

Final Internal Audit Report

Crosfield and Selhurst Nursery and Children's Centre

October 2023

Distribution: Head Teacher

Chair of Governors

School Office Manager

Corporate Director, Children, Families and Education Interim

(Final only)

Director of Education

Head of Finance Education Interim

Director of Finance (DeputyS151)

Corporate Director of Resources and S151 (Final only)

Assurance Level	Recommendations Made	
Limited	Priority 1	7
	Priority 2	6
	Priority 3	5

Confidentiality and Disclosure Clause

This report ("Report") was prepared by Mazars LLP at the request of the 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.

The Report was prepared solely for the use and benefit of the London Borough of Croydon, and to the fullest extent permitted by law, Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk.

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



2. Definitions for Audit Opinions and Recommendations

3. Statement of Responsibility

Executive Summary	Contents Page
1. Introduction	2
2. Key Issues	2
Detailed Report	
3. Actions and Key Findings/Rationale	5
4. Priority 3 issues	26
Appendices	
1. Terms of Reference	



Executive Summary

1. Introduction

- 1.1 Crosfield and Selhurst Nursery and Children's Centre (referred to as "Centre") operates under a shared service of London Borough of Croydon (the 'Council'). The Centre has an expenditure budget of approximately £645,080 for 2022/23.
- 1.2 The three-year budget plan for Crosfield and Selhurst predicts deficits for the periods of 2023/24 and 2024/25. The Centre Business Manager (CBM) confirmed that due to the Council's May 2022 'Financial Deep Dive', the 2022/23 Budget had not been approved by the Governing Board.
- 1.3 The fieldwork for this review was completed remotely. While our review and testing were performed remotely, we have been able to obtain all relevant documents required to complete the review.
- 1.4 This audit is being undertaken as part of the Internal Audit Plan for 2022/23, as agreed by London Borough of Croydon's (the 'Council') Audit Committee. The objectives, approach and scope are contained in the Audit Terms of Reference in Appendix 1.

2. Key Issues

Priority 1 Recommendations

The Centre should review the Financial Deep Dive Report set by the Council to develop an appropriate budget plan and strategy. This should be reviewed and approved by the Full Governing Body (FGB) and implemented prior to the financial year that it relates to. (Issue 3)

The Centre should review the current DBS register for Governors and ensure that a DBS check is in place for each. Where a check has been initiated, the Centre should ensure that this is followed up with the Disclosure and Barring Service and safeguards implemented until clearance has been received.

The School should ensure that all DBS checks are applied for within 21 days of appointment of a new Governor, with this documented to evidence compliance. (Recommendation 6)

Where costs relating to transactions can be identified in advance, an official Purchase Order should be raised by the Centre Business Manager (CBM) and authorised by the Head Teacher prior to placing the order with the supplier in accordance with the Scheme of Delegation. (Issue 8)

The School should ensure that a Goods/Services Received Check is completed by an officer separate to the approval of invoices. (Issue 9)

The School should ensure that all invoices are authorised prior to payment being made, in line with the Scheme of Delegation. (Issue 10)



The Centre should work with the Data Protection Officer (DPO) and Governors to develop a comprehensive strategy for information governance. This should include, but not be limited to, the reviewing and approving of the following:

- · Retention Policy;
- · Information Governance Policy; and
- Appropriate GDPR training for Governors and Staff members that will occur on a periodic basis.

The Centre should ensure that Governors are reminded of the need to review their LGF email accounts and decline to issue restricted information to personal accounts. (Issue 12)

The Centre should ensure that two written references are obtained for candidates prior to the commencement of employment. The date the references were obtained and checked should be documented clearly. (Issue 13)

Priority 2 Recommendations

The Centre should review its Financial Procedures and ensure that these are in line with the Scheme of Delegation. This includes authorisation limits of staff members tasked with financial responsibilities. The Centre should ensure that the Financial Procedures are ratified by the FGB annually, with this formally documented within meeting minutes. (Issue 1)

The Centre should ensure that the School's Financial Value Standard (SFVS) has been completed, reviewed and approved by the FGB. This should be documented within meeting minutes and submitted to the Local Authority by the 31st March each year. **(Issue 2)**

The Centre should ensure that a monthly Budget Monitoring report is reviewed by the CBM and the Head Teacher at least monthly, with evidence of the review maintained. Evidence can be in the form of a signature or email confirmation. (Issue 4)

The Centre should ensure that the draft Pay Policy is formally reviewed and approved by the Governing Body at its next meeting. Subsequent review and approval of the policy should be completed annually, with this formally documented in meeting minutes. (Issue 5)

The Centre should ensure annual benchmarking reports are updated, reviewed and approved by the FGB. (Issue 7)

Contracts should be reviewed on a regular basis against comparative quotations to ensure that value for money is being maintained and should not be rolled over on a continuous basis. The review and approval of the contracts by the FGB should be clearly documented in the meeting minutes. (Issue 11)



The 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;
- Head Teacher's Assistant;
- IT Manager;
- Centre Business Manager, and
- Finance Manager.





3. Actions and Key Findings/Rationale

Priority	Recommendation 1	Detailed Finding/Rationale
2	Scheme of Delegation	Expected Control
	The Centre should review the Scheme of Delegation and ensure that this is in line with the Centre's current practices, including the authorisation limits of staff members tasked with financial responsibilities.	The roles and responsibilities of the FGB, any committees, the Head Teacher and other members of staff in relation to financial decision making and authorisation should be set out in writing within the Scheme of Delegation. The School Governance (Roles, Procedures and Allowances) Regulations 2013 provide for the FGB to delegate functions but require that these are annually reviewed by the FGB.
	The Centre should ensure that the	Finding
	Financial Procedures are ratified by the FGB annually, with this formally documented within the meeting minutes.	The Centre's Scheme of Delegation is incorporated within the School's Financial Procedures Manual 2020. While this manual was approved by the Chair of the Governing Board on 31 st January 2020, the Centre was unable to evidence review and approval by the FGB.
		The Executive Headteacher was incorrectly reported as Deputy Headteacher from 09/01/2022 within the Scheme of Delegation.
		The Centre's Finance Officer works part-time (two days per week); however, the Scheme of Delegation does not outline any other staff members who can share the responsibility during rest of the week.
		Risk
		Where the Scheme of Delegation is not formally approved, there is a risk that the financial limits defined are not align to the expectations of the FGB.
		Where the Scheme of Delegation does not align with the Centre's actual processes, there is a risk that staff members will be unaware of correct working practices that could lead to inconsistencies.



Management Response	Agreed/Disagreed	Responsible Officer	Deadline
The Finance policy has been reviewed by the Finance Governor and includes an updated Scheme of Delegation. This will go before the Governing Board for approval at the next Full Governing Board meeting on the 19 th October 2023.		Acting Executive Headteacher	19 th October 2023



Priority	Recommendation 2	Detailed Finding/Rationale		
2	SFVS Submission	Expected Control		
	The Centre should ensure that the SFVS has been completed, reviewed and approved by the FGB with this documented within meeting minutes to evidence compliance.	The School's Financial Value S FGBs should formally discuss a The school must send a copy finance department. This is a sta maintained schools.	annually with the Head of the signed standard	Teacher and senior staff. I to their local authority's
	The Centre should ensure that the	Finding		
	SFVS is approved by the FGB and submitted to the Local Authority by the 31st March each year.	formally approved. The Headteacher and Business Manager confirmed that the 2021/22 SFVS had not been submitted to the Council by the 31st March deadline and was not uploaded to the Centre's SharePoint. It was explained that this was because the Centre was not in a position to complete the SFVS and therefore this remained an open item which needed to be completed.		
		Where the Centre does not su there is a risk that the Council do management processes.		
Manage	ment Response	Agreed/Disagreed	Responsible Officer	Deadline
approve 23 rd Fel on time.	ocedure was followed for 2022-23, ed by the FGB at their meeting on the bruary 2023, minuted, and submitted An action plan has also been created tess the partial and non-completed	Agreed	Acting Executive Headteacher	Complete



items. Some items cannot be closed out until		
the LA decision is reached on the future of the		
Maintained Nursery Schools. The updated		
action plan will be discussed at the FGB		
meeting on the 19 th October 2023.		



Priority	Recommendation 3	Detailed Finding/Rationale
1	Approved Budget	Expected Control
	The Centre should review the Financial Deep Dive Report set by the Council in developing an appropriate budget plan and	
	The Centre should then ensure that an appropriate budget is formulated,	The Croydon Scheme for Financing Schools, 4.9 Licensed Deficits, details that, 'In certain circumstances, a school may plan for a deficit budget, with the agreement of the LA only if there:
	reviewed and approved by the FGB and implemented prior to the	- is a significant unforeseen decrease in pupil numbers
	financial year that it relates to.	- is a significant over-projection in pupil numbers.
	As per Croydon's Scheme for Financing Schools, the Centre should ensure that Licensed Deficit action plan is submitted to and authorised by the LA, ensuring that the Centre will be back into surplus within three years.	- are extreme circumstances that could not be foreseen or catered for by the school.
		The school must agree an action plan with the LA (authorisation from the Director of Finance, Investment and Risk and S151 Officer) in order that a non-deficit budget can be set at the end of a specified period' and that, 'The plan to put the school back into surplus must not exceed three years.'
		In addition, as per the School's Financial Policies and Procedures, virements to the agreed budget between £0 - £3,000 should be approved by the HT and virements above £3,000 by the Governing Body.
		Finding
		We confirmed through discussions with the Centre and a review of the draft 2022/23 Budget Plan that a deficit was predicted. The CBM informed Internal Audit that neither of the two Schools/Centre had submitted a deficit recovery license to the Council. Internal Audit was additionally informed that a plan was not in place to tackle the deficit. The Centre was in the process of setting up a



	working group for the analysis of a Financial Deep Dive to ensure the Nursery enters a sustainable financial position moving forward.		
	Risk		
	Where the approved budget is not reviewed, scrutinised and formally approve by the Governing Body in line with the financial procedures, there is a risk that those tasked with governing the School do not have sufficient oversight of the financial environment of the School.		dures, there is a risk that
	Where a forecasted deficit has created to mitigate this, there is to continue to operate as intended	a risk that the Centre ma	
Management Response	Agreed/Disagreed	Responsible Officer	Deadline
The working group was established in January 2023, and following analysis of the Deep Dive, and in response to recommendations set out in this document, an options paper setting out opportunities to improve the financial stability of the school was submitted to the LA for consideration.		Acting Executive Headteacher	Complete
An additional independent financial review has since taken place which was submitted to the LA on 15/05/23. We expect this report to further confirm that the Federation cannot reach an in-year balanced budget within the 3-year time-period. We are therefore waiting for further discussions with the LA to inform next steps			



The expected control has been put in place for 2023-24 and a deficit plan has been submitted

to the LA. This was submitted to the LA on the		
2nd May 2023.		



Priority	Recommendation 4	Detailed Finding/Rationale		
2	Budget Monitoring Reports	Expected Control		
The Centre should ensure that a monthly Budget Monitoring report is reviewed by the CBM and the HT at least monthly, with evidence of the review maintained. Evidence can	The Centre should have budget monitoring procedures in place. This includes preparation of monthly budget monitoring reports from the school's financial system and clear roles and responsibilities within budget monitoring, planning and reporting. This includes scheme of delegation and authorisation procedures.			
	be in the form of a signature or email confirmation.	Finding		
eman commination.	It was confirmed that the Buapproved by the HT since 1st Internal Audit completed in No HT planning to adopt this contribution.	st September 2022. The vember 2022 that this is	e HT stated during the	
		Risk		
		Where the Centre cannot dem are reviewed by the Headter adequately monitored and that timely manner.	acher, there is a risk	that the budget is not
Managemen	t Response	Agreed/Disagreed	Responsible Officer	Deadline
with the Find Headteache recently discussed 2023 who have	procedure has now been established hance Administrator and Executive r (in the absence of a SBM) and most cussed with the EHT on the 18th May has signed the report. Moving forward, been on a monthly basis.	Agreed	Acting Executive Headteacher	Completed



Priority	Recommendation 5	Detailed Finding/Rationale		
2	Pay Policy	Expected Control		
The Centre should ensure that the draft Pay Policy is formally reviewed and approved by the Governing Body at its next meeting. Subsequent review and approval of	The School teacher's pay and appraisal policies should be raccount of any uplift to the national states.	eviewed annually and		
	Finding			
	the policy should be completed annually, with this formally documented in meeting minutes to evidence compliance.	Internal Audit reviewed the draft Pay Policy dated June 2022 which was yet to be approved by the FGB. The previous Pay Policy was ratified in June 2013.		
		Risk		
	evidence compilance.	Where the Pay Policy is not up the Centre will be non-compl Education. This could potential with the national framework.	iant with guidance set	t by the Department of
Managemen	t Response	Agreed/Disagreed	Responsible Officer	Deadline
review and	Pay Policy is in the final stages of will be presented to the Governing next meeting in the 19 October 2023	Agreed	Acting Executive Headteacher	19 th October 2023



Priority	Recommendation 6	Detailed Finding/Rationale
1	DBS	Expected Control
	current DBS register for Governors and ensure that a DBS check is in place for each. Where a check has been initiated, the Centre should	Under the School Governance Regulations 2016, where a governor has been elected or appointed before 1 April 2016 and does not hold an enhanced criminal record certificate, the governing body must obtain an enhanced DBS check. Where a governor is elected or appointed after 1 April 2016 and does not hold an enhanced criminal record certificate, the governing body must apply for a DBS check within 21 days of his or her appointment.
		The Keeping children safe in education 2022 legislation states that all schools and colleges must "obtain (via the applicant) an enhanced DBS check (including children's barred list information, for those who will be engaging in
	The School should ensure that all DBS checks are applied for within	regulated activity with children)".
	21 days of appointment of a new	Finding
	Governor, with this documented to evidence compliance. To facilitate this, the School should update the Single Central Register to include a column detailing the date of appointment and date of	A review of DBS checks for six governors at the Centre identified that for one Governor, appointed on 13 of October 2022, the DBS check was initiated on 9 November 2022. This was not within the required 21 days.
		Additionally, testing of seven new starters to the Centre for 2022/23 confirmed that in four cases, a DBS check could not be evidenced.
	application, in order to demonstrate	Risk
	compliance with the School Governance Regulations 2016.	Where DBS clearance has not been obtained prior to commencement of employment, this can result in a risk to the safeguarding of children.
	The Centre should ensure that DBS checks are completed prior to a new member of staff's employment start date. Where a DBS check is delayed, the School should ensure	Where the Centre does not apply for DBS checks within 21 days of a Governors appointment, there is a breach of the School Governance Regulations 2016.



that	adequate	e conf	trols	are	÷
implen	nented to	mitigate	the	risk to)
childre	en.				

Management Response	Agreed/Disagreed	Responsible Officer	Deadline
Having reviewed our DBS processes on the 15 th May 2023, we found that the procedure is normally being followed and the Single Central Register is routinely reviewed by the EHT. We do however accept that on this occasion, the 21-day deadline was not met. The EHT has met with staff to ensure that timeframes are followed and will regularly update Governors via the EHT report.	Agreed	Acting Executive Headteacher	31 December 2023



Priority	Recommendation 7	Detailed Finding/Rationale		
2	Benching Marking Report	Expected Control		
	The Centre should ensure annual benchmarking reports are updated, reviewed and approved by the FGB.	In line with Q16 of the SFVS, the Centre should benchmark the size of its senior leadership team annually against that of similar schools. The outcome of the exercise should then be presented to the Governing Body for oversight.		
		Finding		
		Through discussion with the Centre, evidence of a benchmarking reporting being in place was requested. The Centre confirmed that a benchmarking report was not in place at the time of the audit.		
		Risk		
		Where the Centre does not undertake a benchmarking exercise, there is a risk that that the organisation is unaware of potential outliers in their financial environment compared to similar Schools and may potentially miss opportunities to reduce expenditure where they are overspending.		
Managem	nent Response	Agreed/Disagreed	Responsible Officer	Deadline
being car has car presented 13/12/22 reviewed	tre acknowledges that benchmarking was not rried out routinely. The new Finance Governor ried out 21/22 benchmarking, which was do to the Governing Board at their meeting on The benchmarking for 22/23 is currently being and will be presented to the FGB in October nochmarking reviews are planned as an annual	Agreed	Acting Executive Headteacher	Complete



Priority	Recommendation 8	Detailed Finding/Rationale			
1	Purchase Order	Expected Control			
	Where costs relating to transactions can be identified in advance, an Official Purchase Order should be raised by the School Business Manager and authorised by the Headteacher prior to placing the order with the supplier in accordance with the Scheme of Delegation.	procedures for purchasing goods and services that meet legal requirements and secure value for money. The Centre's Financial Policies and Procedures Manual states that "Official, pre-numbered orders from the FMS6 system must be used for all goods and			
		Finding			
		Testing of a sample of 15 transactions between 1 April 2022 and 22 September 2022 identified that for 11 transactions, an approved Purchase Order was not raised through the Financial Management System and approved prior to the relevant invoice being received (220687, 305382, 165, 2020011964, 1753a, 2622, 121585, 122518RI, SelhCC05, WINF0000663).			
		Risk			
		Where POs are not raised and authorised prior to commitment of funds, there is a risk that the authorisation and commitment processes are bypassed which could result in inappropriate purchases and poor budgetary control.			
Managem	nent Response	Agreed/Disagreed	Responsible Officer	Deadline	
The Centre accepts that Financial procedures were not followed during the period of the audit due to staff vacancies (including the position of an SBM). The Finance Governor has agreed to carry out more sample		Agreed	Acting Executive Headteacher	September 2023	



testing to monitor the situation and the SBM post has				
now been advertised with a view to creating more				
resilience within the Finance function to mitigate the risk				
of this happening again.				



LBC Final Audit Report Crosfield and Selhurst Nursery and Children's Centre 2022-23

Priority	Recommendation 9	Detailed Finding/Rationale		
1	Goods Received Check	Expected Control		
	The School should ensure that a goods/services received check is completed by an officer separate to the approval of invoices.	"The Clerical Administrators must check that goods and services		
		Finding		
		Testing of a sample of 15 transactions between 1 April 2022 and 2 September 2022 identified that for 11 transactions, the Centre was unable to evidence a completed Goods Received Check (220687, 165 2020011964, 2622, 1035330, 121585, 122518 RI, SELHCCOS WINF000063, INV004303).		
		Risk		
		Where goods/services received checks are not undertaken, there is a risk that payments are made for goods or services that have not been received.		
Managem	nent Response	Agreed/Disagreed	Responsible Officer	Deadline
were not staff vac Governor monitor t advertise	e, the Centre accepts that Financial procedures followed during the period of the audit due to cancies including the SBM. The Finance has agreed to carry out more sample testing to the situation and the SBM post has now been d with a view to creating more resilience within ce function to mitigate the risk of this happening	Agreed	Acting Executive Headteacher	September 2023



Priority	Recommendation 10	Detailed Finding/Rationale		
1	Payments Approvals	Expected Control		
	The School should ensure that all invoices are authorised prior to payment being made, in line with the Scheme of Delegation.			
		Finding		
		Testing of a sample of 15 transactions between 1 April 2022 and 22 September 2022 identified that for two transactions, invoices had no been appropriately authorised in line with the Scheme of Delegation (2622 - £1,542.56, SELHCC05 - £7,991.38).		
		Risk		
		Where invoices are not authorised prior to payment, there is a risk that inappropriate expenditure may be incurred, and accountability is reduced.		
Managem	nent Response	Agreed/Disagreed	Responsible Officer	Deadline
outlines authorisa of this h delegation shared wo on the 19	tre have now purchased a stamp which clearly where various signatures are required for ation including that of invoices to mitigate the risk nappening again. The financial scheme of an is also currently being updated and will be with Governors for approval at the FGB meeting of the October 2023 which will give further clarity on atthorised to approve invoices.	Agreed	Acting Executive Headteacher	31 July 2023



Priority	Recommendation 11	Detailed Finding/Rationale		
2	Quotes and Tenders for Contracts	Expected Control		
	Contracts should be reviewed on a regular basis against comparative quotations to ensure that value for money is being maintained and should not be	The Centre should always co when purchasing goods and be given an opportunity to ch contracts on goods and serv	services. As per the Sallenge the Centre's	SFVS the FGB should plans for replacing the
	rolled over on a continuous basis.	Finding		
	The cost of contracts should take account of the whole life of the engagement.	existing suppliers for a number of years as they did not have capacity to retender and there was no evidence that compathe quotations had been sought within the previous 12 months.		_
	Contracts should be reviewed and approved by the FGB in line with the			nce that competitive
	Scheme of Delegation; this should be clearly documented in meeting minutes.		evidence of contracts being reviewed prior to January be provided as these were stored on the previous CBM's which was not accessible.	
		Risk		
		Where long standing contracts are not periodically reviewed comparative quotations sought, there is a risk that value for mone not be achieved from existing suppliers.		=
		Where contracts/SLAs are not reviewed by the FGB and approved to funds being committed, there is a risk that the Centre undertaservices which may not be the best use of the Centre's funds.		
Management	Response	Agreed/Disagreed	Responsible Officer	Deadline



Centre acknowledges that not all services were petitively tendered due to capacity issues. Where prtunities arise the EHT is reviewing contracts on a by case basis and many contracts have already a combined to benefit from economies of scale as the Federation. As soon as we recruit a SBM we have the capacity to retender more contracts for ds and services that are due to expire. We also store our contracts in OneDrive which can be accessed by.	Acting Executive Headteacher	September 2023
--	------------------------------	----------------



Priority	Recommendation 12	Detailed Finding/Rationale
1	Information Governance	Expected Control
DPO and Governors to comprehensive strateg	Information Governance. This should	To comply with the Data Protection Act (DPA) 2018 and the UK General Data Regulations (UK GDPR), and help ensure the protection of personal data, the Centre should ensure staff are aware of the importance of data protection and the consequences of not maintaining records of data breaches.
	include, but not be limited to, the reviewing and approving of the following:	Guidance should be provided to staff on the DPA 2018 and UK GDPR requirements. This should state that the use of personal emails accounts is not allowed as they may not be secure.
	 DPA and UK GDPR Project Plan; Petention Policy; 	Finding
 Retention Policy; Information Governance Policy and Appropriate DPA and UK GDPF training for Governors and State 	Although the Centre had access to the London Borough of Croydon's Information Sharing Agreement dated 2021, an Information Governance policy was not in place. As a result, the Designated Protection Officer's (DPO) main tasks, roles and responsibilities had not been clearly documented.	
	training for Governors and Staff members that will occur on a periodic basis. The Centre should ensure that Governors are reminded of the need to review their LGF email accounts and decline to issue restricted	Additionally, the Finance Administrator stated that the Governors did not regularly check their LGF (London Grid For Learning) email accounts. The Governors send restricted information through the use of their personal email accounts, rather than the regulated and restricted access school and FGB accounts.
to review their LGF er		The Centre did not have in place measures for Governors and staff members to complete relevant UK GDPR training.
	information to personal accounts.	Risk
		Where the Centre does not have in place an updated and ratified Information Governance Procedures document, there is a risk that staff members may be unaware of potential cases of DPA and UK GDPR breaches and controls in place to mitigate this risk.



	The Centre should not be sending restricted information relating to the Centre to an individual personal account. This could result in data breaches and breaches GDPR regulation.		
Management Response	Agreed/Disagreed	Responsible Officer	Deadline
The Centre acknowledges this recommendation and the Governing Board appointed a Link Governor for Information Governance / GDPR at its last meeting on 13/02/2023 who will work with the Centre DPO to strengthen this area.	Agreed	Acting Executive Headteacher	September 2023



Priority	Recommendation 13	Detailed Finding/Rationale			
1	New Starters	Expected Control			
	The Centre should ensure that two written references are obtained for candidates prior to the commencement of employment. The date the references were obtained and checked should be documented				
	clearly.	Finding			
		The Centre had seven new starters during 2022/23. The documentation retained for all seven of these new starters was requested, but for three cases, no evidence of references was made available for testing.			
		Risk			
		Where evidence of references are not maintained, there is a risk that the Centre may hire unsuitable personnel.			
Management Response		Agreed/Disagreed	Responsible Officer	Deadline	
The Executive Headteacher is now overseeing this control to ensure that all references are received prior to interviewing		Agreed	Acting Executive Headteacher	Complete	



4. Priority 3 issues

Priority 3 Recommendations	Detailed Finding/Rationale
1. Governance and Leadership	Expected Control
The Governors Induction Training Manual should be amended to include their responsibilities to	The Governors should be made aware of their responsibilities and understanding related to financial management. A suitable induction process should be in place to provide support and guidance to all Governing Board Members.
financial management.	Finding
A review of Governors' skills should be undertaken on a periodic basis to identify any potential skills gaps or imbalances in the composition of the FGB. If appropriate, an action plan should be put in place to address	Examination of the Governors' Induction Training Manual found that the induction checklist was last reviewed in August 2020. It was also found that the Manual's financial aspects did not include the Croydon Scheme for Financing Schools, the Schools Delegation of authorisation levels, information of the current years approved budget or the Governance handbook.
any gaps.	Furthermore, an annual skills audit for the FGB was completed in August 2022.
Centre's Response	The audit highlighted that the area of Accountability and Specialist Knowledge scored the lowest of the four areas, scoring ratings of 'red' within each of the four
The Induction Training Manual will be reviewed to include more details covering responsibilities for financial	sub-groups. The consolidated skills matrix assessed the overall 'Boards Experience' to be 'amber'.
management.	Risk
The last skills audit was undertaken and reported to the FGB on 13 th December 2022. Included was a checklist of areas for governor further training.	Where Governors are under-informed regarding matters pertaining to the School's finances, there is a risk that those responsible for the oversight of the School may not be adequately equipped to perform their role accordingly.
Responsible Officer:	
Acting Executive Headteacher	



Priority 3 Recommendations	Detailed Finding/Rationale
Deadline: October 2023	
2. Governance and Leadership The Centre should ensure that the latest internal audit report is submitted to the FGB for review, discussion and approval. This should be documented within meeting minutes to evidence compliance. Centre's Response This most recent audit report will be submitted to the Governing Board and discussions will be held at the meeting on 19th October 2023. Responsible Officer: Acting Executive Headteacher Deadline: End of October 2023	Expected Control The SFVS requires the FGB to ensure there are no outstanding matters from audit reports or from previous consideration of weakness. Finding Internal Audit received verbal CBM confirmation that the last internal audit report received by the Centre was in June 2020. The report was submitted to the FGB in June 2020; however, the Centre was unable to evidence the report being discussed by the FGB. Risk Where the latest internal audit report is not discussed by the FGB, this can lead to a lack of oversight of any recommendations made and necessary actions required by the Centre.
3. Payroll The Centre should ensure all Leaver's notices are acknowledged and issued to the payroll provider,	Expected Control The School should ensure that staff terminations or resignations are acknowledged by the Headteacher prior to notification being issued to the payroll provider.



Priority 3 Recommendations	Detailed Finding/Rationale
Centre's Response This recommendation is accepted. A procedure will be adopted by the	There were six leavers during 2022/23 and Internal Audit tested all of these. In all six cases, there was no evidence of the HT acknowledging the resignations. Risk Where written acknowledgment of resignation from the HT is not present, there is a risk of potential disputes relating to the staff member's last working day
The Centre should ensure that a comprehensive annual check, review and approval of the Information Asset Register by an independent member of staff and signed and dated. The Centre should ensure that the IAR is updated to include the following items; The Information Asset Owner; and Details of staff, personal and financial access to data	Expected Control An Information Asset Register (IAR) has been created/updated. This details key types of data / information within the school, what it is used for, where it's stored, who it is shared with (if it is), how long it is kept it for and how it is protected. This should include: a. Paper files b. Emails c. Registers d. Club lists e. Trip records f. Sickness records g. Staff and governor details h. Salaries i. Third party data held or shared



Priority 3 Recommendations	Detailed Finding/Rationale
Centre's Response This control will be part of the School Business Manager's role when appointed. Responsible Officer: SBM Deadline: September 2023	 A review of the IAR confirmed that it was in 'draft' form and does not outline the following information: The information asset owner; and Detail of staff, personal and financial access to data. Risk Where the Centre does not hold an adequate IAR and there are insufficient checks by the FGB, there is an increased risk of non-compliance with the Data Protection Act 2018 and UK GDPR.
5. Income	Expected Control
The Centre's Letting Policy should be reviewed, updated, and formally approved by the FGB on an annual basis. Approval should be recorded	The Centre is expected to have an up to date lettings policy which details all the current fees on a variety of services. The policy should be reviewed and approved by the FGB. Finding
in the minutes of the relevant meeting.	A review of the lettings policy confirmed that it contained details on the fees and
Centre's Response	charges on services, staffing, administration, wear and tear, equipment and rental value. However, the policy had been in 'draft' form since October 2022 and had
The school facilities are not let on a commercial basis. Should the circumstances change an updated policy will be submitted to the GB for approval. The training room is made available to the Children's Centre at	not been reviewed or approved at a FGB meeting. Risk Where the Centre does not have an up to date and approved Lettings Policy, there is a risk the Centre does not receive the level of income which accurately reflects the cost of buildings and equipment utilised.



Priority 3 Recommendations	Detailed Finding/Rationale
a fee in Partnership with the LA Best Start.	
Responsible Officer:	
Acting Executive Headteacher	
Deadline:	
As required	



AUDIT TERMS OF REFERENCE

Crosfield and Selhurst Nursery and Children's Centre 2022/23

1. INTRODUCTION & BACKGROUND

- 1.1 This audit was undertaken as part of the Internal Audit Plan for 2022/23, as agreed by the Council's Audit Committee.
- 1.2 With Covid-19 and the consequent restrictions in place, we are adopting a hybrid approach with this audit initially being conducted remotely.

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

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	1	1	2
Budget Planning, Monitoring & Reporting	1	1	0
Payroll	1	3	1
Procurement	3	1	0
Banking	0	0	0
Information Governance	1	0	1
Income	0	0	1
Health and Safety	0	0	0
School Fund Accounting	0	0	0
Totals	7	6	5



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.
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 (High)	management to action and mitigate significant expecting to rick
Priority (Mediur	
Priority (Low)	areas considered to be of boot practice that are improve for everyle the



Appendix 3

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.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk.

Registered office: Mazars LLP, 30 Old Bailey, London EC4M 7JZ, United Kingdom. Registered in England and Wales No 0C308299.

