

CROYDON

Final Internal Audit Report

Access to IT Services

December 2018

Distribution:

Executive Director of Resources (Final only)

Director of HR

Chief Digital Officer

Interim Head of ICT

ICT Service & Contract Manager

HR Recruitment and Process Manager

Assurance Level	Recommendations	Made
	Frienty 1	
Substantial Assurance	Priority 2	3
	Priority 3	0

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.

The Report was prepared solely for the use and benefit of 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.

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Executive Summary

1. Introduction

- 1.1 The Croydon Managers Guidance for Supporting Disabled Employees details that, 'Croydon Council are fully committed to the principles of equality of opportunity and promoting diversity. As a Disability Confident Employer, the Council is aware that disabled people together with other groups may be discriminated against whilst seeking employment or promotion. The Council is determined to ensure that all its functions and services (including employment) are free from unlawful discrimination.'
- 1.2 As an employer, Croydon Council aims to create an environment in which all staff, whatever their disability status, feel equally welcomed and valued. Furthermore, it aims to remove or exclude all barriers preventing disabled employees from playing a full role in the council's workforce and enjoying all the benefits of their working life.
- 1.3 The Croydon Disability Staff Network supports staff with physical disabilities such as visual impairment, hearing loss, wheelchair users and those with other hidden disabilities. They work closely with the Facilities Management and ICT departments to ensure that technology and facilities work for all staff with disabilities.
- 1.4 The audit focused on interviewing officers within the council to ascertain the level of support and guidance offered to staff and, in particular, members of the disability staff network.
- 1.5 This audit was part of the Internal Audit Plan for 2018/19. The audit objectives, methodology and scope are contained in the Audit Terms of Reference at Appendix 1.

2. Key Issues

Priority 2 Issues

The ICT Service & Contract Manager did not feel that the on-boarding process was as efficient as could be and that ICT were not always being informed of the staff various disabilities and needs. This caused issues for new starters, as it would cause delays for new equipment to be procured. (Issue 1.)

Discussions with various officers of the disability network established that it was felt that line managers were unaware of the policies and guidance on offer from London Borough of Croydon, (Issue 2.)

Discussions with members of staff from the disability network and ICT Service & Contract Manager established that it was felt that line managers were unaware of disability training on offer from the Council. (Issue 3.)



3. Actions and Key Findings/Rationale

stem stem inked shows in ICT i				Service of the service of disabilities duffilly off-boarding process.
s seeking to provide a closer farter information being linked ey learning. The effectiveness ystem should be reviewed as to live launch and review. ICT plementation project group Deadline June 2019 for review	Priority	Action Prop	osed by Management	Detailed Finding/Rationale – Issue 1
Deadline June 2019 for review		The move to the in April 19 is the link to new stand through to key of the new system.	he new recruitment system seeking to provide a closer rier information being linked learning. The effectiveness stem should be reviewed as	The HR Recruitment and Process Manager advised of the various facilities available for staff from the recruitment stage through the on-boarding process and also during their employment within the Council. This included the needs for reasonable adjustments to be made within the workplace prior to the member of staff joining, and any specialist equipment being ordered by a manager as and when needed.
Deadline F		part of the go are on the imp	live launch and review. ICT lementation project group	New members of staff are made aware of the government grant available via the 'Access to Work' form, which can help to subsidise specialist equipment required within the workplace.
Deadline f				There is an induction process with information about disability resources passed on at this time to new managers. All new managers should complete health and safety training, which also refers to disability resources.
Deadline June 2019 for review				From discussions with the ICT Service & Contract Manager, it was noted that from his experience, the on-boarding process was not as efficient as could be. He felt that ICT were not always being informed of the staff various disabilities and needs. This caused issues
June 2019 for review	Responsi	ible officer	Deadline	for new starters, as it would cause delays for new equipment to be procured.
	Director of	HR	June 2019 for review	staff (if known), there is a risk that delays in procurement of specialist equipment could lead to an adverse effect on the employees' ability to carry out normal day-to-day activities.

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Control	Area 4: Polic	es and Procedures supp	Control Area 4: Policies and Procedures supporting arrangements in place.
Priority		Action Proposed by Management	Detailed Finding/Rationale – Issue 2
8	As part of the movesystem we are experient and interest of the motification learning. We will revise live after April 19. This is depended by the This should be revised the functionality possible. Line managers and respandiustments.	As part of the move to new recruitment system we are exploring the automatic email notification to e-induction and learning. We will review this once system is live after April 19. This is dependent on working collaboratively with ICT on solutions. This should be reviewed in June 2019 to check if functionality described has been possible. Line managers are responsible for identifying and responding to reasonable adjustments.	A disability passport is in place. This details requirements/needs for disabled staff and has helped ensure continued support for disabled staff, specifically if moving roles through the Council. It ensures that reasonable adjustments will be made and continued support can be given. HR believes that help is also offered to managers managing sickness issues where disability may be a factor. Resources are available to support managers. This includes extensive learning resources. All equipment needs manager approval, who will also need to provide a cost code for specialist equipment. Members of staff are offered a loan of specialist equipment to use (e.g. roller mouse for people with arthritis, special chair for people with back problems), and once they are happy with the product they will either be assigned that piece of equipment, or a new one will be procured. This is to ensure all items match user needs. The Health & Safety team will then follow up to assess whether any changes may be needed. From there, the manager will monitor the situation. There are various Health & Safety policies and guidance documents are being reviewed every two years by the Health & Safety compliance manager to ensure compliance to legislation. From discussions with various officers of the disability network, it was felt that in their experience, line managers were unaware of the policies and guidance on offer from London Borough of Croydon, due to the queries being directed to the disability network.
Respon	Responsible officer	Deadline	Where Managers are not utilising all the facilities the council has in place to support them to haild knowledge and enable them to feel confident working effectively with disabled
Director of HR	of HR	June 2019	staff, there is a risk disabled staff may feel they are not being treated/or are receiving fair, relevant and appropriate treatment.

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rilority	Action Prop	ritority Action Proposed by Management	Detailed Finding/Kationale – Issue 3
7	ICT/H&S to developments	ICT/H&S to work with learning and development when new legal or other developments are identified and e-learning	Members of the disability network were made aware of the internal audit and were offered the opportunity to contact the Internal Audit team. A number of individuals did come forward, and their comments have been taken into account.
	may be update	may be updated and communicated.	The Chair of the Disability Network informed audit that ICT facilities for disabled/less able staff had improved greatly in the past two years. A refresh of all ICT equipment was carried out approximately two years ago. This enabled ICT to evaluate and decide how they could improve the service for all disabled users.
			There is a fact sheet with manager's guidance on the website/intranet, which was updated in July 2018. Discussions had been held with a variety of managers by the chair of the disability network and it was felt that the 'disability network' and its members offered managers a better understanding for requirements. This had been mentioned to the members of the network by various managers.
			However, from discussions with members of staff from the disability network and ICT Service & Contract Manager, it was noted that from the experience of these officers, line managers were unaware of disability training on offer from the Council. This was mainly due to queries being directed to disability network members.
Respons	Responsible officer	Deadline	Although there is disability training for managers at induction for all new managers, there is a risk that areas of new developments and legal and regulatory requirements may be
Director of HR	fHR	Completed	forgotten by managers and their responsibilities in making reasonable adjustments for their members of staff.



TERMS OF REFERENCE

Access to IT Services

1. INTRODUCTION AND BACKGROUND

- 1.1 The Croydon Managers Guidance for Supporting Disabled Employees details that, 'Croydon Council are fully committed to the principles of equality of opportunity and promoting diversity. As a Disability Confident Employer the Council is aware that disabled people together with other groups may be discriminated against whilst seeking employment or promotion. The council is determined to ensure that all its functions and services (including employment) are free from unlawful discrimination.'
- 1.2 As an employer, Croydon Council aims to create an environment in which all staff, whatever their disability status, feel equally welcomed and valued. Furthermore, it aims to remove or exclude all barriers preventing disabled employees from playing a full role in the council's workforce and enjoying all the benefits of their working life.
- 1.3 The Croydon disability staff network supports staff with physical disabilities such as visual impairment, hearing loss, wheelchair users and those with other hidden disabilities. They work closely with the Facilities Management and ICT departments to ensure that technology and facilities work for all staff with disabilities.
- 1.4 This audit is part of the agreed Internal Audit Plan for 2018/19.

2. OBJECTIVES AND METHODOLOGY

- 2.1 The overall audit objective is to provide an objective independent opinion on the adequacy and effectiveness of the control framework operating.
- 2.2 In order to achieve the overall objective, a risk based systems audit approach will be carried out, documenting and evaluating the actual controls against those expected and based on this, undertaking appropriate testing. Comparison will be made as appropriate with best practice guidance.

3. SCOPE

3.1 The audit scope included the following areas in assessing how London Borough of Croydon address the IT needs of their users with disabilities:

	Is	sues Identifi	ed
Control Areas/Risks	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
During the recruitment process;	0	0	0
During the on boarding process;	0	1	0

On an ongoing basis during their employment in order to refresh the needs based on triggers (legislation change, individual employee circumstances change etc.)	0	0	0
Policies and procedures supporting the arrangements in place;	0	1	0
Training provided to managers and staff supporting policies and procedures;	0	1	0
Focus groups or forums established	0	0	0
TOTAL	0	3	0

DEFINITIONS FOR AUDIT OPINIONS AND RECOMENDATIONS

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 consistently applied.
0	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 which may put this achievement at risk.
0	Limited Assurance	There are significant weaknesses in key areas of system controls and/or non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or weak and/or there are high levels of non-compliance, leaving the system open to the high risk of error or abuse which could result in financial loss and/or reputational damage.

Priorities assigned to recommendations are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require the immediate attention of management to miligate significant exposure to risk.
Priority 2 (Medium)	Control weakness that represent an exposure to risk and require timely action.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, action to address still provides an opportunity for improvement. May also apply to areas considered to be of best practice.



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.

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