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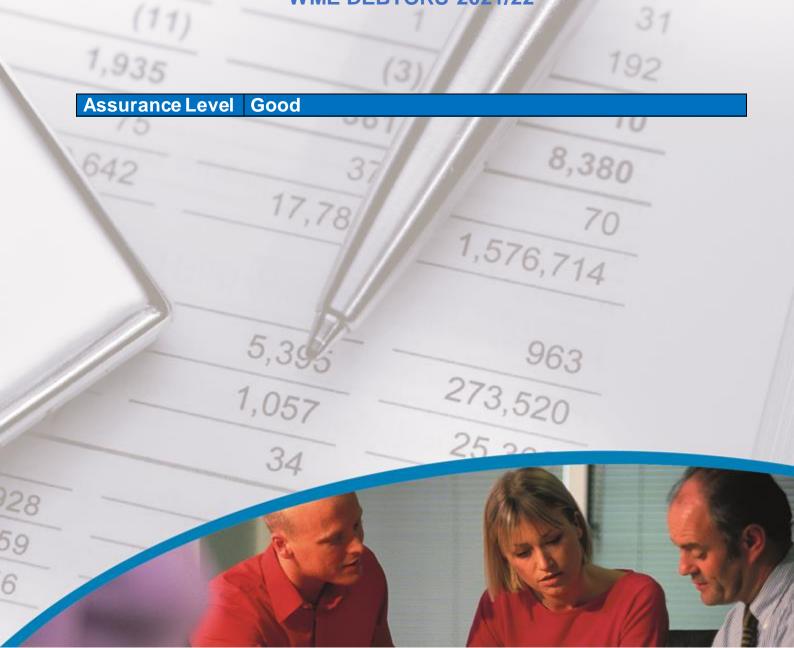




# SHROPSHIRE COUNCIL **AUDIT SERVICES**

"ADDING VALUE"

FINAL INTERNAL AUDIT REPORT **WME DEBTORS 2021/22** 



# **Audit Data**

West Mercia Energy **Customer:** Nigel Evans (Director) **Report Distribution:** Jo Pugh (Finance Manager) Auditor(s): **Kayleigh Griffiths** Fieldwork Dates: November 2021 25<sup>th</sup> November 2021 **Debrief Meeting: Draft Report Issued:** 01 December 2021 Responses Received: 01 December 2021 Final Report Issued: **01 December 2021** 

| Assurance                   |                            |                                  |  |  |
|-----------------------------|----------------------------|----------------------------------|--|--|
| Previous Assurance<br>Level | Current Assurance<br>Level | Direction of Travel              |  |  |
| Good                        | Good                       | No change to control environment |  |  |

### **Introduction and Background**

- 1. As part of the approved internal audit plan for 2021/22 Audit Services have undertaken a review of Debtors.
- 2. This audit has been conducted in accordance with the Public Sector Internal Audit Standards.
- Maintenance of the control environment is the responsibility of Management. The audit
  process is designed to provide a reasonable chance of discovering material
  weaknesses in internal controls. It cannot, however, guarantee absolute assurance
  against all weaknesses including overriding of management controls, collusion, and
  instances of fraud or irregularity.
- 4. Audit Services would like to thank officers who assisted during the audit.
- 5. The audit was delivered on time and within budget.

## Scope of the Audit

- 6. The following scope was agreed with key contacts at the beginning of the audit: To review the procedures in respect of the reconciliation and monitoring of the debtors and income system and to establish the progress made in implementing the recommendations made in the previous audit.
- 7. The scope includes a follow up of recommendations made in the 2020/21 audit. Where not implemented fully, these are revisited, and the findings included in this report.
- 8. Audit work was undertaken to give assurance on the extent to which the following management control objectives are being achieved. Objectives with a √ demonstrate that appropriate management controls are in place and upon which positive assurance can be given. Objectives with an X are those where the management controls are not being achieved:
  - $\sqrt{\phantom{a}}$  The previous recommendations have been implemented.
  - √ There are appropriate policies and procedure notes in place for the operation of the system.
  - √ Billing information is verified before invoicing customers.
  - √ There are appropriate arrangements in place to ensure prompt payment of invoices.
  - $\sqrt{\phantom{a}}$  There are appropriate post opening procedures in place for the control of cash and cheques.
  - There are appropriate arrangements in place for the collection of Income by Direct Debit.
  - $\sqrt{\phantom{a}}$  All income received is reconciled to the bank account.
  - $\sqrt{\phantom{a}}$  Refunds are actioned in a timely manner with appropriate authorisation.
  - $\sqrt{\phantom{a}}$  Write-offs are actioned in a timely manner with appropriate authorisation.
  - Income credited to suspense accounts is reviewed and cleared in a timely manner.
  - $\sqrt{\phantom{a}}$  Management Information in respect of income is timely and adequate.

#### **Assurance Level and Recommendations**

9. An opinion is given on the effectiveness of the control environment reviewed during this audit. The level of assurance given is based upon sample testing and evaluation of the controls in place. This will be reported to the Joint Committee and will inform the Annual Governance Statement which accompanies the Annual Statement of Accounts. There are four levels of assurance; Good, Reasonable, Limited and Unsatisfactory.

Audit Services can give the following assurance level on the area audited:

| Good | There is a sound system of control in place which is designed |
|------|---|
|      | to address relevant risks, with controls being applied        |
|      | consistently.   |

10. Recommendations are made where control weaknesses, risks or areas for improvement have been identified and are of sufficient importance to merit being reported to you in accordance with auditing standards. There are four categories of recommendation; Best Practice, Requires Attention, Significant and Fundamental. The following table summarises the number of recommendations made in each category:

|   | Total | Fundamental | Significant | Requires Attention | Best Practice |
|---|-------|-------------|-------------|--------------------|---------------|
| ſ | 2     | 0           | 0           | 1                  | 1             |

- 11. A summary of the recommendations, together with the agreed management responses are included at **Appendix 1**. Implementation of these recommendations will address the risks identified and improve the controls that are currently in place.
- 12. The status of the recommendations accepted by management at the previous audit has been reviewed and is summarised in the table below:

| Number of recommendations accepted by management at the last audit | 2 |
|--|---|
| Recommendations implemented  | 2 |
| Recommendations partially implemented                              |   |
| Recommendations superseded   |   |
| Recommendations not implemented                                    |   |

Good progress has been made in the implementation of previous recommendations. Recommendations which remain outstanding are repeated in the Exception Report and Action Plan.

## **Audit Approach**

- 13. The approach adopted for this audit included:
  - Review and documentation of the system.
  - Identification of the risks to achieving the business outcomes and associated key controls.
  - Follow up of previous recommendations.
  - Testing of controls to confirm their existence and effectiveness.
  - Identification of weaknesses and potential risks arising from them.
- 14. As Internal Audit report by exception, only those areas where control weaknesses and/or errors have been identified are included in this report. Your Action Plan is included at **Appendix 1**. A more detailed report covering all the work undertaken can

be provided on request.

15. In accordance with the Public Sector Internal Audit Standards, recommendations will be followed up to evaluate the adequacy of management action taken to address identified control weaknesses.

Ceri Pilawski Head of Audit

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# APPENDIX 1

# ACTION PLAN FOR WME DEBTORS 2021/22

| Rec<br>Ref. | Rec<br>No. | Recommendation  | Rec Rating            | Proposed Management Action  | Lead Officer                   | Date to be<br>Actioned |
|-------------|------------|---|-----------------------|---|--------------------------------|------------------------|
| 9.1         | 1          | The bad debt authorisation section of the Credit Management Policy should be updated to reflect the authorisation limits set in the Scheme of Delegation.   | Requires<br>Attention | Credit Management Policy now updated to reflect the authorisation limits set in the Scheme of Delegation. | Jo Pugh,<br>Finance<br>Manager | Completed              |
| 10.1        | 2          | The two historic amounts within the suspense account should be written off and the account cleared, the amount have been unable to be allocated to the correct accounts due to the lack of reference. | Best Practice         | The two historic amounts within the suspense account to be written off.                                   | Jo Pugh,<br>Finance<br>Manager | December 2021          |