cause, and consequence columns for the corporate risks. A review of the service risks has not yet commenced. **Internal Audit Comments** The corporate risk register was reviewed to provide evidence of the above. We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2024-25 **Risk Management**	3a. The Council should review actions/controls listed in the both the corporate and service risk register to ensure: • They remain up-to-date and are effective to mitigate the risks identified • Progress updates and controls remain up to date and remain relevant • Allocated risk owners are still employed by the Council; and the relevant mitigating controls are in place and that they manage the risk to a tolerable risk level.	M	Roger Martin, Insurance, Risk Management and Business Continuity Manager	~~01/07/2025~~ 15/07/2025	**Management Comments** The Council is reviewing actions and controls listed in the corporate risk register. A comprehensive review of service risk registers remains outstanding. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2024-25 **Data Protection**	1a. Management, in conjunction with each business unit or department, should carry out a full and comprehensive review of all the Council's RoPAs to ensure that these	H	Emma Jackman, Head of Law and Governance, Council	~~30/04/2025~~ 30/08/2025	**Management Comments** The Council provided a series of evidence for the implementation of the recommendation however it could not be accessed via BDO. We followed this up but unfortunately

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AUDIT	RECOMMENDATIONS MADE	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
	are consistent, complete, and up to date and that they capture, as a minimum, the information identified as missing by this review. The updated RoPAs should be presented to and approved by Senior Management and subject to review on an ongoing basis to ensure that these remain current and appropriate. 1b. As part of the RoPA review, the Council should continue to review existing privacy notices and updating them in case of any changes to data processing activities to ensure continued transparency of data processing with data subjects and consistency across all data privacy notices that exist.		Monitoring Officer and Data Protection Officer		due to capacity issues as a result of a critical incident further evidence could not be provided at the time of the audit. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2024-25 **Data Protection**	Management should review the Council's retention schedules and ensure that these are fit for purpose. The retention schedules should be subject to review on a regular basis. This should be done in line with the RoPA review as per finding 1.	M	Emma Jackman, Head of Law and Governance, Council Monitoring Officer and Data Protection Officer	~~30/04/2025~~ 30/08/2025	**Management Comments** The Council provided a series of evidence for the implementation of the recommendation however it could not be accessed via BDO. We followed this up but unfortunately due to capacity issues as a result of a critical incident further evidence could not be provided at the time of the audit. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.

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RECOMMENDATIONS: OVERDUE

These recommendations have been marked as overdue as they have previously revised their implementation date. Therefore, they have now missed at least two implementation dates.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2023-2024 **Income Generation**	1.4 We understand that the Council are considering procuring a new asset management system therefore, it should be investigated whether a new system could interface directly with Agresso to reconcile the rent billed to tenants with the property management database.	H	Emma Gubbins (Corporate Asset Lead)	~~31/03/2024~~ ~~31/03/2025~~ ~~30/06/2025~~ 30/09/2025	**Management Comments** Whilst the Council had moved towards the end of the evaluation of the tender returns for the new system by June 2025. There was an issue with the procurement process that has resulted in a 3-month delay to the procurement process. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2023-24 **Building Control**	2a. Training Needs Analysis should be undertaken annually to explore the type of training the Council can offer staff including exploring opportunities for joint training. 2b. A training plan should be created as a result of the training needs analysis and circulated to the Building Control Team and other teams (where applicable).	M	Courtney Bennet, Building control Team Manager	~~31/07/2024~~ ~~31/01/2025~~ 30/09/2025	**Management Comments** A competency matrix and structured training procedure are in place to identify staff training needs. Each team member has their own training journal that details their specific training needs since the training will vary depending on experience. There is not a training plan in place to book staff to training identified by the analysis yet, this is in progress. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2023-24 **Recruitment and Retention**	1a. To review and update the Recruitment and Selection Policy to clearly outline roles and responsibilities of all officers and service areas involved in the recruitment process and share the Policy with Heads of Services & Hiring Managers including uploading the policies onto the intranet.	M	Gail Malkin, Head of People	~~31/12/2024~~ ~~28/02/2025~~ 30/09/2025	**Management Comments** 1a. Due to resource pressures the Recruitment and Selection Policy has not yet been finalised, however a draft is in development. 1b. The Council have developed a Recruitment flowchart which is available to staff via the intranet. **Internal Audit Comments**

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AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
	1b. To review and finalise the Recruitment process flow chart, incorporate this within the Recruitment and Selection policy and update timescales for each stage of the recruitment process and share with the People Team, Heads of Service & Hiring Managers.				We will follow up this recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2023-24 **Recruitment and Retention**	2b. To obtain feedback from system users of ITrent, idox and ASM to determine the most effective system to use for recruitment data retention. 2c. To review the system functionality to producing recruitment monitoring data such as time to hire, agency spend and vacancy data.	M	Gail Malkin, Head of People	~~31/12/2024~~ ~~28/02/2025~~ 30/09/2025	**Management Comments** The Council have stated that the team has reviewed data retention according to recommendation but did not record this exercise. The Council have not been able to progress with monitoring data currently but will look to do so shortly. **Internal Audit Comments** We will follow up this recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2023-24 **Recruitment and Retention**	3a. To review the use of ITrent and the functionality to contain all documentation including employee references in relation to recruitment.	M	Gail Malkin, Head of People	~~31/12/2024~~ ~~28/02/2025~~ 30/09/2025	**Management Comments** We have not kept a record but we know the system can't handle the documentation. The draft policy and DBS is in progress. **Internal Audit Comments** We will follow up this recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.
2023-24 **Selective Licensing**	1a. The Council should conduct inspections based on their risk/priority level which is reviewed and a rating applied on receipt of application.	M	Courtney Bennet, Building control Team Manager Executive Sponsor, David Butler, Head of Planning and Regulatory Services	~~31/01/2025~~ ~~30/04/2025~~ 30/09/2025	**Management Comments** To revisit, a contractor has now been selected and tasked with completing 1000 inspections per year of high priority, however they have not begun inspections yet. **Internal Audit Comments** We will follow up this recommendation as part of the next follow up process as recommendation 1a remains to be completed we will report on the status of this recommendation as ahead of the next Audit and Governance Committee meeting.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2023-24 **Data Analytics**	3a. The Accounts Payable team should run a monthly report of all purchase card transactions that have not been reviewed and approved by the relevant officers. Reminders should be sent to the line managers to ensure these are reviewed 3b. The Council should determine a suitable timeframe for transactions incurred by purchase cards to be reviewed and approved by the purchase card holder and the corresponding line manager. If transactions are not reviewed in a timely manner the purchase card should be froze until the relevant action has been taken.	H	Gaynor Didcock, Accounts Payable Officer	~~30/11/2024~~ ~~30/04/2025~~ 30/09/2025	**Management Comments** There is currently an ongoing audit for purchase cards and further recommendations are likely to address further actions to be taken. Currently the Council have been reviewing transactions back to 2021 which haven't been approved and have been contacting cardholders/reviewers to rectify the issues. This has been an ongoing task over the last few months and there are now only a handful outstanding transactions from 2022 but still quite a number from 2023 and 2024. **Internal Audit Comments** We will follow up the outstanding part of the recommendation as part of the next follow up process ahead of the next Audit and Governance Committee meeting.

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