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**Subject:** Q3 2019 Follow-up Status of Audit Recommendations

**Report to:** Audit Committee

**Report date:** Monday, September 9, 2019

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## Recommendations

That report AC-C 24-2019 regarding the current status of audit recommendations **BE RECEIVED.**

## Key Facts

- The purpose of this report is to provide Audit Committee with a status update on the degree of implementation of audit recommendations made since 2015.
- This report will cover all audits completed and issued up to the previous Audit Committee meeting, June 24, 2019.
- As part of the annual audit business cycle, the follow up process will be completed and reported to Audit Committee on a quarterly basis.
- A total of 80 recommendations have been provided to management and staff to improve operations or their internal controls.
- Between 2017 and 2019, Internal Control and Organizational Performance has completed 16 internal audit reports.

## Financial Considerations

There are no immediate budgetary considerations associated with this report. The audit recommendations and subsequent Management Action Plans (MAPs) may have had budgetary implications associated with their implementation and have been accommodated within current operating budgets.

## Analysis

This report is intended to be an update on the status of Management's implementation of the audit recommendations since 2015. All recommendations that have not been fully implemented within the management approved timeframe will be highlighted in this report for Audit Committee's attention.

In total, Niagara Region had 80 audit recommendations brought forward through past completed audits. Details of these recommendations are as follows:

- 58 have been fully implemented,

- 13 of the recommendations are in progress and proceeding with satisfactory implementation plans in place,
- 7 recommendations are in progress, but behind schedule.
- 2 recommendations remain on hold,

The attached appendices provide a detailed status of all recommendations, including progress updates from management and staff.

This type of follow-up report is consistent with a best practice outlined in the guiding principles published by the Institute of Internal Auditors, which Internal Control & Organizational Performance adheres to. The quarterly follow up process ensures that Management and Staff are held accountable for the implementation of action plans, which they have committed to. The follow up provides valuable information to members of Audit Committee in the execution of their oversight and governance role.

### **Alternatives Reviewed**

No other alternatives were reviewed at this time.

### **Relationship to Council Strategic Priorities**

Internal Auditing is consistent with Regional Council's Strategic Plan, specifically the fourth pillar: "Sustainable and Engaging Government". Internal auditing promotes an organizational culture that values continuous improvement, collaboration between business units and innovative ideas to drive efficiency and effectiveness.

### **Other Pertinent Reports**

AC-C 8-2017 Annual Follow Up Status of Audit Recommendations  
AC-C 15-2018 Management Action Plan and Follow-up Status Report  
AC-C 21-2018 Q1 2018 Follow up Status of Audit Recommendations  
AC-C 34-2018 Q2 2018 Follow up Status of Audit Recommendations  
AC-C 3-2019 Q1 2019 Follow up Status of Audit Recommendations  
AC-C 14-2019 Q2 2019 Follow-up Status of Audit Recommendations

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**Prepared by:**

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**Recommended by:**

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Commissioner/Treasurer  
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**Submitted by:**












Ron Tripp, P.Eng.  
Acting Chief Administrative Officer

*This report was reviewed by Frank Marcella, Internal Auditor and Henrik Gao, Internal Audit Analyst.*

**Appendices**

Appendix 1	AC-C 24-2019 Appendix 1 – Final Summary
Appendix 2	AC-C 24-2019 Appendix 2 – Final Detailed

**INTERNAL CONTROL & ORGANIZATIONAL PERFORMANCE  
FOLLOW UP STATUS REPORT  
Current Status as of August 23, 2019**

Audit Name		Total # of Recommendations	Not Started	In Progress		On Hold	Fully Implemented	Percentage Completion
				On Time	Late			
2015	Burgoyne Bridge	8	0	0	1	1	6	 75%
2016	Fleet Management	4	0	0	1	0	3	 75%
2017	Fleet Parts Inventory and Fuel	9	0	0	4	1	4	 44%
2018	Waste and Recycling Drop-Off Depot Agreement	2	0	0	0	0	2	 100%
	Payroll 1 - Timekeeping	3	0	2	0	0	1	 33%
	Grants and Incentives	4	0	4	0	0	0	 0%
	Controlled Medications Inventory	3	0	0	1	0	2	 67%
	Accounts Payable	2	0	2	0	0	0	 0%
	Information Technology Security and Data Backup Controls	20	0	5	0	0	15	 75%
Audit Projects with Recommendations Previously reported to Audit Committee		25	0	0	0	0	25	 100%
<b>Total</b>		<b>80</b>	<b>0</b>	<b>13</b>	<b>7</b>	<b>2</b>	<b>58</b>	 73%

Title: Log of outstanding Management Action Plans from historical internal audit reports

Audit Report Title	Observation Title and Brief Description	Recommendation per Audit Report	Management Action Plan per Audit Report	Accountable Individual & Title	Original Completion Date MM/DD/YYYY	Revised Completion Date MM/DD/YYYY	Issue Status	Follow Up Comments
Burgoyne Bridge Audit	Cost Estimating	The Region should develop a structured estimating process to allow for accurate monitoring, control, forecasting and reporting of project costs.	<p>1. Large construction projects: Provide estimates at various project stages utilizing the services of qualified cost consultant's/quantity surveyors</p> <p>2. Lifecycle renewal projects: Use structured estimating as applicable for the particular project</p> <p>3. Structured cost estimating: Different cost estimating should be applied based on the type of capital project. Large projects should engage qualified cost consultants at various stages</p> <p>4. Job order contracting: Pilot in progress for facilities lifecycle renewal projects and maintenance projects. Provides unit pricing for projects on an ongoing basis for a set term</p>	Kashif Siraj, Manager, Implementation & Analysis	Not provided in report	Q4 2020	On Hold	<p><b>As per Kashif Siraj (Manager, Project Management Office) on 08/06/2019:</b> AMO Director starting this week, we'll get the ball rolling on the Estimation conversation as it is part of the AMO roadmap.</p> <p><b>Auditor's note: Maciej Jurczyk, September 5, 2019.</b> Principle reason for this issue being outstanding since 2016 is employee turnover, as it has been reassigned multiple times.</p> <p><b>As per Kashif Siraj (Manager, Project Management Office) on 04/12/2019:</b> The status will remain exactly the same as last time update.</p> <p><b>As per Kashif Siraj (Manager, Project Management Office) on 01/11/2019:</b> Estimates for Capital Initiatives are developed as part of the business cases for budget approvals. PMO will be looking into standardizing Validation of these Estimates early on in the capital projects. Once the Asset Management Office is in place the PMO will collaborate and align with it on Estimation.</p> <p><b>Maciej Jurczyk (Director, Internal Control &amp; Org Performance), Aug 20, 2018:</b> Discussions with Senior Management in PW and Finance in May 2018 resulted in ICOP taking a leadership role in cost estimating. Pending the creation of the PMO on Sept 10, 2018, this unit will be accountable for this work going forward.</p> <p>No update for the <b>May 7, 2018 Audit Committee</b> report, still on hold. Due to staff leave of absence special projects related to this recommendation have been put on hold pending return.</p>
Burgoyne Bridge Audit	Document Management	The Region should develop and implement a formal document management process for all projects	<p>Review of current corporate processes to:</p> <ol style="list-style-type: none"> <li>Determine immediate actions required to have all Burgoyne Bridge records brought into compliance</li> <li>Develop document management best practices <ul style="list-style-type: none"> <li>compare against lead/best practices and identify areas for improvement</li> <li>ensure implementation of the process across the organization</li> </ul> </li> <li>Report back on this review and any proposed recommendations and actions</li> </ol>	Tom Jamieson, Associate Director, Application and Information Services	<p>1. 08/31/2016</p> <p>2. 12/31/2016</p> <p>3. 03/31/2017</p>	Pilot Project in 2020	In progress late	<p><b>As per Tom Jamieson on 08/09/2019</b> Two key milestones have been achieved since the last update on this initiative: First, two central project roles have been filled including the Project Manager (Judi Rock – starting August 26th) and the Manager, Records and Information Management role (Sherri Hannel – starting September 3rd). Both of these roles have been absent until now and are critical in successfully moving the project forward Second, the information audit referenced in the previous update was completed in March with a final report delivered by the consultant in May. The deliverables included: -An inventory of key data and content (documents etc.) used across departments in support of their business - Documented risks and opportunities across the organization for ECM and Business Intelligence technology and relative impact. -Documented scope and functional requirements for ECM which will be the basis of an RFP. - A multi-year action plan for establishing and implementing an Enterprise Information Management Framework providing the foundation for technology, business process, governance, compliance and people The action-plan noted above recommends that the balance of 2019 be invested in establishing a governance program for data and information at the Region while working through the identification, selection and procurement of a technology solution in parallel. Upon completion (year end) it is recommended that a production pilot be undertaken over the course of 2020 including the review and implementation of an enterprise scanning and email management solution.</p> <p><b>Auditor's note: Maciej Jurczyk, September 5, 2019.</b> Principle reason for this issue being outstanding since 2016 is the complexity of subject matter (i.e. developing new system and due diligence within procurement process).</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per correspondence with Tom Jamieson (Associate Director, Application and Information Services) on 01/11/2019:</b> To address gaps around process, management and information governance an audit of information and content has been scheduled for Jan. and Feb. This will entail sessions with each Department or Division to inventory key information</p>
Fleet, Equipment Management and Replacement Process	Fleet Strategies, Policies, Procedures	Management should formalize the Fleet Strategy and set priorities or areas of focus to provide direction to fleet services. The strategy could be supported by a life cycle costing framework or align to the enterprise wide asset management planning initiatives. Performance and value metrics should be set to align to strategic directives and should be periodically tracked. Council approval should be sought once the fleet strategy is documented.	<ol style="list-style-type: none"> <li>Develop a Fleet strategy statement to be presented to Public Works Committee for approval, prior to seeking approval from Regional Council (update report to Audit Committee to follow)</li> <li>Fleet strategy will be incorporated into overall Asset Management Plan</li> <li>Performance measures should be developed and tracked to align with the overall Fleet Strategy.</li> <li>Review Fleet policies and procedures as required.</li> </ol>	<p>Derek McGaghey, Associate Director, Transportation Integrated Services</p> <p>formerly Ken Williams (Supervisor Fleet Operations) and Shawn McCauley (Associate Director Transportation and Fleet Operations)</p>	<p>1. 06/2017</p> <p>2. Ongoing</p> <p>3. Ongoing</p> <p>4. Ongoing</p>	<p>1. Dec 31, 2019</p> <p>2. Completed</p> <p>3. Dec 31, 2019</p> <p>4. Dec 31, 2019</p>	In progress late	<p><b>Derek McGaghey, Associate Director, Transportation Integrated Services, Sept 5, 2019:</b> 1. Not yet completed. Currently considering updating the vision and mission statement within the PW Vehicle and Equipment Policy, if possible. 2. Completed with alignment to Asset Management Office (AMO). 3. Being developed as part of Q3-Q4 performance objectives through the use of KPIs. Has received KPIs used by other jurisdictions (Guelph and Ottawa), and interested in developing KPI's with internal consulting support from ICOP division. 4. Ongoing. The PW Vehicle and Equipment Policy was approved in 2009. Requires updating to bring it in alignment with Corporate branding standards and language.</p> <p><b>Auditor's note: Maciej Jurczyk, September 5, 2019.</b> Principle reason for this issue being outstanding since 2016 is staffing transition, as this file has been re-assigned due to a re-organization in Transportation Division in 2018.</p> <p><b>Management Action Plan updates for May 2019 AC have not been received.</b></p> <p><b>As per correspondence with Shawn McCauley (Associate Director, Transportation) on 12/19/2018:</b> 1. As part of restructuring a new division was created to run this area in 2019, once the new Associate Director is in place the division will finalize the statement. On target to complete this by end of Q1, 2019</p> <p><b>As per correspondence with Shawn McCauley (Associate Director, Transportation) on 08/10/2018:</b> 1. Mission statement has been finalized and is under review by senior staff. Estimated completion date: 03/31/2019 2 - 4. Previously completed</p> <p><b>As per follow up correspondence with Shawn McCauley (Associate Director, Transportation) on 04/03/2018:</b> 1. Ken Williams has reached out to staff but the mission statement has not been formalized. Winter season was busier than usual and as a result it tied up a lot of staff time. 2-4. Previously completed</p>

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Fleet Parts Inventory & Fuel Audit	Niagara Recycling Centre - Area to improve internal controls	<p>1. Fuel dip tests should be conducted two times a week in order to monitor fuel levels and perform reconciliations. The twice-weekly dip tests should be conducted at the start of the work week, first shift Monday morning, and then the end of the work week, last shift Friday evening.</p> <p>2. Fuel reconciliations should be completed on a daily basis. The reconciliations should account for opening fuel levels, deliveries and consumption for the day. This amount should be compared and reconciled to the twice-weekly fuel dip tests. Variances should be examined.</p> <p>3. Assuming that the Niagara Region will retain ownership and continue to operate the Recycling Centre, Niagara Region staff should research the cost associated, and if feasible, install automatic fuel pumps in correlation with an automated fuel management system (such as the CoenCorp system utilized by Public Works).</p> <p>4. In the interim, the Recycling Centre should continue and/or begin the following:</p> <p>a. Implement and enforce a policy whereby circle checks are not allowed to be turned in with nil values. The employee is required to fill out the circle check, indicating the amount of fuel they pumped into their unit or they are required to indicated that nil fuel was pumped and initial the box. Each form should be signed by the operator on a daily basis in order to improve and foster accountability.</p> <p>b. A ticket system should be implemented for any fueling transactions not completed at the time of the circle check. The ticket system will ensure that there is a tracking system in place for all fuel transactions which will improve record keeping, reporting and directly affect the ability to complete reconciliations.</p>	<p>1. As per recommendation 1, Niagara Region staff to conduct manual dip test twice weekly to reconcile fueling transactions throughout the week. Dip stick ordered and received on Nov 22nd. Implementation starting week of November 27, 2017.</p> <p>2. As per recommendation 2, Niagara Recycling staff will complete fuel reconciliations on a daily basis. Niagara Region's Contract Manager will be responsible for reviewing tracking spreadsheet every month to look for variances/discrepancies. First monthly review scheduled for January 2018. Daily reconciliations start date November 13, 2017.</p> <p>3. As per recommendation 3, and dependent on Council's direction on Niagara Region's role in recycling processing operations as part of the Waste-Free Ontario Act, Niagara Region's Contract Manager will research automated systems used at Regional facilities, and, depending on cost, will procure and install automatic fuel pumps in correlation with an automated fuel management system.</p> <p>4. Implementation of a ticket based system for all fueling transactions. Staff will no longer be documenting information on circle checks, as circle check is complete at beginning of shift and fuel transactions occur throughout the day. Alternatively, as per recommendation 4b, ticket information includes the following: date, unit number, fuel usage, odometer reading and signature of operator. Complete - started Nov 13, 2017.</p>	<p>Allison Tydesley (Associate Director, Waste Collection &amp; Diversion)</p> <p>in Allison's absence, Jennifer Wilson (Supervisor Waste Management)</p>	<p>1. Nov 27, 2017</p> <p>2. Nov 13, 2017 and January, 2018</p> <p>3. Ongoing</p> <p>4. Nov 13, 2017</p>	<p>Dependent upon Council direction</p>	<p>On Hold</p>	<p><b>As per Jennifer Wilson (Supervisor, Waste Management) on 08/19/2019:</b> 3. Still on hold pending decision on MRF</p> <p><b>As per Jennifer Wilson (Supervisor, Waste Management) on 04/17/2019:</b> 3. Still on hold pending decision on MRF</p> <p><b>As per Jennifer Wilson (Supervisor, Waste Management) on 01/22/2019:</b> Action plan is awaiting to be presented and approved by Council. No data has been provided when it will be presented at this point. All MAPs have been fully implemented with the exception of #3 which is dependent on Council's direction and will be implemented once a decision is known.</p> <p><b>As per correspondence with Jennifer Wilson (Supervisor, Waste Management) on 08/10/2018:</b> 1. Completed 2. Completed 3. Dependent on Council's direction and will be implemented once a decision is known. 4. Completed</p> <p><b>As per correspondence with Jennifer Wilson (Supervisor, Waste Management) on 04/04/2018:</b> 1. Fully implemented 2. Fully implemented 3. Dependent on Council's direction 4. Fully implemented</p>
Fleet Parts Inventory & Fuel Audit	Public Works - Automation of fueling system at Smithville yard	<p>Public Works should research the cost and, if feasible, implement the CoenCorp automated fueling system at the Smithville yard.</p>	<p>Staff are in the process of reviewing the recommendations from a consultant report on Niagara Patrol Yards Retrofit, Smithville and Pelham Patrol Yards completed in 2013 that has been on hold while we completed an external audit on Snowplowing, Road Maintenance and Landscaping Services. Based on the recommendations in these reports and the condition of the fueling system at the Smithville Yard, staff are not recommending installing the CoenCorp fuel system at this time. If staff follow through with the recommendation to consolidate both yards into one facility, the fueling system at Pelham was built to be transferable to the new consolidated yard location. The current fuel storage system at Smithville is oversized and was built only as a temporary measure. If a final decision is made to keep Smithville Patrol Yard open then the costs of installing new tanks with the CoenCorp fuel system will be incorporated within the capital budget.</p>	<p>Derek McGaghey, Associate Director, Transportation Integrated Services</p> <p>formerly Ken Williams (Supervisor Fleet Operations) and Shawn McCauley (Associate Director Transportation and Fleet Operations)</p>	<p>Dec 31, 2017</p>	<p>Q2 2020 (June 30, 2020)</p>	<p>In progress late</p>	<p><b>Derek McGaghey, Associate Director, Transportation Integrated Services, Sept 5, 2019:</b> The card lock system is being considered for the Smithville Yard with potential implementation in Q2 2020. Smithville Yard continues to be looked at for capital replacement. Routing study underway with a patrol yard replacement study to follow.</p> <p><b>Auditor's note: Maciej Jurczyk, September 5, 2019.</b> Principle reason for this issue being outstanding since 2016 is staffing transition, as this file has been re-assigned due to a re-organization in Transportation Division in 2018 and a lack of capital funding.</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per correspondence with Shawn McCauley (Associate Director, Transportation) on 12/19/2018:</b> Delayed until restructuring of the division is complete. Estimated completion date: June 30, 2019 Dependent on decision to consolidate the yards or not.</p> <p><b>As per correspondence with Shawn McCauley (08/10/2018):</b> A consultant is going to be hired to conduct a yard rationale study in 4th quarter of 2018.</p>
Fleet Parts Inventory & Fuel Audit	Public Works - Inventory storage and reconciliation process	<p>1. Inventory cycle counts should continue to be conducted on a quarterly basis. Staff working at each respective yard should be informed of the count results and required to follow up with Management on variances.</p> <p>2. Management should develop an internal guideline as to how many variances are considered to be an acceptable variance</p> <p>3. When unacceptable variances are noted on more than one occasion, Management should conduct cycle counts on a more frequent basis (bi-monthly) in order to ensure inventory existence and accuracy until counts are within acceptable variance limits</p> <p>4. The Smithville inventory storage room should be reorganized using the bin location format applied at the other locations</p> <p>5. Management should implement a system, whereby staff taking an inventory item off the shelf, he/she uses the hand held scanner to scan the barcode affixed to the shelving to add the item to the work order rather than manually adding the item, mitigating the risk of an incorrect item being added to the work order</p> <p>6. If Public Works decides to consolidate the current yard locations, they should investigate the incremental cost of adding a stock clerk to the remaining location(s)</p>	<p>1. Inventory cycle counts are part of our current inventory process guideline manual in Cityworks, this document will be updated to include the M5 inventory.</p> <p>2. Current Cityworks internal inventory process identifies a variance reporting mechanism and a process for recounts if there are any unusual variances. The manual will be updated to include the M5 inventory including identifying acceptable variance limits.</p> <p>3. The update manual will include a section on a procedure to handle unacceptable variances including recommending bimonthly counts where required</p> <p>4. Staff will reorganize Smithville into bin locations after the 2017 year end inventory reconciliation</p> <p>5. Current scanners are not capable of adding items directly onto a work order. Staff will review and determine if this functionality can be programmed into our current scanners or will an upgrade be required</p> <p>6. Staffing levels will be reviewed once a decision on the yard locations is made, including adding an additional staff member to deal with the stock at the Patrol Yards. Currently there are only two Road Operations Clerk for the four Patrol Yards. These positions have stock responsibility in their job descriptions, adding a third in a three yard model will help control both fleet and road inventory levels</p>	<p>Derek McGaghey, Associate Director, Transportation Integrated Services</p> <p>formerly Ken Williams (Supervisor Fleet Operations) and Shawn McCauley (Associate Director Transportation and Fleet Operations)</p>	<p>March 31, 2018</p>	<p>1. Completed 2. Dec 31, 2019 3. Dec 31, 2019 4. Completed 5. Upgrade Required 6. Q2 2020 (June 30, 2020)</p>	<p>In progress late</p>	<p><b>Derek McGaghey, Associate Director, Transportation Integrated Services, Sept 5, 2019:</b> 1. Completed. Implementation at Welland location is complete. Implementation at Smithville location is underway. Inventory counts at least quarterly, some products counted monthly.</p> <p>2. This is outstanding. Acceptable inventory variances identified through a cycle-count or year-end inventory count have not yet been identified.</p> <p>3. This is outstanding. The inventory manual has not yet been updated with acceptable variances per above.</p> <p>4. Completed. Smithville bins were reorganized in 2017, bins currently being reorganized again. Welland Yard was reorganized again in July 2019.</p> <p>5. Not yet completed. The usage of handheld scanners will be looked at with M5 upgrade which is expected to be completed by Dec 31, 2019. Discussions with 3rd party IT vendor on terms and conditions already underway.</p> <p>6. Not yet completed. The Smithville Yard replacement has not been approved. A new study is underway to determine optimal deployment of patrol yards in the west end and the Regional Government Review outcome may impact future location(s).</p> <p><b>Auditor's note: Maciej Jurczyk, September 5, 2019.</b> Principle reason for this issue being outstanding since 2016 is staffing transition, as this file has been re-assigned due to a re-organization in Transportation Division in 2018.</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per discussion with Shawn McCauley (Associate Director, Transportation), on 12/19/2018:</b> 1-3. Process updated and utilized to conduct year end counts. 4. Previously completed. 5. Upgrade required as part of the division's mobile solution strategy. Currently waiting on IT. 6. Delayed until the restructuring of the division is complete Estimated completion date: June 30, 2019</p> <p><b>As per discussion with Shawn McCauley (Associate Director, Transportation) on 08/10/2018:</b></p>

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Fleet Parts Inventory & Fuel Audit	EMS - Maximization of available discounts	<p>1. Management should continue to encourage the use of the key fobs and the follow up of employees when it is noted that the key fob was not used at the respective gas station</p> <p>2. Management should inquire with the key fob provider if there are any increased savings plans based on volume of fuel they are purchasing on an annual basis</p>	<p>1. We observe approximately a 30% utilization of the key fob vs. Visa card. We will communicate with staff to use key fob or Visa Card with key fob vendor as first choice, and use alternate fuel providers if key fob vendor is not available. We will set up a meeting involving upper management, fleet and our Operation's team to discuss the best course of action to increase the use of the key fob</p> <p>2. We will reach out to Corporate, ICOP and key fob vendor sales representative to see if further discounts can be gained or if there are other incentive programs available since we adopted the use of the key fob. Our Pcard is used approximately 70% of the time and reconciling the monthly statement is time consuming and lends itself to risk of human error. We will be seeking out advice from our Region IT dept. to see if they can come up with an electronic solution to automatically populate our current internal spread sheets to mitigate human error.</p>	Ralph Paolini (Manager, EMS and Support Services)	February 2018	TBD	In progress late	<p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 08/22/2019:</b> EMS personnel are meeting with a new vendor this month who is introducing technology into the market that may meet the needs of EMS (i.e. electronic record keeping and availability to purchase fuel across the Region). From a corporate perspective, the opportunity to synchronize fuel procurements with other departments and ABC's (i.e. NRPS) is still being evaluated. <b>Per Bart Menage (Director, Procurement &amp; Strategic Acquisitions) on August 30, 2019;</b> Procurement has been working with EMS on the file and is exploring the possibility of signing onto the Provincial Vendor of Record.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 04/16/2019:</b> Purchasing is in the process of having all Regional fuel purchasers involved in trying to have all criteria noted included in a purchasing contract with a particular fuel vendor. Preliminary findings show all criteria mentioned in the audit can be satisfied.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 12/19/2018:</b> Procurement is in the process of completing the work.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) and Bart Menage (Director, Procurement and Strategic Acquisitions) on 08/20/2018:</b> Procurement is in the process of completing the work.</p> <p><b>As per correspondence received from Ralph Paolini (03/27/2018),</b></p> <p>1. Fully implemented</p> <p>2. EMS has found 2 providers that would meet all of their requirements (volume discounts, store hours, security aspects when dealing with Pcard or fob, record keeping, use friendliness). They are currently working with Procurement on this</p>
Fleet Parts Inventory & Fuel Audit	EMS - Opportunities to automate record keeping process	<p>1. Management should discuss with the key fob provider if there is a capacity in which they can receive the statement electronically and download them into their vehicle operation data report online platform in order to save time and mitigate the risk of human error</p> <p>2. Management should download PCard transactions and download the transactions into their vehicle operation data report or online platform in order to save time and mitigate the risk of human error. EMS may want to discuss with the IT department a spreadsheet in which the PCard data can be downloaded, sorted and summarized based on their requirements for the vehicle operation data report</p>	<p>1. We will meet with Corporate and fuel provider to investigate any software upgrades (mileage, vehicle call sign ID, signature, cost and litres used) of their system for reconciling monthly statements</p> <p>2. Our Pcard is used approximately 70% of the time and reconciling the monthly statement is time consuming and lends itself to risk of human error. We will be seeking out advice from our Region IT dept. to see if they can come up with an electronic solution to automatically populate our current internal spread sheets to mitigate human error.</p>	Ralph Paolini (Manager, EMS and Support Services)	February 2018	TBD	In progress late	<p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 08/22/2019:</b> EMS personnel are meeting with a new vendor this month who is introducing technology into the market that may meet the needs of EMS (i.e. electronic record keeping and availability to purchase fuel across the Region). From a corporate perspective, the opportunity to synchronize fuel procurements with other departments and ABC's (i.e. NRPS) is still being evaluated. <b>Per Bart Menage (Director, Procurement &amp; Strategic Acquisitions) on August 30, 2019;</b> Procurement has been working with EMS on the file and is exploring the possibility of signing onto the Provincial Vendor of Record.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 04/16/2019:</b> Purchasing is in the process of having all Regional fuel purchasers involved in trying to have all criteria noted included in a purchasing contract with a particular fuel vendor. Preliminary findings show all criteria mentioned in the audit can be satisfied.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) on 12/19/2018:</b> Procurement is in the process of completing the work.</p> <p><b>As per conversation with Ralph Paolini (Manager, EMS and Support Services) and Bart Menage (Director, Procurement and Strategic Acquisitions) on 08/20/2018:</b> Procurement is in the process of completing the work.</p>
Waste and Recycling Drop-Off Depot Agreement Audit	Opportunity to enhance transparency of reported information from the vendor	<p>1. Waste Management staff at Niagara Region should discuss with the vendor the possibility of including tipping fee as one of the selected data fields on the daily transfer of information. Waste Management should request that the pre-tax tipping fee amount, tax amount and gross tipping fee amount be reported on a daily basis so that monthly and quarterly reconciliations may be completed easier.</p> <p>2. Waste Management staff should discuss with the vendor, the possibility of enhancing the reporting process so that both tonnage and revenues are reported on a quarterly basis. As a result of the enhancements, Waste Management staff may be able to reconcile the systems, compute royalty amounts and monitor information with increased ease and efficiency.</p>	<p>1. Niagara Region holds quarterly meetings with the vendor. The next meeting is to be scheduled in late Q2. The issue will be brought forward to see if tipping fee can be a selected data field. The Region will investigate if the quarterly report can be done on a monthly basis showing pre-tax tipping fee amount, tax amount and gross tipping fee amount.</p> <p>2. Niagara Region hold quarterly meetings with the vendor. The next meeting is to be scheduled in late Q2. The issue will be brought forward to see if tonnage can be added to the quarterly report. If the vendor is in agreement to supply this information.</p>	Andrew Winters, Waste Disposal Operations Program Manager	1. 09/30/2018 2. 07/31/2018		Completed	<p><b>Per discussion with Andrew Winters (Waste Disposal Operations Program Manager) on 08/21/2019:</b> RMON is reliant on the vendor to make this change in their IT systems. Their current system is not designed for waste management operations and the recommended fields identified in the audit would require re-writing software code (which the vendor identified would be a minimum of \$10k) or waiting for the vendor to upgrade the system. The vendor has indicated that this is not a priority and may take multiple years.</p> <p><b>Auditor's Note: Maciej Jurczyk, Director, ICOP (Aug 21, 2019);</b> in light of this information and given that this was a low risk finding AND the second portion of the Management Action Plan was successfully completed, we are comfortable to close this outstanding Management Action Plan.</p> <p><b>As per discussion with Andrew Winters (Waste Disposal Operations Program Manager) on 08/14/2019:</b> At this time nothing has changed with the status of this file since the last update.</p> <p><b>As per Conversation with Andrew Winters, (Waste Disposal Operations Program Manager) on 04/23/2019:</b></p> <p>1. Right now the two sections - no upgrade in the near future, so in a couple of years.</p> <p>2. Quarterly tonnage has been done</p> <p><b>As per correspondence with Andrew Winters (Waste Disposal Operations Program Manager) on 01/09/2019:</b></p> <p>1. The vendor currently are unable to select this data field. Next time they have to upgrade their program they will look at feasibility if they can implement this request.</p> <p>2. The vendor agreed that they would add the tonnages to the quarterly report. They will start in Q4 report.</p> <p><b>As per discussion with Andrew Winters (Waste Disposal Operations Program Manager) on 08/16/2018:</b> A meeting was held with the Vendor on June 4, 2018 in which items #1 and #2 were raised. The Vendor is going to go back to their IT department for validation but Vendor didn't think it would be an issue. MAP#1 is still on target to be completed for the original September 30, 2018 completion date. The Vendor indicated that item #2 would be completed at the same time.</p>

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Grants and Incentives Audit	The Region needs to consider program rationalization	<p>1. Regional Council needs to reaffirm the alignment of current programs with Council objectives and/or priority projects at least once during each term of Council.</p> <p>2. Regional Council needs to rationalize the number of programs that it manages and funds and ensure that new or remaining programs have direct alignment to the Region's core mandate. The Region should develop an exit strategy to terminate its participation in the following programs: Building and Facade; Heritage Restoration and Improvement; Environmental Assessment; Planning Studies; Residential Grant/Loan</p> <p>3. Regional Council needs to reconsider its participation in the following programs given the limited client uptake: Agricultural Buildings and Facilities Revitalization Grant/Loan; Agricultural Feasibility Study Grant; and Affordable Housing Grant/Loan Program</p> <p>4. The Region needs to re-evaluate its role as the administrative lead in Niagara Investment in Culture and consider either providing block funding to Local Area Municipalities or transfer full administrative responsibility to an external agency (i.e. Niagara Prosperity Initiative, Prokids).</p> <p>5. The Region should consider repurposing budgets and resources from any programs it is no longer financially supporting to those programs that have high strategic alignment to ensure these programs are being delivered at the appropriate financial scope and scale.</p>	<p>Representatives from Economic Development, Finance and Planning and Development have reviewed the observations and associated comments provided in Phase 1 and 2 of the Grant and Incentives Programs audit. The implementation of the observations as proposed needs to be carefully considered as there would be significant impact on:</p> <ul style="list-style-type: none"> <li>- the delivery of grant and incentives programs</li> <li>- resources allocated within Regional Departments and Local Area Municipalities; and</li> <li>- the applicants of the grant and incentive programs</li> </ul> <p>In order to adequately assess the observations and make considered recommendations on grant and incentive programs moving forward, it is recommended that a Working Group is established consisting of representatives from Economic Development, Finance, Planning and Development and ICOP. The Working Group will report to CLT.</p>	Doug Giles, Director, Community and Long Range Planning	Not provided in report	Q3, 2019	In progress on time	<p><b>As per Doug Giles on 08/12/2019:</b> The presentation on the Grants and Incentives Review scheduled for a June 2019 COTW meeting was postponed until September 5, 2019. On this date there will be a presentation on existing incentive programs, the incentive review and options for Council's consideration, accompanied by a report on same. Once Council direction is received, staff will develop programs based on this direction and return to Council with a report outlining the specific recommendations to be referred to the 2020 budget process. Implementation and transition of approved changes are anticipated to begin at some point TBD in 2020. Please note any potential changes to municipal governance structures may affect this work and these timelines.</p> <p><b>Per discussion with Doug Giles &amp; Marian Bannerman in a meeting on May 21, 2019:</b> A staff led review of grants and incentives is still on-going but is nearing completion. Planning &amp; Development staff are proposing to present a report to Committee of the Whole (COTW) on June 6, 2019 providing background information about the current portfolio of grant and incentive programs as well as presenting a new future strategic and model for governing these programs. Staff's ultimate objective is to receive feedback and direction from COTW about in which strategic direction these programs should reside; then model a future portfolio of programs to be aligned with Council's new strategic direction. Administrative changes to the delivery of these programs is still on hold pending Council's direction and subsequent design of new programs.</p> <p><b>As per correspondence with Marian Bannerman (Program Manager, Grants and Incentives) on 01/24/2019:</b> As outlined in the Management Action Plan, an inter-departmental Incentive Review Working Group met several times during Q4 2018 to develop recommendations regarding potential incentive target areas and options for program resourcing and delivery. An education session for Regional Council on existing Regional incentive programs and the status and next steps of the Incentive Review is anticipated in February 2019, with a similar session anticipated to be provided for interested Local Area Municipal staff in March. Following leadership review of the Working Group recommendations, a report will go forward (likely in May-June 2019) to Planning and Economic Development Committee and Regional Council for consideration.</p>
Grants and Incentives Audit	Lack of master agreement or standard operating procedures	<p>1. Regional staff needs to develop foundational documents such as a Master Agreement and Standard Operating Procedures in conjunction with its LAM partners. Some items to be included within the master agreement are:</p> <ol style="list-style-type: none"> <li>a. Details of the program objectives from a Regional perspective</li> <li>b. Regional criteria to be considered during application evaluation/approval and post-award monitoring phases, i.e. jobs created, minimum external investment threshold.</li> <li>c. Enforcement of Regional standards and approval procedures</li> </ol> <p>2. Regional staff, along with LAMs, should define its optimal business model, such as a delegated authority model. This will establish the parameters around the business relationship and support the description of roles and responsibilities for all parties in the delivery of grant and incentive programs.</p> <ol style="list-style-type: none"> <li>a. If the Region continues with Type B and Type C program models, whereby the LAMs provide post-award monitoring or verification, then a right to audit clause should be developed and enforced.</li> <li>b. As an alternative, if a right to audit clause cannot be agreed upon within the master agreement, the Region should consider implementing an indemnity clause to protect the Region from exposure to legal or financial liability.</li> </ol> <p>3. Following the drafting of a Standard Operating Procedure for all the programs, the Region should develop flow charts and work descriptions that detail the following service levels:</p> <ol style="list-style-type: none"> <li>a. Appropriate level of due diligence required from each party</li> <li>b. Communication requirements and frequency,</li> <li>c. Documentation to support application approval and payment processing</li> <li>d. Ongoing and post-award monitoring to ensure application criteria have been satisfied; and</li> <li>e. Timeliness and quality of project, program and performance reporting.</li> </ol>	<p>Representatives from Economic Development, Finance and Planning and Development have reviewed the observations and associated comments provided in Phase 1 and 2 of the Grant and Incentives Programs audit. The implementation of the observations as proposed needs to be carefully considered as there would be significant impact on:</p> <ul style="list-style-type: none"> <li>- the delivery of grant and incentives programs</li> <li>- resources allocated within Regional Departments and Local Area Municipalities; and</li> <li>- the applicants of the grant and incentive programs</li> </ul> <p>In order to adequately assess the observations and make considered recommendations on grant and incentive programs moving forward, it is recommended that a Working Group is established consisting of representatives from Economic Development, Finance, Planning and Development and ICOP. The Working Group will report to CLT.</p>	Doug Giles, Director, Community and Long Range Planning	Not provided in report	Q3, 2019	In progress on time	<p><b>As per Doug Giles on 08/12/2019:</b> The presentation on the Grants and Incentives Review scheduled for a June 2019 COTW meeting was postponed until September 5, 2019. On this date there will be a presentation on existing incentive programs, the incentive review and options for Council's consideration, accompanied by a report on same. Once Council direction is received, staff will develop programs based on this direction and return to Council with a report outlining the specific recommendations to be referred to the 2020 budget process. Implementation and transition of approved changes are anticipated to begin at some point TBD in 2020. Please note any potential changes to municipal governance structures may affect this work and these timelines.</p> <p><b>Per discussion with Doug Giles &amp; Marian Bannerman in a meeting on May 21, 2019:</b> A staff led review of grants and incentives is still on-going but is nearing completion. Planning &amp; Development staff are proposing to present a report to Committee of the Whole (COTW) on June 6, 2019 providing background information about the current portfolio of grant and incentive programs as well as presenting a new future strategic and model for governing these programs. Staff's ultimate objective is to receive feedback and direction from COTW about in which strategic direction these programs should reside; then model a future portfolio of programs to be aligned with Council's new strategic direction. Administrative changes to the delivery of these programs is still on hold pending Council's direction and subsequent design of new programs.</p> <p><b>As per correspondence with Marian Bannerman (Program Manager, Grants and Incentives) on 01/24/2019:</b> As outlined in the Management Action Plan, an inter-departmental Incentive Review Working Group met several times during Q4 2018 to develop recommendations regarding potential incentive target areas and options for program resourcing and delivery. An education session for Regional Council on existing Regional incentive programs and the status and next steps of the Incentive Review is anticipated in February 2019, with a similar session anticipated to be provided for interested Local Area Municipal staff in March. Following leadership review of the Working Group recommendations, a report will go forward (likely in May-June 2019) to Planning and Economic Development Committee and Regional Council for consideration.</p>
Grants and Incentives Audit	Insufficient performance measures to report on program success and compliance	<p>1. Regional staff needs to further develop performance measures for all of its grant and incentive programs along with templates to support the LAMs in the collection, verification and reporting on the program successes. As a foundation the Region should develop performance measures categorized by volume, outputs, performance and qualitative as described in Appendix X.</p> <p>2. Regional staff needs to develop an effective post-award monitoring methodology, especially for Type C programs, those administered by the LAMs and funded by the Region.</p> <p>3. Regional staff needs to conduct regular comprehensive program evaluations (i.e. once per Council term) to ensure program objectives are continuously satisfying its original and intended goals. For all programs the Region should develop a sunset clause that defines the timing of when to conduct program evaluations.</p>	<p>Representatives from Economic Development, Finance and Planning and Development have reviewed the observations and associated comments provided in Phase 1 and 2 of the Grant and Incentives Programs audit. The implementation of the observations as proposed needs to be carefully considered as there would be significant impact on:</p> <ul style="list-style-type: none"> <li>- the delivery of grant and incentives programs</li> <li>- resources allocated within Regional Departments and Local Area Municipalities; and</li> <li>- the applicants of the grant and incentive programs</li> </ul> <p>In order to adequately assess the observations and make considered recommendations on grant and incentive programs moving forward, it is recommended that a Working Group is established consisting of representatives from Economic Development, Finance, Planning and Development and ICOP. The Working Group will report to CLT.</p>	Doug Giles, Director, Community and Long Range Planning	Not provided in report	Q3, 2019	In progress on time	<p><b>As per Doug Giles on 08/12/2019:</b> The presentation on the Grants and Incentives Review scheduled for a June 2019 COTW meeting was postponed until September 5, 2019. On this date there will be a presentation on existing incentive programs, the incentive review and options for Council's consideration, accompanied by a report on same. Once Council direction is received, staff will develop programs based on this direction and return to Council with a report outlining the specific recommendations to be referred to the 2020 budget process. Implementation and transition of approved changes are anticipated to begin at some point TBD in 2020. Please note any potential changes to municipal governance structures may affect this work and these timelines.</p> <p><b>As per correspondence with Marian Bannerman (Program Manager, Grants and Incentives) on 01/24/2019:</b> As outlined in the Management Action Plan, an inter-departmental Incentive Review Working Group met several times during Q4 2018 to develop recommendations regarding potential incentive target areas and options for program resourcing and delivery. An education session for Regional Council on existing Regional incentive programs and the status and next steps of the Incentive Review is anticipated in February 2019, with a similar session anticipated to be provided for interested Local Area Municipal staff in March. Following leadership review of the Working Group recommendations, a report will go forward (likely in May-June 2019) to Planning and Economic Development Committee and Regional Council for consideration.</p> <p><b>Per discussion with Doug Giles and Marian Bannerman (08/24/2018):</b> a report will be going go Planning and Development Committee that highlights the result of a survey of Local Area Municipalities. A full strategy on how to implement the recommendations will be developed in Q1 2019 following an orientation to the various programs delivered for the new Regional Council.</p>



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Grants and Incentives Audit	The Region can provide greater value-added support to improve administrative efficiency and program success	<ol style="list-style-type: none"> <li>The Region should work with LAMs to develop an effective web portal and Regional website landing page to improve communication, reporting, and sharing of information and documentation between partner municipalities.</li> <li>The Region needs to study the merits, benefits and risks of converting grant programs to loans to create greater sustainability.</li> <li>The Region should develop minimum investment thresholds (i.e. \$100,000 per project) to increase scale, overall ROI and efficiencies.</li> <li>Based on the entire inventory of Regional grant and incentive programs, the Region should review the creation of a separate function with dedicated resources that specializes in grant administration and is reliant upon the technical support of program areas.</li> </ol>	With respect to Redesigning Programs as Loans, it was felt that this particular observation is not an option for the delivery of grant and incentive programs; however comments relating to this should be provided as part of the assessment and recommendations made by the Working Group to CLT.	Doug Giles, Director, Community and Long Range Planning	Not provided in report	Q3, 2019	In progress on time	<p><b>As per Doug Giles on 08/12/2019:</b> The presentation on the Grants and Incentives Review scheduled for a June 2019 COTW meeting was postponed until September 5, 2019. On this date there will be a presentation on existing incentive programs, the incentive review and options for Council's consideration, accompanied by a report on same. Once Council direction is received, staff will develop programs based on this direction and return to Council with a report outlining the specific recommendations to be referred to the 2020 budget process. Implementation and transition of approved changes are anticipated to begin at some point TBD in 2020. Please note any potential changes to municipal governance structures may affect this work and these timelines.</p> <p><b>As per correspondence with Marian Bannerman (Program Manager, Grants and Incentives) on 01/24/2019:</b> As outlined in the Management Action Plan, an inter-departmental Incentive Review Working Group met several times during Q4 2018 to develop recommendations regarding potential incentive target areas and options for program resourcing and delivery. An education session for Regional Council on existing Regional incentive programs and the status and next steps of the Incentive Review is anticipated in February 2019, with a similar session anticipated to be provided for interested Local Area Municipal staff in March. Following leadership review of the Working Group recommendations, a report will go forward (likely in May-June 2019) to Planning and Economic Development Committee and Regional Council for consideration.</p> <p><b>Per discussion with Doug Giles and Marian Bannerman (08/24/2018):</b> A report will be going to Planning and Development Committee that highlights the result of a survey of Local Area Municipalities. A full strategy on how to implement the recommendations will be developed in Q1 2019 following an orientation to the various programs delivered for the new Regional Council.</p>
Information Technology Security and Data Backup Controls Audit	Cybersecurity Management - Security systems Architecture	<p>A. It is recommended to limit the access from the branch locations to the Region's network by placing the branch locations into a separate security zone and only allow the bare minimum required for business operation.</p> <p>B. - The branch location's network is to be segmented; separating the managed from the unmanaged devices and only allow access to the Region's network to managed devices.</p> <p>- Segment end-user devices, included managed devices, into controlled zones treated as semi-trusted to limit exposure to critical infrastructure as application and database servers.</p>	<p>A. Non Corporate internet is currently on separated network segmentation with no communication to the corporate network. We are implementing physical security to the ports (network port locks) on the non Corporate internet ports of the switch at the branch office locations to reduce risk.</p> <p>B. The Region will be implementing segmented security zones through Corporate firewall for critical servers to reduce exposure.</p>	Julie Max (Associate Director, Infrastructure and Operations)	Not provided in report	B. Q4, 2019 (December 31, 2019)	In progress on time	<p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/13/2019:</b> B. This is anticipated to be completed by Q4 of 2019.</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 01/15/2019:</b> A. The network locks have been purchased and are scheduled to be installed in Regional facilities. Completed B. The current firewall migration is underway, and upon completion the segmented security zones will be in place as indicated. Security Zones have been configured and scheduled for implementation in Q1 2019.</p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/20/2018:</b> A. The network locks have been purchased and are scheduled to be installed in Regional facilities Estimated completion date: 12/31/2018</p>
Information Technology Security and Data Backup Controls Audit	Cybersecurity Management - Network Security Systems	<ol style="list-style-type: none"> <li>Identify operating systems in use on each ASA in use by the Region and identify all the latest versions available for installation.</li> <li>Install the latest version available for all Cisco ASA firewalls.</li> <li>Replace firewalls for a more recently released firewall system which is expected to be supported for the intended lifecycle of the firewall.</li> <li>Use a vulnerability assessment solution to identify old versions of firmware and software. A vulnerability assessment solution generally provides information on new releases of firmware and software for monitored devices.</li> <li>To limit exposure to known vulnerabilities in unsupported firmware and software releases, ensure equipment in use is running firmware and software which is still supported by the vendor.</li> </ol>	<ol style="list-style-type: none"> <li>1&amp;2: Currently underway</li> <li>3: ASA firewall replacements will be budgeted for in 2019.</li> <li>4: The Region regularly conducts security assessments with 3rd party vendors to help identify these areas. The most recent being January 2018. We will be assessing a vulnerability assessment solution further.</li> <li>5: It should be noted that mitigation solutions have been put in place to deal with unsupported firmware and software to limit vulnerabilities. Staff have enrolled to receive vendor notifications for hardware and software updates and do review and assess notifications for exposure and risk. We will be looking at enhancing our processes with a vulnerability assessment solution.</li> </ol>	Julie Max (Associate Director, Infrastructure and Operations)	Not provided in report	#1 and #2 - Q4, 2019 (December 31, 2019) #4 Q4, 2020 (December 31, 2020)	In progress on time	<p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/13/2019:</b> 1 &amp; 2 To be completed by Q4, 2019. 4. A solution has been budgeted for in 2019</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 01/15/2019:</b> 2. Budget has been allocated in 2019 for the purchase of new ASA's as the current ones have memory limitations. Currently procuring hardware. Anticipated completion Q3 2019 4. SAS product will need further investigation.</p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/20/2018:</b> 1. Complete 2. Budget has been allocated in 2019 for the purchase of new ASA's as the current ones have memory limitations. <b>Estimated completion date Q1/2019</b> 3. Complete - Budget has been allocated in 2019 for the new hardware replacements of the current asa5505's with PA220's and support 4. SAS product will need further investigation <b>Estimated completion date: Q1/2019</b> 5. Complete</p>
Information Technology Security and Data Backup Controls Audit	Cybersecurity Management: Account and access management	<ol style="list-style-type: none"> <li>Disable insecure management and authentication mechanisms on networking devices and in particular the firewalls and force the use of secure mechanisms like SSHv2.</li> <li>Implement centralized authentication for management of networking devices to prevent credential reuse and sharing, allow for password requirements enforcement, and auditability of administrator actions.</li> </ol>	<ol style="list-style-type: none"> <li>We have set SSHv2 and disabled SSHv1 and have modified the configuration to telnet access. This has been confirmed and verified. No further action is required.</li> <li>Will be implemented with the new firewall implementation and remainder of infrastructure devices by end of year.</li> </ol>	Julie Max (Associate Director, Infrastructure and Operations)	Not provided in report	Q1, 2019 (March 31, 2019) Q4, 2020 (December 31, 2020)	In progress on time	<p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/13/2019:</b> 2. Partially completed. Remote sites to be completed in 2020.</p> <p><b>Management Action Plan updates for Q2 2019 have not been received</b></p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 01/15/2019:</b> 1. Completed 2. This project is currently underway as ClearPass in being setup and configured by the vendor. Completion Q1 2019</p> <p><b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/20/2018:</b> 1. Completed 2. Will be completed as part of the Aruba ClearPass implementation Estimated completion date: Q4, 2018 (Dec. 31, 2018)</p>

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Information Technology Security and Data Backup Controls Audit	Change Management	1. Formalize and agree with the CAB which changes need to be run by the CAB before implementing. 2. Keep track of all changes, regardless of their importance or impact, in a formalized change management system storing at least the purpose, executor, approver, rationale, request and execution date.	1: It should be noted that a formal CAB process currently exists. Updates will be added to CAB terms of reference to include a more comprehensive list of standard changes needs along with preapproved SOP's. 2: This will be addressed with changes to CAB processes.	Julie Max (Associate Director, Infrastructure and Operations)	Not provided in report	2 - Q2, 2020 (June 30, 2020)	In progress on time	<b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/13/2019:</b> 2. Currently investigating a CMDB tool  <b>Management Action Plan updates for Q2 2019 have not been received</b>  <b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 01/15/2019:</b> 1. Completed 2. Currently investigating a CMDB tool - Change Management Database  <b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/20/2018:</b> 1. Current CAT policy is being revised to include the new processes identified in response, certain SOP's have been created for standard changes. Estimated completion date: Q4 2018 (Dec 31, 2018) 2. Currently investigating a CMDB tool - Change Management Database Estimated completion date: Q2, 2019 (June 30, 2019)
Information Technology Security and Data Backup Controls Audit	Patch Management	A. Recommendations for Findings A and B: 1. Create a patch management policy that outlines the objectives of patching, roles and responsibilities, steps to evaluate criticality, testing and handling of exemptions. 2. The patch management policy should include procedures when patches are not applied, risk is assessed, mitigation or acceptance is documented and approved by the appropriate level.	1: There is currently an SOP in place to implement operating systems securities patches. We will be looking at enhancing current practices. 2: We will be implementing a Risk Assessment Framework supported by documented approvals.	Julie Max (Associate Director, Infrastructure and Operations)	Not provided in report	Q4 2019	In progress on time	<b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/13/2019:</b> 2. Risk Framework is being developed.  <b>Management Action Plan updates for Q2 2019 have not been received</b>  <b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 01/15/2019:</b> 1. SOP for OS and security patches completed. 2. Risk Framework is being developed.  <b>As per correspondence with Julie Max (Associate Director, Infrastructure and Operations) on 08/20/2018:</b> 1. Currently underway Estimated completion date: 12/31/2018 2. Currently underway Estimated completion date: 12/31/2018
Payroll Audit: Phase 1 - Timekeeping Process	Lack of Management Approval of Timekeeping in some Divisions	1. Supervisors/Managers should be given Kronos user logins. 2. The HR Division, in consultation with business units, should develop an approval/sign off business process whereby Supervisors/Managers are reviewing and signing off on the timecards of the staff that they supervise in a consistent manner. 3. In the longer term, HR Division should investigate the feasibility of designing a process which consolidates the Supervisor/Manager's approval of time entries and the encoding of time entries into one step.	1. Management is conducting a cost benefit review of adding additional manager timekeeping licenses, allowing for manager level approvals, against the cost/risk of potential payroll errors. 2. Management fully supports the need for appropriate manager level oversight on all payroll costs in a consistent fashion. Some operational areas (i.e.: Children's Services) have a well documented manager level approval process for timekeeping sign off developed by HR, as well as manager licenses to electronically support this work. Depending on the outcome of item 1 above, HR will provide a documented corporate wide business process that supports manager electronic approval, or a suitable alternative to ensure manager level oversight. 3. Management acknowledges the benefits of the time entry and approval being consolidated into one step. While there are technical constraints in implementing this today, HR has included this items as part of their broader HRIS review project currently underway.	Franco Meffe <del>Peter Wadsworth</del> (Director, Human Resources)  Linda Gigliotti (Associate Director, Employee Services)  Cindy Creemer (Manager, Employee Services)	09/30/2019		In progress on time	<b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 08/14/2019:</b> 1. Supervisors/Manager licensing: Community Services, our largest workforce which also has the greatest number of hourly staff, is fully completed with manager/supervisory sign off approvals - most of which was already compliant prior to the audit. All remaining RMON divisions, are either compliant or part of a phased in plan to be compliant with licensing needs within 2020 budget. HR staff working directly with clients for training and change management - currently underway. 2. HR developing online training to be launched in corporate learning management system in Q3. Training will be for all management approvers and timekeepers for easy reference and support and to ensure necessary compliance to pay rules, collective agreements, policy, etc. Training curriculum and content is developed with planned roll out to begin in Q3, and additional modules scheduled to be delivered in Q4. 3. HR has begun the process of a longer term strategy, in collaboration with IT, to develop a fulsome review of HR technology needs, with an immediate priority placed on the current timekeeping system requirements and business needs.  <b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 04/26/2019:</b> Management continues to work with vendor for additional licensing and cost analysis for current budget year. In the interim, development planning for new business processes and training for change management underway.  <b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 12/21/2018:</b> This review is expected to be completed by the deadline.
Payroll Audit: Phase 1 - Timekeeping Process	Developing Training and Guidelines	1. Manuals that detail step-by-step procedures should be updated to include Niagara Region business procedures. This will allow for time keeping tasks to be completed consistently throughout the corporation. 2. The HR division should develop training modules for Kronos users. The training should educate the user on the task associated with their specific role(s) within the timekeeping process. The format of training (on-line, in person, etc.) should be decided upon by the HR division in order to effectively suit the corporation. 3. A Champion for each collective agreement should be decided upon and communicated to the encoder group so that when questions arise, Encoders have the necessary resources. 4. Management from respective business units should develop backup/coverage plan for instances when their main Encoder is away from the office or otherwise unable to complete the encoding.	1. Management fully supports updating training materials to include Niagara Region business procedures. 2. Management supports the delivery of timekeeping training and is developing online tools to create greater effectiveness, consistency, timeliness and access in comparison to the prior classroom provided training. 3. Management has considered this. Escalated questions from timekeepers are managed by HR, and recommends that any additional supports in a specific operating area can be determined within the division. 4. Management supports this recommendation and will continue to encourage adequate back up support amongst timekeepers in each operating area. The requirement to utilize a back up resource for one's own encoding will reinforce this need, as per Observation 2.	Linda Gigliotti (Associate Director, Employee Services)	09/30/2019		In progress on time	<b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 08/14/2019:</b> 1. Addressed in item above. 2. Addressed in item above. 3. Completed. 4. Completed.  <b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 04/26/2019:</b> The training delivery is currently being developed to begin a phased delivery starting in the Fall 2019.  <b>As per correspondence with Linda Gigliotti (Associate Director, Employee Services) on 12/21/2018:</b> This review is expected to be completed by the deadline.
Controlled Medications Inventory	NEMS - Internal controlled medications policy needs to be updated	1. NEMS Management should update the internal policy to include all current business process. 2. Once the internal policies have been updated, all changes should be communicated to staff.	1. The recommended updates will be made within the policy. 2. Training surrounding the updates will be delivered to affected staff.	Michael Franklin, Commander, Quality Management and Professional Standards	06-01-2019	08-30-2019	In progress late	<b>As per correspondence with Michael Franklin (Commander, Quality Management and Professional Standards) on Aug 13, 2019:</b> Updates have been made to policy and staff educated. The policy just needs to be signed off. It's anticipated to be done by the end of August with as there are several other policies that will need signing.  <b>As per correspondence with Michael Franklin (Commander, Quality Management and Professional Standards) on Apr 10, 2019:</b> 1. NEMS is working on the policy update, and the update is scheduled to be completed prior to their internal Spring Training.

Title: Log of outstanding Management Action Plans from historical internal audit reports

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Accounts Payable Audit	Maintenance and review of vendor master file information	<p>1) Maintenance should be conducted on the master vendor file on a regular basis (i.e. at least annually). This would include the following activities to ensure completeness and accuracy:</p> <ul style="list-style-type: none"> <li>a) Review and update the vendor master information.</li> <li>b) Obtain missing or incomplete data such as missing telephone numbers, postal address, complete name, and emails.</li> <li>c) Update any out of date information</li> <li>d) Determine if there are any vendors (i.e. duplicate vendors) that should be removed from the master file.</li> <li>e) Archive inactive vendors which have had no business activity for a certain amount of time (i.e. for over 18 months). If the vendor is archived, their information can be easily accessed for reinstatement, if needed. By removing inactive vendors, the list becomes leaner and records are easier to access, increasing employee productivity through reduced processing time.</li> </ul> <p>Maintenance activities should include department representatives (in addition to Finance staff), if possible, as they may have insight into information that is old, missing or incorrect.</p> <p>The Region should also consider if any of the master vendor file review or maintenance activities can be automated as some cleanup activities lend themselves well to automation. In addition, the Region may want to consider the use of a vendor self-service portal where individual vendors can update their information.</p> <p>2) On a regular basis, conduct analysis and further review on areas which may uncover fictitious vendors, such as comparing vendor and employee addresses and vendor use of P.O. Box addresses.</p>	<p><b>As per Correspondence with Erin Amirault (Associate Director, Finance Operations and Systems) on 04/12/2019:</b> More definitive update is not available at this time. We are still planning the PeopleSoft Financials upgrade for November with initial review and testing to start in September, however final dates are still to be determined. We will review at that time if functionality will change to allow for logging of when delegation has been turned on. At this time we do not anticipate that such a logging function will be available.</p> <p>+T81:U81</p>	Bart Menage, Director, Procurement & Strategic Acquisitions	11/30/2019		In progress on time	<p><b>As per Correspondence with Tracie Byrne, (Manager Purchasing Service) on 08/13/2019:</b> Item 1 and item 2 will be completed by 31 October 2019.</p> <p><b>As per Correspondence with Bart Menage (Director, Procurement &amp; Strategic Acquisitions) on 04/16/2019:</b> "No definitive update at this point in time. I believe we had provided actions dates on the audit responses we were going to action. I will review and these and provide confirmation of any status updates based on those initial response."</p>
Accounts Payable Audit	System logging and reporting of delegation of authority	<p>Consider review of the PeopleSoft system to determine if the start and end dates of users who have delegated their approval authority can be captured within the system and reported on.</p>	<p>At this time, we do not have the capability in our current version of PeopleSoft Financials to audit the start and end dates of when users have turned on their delegated authority. Although a user can choose the start and end date when turning on the delegation function, the back end table in PeopleSoft Financials that tracks delegation is not effective dated and therefore only records that the function was turned on (not as of/when). As such, we can run a report that shows everyone who has delegation turned on today, but cannot run an historical version of that report.</p> <p>However, at any point in time, we can easily provide a history of when a delegation of authority was used to approve something (as we provided for the purpose of this audit). Every transaction records when it has been approved "on behalf of" someone else. For example:</p> <ul style="list-style-type: none"> <li>• Director of Finance, Helen Chamberlain, turns on delegation of authority for March 4 – 8, 2019, assigning the Associate Director, Budget Planning and Strategy, Margaret Murphy, as her delegate.</li> <li>• During that period, Margaret Murphy approves several purchase orders, travel and expense reports, and vouchers that would usually be approved by the Director role.</li> <li>• PeopleSoft Financials records each of those transactions as "Margaret Murphy approved on behalf of Helen Chamberlain".</li> </ul> <p>If the delegator (Helen Chamberlain, in this example) would like to know what transactions were approved in her absence, PeopleSoft Financials is able to provide that information.</p> <p>If the concern is that an employee could assign a delegate for the length of their employment and therefore never directly approve transactions, then the available report would show that the employee's user ID has never approved a transaction.</p> <p>To our knowledge, there is no PeopleSoft Financials out-of-the-box audit logging process that shows effective dating for the delegation function. In theory, we could customize a solution:</p>	Erin Amirault, Associate Director, Finance Operations and Systems	11/30/2019		In progress on time	<p><b>Auditor's Note: Maciej Jurczyk, no update required as system upgrade scheduled for Nov 2019.</b></p> <p><b>As per Correspondence with Erin Amirault (Associate Director, Finance Operations and Systems) on 04/12/2019:</b> More definitive update is not available at this time. We are still planning the PeopleSoft Financials upgrade for November with initial review and testing to start in September, however final dates are still to be determined. We will review at that time if functionality will change to allow for logging of when delegation has been turned on. At this time we do not anticipate that such a logging function will be available.</p>