

COUNTY DURHAM AND DARLINGTON FIRE AND RESCUE SERVICE

At a **MEETING** of the **AUDIT AND RISK COMMITTEE** held at Fire Service Headquarters, on **21 May 2019 at 10.00 am.**

PRESENT: Cllr J Turnbull in the Chair
DURHAM COUNTY COUNCIL: Cllrs L Marshall, B Avery and R Manchester
DARLINGTON BOROUGH COUNCIL: Cllr C Johnston

OFFICERS: T Hope

AUDIT: S Carter and J Greener

Item

1 Apologies

Apologies were received from Cllrs D Bell (RM sub) and M Simmons and from C Dearden, Mazars

2 Minutes of the Previous Meeting

The minutes of the previous meeting held on 28 February 2019 were agreed as a true and accurate record.

3 Corporate Governance Action Plan Update

T Hope presented an update of the progress being made in relation to the actions arising from the Corporate Governance Action Plan and advised that Appendix A, reflects the position in relation to the action points as at 31 March 2019.

The group considered and discussed the findings and associated risks with the plan.

T Hope advised that providing that the MTFP assumptions turn out to be accurate the efficiency savings previously identified through the Emergency Response Review will be sufficient to create a balanced budget over the medium term.

ACTION: Members **noted** the contents of the report and the ongoing work in relation to the corporate governance arrangements of the Authority.

4 Corporate Risk Register Update

T Hope provided members with the details of the corporate risk register as at 31 March 2019. There were eight risks on the risk register. Changes to the register were summarised and discussed as follows:

No risks had been closed and no new risks had been added.

Two risks have been downgraded to section risks and removed from the corporate risk register:

- **Risk CR 215** – Outstanding backlog maintenance on the Service's buildings in excess of £3M.

This risk has significantly reduced following the earmarking of capital funding for the replacement of Darlington Fire Station which accounted for a large proportion of the backlog maintenance.

- **Risk ASN 01** – Unknown resource requirement needed to manage the HMICFRS inspection programme. Currently the content of the inspection is unspecified.

This risk has been downgraded following a review of current workloads and demands linked to the forthcoming HMICFRS inspection and the available resources. Based on progress made to date the Service is on track to meet the requirements of the inspection process.

Members discussed the status and progress of all risks within the report.

ACTION: Members **considered** the corporate risk register report and **noted** the current position.

5 Internal Audit Progress Report

S Carter advised members on the detailed work undertaken by Internal Audit between 01 April 2018 and 31 March 2019.

The Committee considered the progress against planned work, amendments to the annual audit plan, along with the audit recommendations and work to prepare for the Annual Governance Statement.

It was noted that there are two reviews which are in progress but which are not expected to be completed until 2019/20. In addition, three assurance reviews have also been cancelled and will now be undertaken as part of the 2019/20 internal audit plan. Six medium priority recommendations are overdue against original target implementation dates. Target dates have been revised and agreed and further details were considered under part B of the agenda. No unplanned work has been undertaken during the period and no reports have been issued that resulted in a Limited Assurance Opinion. A review of data released from NFI pensions, payroll and creditors is currently ongoing and the outcome of this review will help to inform the Annual Fraud and Corruption Report which is to be presented to the Committee in July.

ACTION: Members **noted** the report.

6 Internal Audit Plan

S Carter presented the Committee with the Internal Audit Plan for the period 1 April 2019 to 31 March 2020 which had previously been agreed by the Service Leadership Team on 24 April 2019.

The internal audit plan will deliver 71 productive audit days in 2018/19, in line with the Service Level Agreement (SLA) with the Authority. The scope of the planned audit reviews were explained to the committee.

ACTION: Members **agreed** the Internal Audit Plan for 2019/20.

PART B

7 Internal Audit Recommendations

The six medium priority recommendations overdue against the original target implementation dates were discussed and considered by the committee. It was noted that revised target dates have been agreed in all cases.

Progress updates on all recommendations were highlighted and considered by the committee.

ACTION: Members noted and approved the revised target dates set out.