



### Final Internal Audit Report St Joseph's Federation March 2020

Distribution:

Head Teacher Chair of Governors School Business Manager Executive Director, Children, Families and Education (Final Only) Director of Education and Youth Engagement (Final Only) Director of Finance, Investment and Risk and S151 Officer (Final Only)

Assurance Level	Recommendations Made	
	Priority 1	5
Limited Assurance	Priority 2	7
	Priority 3	2

#### **Confidentiality and Disclosure Clause**

This report ("Report") was prepared by Mazars LLP at the request of London Borough of Croydon and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

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Please refer to the Statement of Responsibility in Appendix 3 of this report for further information about responsibilities, limitations and confidentiality.

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#### Executive Summary

#### 1. Introduction

- 1.1 St Joesph's Federation is the federation of St Joseph's RC Junior, Infant and Nursery Schools. At the time of audit there were 384 pupils attending and it had a combined expenditure budget of approximately £2.32m for 2019/20.
- 1.2 The approved 2019/20 combined budgets forecast a year end defict of £134,536. However, the quarter 3 budget monitoring reports now forecast a year end surplus of £42,279 (a surplus of £84,461 for the Junior School and a deficit of £42,182 for the Infants School.)
- 1.3 The audit was undertaken as part of the agreed Internal Audit Plan for 2019/20 based on a risk assessment. The objectives, approach and scope are contained in the Audit Terms of Reference at Appendix 1.

#### 2. Key Issues

#### **Issues resulting in Priority 1 Recommendations**

Sample testing identified payments to an individual, where NI and PAYE deductions had not been made and the HMRC Employment Status Service tool check had not been conducted. **(Recommendation 5)** 

Testing of a sample of 15 transactions identified eight where the purchase orders were authorised after the date of the corresponding invoices. (**Recommendation 6**)

There were no goods or services received checks evidenced for any of the 15 transactions selected for testing. **(Recommendation 7)** 

A number of control weaknesses in the management of the petty cash fund were found, some of which were significant. (**Recommendation 8**)

A number of gaps in the control framework of the School's information governance arrangements, including the lack of an information asset register, were found. **(Recommendation 9)** 

#### **Priority 2 Recommendations**

A financial skills audit had not been carried out for all Governors or any staff with financial responsibilities. **(Recommendation 1)** 

Only one reference had been obtained for one of the new starters sampled. (Recommendation 2)

There was no evidence of a medical check being conducted for one of the three new starters sampled. **(Recommendation 3)** 

The School did not obtain three quotes and approval from the Resources Committee for the high value purchase of a school trip. (**Recommendation 4**)

The Schools Lettings Policy had not been approved by the Full Governing Body. It was also found for one hirer, the hirer's agreement had not been authorised by the Head Teacher, and the hirer's public liability insurance had expired in 2016. **(Recommendation 10)** 

Two members of staff had school meal debts. (Recommendation 11)

The school fund account has not been audited. (Recommendation 12)

Priority 3 recommendations are included under item 4 below.

#### Acknowledgement

We would like to thank the following members of staff for their time and contribution to this audit:

- Head Teacher
- School Business Manager
- Office Manager

#### **Detailed Report**

#### 3. Actions and Key Findings/Rationale

#### Audit Area: Budgetary control & Monitoring

Priority	Recommendation 1	Detailed Finding/Rationale		
2	A financial skills audit of all staff with financial responsibilities should be carried out. A financial skills audit for governors should be conducted annually and for all new Governors to identify where training is required.	<ul> <li>Expected Control</li> <li>The Schools Financial Value Standard (SFVS) question 6 asks, 'Does the school have access to an adequate level of financial expertise, including when specialist finances staff are absent such as sick leave?' The SFVS support notes provided on the DfE website further explain that, 'Schools should analyse the skills of staff with financial</li> </ul>		
Managemen	ment Response Agreed/Disagreed Responsible Officer Deadline		Deadline	



We have tasked the staff Governor with performing the skills audit above including the financials skills audit for staff who have financial responsibilities, being SBM and the Resources Committee Chair	Agreed	Staff Governor	22 April – next FGB meeting
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### Audit Area : Payroll

Priority Recommendation 2		Detailed Finding/Rationale		
2 A second reference for the identified new starter should be obtained.		dated September 2019, deta	n education - Statutory guidance for schools and colleges' ails that two or more written references are obtained for all or to being interviewed. The references should ideally be ployment.	
		Issue/Finding		
		Sample testing of the documentation retained for a sample of three new starters fou that for one of the new starters, only one reference had been obtained.		
		Risk		
		Where the 'Keeping children safe in education - Statutory guidance for schools a colleges' is not complied with and appropriate references obtained, there is a risk t the School may hire based upon false pretences and that inappropriate individu could be appointed.		obtained, there is a risk that
Management Response		Agreed/Disagreed	Responsible Officer	Deadline
The staff member in question had put down the HT and DHT of her former school and the school had returned one reference, signed by the HT, on behalf of both. We have gone back to the school and asked for the second reference to be completed and sent back ASAP.		Agreed	SBM	End of March 2020

Priority	Recommendation 3	Detailed Finding/Rationale		
2	The School should follow up on the staff member identified to ensure that a medical check, if not already conducted, is conducted as soon as possible. A copy of the relevant check should be retained on the employee file.	<ul> <li>In line with the requirements of the Education (Health Standards) (England) R 2003, all new staff should receive a Health Check from the Council's Medical check that they are fit to perform their required duties in their role. The confirming the successful check is sent to the school and should be retained o</li> <li>Issue/Finding</li> <li>Examination of the documentation available for a sample of three new start School established that there was no evidence of a medical check being con one of the new starters.</li> <li>Risk</li> <li>Where new staff do not receive a medical check prior to commencing employm is a risk that employees are not fit to carry out some specific roles. This could loss of provision of services through long term illness and potentially a financ the School.</li> </ul>		e Council's Medical Officer to in their role. The document hould be retained on file. of three new starters at the al check being conducted for mmencing employment, there c roles. This could result in a
Management Response A		Agreed/Disagreed	Responsible Officer	Deadline
	We have asked the DHT to complete the medical Agreed SBM w/c 9 March 2020 w/c 9 March 2020		w/c 9 March 2020	

#### Audit Area: Procurement

Priority	Recommendation 4	Detailed Finding/Rationale		
2	The School should ensure that transactions are appropriately evidenced as authorised in line with the requirements of the Financial Policies and Procedures Manual, (as this document does not distinguish at what stage the authority is due, this should be at order stage before the School is committed and also at invoice stage prior to payment being made.) The School should ensure that the required quotes are obtained for higher value expenditure in line with the requirements of the Financial Policies and Procedures Manual.	<ul> <li>The School's Financial Policies and Procedures Manual, Section A3: 'Financial delegated authority' details that the Head Teacher may approve purchases up to the Resources Committee up to £25,000 and that all other purchases must be apply the full Governing Body.</li> <li>Section E1 'Obtaining value for money when purchasing' within the Manual also that, 'Three written quotations should be obtained for all expenditure above £3,000 it is impractical to do so due to the nature of the supply or service being only a from a limited number of specialist providers' and 'Where a quotation other than the is accepted, the reasons for this decision must be reported to the Governing Beincluded in the minutes of the relevant meeting'.</li> <li>Issue/Finding</li> <li>Examination of documentation available for a sample of 15 transactions identified one of the transactions had not been evidenced as authorised as required Resources Committee and that evidence of quotes being obtained was not avail of governors agreeing this as an exemption to obtain quotes.</li> <li>Risk</li> <li>Where higher value purchases are not appropriately approved, there is an increat that inappropriate expenditure may occur. Where three quotes are not obtained for value purchases, there is a risk that the School does not obtain value for money.</li> </ul>		Prove purchases up to £5,000, purchases must be approved within the Manual also details <i>benditure above £3,000 unless</i> <i>r service being only available</i> <i>guotation other than the lowest</i> <i>d to the Governing Body and</i> 15 transactions identified that thorised as required by the obtained was not available, or s.
Management Response		Agreed/Disagreed	Responsible Officer	Deadline
The School has been going to PGL for Residentials for many years but we accept that we do need to obtain quotes/alternatives on an ongoing basis to ensure value for money. We		Agreed	HT	Immediate

that it should have gone to the FGB or Resources committee for approval. Staff with financial and purchasing responsibility have been reminded of these limits and instructed to bring any purchases above them to the appropriate body for approval.
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Priority	Recommendation 5	Detailed Finding/Rationale		
1	The HMRC 'view' of the employment status of the individual should be obtained by using the Employment Status Indicator (ESI) tool, and NI and PAYE deductions, where appropriate, should be made from payments.	The guidance on the HMRC website details that, 'A worker's employment statue whether they are employed or self-employed, is not a matter of choice. Whether is employed or self-employed depends upon the terms and conditions of the		r of choice. Whether someone and conditions of the relevant icator (ESI) tool < <u>or-tax/setup</u> > on the HMRC f individuals. Where someone ust be made at source. een transactions identified that wever, there was no evidence sed or any other check of self- e as required. ent status of these individuals be defined as employees by
Manager	nent Response	Agreed/Disagreed	Responsible Officer	Deadline
The School accepts that it did not perform the HMRC check on this occasion for this supplier. We did do a check subsequent to the audit and the result was in this case, that it was not an employment relationship, as the supplier could and did send replacements and we would accept them. We are reviewing all our other arrangements currently to see if any others may have this issue.		Agreed	SBM / HT	End of March 2020

Priority	Recommendation 6	Detailed Finding/Rationale		
1	The School should ensure that all green internal requisition forms are authorised by the Head Teacher before committing to purchases. The School should update the Financial Policy and Procedures Manual with regards to the use of green internal requisition forms, and have it reviewed/approved by the Full Governing Body.	<ul> <li>The Schools Financial Policy and Procedures Manual states in Section purchase ordering system, that 'St Joseph's Federation will operate a purchas system that uses, unique pre-numbered purchase order number, which will in the Capita SIMS FMS6 accounting system for all goods and services exert rents, rates and petty cash payments.'</li> <li>Issue/Finding</li> <li>Testing of a sample of 15 transactions identified that for eight of these transpurchase order/requisition form was appropriately authorised after the irreceived.</li> <li>Discussion with the School Business Manager established that since they School in the last 6 months, they have introduced the use of green requisition a staff request to purchases goods/services for school use. The use of these as yet detailed in the School's Financial Policies and Procedures Manual.</li> <li>Risk</li> <li>Where purchase orders/internal requisition forms are not raised and author purchases being made, there is a risk that the authorisation and commitment are by-passed which could result in inappropriate purchases and poor budge. Where the School has not updated the Financial Policies and Procedures I regards to the use of green internal requisition forms, there is a risk that out inappropriate procedures are followed with regards to procurement.</li> </ul>		<ul> <li>d operate a purchase ordering imber, which will be recorded and services except utilities,</li> <li>ight of these transactions the prised after the invoice was</li> <li>ed that since they joined the green requisition forms when The use of these forms is not dures Manual.</li> <li>aised and authorised prior to n and commitment processes s and poor budgetary control.</li> <li>and Procedures Manual with e is a risk that out of date and</li> </ul>
Management Response		Agreed/Disagreed	Responsible Officer	Deadline
The revised finance manual is due to be reviewed and approved at the next FGB on 24 March. It will then include references to the green forms and requirement to get evidence of approval before all purchases.		Agreed	SBM / HT	Immediate

In terms of approvals, note that the policy will also state that only the SBM can approve purchase orders as he is in close/day-to-day contact with the budget limits whereas only the HT or DHT can authorise payments in order to provide separation of duties.		
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Priority	Recommendation 7	Detailed Finding/Rationale			
1	1 An appropriate goods received check should be evidenced for all transactions prior to these being paid. This should not be conducted by the person who signed the order or who approves the	Expected Control	Expected Control		
		The Schools Financial Policy and Procedures Manual states in Section E5: Use of purchase ordering system, that ' <i>The School Business Manager or Office Manager must ensure goods and services on receipt match the order prior to payment.</i> '			
	invoice for payment.	Issue/Finding			
		Testing of a sample of 15 transactions identified that there was no goods or services received check evidenced for any of the transactions.			
		Risk			
		Where appropriate evidence of goods or services received checks is not retained for each purchase made by the School, there is a risk that payments are made for goods and services that are not received.			
Manage	ment Response	Agreed/Disagreed	Responsible Officer	Deadline	
Immediately after the audit, procedures were changed so that office / receiving staff have to sign and date the delivery notes and file it away so that it can be matched to the invoice.		Agreed	SBM	Immediate	

Priority	Recommendation 8	Detailed Finding/Rationale		
1	<ul> <li>The School should either close the Petty Cash Float and/or ensure appropriate controls are put in place to manage it, including:</li> <li>Petty cash disbursements are only made where these have been properly authorised and are within the limits defined in the Finance Policy;</li> <li>Income and petty cash are kept separate, with all income being banked intact;</li> <li>All petty cash expenditure is appropriately supported by invoices / receipts; and</li> <li>The total petty cash held does not exceed the £100 limit.</li> </ul>	of petty cash, that 'St Joseph office'. Section G3: Proper us are limited to amounts below member of staff.' And Section states that 'All expenditure fro VAT paid. It must be signed member of staff, such as the Issue/Finding Examination of petty cash do been exceeded twice since 1 and 31 December 2018. T identified that between the 5 I limit, with £257.09 the highes Examination of the 'petty cash into the petty cash. Finally, no receipts and / or of sample of transactions select <b>Risk</b> Where the petty cash is not pr / invoices are not obtained, the	h's Federation will maintain a se of petty cash, also states the £20, which must be approved on G4: Supporting documents of petty cash must be support of for by the recipient and could be determined by the recipient and could be determined by the recipient and by the	ed by receipts, identifying any intersigned by an authorised ess Manager.' ed that the petty cash limit had en times between 1 May 2018 re was £54.70. It was also 3, the float exceeded the £100 re income had been deposited in was available for any of the e Finance Policy and receipts purchases and misuse of the
Manager	ment Response	Agreed/Disagreed	Responsible Officer	Deadline
Noted. Petty cash procedures were tightened up significantly since the audit. E.g. A physical log book was set up to store all receipts, and the rules regarding maximum expenditure (£20) and		Agreed	SBM	Immediate

maximum petty cash balance (£100) were printed		
and placed in a prominent place near the petty		
cash.		

#### Audit Area: Information Governance

Priority	Recommendation 9	Detailed Finding/Rationale
1	<ol> <li>The School's information governance arrangements should be strengthened by:</li> <li>An Information Asset Register (as required by the DPA 2018) being put in place;</li> <li>Create a Document Retention Policy;</li> <li>Update the Data Protection Policy to cover all aspects of data breaches, subject access requests and include any information that would have been in the web links;</li> <li>Bring HR procedures and practices up to date with consequences of data breaches; and</li> <li>Ensure that the Emergency Response Procedures document is reviewed and approved by the Full Governing Body.</li> </ol>	Expected Control The Data Protection Act (DPA) 2018 came into force on 25 May 2018 and enshrined the General Data Protection Regulations (GDPR) into UK law. The DPA 2018 has two categories for breaches of GDPR, acts deemed to be a lesser breach hold a maximum fine of €10 million or two per cent of a company's annual revenue, whichever is greater, and for more severe breaches, the maximum fine is €20 million or four per cent of a company's annual revenue, whichever is greater. Under Article 30 of the GDPR each data controller and, where applicable the controller's representative needs to maintain a record of processing activities under its responsibility. These records must be in writing or electronic form. The controller must make the record available to the Information Commissioners Office (ICO) on request. Under the DPA 2018 and GDPR, the ICO may fine an organisation for non-compliance. The Information Asset Register (IAR) is one method of demonstrating compliance with
		Article 30. An IAR is an inventory or catalogue of information assets and the systems used. By understanding the nature of information, where it is held, how it is used, and if it is protected risks can more easily be mitigated. Issue/Finding
		While the School had a number of documents and policies in place in respect of Information Governance, testing identified several gaps and areas for improvement as follows:
		<ul> <li>The School did not have an Information Asset Register;</li> <li>The School did not have a document retention policy;</li> <li>The Schools Data Protection Policy did not include the procedures for reporting a data breach, what is classified as a data breach and the consequences of data breaches;</li> <li>The Schools HR policies had not brought its practices and procedures up to date to include the consequences of any breaches;</li> <li>The Schools Data Protection Policy did not include procedures for when someone exercises their rights;</li> </ul>

	<ul> <li>The Schools Data Protection Policy contained links to the ICO website, where the webpages no longer existed; and</li> <li>The Schools Emergency Response Procedures document had not been evidenced as reviewed and by the governors in the last 12 months.</li> <li><b>Risk</b></li> <li>Where the Schools information governance arrangements are not fully up to date for the DPA 2018 and GDPR, there is a risk that the School is not compliant with the DPA 2018 or GDPR and could be liable for significant fines should a data breach occur.</li> </ul>		
Management Response	Agreed/Disagreed	Responsible Officer	Deadline
<ul> <li>The Chair of Governors has tasked the following staff to address these points:</li> <li>Online and Computing Lead: Information Asset Register</li> <li>LA Governor and HT: Document Retention Policy</li> <li>HT: Update the Data Protection Policy</li> <li>HT: Bring HR procedures and practices up to date</li> <li>HT: Emergency Response Procedures</li> </ul>	Agreed	Chair of Governors	End of March

#### Audit Area: Income

Priority	Recommendation 10	Detailed Finding/Rationale		
2	The public liability insurance of any hirers of the School facilities should be confirmed prior to any lets being agreed. Evidence of this check should be retained. The Lettings Policy should be approved by the governors and recorded as such in the relevant meeting minutes. The Head Teacher should approve the letting of facilities, unless they elect to delegate this function. In which case, this delegation should also be recorded.	<ul> <li>When school facilities are let to those outside of the school, a booking form is filled and the hirer signs to confirm that they have public liability insurance. The lettings shalso be authorised by the Head Teacher. Governors should review and approve Lettings Policy annually.</li> <li>Issue/Finding</li> <li>Testing of the documentation for a sample of three lettings found that:</li> <li>For one hirer, they had provided a hirer's public liability insurance, but it went o date on 18 May 2016, and the hirer still uses the schools facilities; and</li> <li>One letting had not been evidenced as authorised by the Head Teacher</li> </ul>		nsurance. The lettings should ould review and approve the found that: v insurance, but it went out of s facilities; and e Head Teacher ed that there was no lettings eloped a Lettings Policy which larch 2020. ed, there is a risk that School irrance and, if there were any ons, this could result in large
		is an increased risk that school facilities are let out for inappropriate use. W lettings policy has not been approved by governors, there is an increased risk inappropriate prices are levied.		
Manager	ment Response	Agreed/Disagreed	Responsible Officer	Deadline
These two lettings were signed before the current HT and SBM took office. However, since the audit we have since obtained the insurance policy for first hirer and the HT has reviewed and		Agreed	SBM	w/c 9 March



signed agreement for the second hirer in question.			
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Priority	Recommendation 11	Detailed Finding/Rationale		
2	Staff debt should be strongly discouraged and immediate action should be taken to recover outstanding school meal debts.	recognised that some payme should not be normal practic strongly discouraged. Issue/Finding During the testing of the sc members of staff that had me that these amounts may be re <b>Risk</b> Where school meal charges collected in a timely manner	b be paid for in advance. In exerts may be late and these matce. Staff incurring debt sets a hool meal income it was estaged debts of £5.80 and £11.60 relatively small, staff should not s are not paid in advance a , there is a risk that these am eal debts there is a risk that the	ay be paid in arrears, but this a poor example and must be ablished that there were two respectively. Notwithstanding t have meal debts. nd outstanding amounts not ounts may not be recovered.
Management Response		Agreed/Disagreed	Responsible Officer	Deadline
Staff in debt have been told to bring their accounts into credit immediately.		Agreed     SBM / HT     w/c 9 March		w/c 9 March

#### Audit Area: School Fund

Priority	Recommendation 12	Detailed Finding/Rationale		
2	The School should carry out an audit of the school fund account and present the results to the full Governing Body.	<b>Expected Control</b> The Schools Financial Policies and Procedures Manual in Section '12: Registered with Charity Commission', details that, 'Voluntary fund accounts must be certified by an auditor who is completely independent of the school. Additionally where the schools' voluntary funds exceeds income or expenditure over £1,000, it will be registered with the Charity Commission.' Section 16: Audited accounts, also details that, 'The Head teacher will present the audited accounts, the auditor's certificate and a written report on the accounts to the Governing Body as soon as possible after the year-end.' <b>Issue/Finding</b> Discussion with the Head Teacher and the School Business Manager established that the school fund had not been audited. It was explained that this was because the money in		
		the fund had not been addited. It was explained that this was because the money in the fund had not been used in the last 12 months, due to difficulties in accessing the account. The School Fund currently has a balance of £16,795.12 <b>Risk</b> Where the school fund account has not been audited and therefore no audit results are presented to governors annually, there is a risk that these funds may be mismanaged and that the Governing Body may not be able to demonstrate appropriate stewardship of these funds.		
Managei	ment Response	Agreed/Disagreed	Responsible Officer	Deadline
The School is considering setting up an unincorporated charitable organisation ("The St Joseph's Federation Charitable Foundation") which will have its own Board, bank account, and annual report and accounts which will be audited by an independent auditor and will complete a charity return each year. The Foundation can then claim Gift Aid on donations it receives and make grants to the school as required for		Agreed	SBM / HT	End of April

purchases by the School. This will take over the	
school fund account. This will be discussed at the	
next Resources and FGB committees.	
next Resources and FGB committees.	

#### 4. **Priority 3 Recommendations**

Re	commendation	Findings
1)	The Schools delegation of authorisation levels and the 2019/20 budget should be included in the Governor's Induction pack.	<ul> <li>The School does not include the following items in the Governors Induction Pack:</li> <li>Schools delegation of authorisation levels; and</li> <li>The 2019/20 Budget.</li> </ul> Where the School does not include the Schools delegation of authorisation levels or 2019/20 budget in the Governor's Induction Pack and important information and documents are not provided, there is a risk that the Governors will not receive the necessary information and be appropriately briefed to govern the School efficiently.
2)	The School should review the Resources Committee terms of reference to ensure that these appropriately detail the responsibilities designated to the committee.	<ul> <li>The Resources Committee terms of reference did not include the following responsibilities detailed in the Schools Finance Policy and Procedures as being functions of the Committee:</li> <li>Disposal of assets;</li> <li>Contract Disposal; and</li> <li>Tendering and quotations</li> <li>Where responsibilities of the Resources Committee are not included in the terms of reference, there is an increased risk that during meetings, the Committee does not discuss fundamental matters of finance.</li> </ul>



### AUDIT TERMS OF REFERENCE

#### St Joseph's Federation – 2019/20

#### 1. INTRODUCTION & BACKGROUND

1.1 This audit is being undertaken as part of the Internal Audit Plan for 2019/20, as agreed by the Council's Audit Committee.

#### 2. AUDIT OBJECTIVES AND METHODOLOGY

- 2.1 To provide an independent and objective opinion on the degree to which the Council's internal control environment supports and promotes the achievement of the Council's objectives. The internal control environment comprises the policies, procedures and operations in place to:
  - establish, and monitor the achievement of the service's objectives;
  - identify, assess and manage the risks to achieving the services objectives;
  - facilitate policy and decision making;
  - ensure the economical, effective and efficient use of resources;
  - ensure compliance with established policies (including behavioural and ethical expectations), procedures, laws and regulations;
  - safeguard the service's assets and interests from losses of all kinds, including those arising from fraud, irregularity or corruption; and
  - ensure the integrity and reliability of information, accounts and data, including internal and external reporting and accountability processes.
- 2.2 To confirm that management have controls in place to detect and vigorously, pursue, fraud, corruption, other irregularities, errors and poor value for money.
- 2.3 To confirm that appropriate management action has been taken to implement recommendations for change leading to improvement in performance and/ or control.

#### 3. **SCOPE**

3.1 The audit included the following areas (and number of recommendations made):

	Recommendations Made		
Audit Area	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Governance and Leadership	0	0	2
Budgetary Control & Monitoring	0	1	0
Payroll	0	2	0
Safeguarding	0	0	0
Procurement	4	1	0

Bank Accounts	0	0	0
Information Governance	1	0	0
Income	0	2	0
Health and Safety	0	0	0
School Fund	0	1	0
Totals	5	7	2



#### **Definitions for Audit Opinions and Recommendations**

In order to assist management in using our reports:

We categorise our **audit assurance opinion** according to our overall assessment of the risk management system, effectiveness of the controls in place and the level of compliance with these controls and the action being taken to remedy significant findings or weaknesses.

	Full Assurance	There is a sound system of control designed to achieve the system objectives and the controls are constantly applied.
$\bigcirc$	Substantial Assurance	While there is basically a sound system of control to achieve the system objectives, there are weaknesses in the design or level of non-compliance of the controls which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or extremely weak, leaving the system open to the high risk of error, abuse and reputational damage.

Priorities assigned to recommendations are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require immediate attention by management to action and mitigate significant exposure to risk.	
Priority 2 (Medium)	Control weakness that still represent an exposure to risk and need to be addressed within a reasonable period.	
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, still provides an opportunity for improvement. May also apply to areas considered to be of best practice that can improve for example the value for money of the review area.	



#### STATEMENT OF RESPONSIBILITY

We take responsibility to the London Borough of Croydon for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

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