Internal Audit Report

Project Management Audit

Philippa Watts
Auditor
December 2015
Contents

If viewing on-screen, please click on the links below or use the scrolling arrows

1 Introduction .................................................................................................................. 3
2 Scope ............................................................................................................................. 3
3 Findings ......................................................................................................................... 4
4 Conclusion ..................................................................................................................... 5
5 Action Plan – Appendix 1 .......................................................................................... 6
1 Introduction

The Chichester District Council (CDC) Project Management Guide was approved by Cabinet in 2013 and subsequently reviewed and updated in November 2014. This document sets out how project management should take place at CDC and has been based on the PRINCE2 methodology. The guidance sets out the general processes that need to be followed and the documentation that should be incorporated and used in a project.

2 Scope

2.1 The scope for this audit review was agreed to ensure that:

- The processes for project management were identified and documented following discussions with staff.

- Testing was undertaken of a sample of projects to identify if the key processes and procedures as per the CDC Project Management Guide are being followed. An examination of project documentation was made to establish that:

  a) there is a project plan and where applicable an initial project proposal document (IPPD) and a project initiation document (PID), which is mandatory for medium and large projects,

  b) projects have received approval at the appropriate level and adequate documentation is available to evidence this approval,

  c) projects have a project manager/leader and a senior responsible officer,

  d) risks have been documented,

  e) an options appraisal has been carried out where applicable,

  f) there is evidence of monitoring of projects and that Covalent reports are available to support this,

  g) there is evidence of issues being reported and

  h) post project evaluation has been carried out where applicable.
3 Findings

3.1 A sample of 4 projects was examined which included; older, newer and different size projects. The following projects were examined:

- Avenue De Chartres (ADC) car park pay on foot system
- Westhampnett depot refurbishment
- Think Family project
- ADC refurbishment project.

It should be noted that some of the projects examined commenced prior to the Project Management Guidance approved by Cabinet in July 2013. Consequently not all of the documentation required at that time was consistent with that expected under the current guidance, for instance IPPDs and PIDs are now mandatory for all medium and large projects.

3.2 All the projects examined were found to have a project plan and a PID or an IPPD where required, had identified risks and had carried out options appraisals where needed. In discussions with the Corporate Improvement Manager it was established that there is an acceptance that the Project Management Guide sets out best practice and does not need to be followed prescriptively in every case. However the key steps and documentation are always expected to be followed. Therefore during this audit, checks were made for the projects examined to establish that the key documentation had been produced. The PID and the IPPD cover some of the same areas so a check was made for the projects examined that both or either of these documents had been produced. Most importantly evidence was found for all the projects examined that the appropriate approval had been obtained by Cabinet.

3.3 Evidence was found of issues being reported and of monitoring project progress including update monitoring reports being produced on Covalent. Project exception reports are considered by the Senior Leadership Team (SLT) and evidence was found to support this. ICT projects were previously monitored by the Information Technology Advisory Group, which was disbanded this year, ICT projects will now follow the same processes as other projects and are monitored by SLT.

3.4 Evidence was found of post project evaluation for those projects that are complete.

3.5 During the audit there was some difficulty in identifying all the projects that are currently running across the Council. It was found that there is no complete list available of all projects, the corporate role of the Corporate Improvement Team was only established when the guidance was rewritten in November 2014. The Corporate Improvement team are currently in the
process of compiling a register of all projects (including those pre 2014) in operation across CDC. This is being achieved by searching through minutes for what has been approved by Cabinet and is an extensive process. A search had to be made for some documents as part of this audit, which proved difficult as services file project documentation in various locations on the S:/drive. A central register of all projects would enable better, corporate monitoring of projects and sharing of best practice.

3.6 Some services expressed difficulty in amending targets on Covalent for instance when they no longer achievable. SLT approve any changes to milestones that have a significant financial effect. The Corporate Improvement Manager stated that discussions are currently taking place with regard to the approval of amendments to milestones on Covalent.

4 Conclusion

4.1 Overall, controls appear to be working satisfactorily in relation to project management at CDC. There is a need, however, for a more coordinated approach to the identification of all projects running across the Council and to a uniform approach in the electronic storage of documents relating to projects. Therefore, Internal Audit has made recommendations to improve this. (See Action Table at Appendix 1).

4.2 In order to prioritise the issues raised, the following traffic light indicator has been used:

4.3 Red – Significant issues to be addressed

4.4 Amber – Important issues to be addressed

Green – Minor or no issues to be addressed
## 5 Action Plan – Appendix 1

<table>
<thead>
<tr>
<th>Paragraph Ref</th>
<th>Recommendation</th>
<th>Officer</th>
<th>Priority</th>
<th>Agreed?</th>
<th>Comments</th>
<th>Implementation Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.5</td>
<td>Services should notify the Corporate Improvement Team of details of all ongoing and recently completed projects and provide them with key project documentation, so that a central corporate register can be maintained.</td>
<td>Joe Mildred, Corporate Improvement Manager</td>
<td>Important (Amber)</td>
<td>Yes</td>
<td>Existing record of documentation to be sent to all Heads of Service for completion and relevant documents sent to Corporate Improvement Team.</td>
<td>31/3/2016</td>
</tr>
<tr>
<td>3.5</td>
<td>All project documentation is held in a central location.</td>
<td>Joe Mildred, Corporate Improvement Manager</td>
<td>Minor (Green)</td>
<td>Yes</td>
<td>P drive file to be set up for all non-sensitive project documentation.</td>
<td>31/3/2016</td>
</tr>
<tr>
<td>3.6</td>
<td>The Project Management Guide is reviewed and updated on a regular basis, especially, if there is a change to the approval process for the amendment of milestones on Covalent.</td>
<td>Joe Mildred, Corporate Improvement Manager</td>
<td></td>
<td></td>
<td>Ongoing</td>
<td></td>
</tr>
</tbody>
</table>