

Audit Committee
20 July 2023

Internal Audit Update - Progress and Follow Up

Report Author(s): Faye Haywood
Head of Internal Audit for Broadland District Council
01508 533873
faye.haywood@southnorfolkandbroadland.gov.uk

Portfolio: Finance

Ward(s) Affected: All

Purpose of the Report:

This report reviews the work performed by Internal Audit in delivering the Annual Internal Audit Plan for 2022/23 during the period 17 January to 11 July 2023, and details of outstanding internal audit recommendations.

Recommendations:

1. That members receive the progress report covering the completion of the internal audit plan of work, and details of outstanding internal audit recommendations.

1. Summary

- 1.1 This report reviews the work performed by Internal Audit in delivering the Annual Internal Audit Plan for 2022/23 and provides details of outstanding internal audit recommendations during the period 17 January to 11 July 2023.

2. Background

- 2.1 The Audit Committee receive updates on progress made against the annual internal audit plan and outstanding internal audit recommendations. This report forms part of the overall reporting requirements to assist the Council in discharging its responsibilities in relation to the internal audit activity.

3. Current position/findings

- 3.1 The final position in relation to the delivery of the Annual Internal Audit Plan 2022/23, and the position of outstanding internal audit recommendations, is shown in the report attached.

4. Proposed action

- 4.1 For the Audit Committee to review the final position relating to the completion of the Annual Internal Audit Plan for 2022/23 and outstanding internal audit recommendations.

5. Issues and Risks

- 5.1 **Resource implications** –there are no resource implications arising from this report.
- 5.2 **Legal implications** – there are no legal implications arising from this report.
- 5.3 **Equality implications** – there are no equality implications arising from this report.
- 5.4 **Environmental impact** – there are no impacts on the environment arising from this report.
- 5.5 **Crime and disorder** – there are no impacts upon crime and disorder arising from this report.
- 5.6 **Risks** – Failure to undertake the Annual Internal Audit Plan could result in the Head of Internal Audit not being able to provide an annual opinion. Reductions in Internal Audit coverage could permit on-going weaknesses in the internal control environment at the Council not being detected and reported upon.

6. Conclusion

- 6.1 The attached report provides the Council with the final position relating to the completion of the 2022/23 internal audit plan and any outstanding internal audit recommendations.

7. Recommendations

- 7.1 That Audit Committee receives the final progress report covering progress in delivering the internal audit plan of work for the 2022/23 financial year, and reviews responses to outstanding internal audit recommendations.

Background papers

None

Eastern Internal Audit Services



Broadland District Council

Internal Audit Update - Progress and Follow Up

Period Covered: 17 January 2023 to 11 July 2023

Responsible Officer: Faye Haywood – Head of Internal Audit for Broadland District

CONTENTS

1. INTRODUCTION.....	
2. SIGNIFICANT CHANGES TO THE APPROVED INTERNAL AUDIT PLAN	
3. PROGRESS MADE IN DELIVERING THE AGREED AUDIT WORK	
4. THE OUTCOMES ARISING FROM OUR WORK	
5. UPDATE REGARDING OUTSTANDING INTERNAL AUDIT WORK FROM 2021/22	
6. FOLLOW UP OF AGREED AUDIT RECOMMENDATIONS	
APPENDIX 1 – PROGRESS IN COMPLETING THE AGREED AUDIT WORK.....	
APPENDIX 2 – AUDIT REPORT EXECUTIVE SUMMARIES 2022/23.....	
APPENDIX 3 – STATUS OF AGREED INTERNAL AUDIT RECOMMENDATIONS.....	
APPENDIX 4 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2020/21	
APPENDIX 5 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2021/22	
APPENDIX 6 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2022/23	

1. INTRODUCTION

- 1.1 This report is issued to assist the Authority in discharging its responsibilities in relation to the internal audit activity.
- 1.2 The Public Sector Internal Audit Standards requires the Chief Audit Executive to report to the Audit Committee on the performance of internal audit relative to its plan, including any significant risk exposures and control issues.
- 1.3 To comply with the above this report includes:
- Any significant changes to the approved Audit Plan;
 - Progress made in delivering the agreed audits for the year;
 - Any significant outcomes arising from audits; and
 - Performance Indicator outcomes to date.

2. SIGNIFICANT CHANGES TO THE APPROVED INTERNAL AUDIT PLAN

- 2.1 One significant change to the plan was highlighted at the January 2023 meeting. Since then, two further audits have been deferred:

Audit	Justification
BRD2311 Housing Strategy and Affordable Housing	A review of Housing Strategy is now planned for 2024/25 once the strategy has been re-defined to manage the Council's approach to managing homelessness and temporary accommodation assets.
BRD2317 Service Desk	At the request of management, in order to allow the IT team to support the move to horizon it was agreed to defer this audit to the 2023/24 plan.

3. PROGRESS MADE IN DELIVERING THE AGREED AUDIT WORK

- 3.1 The current position in completing audits to date within the financial year is shown in **Appendix 1**.
- 3.2 In summary 131 days of programmed work have now been completed, equating to 98% of the revised Internal Audit Plan for 2022/23.

4. THE OUTCOMES ARISING FROM OUR WORK

- 4.1 On completion of each individual audit an assurance level is awarded using the following definitions:

Substantial Assurance: Based upon the issues identified there is a robust series of suitably designed internal controls in place upon which the organisation relies to manage the risks to the continuous and effective achievement of the objectives of the process, and which at the time of our review were being consistently applied.

Reasonable Assurance: Based upon the issues identified there is a series of internal controls in place, however these could be strengthened to facilitate the organisation’s management of risks to the continuous and effective achievement of the objectives of the process. Improvements are required to enhance the controls to mitigate these risks.

Limited Assurance: Based upon the issues identified the controls in place are insufficient to ensure that the organisation can rely upon them to manage the risks to the continuous and effective achievement of the objectives of the process. Significant improvements are required to improve the adequacy and effectiveness of the controls to mitigate these risks.

No Assurance: Based upon the issues identified there is a fundamental breakdown or absence of core internal controls such that the organisation cannot rely upon them to manage risk to the continuous and effective achievement of the objectives of the process. Immediate action is required to improve the controls required to mitigate these risks.

4.2 Recommendations made on completion of audit work are prioritised using the following definitions:

Urgent (priority one): Fundamental control issue on which action to implement should be taken within 1 month.

Important (priority two): Control issue on which action to implement should be taken within 3 months.

Needs attention (priority three): Control issue on which action to implement should be taken within 6 months.

4.3 In addition, on completion of audit work “Operational Effectiveness Matters” are proposed, these set out matters identified during the assignment where there may be opportunities for service enhancements to be made to increase both the operational efficiency and enhance the delivery of value for money services. These are for management to consider and are not part of the follow up process.

4.4 During the period covered by the report Internal Audit has issued six reports:

Audit	Assurance	P1	P2	P3
BRD/SNC2307 Local Council Tax Support and Housing Benefit	Reasonable	0	2	0
BRD/SNC2308 Council Tax and NNDR	Reasonable	0	2	5
BRD/SNC2315 Elections	Substantial	0	0	1
BRD/SNC2304 Business Continuity and Emergency Planning	Reasonable	0	2	3
BRD/SNC2306 Accounts Payable	Limited	1	6	2
BRD/SNC2301 Key Controls and Assurance (DRAFT)	Limited	0	13	9

The Executive Summaries of these reports are attached at **Appendix 2**, full copies of the reports can be requested by Members.

4.5 The report for Procurement and Contract Management was issued 11 July 2023. A limited assurance opinion has been indicated. We would like the opportunity to verify findings with management before the full report is made available to members of the Audit Committee.

- 4.6 As can be seen in the table above and as a result of these audits 46 recommendations have been raised by Internal Audit. Three Operational Effectiveness Matters have been proposed to management for consideration.
- 4.7 In addition to the audits above, a position statement on Post-Implementation Finance System has been issued. The position statement has concluded with the following three suggested actions/improvements:
- A benefits realisation report be prepared and ensure that all in-flight and planned projects also implement this process.
 - Formal tracking of non-go live project issues post go live be undertaken. A quorum be established such that key decisions can still be made with a reduced attendance at relevant meetings.
 - The Councils to ensure that Project Board management meetings be formally minuted.
- 4.8 A position statement has also been issued in relation to HR and Payroll. At the request of management, the payroll process was mapped to identify any duplication apparent between the responsibilities of each of the three parties involved in delivering the Council's payroll.

Three suggested actions were raised during the review including documenting key HR and Payroll policies, ensuring that co-operation agreements are agreed, signed and retained between the Council and Payroll providers, once signed quality assurance checks are suggested to ensure agreements are being upheld.

5. FOLLOW UP OF AGREED AUDIT RECOMMENDATIONS

- 5.1 In addition to providing the Committee with the performance of internal audit relative to its plan, the Public Sector Internal Audit Standards also require the Chief Audit Executive to establish a process to monitor and follow up management actions to ensure that they have been effectively implemented or that senior management have accepted the risk of not acting.
- 5.2 To comply with the above this report includes the status of agreed actions.
- 5.3 As a result of audit recommendations, management agree action to ensure implementation within a specific timeframe and by a responsible officer. The management action subsequently taken is monitored by the Internal Audit Contractor on a regular basis and reported through to the Committee. Verification work is also undertaken for those recommendations that are reported as closed.
- 5.4 **Appendix 3** to this report shows the details of the progress made to date in relation to the implementation of the agreed recommendations. This appendix also reflects the year in which the audit was undertaken and identifies between outstanding recommendations that have previously been reported to this Committee and then those which have become outstanding this time round. A total of 23 (two urgent, 13 important and eight needs attention) recommendations are outstanding. A further 18 recommendations are not due for implementation yet.

Appendix 4, 5 and 6 provide the committee with details of urgent and important priority recommendations that are overdue by the year in which they were raised. Management responses and a new deadline have been indicated for each.

APPENDIX 1 – PROGRESS IN COMPLETING THE AGREED AUDIT WORK

Audit Area	Audit Ref	No. of days	Revised Days	Days Delivered	Status	Assurance Level	Recommendations				Date to Committee
							Urgent	Important	Needs Attention	Op	
Quarter 1											
Community Activity	BRD2314	8	8	8	Final report issued on 8 January 2023.	Reasonable	0	2	4	0	Jan-23
TOTAL		8	8	8							
Quarter 2											
Covid-19 Relief Grants	BRD2302	8	8	6	Draft report in preparation.						
Community Assets	BRD2312	8	8	8	Final report issued on 5 December 2022.	Reasonable	0	3	2	0	Jan-23
TOTAL		16	16	14							
Quarter 3											
Risk Management	BRD2305	4	4	4	Final position statement issued on 7 March 2023.	Position Statement					Jan-23
Accounts Payable	BRD2306	10	10	10	Final report issued on 27 June 2023.	Limited	1	6	2	2	Jul-23
Local Council Tax Support and Housing Benefit	BRD2307	15	15	15	Final report issued on 19 January 2023.	Reasonable	0	2	0	0	Jul-23
Council Tax and NNDR	BRD2308	15	15	15	Final report issued on 11 May 2023.	Reasonable	0	2	5	0	Jul-23
Elections	BRD2315	8	8	8	Final report issued on 9 February 2023.	Substantial	0	0	1	0	Jul-23
TOTAL		52	52	52							
Quarter 4											
Key Controls and Assurance	BRD2301	10	10	10	Draft report issued on 27 June 2023.	Limited					
Procurement and Contract Management	BRD2303	10	10	10	Draft report issued 11 July 2023	Limited					
Business Continuity and Emergency Planning	BRD2304	8	8	8	Final report issued on 26 June 2023.	Reasonable	0	2	3	1	Jul-23
Payroll and HR	BRD2309	8	8	8	Position statement issued 3 July 2023						Jul-23
Economic Development	BRD2310	9	9	8	Draft report in preparation.						
Housing Strategy and Affordable Housing	BRD2311	6	0	0	Audit deferred to 2023/24.						
TOTAL		51	45	44							
IT Audits											
Service Desk	BRD2317	5	0	0	Audit deferred to 2023/24.						
Post-Implementation Finance System	BRD2318	3	3	3	Final report issued on 21 February 2023.	Position Statement					Jul-23
Network Security and Infrastructure Management	BRD2316	9	0	0	Audit deferred to 2023/24.						
TOTAL		17	3	3							
Follow Up											
Follow Up	NA	10	10	10							
TOTAL		10	10	10							
TOTAL		154	134	131			1	17	17	3	
Percentage of plan completed				98%							

APPENDIX 2 – AUDIT REPORT EXECUTIVE SUMMARIES 2022/23

Executive Summary – BRD/SNC2307 Housing Benefit and Council Tax Support

OVERALL ASSESSMENT



ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

The audit has sought to provide assurance over the following key risk:
 Authority errors in payments leads to full subsidy claim not being paid by DWP.

SCOPE

This key financial system feeds into the Statement of Accounts and requires regular review to confirm the adequacy and effectiveness of controls in this area.

KEY STRATEGIC FINDINGS

- Housing Benefit and Council Tax Assistance claims are assessed promptly and in accordance with legislation and local policy.
- Annual system updates are independently reviewed to ensure that they have been input correctly and a sample of claims is tested to confirm the accuracy.
- Although regular sample checking is undertaken, errors are not regularly followed up to ensure that they have been corrected.
- A reconciliation between the benefits system and the general ledger has not taken place in 2022/23 to date.

GOOD PRACTICE IDENTIFIED

- The Councils' processes will be reviewed and aligned during 2023 as part of the migration to a single system.
- Quality assurance checks are undertaken on various types of claim processing, with outcomes fed back to officers for development.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	2	0	0

Executive Summary – BRD/SNC2308 Council Tax and NNDR

OVERALL ASSESSMENT

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Assurance was provided over risk to Council Tax and NNDR maximum recovery.

SCOPE

This key financial system feeds into the Statement of Accounts and requires regular review to confirm the adequacy and effectiveness of controls in this area.

KEY STRATEGIC FINDINGS

- System parameters and data are checked and tested as part of the annual billing process, to ensure that all changes have been made correctly and accurate bills are produced. However, system access reviews have not been recently completed.
- There is a Corporate Debt Collection Policy, Principles & Procedure, however, it does not contain a defined process for the recovery of Council Tax and NNDR.
- Monthly general ledger reconciliations have not been performed for Broadland this financial year. Reconciliations have been performed for South Norfolk, however, reviews are inconsistent.
- Quality assurance checks of staff's work have not recently been completed, due to resource limitations.

GOOD PRACTICE IDENTIFIED

- Cash collection for both Council Tax and NNDR is tracked on a monthly basis, with historical collection rates included to gauge performance.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	2	5	0

Executive Summary – BRD/SNC2315 Elections

OVERALL ASSESSMENT



ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

This audit sought to provide assurance over the following key risk:
The Councils' readiness for the next elections, with changes to the elections process along with the Councils' office move and physical availability of space to manage the elections.

KEY STRATEGIC FINDINGS

- Testing of a sample of canvassers identified that they had been formally appointed and trained and paid according to properties visited and responses received.
- Elections and canvass activities are carried out in accordance with Electoral Commission guidance.
- Testing confirmed that Electoral Register changes had been processed accurately with adequate audit trail maintained.

GOOD PRACTICE IDENTIFIED

- Preparations for the implementation of the voter ID include an impact assessment, project planning meetings with CMLT and recruiting additional administration staff to cover an expected rise in calls.
- The Elections Manager maintains a set of risk registers for the electoral process along with actions being taken to mitigate them.

SCOPE

Both Councils received a Substantial assurance the last time they were reviewed. New elections software has been implemented and elections are due to take place in May 2023. This audit provided assurance over electoral registration and electoral management processes in preparation for the 2023 elections whilst considering the potential impacts of changes to voter identity checks.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	0	1	0

Executive Summary – BRD/SNC2304 Business Continuity and Emergency Planning

OVERALL ASSESSMENT

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Assurance was provided over the following risk: The Councils' ability to respond to Business Continuity incidents effectively and mitigating the impact on operations.

SCOPE

A review of Business Continuity and Emergency Planning had not been undertaken at the Councils recently. This audit provides assurance that the Councils have the necessary plans and capabilities to respond to incidents effectively. As well as the above, the audit reviewed flood water management and business continuity plans for waste management.

KEY STRATEGIC FINDINGS

- Business Continuity Plans (BCP) for each service area have been drafted, and a template developed. However, some information is not uniformly presented across the service areas, with areas of improvement identified.
- Lessons learnt and actions as a result of exercises or business continuity incidents are captured within meeting notes or log sheets, but there is no process in place to effectively monitor implementation of any recommendations thereon.
- As management's focus has been on the implementation of the BCP, not all plans have been tested, or have a timetable for testing.
- The Councils are members of the Norfolk Strategic Flood Alliance, which was founded following flooding in 2020. A strategy has been developed to enable countywide responses to flooding across all agencies involved.

GOOD PRACTICE IDENTIFIED

- The Emergency Planning Team are part of the Norfolk Resilience Forum. Weekly meetings are attended that inform the Team of key county-wide risks and issues.
- Staff are provided with laptops, with VPN connectivity, to support remote working. Grab bags have been prepared for CLT, which contain contact details, the Emergency Response Plan and immediate actions check list.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	2	3	1

Executive Summary – BRD/SNC2306 Accounts Payable

OVERALL ASSESSMENT



ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

This audit sought to provide assurance over the following key risks:

- Financial loss due to incorrect or fraudulent payments.
- Financial loss through bank mandate fraud, if the controls over changes to supplier bank details are inadequate.

SCOPE

This key financial system feeds into the Statement of Accounts and requires regular review to confirm the adequacy and effectiveness of controls in this area.

KEY STRATEGIC FINDINGS



The Councils do not monitor amendments to supplier records. No controls are in place to identify changes made without the appropriate documentation and verification.



Supporting evidence for invoices without POs and for new suppliers is inconsistent and not always retained in a readily available format.



25% of the sampled invoices with POs have been ordered before the PO was raised and approved. One case was identified where officers have received special authorisation to self-authorise POs under £500, however no monitoring controls are in place for these.



Reconciliations for this financial year between the creditor control account and general ledger have only been completed at the end of November. Discrepancies in the supplementary aged creditors report have been identified and are being investigated.

GOOD PRACTICE IDENTIFIED



Mitigating controls are in place to prevent supplier details being entered when raising a PO; to prevent orders from being placed where no funds are available; and to ensure no duplicates of invoices are being raised.



Both Councils have published the required information on spending data over £500 and statistics on prompt payments.

ACTION POINTS

Urgent	Important	Needs attention	Operational
1	6	2	2

Executive Summary – BRD/SNC2301 Key Controls and Assurance (DRAFT)

OVERALL ASSESSMENT

The diagram shows a central orange circle labeled 'LIMITED ASSURANCE' surrounded by a blue ring with the text 'Adequate & effective governance, risk and control processes'. To the right is a legend with four colored circles: green for 'SUBSTANTIAL ASSURANCE', yellow for 'REASONABLE ASSURANCE', orange for 'LIMITED ASSURANCE', and red for 'NO ASSURANCE'.

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

The audit has sought to provide assurance over the following key risk: “Non-compliance with key financial controls”.

SCOPE

This is an annual review of key financial controls and informs the Head of Internal Audit's overall opinion on the control environment and feeds into the Statement of Accounts. For those systems not subject to a full audit review within the year, assurance was provided.

KEY STRATEGIC FINDINGS

- Creditor and debtor control accounts have not been consistently completed and independently reviewed each month.
- Bank account reconciliations have not been fully completed due to historic issues, dating back to 2021/22, that have not been resolved.
- Monthly aged debt reports not currently reported to senior management.
- Authorised signatories for various tasks do not align with working practices. This includes raising invoices and credit notes, investments and write offs.

GOOD PRACTICE IDENTIFIED

- Adequate controls were found to be in place for the following areas: Annual Governance Statement.
- The budget setting timetable for 2022/2023 has been adhered to.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	10	9	0

APPENDIX 3 – STATUS OF AGREED INTERNAL AUDIT RECOMMENDATIONS

			Completed between 17 January 2023 to 11 July 2023			Previously reported to Committee as outstanding			(New) Outstanding			Total Outstanding	Not Yet Due for implementation		
			Priority 1	Priority 2	Priority 3	Priority 1	Priority 2	Priority 3	Priority 1	Priority 2	Priority 3		Priority 1	Priority 2	Priority 3
Audit Ref	Audit Area	Assurance Level													
2020/21 Internal Audit Reviews															
BRD2102	Corporate Governance	Reasonable			1						0				
BRD2108	Key Controls and Assurance	Reasonable			1						0				
BRD2104	HR and Payroll	Reasonable					1				1				
BRD2112	Remote Access	Reasonable		1							0				
2021/22 Internal Audit Reviews															
BRD2210	Covid-19 Business Grants	Reasonable			1						0				
BRD2206	Counter Fraud and Corruption	Limited					6				6				
BRD2214	Disaster Recovery	Limited		1		2	1				3				
BRD2201	Key Controls and Assurance	Reasonable			2		1	2			3				
BRD2209	Accountancy Services	Reasonable		1				1			1				
BRD2203	Annual Governance Statement	Substantial						1			1				
BRD2211	Homelessness and Housing Options	Reasonable		2							0				
BRD2207	Accounts Receivable	Limited	1	1							0				
BRD2205	Corporate Health and Safety	Substantial			2						0				
BRD2208	Income	Reasonable			2		1	1			2				
BRD2202	Performance Management, Business Planning	Reasonable						1			1				
2022/23 Internal Audit Reviews															
BRD2312	Community Assets	Reasonable							3	2	5				
BRD2308	Council Tax and NNDR	Reasonable									0		2	5	
BRD2304	Business Continuity and Emergency Planning	Reasonable		2							0			3	
BRD2315	Elections	Substantial									0			1	
BRD2306	Accounts Payable	Limited		5	1						0	1	1	1	
BRD2307	Local Council Tax Support and Housing Benefit	Reasonable		2							0				
BRD2314	Community Activity	Reasonable			2						0		2	2	
TOTALS			1	15	12	2	10	6	0	3	2	23	1	5	12

APPENDIX 4 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2020/21

Job	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
BRD2104 HR and Payroll	Recommendation 3: The audit trail in the payroll system be improved so that it is possible to view the authorisation details for all claims submitted, including the authorising officer and the dates submitted and authorised.	Important	Chief of Staff	30/06/2021	31/03/2024	5	Outstanding	The IT system implementation has now been postponed with a procurement exercise due to commence to appoint a new provider with implementation of the new system to be by the end of 31 March 2024. This recommendation will be addressed as part of that system implementation.

APPENDIX 5 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2021/22

Job	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
BRD2214 Disaster Recovery	Recommendation 2. Council DR Plans be reviewed, updated, communicated and tested	Urgent	AD Transformation, Innovation and IT	01/11/2022	31/10/2023	2	Outstanding	DR plans in relation to the Recovery Time Objectives have been agreed by the business and the Corporate Leadership Team.
BRD2214 Disaster Recovery	Recommendation 3. Regular DR tests be scheduled and undertaken.	Urgent	AD Transformation, Innovation and IT	01/02/2022	31/10/2023	3	Outstanding	DR tests are yet to be scheduled the move to new infrastructure and the Horizon Building has delayed the scheduling of these DR tests. We have recently re-worked our workplan to reflect a more realistic view of the completion date for this exercise in view of current workload and the planning and timing of the enabling works for this.
BRD2214 Disaster Recovery	Recommendation 6. Ensure that appropriate staff have DR responsibilities and skills/knowledge is refreshed	Important	AD Transformation, Innovation and IT	01/11/2022	31/10/2023	2	Outstanding	Training needs have been identified and funding has been ringfenced from the Learning and Development budget to deliver training this year.
BRD2206 Counter	Recommendation 3: A Counter Fraud and Corruption Strategy be devised, applying to all aspects of	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	The contract has been signed by the Council, actions will be progressed with

Job	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
Fraud and Corruption	the Councils' business. This should be communicated throughout the Councils and acknowledged by those charged with governance. A strategy provides a framework for preventing and tackling bribery, fraudulent and corrupt acts against the Councils.							urgency now the contract is signed by both parties.
BRD2206 Counter Fraud and Corruption	Recommendation 4: Proactive work be undertaken to raise awareness of potential fraud.	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	Update as above.
BRD2206 Counter Fraud and Corruption	Recommendation 5: A programme of work be introduced to improve staff awareness and responsiveness to fraud across the Council.	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	Update as above.
BRD2206 Counter Fraud and Corruption	Recommendation 6: An annual fraud plan be devised, agreed by committee and reflect resources mapped to risks and arrangements for reporting outcomes. This plan should cover all areas of the local authority's business and include activities undertaken by contractors and third parties or voluntary sector activities.	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	Update as above.
BRD2206 Counter Fraud and Corruption	Recommendation 7: The Councils to introduce an official programme to publicise fraud and corruption cases internally and externally, which is positive and endorsed by the council's communications team.	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	Update as above.
BRD2206 Counter Fraud and Corruption	Recommendation 9: A fraud and corruption response plan should be devised to cover all areas of counter fraud work: prevention, detection, investigation, sanctions and redress.	Important	AD Finance	30/04/2022	01/09/2023	6	Outstanding	Update as above.
BRD2208 Income	Recommendation 1: Bank charge reconciliations to be completed within the month end accounting	Important	AD Finance	30/11/2022	31/08/2023	2	Outstanding	These reconciliations are now being carried out, signed off and are up to date. However, some further work is

Job	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
	cycle and reviewed no later than 30 days following month-end shut down.							taking place to ensure supporting evidence is in place, and therefore, the due date for the recommendation has been revised to end of August 2023 to allow time for this work to be done.
BRD2201 Key Controls and Assurance	Recommendation 4 – The CTAX and NNDR System is reconciled to the general ledger on a monthly basis, documented and subject to independent review, with evidence retained.	Important	AD Finance	30/11/2022	31/08/2023	2	Outstanding	NNDR reconciliations have been brought up to date; however CTAX reconciliations are only up to date until January 2023. The deadline has therefore been revised to August 2023.

APPENDIX 6 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2022/23

Job	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
BRD2312 Community Assets	Update the Community Assets Strategy, for both Councils, and prepare supporting documents that link to it, such as Tree Management Plan, Playgrounds Management Plan and Open Space Strategy.	Important	AD Economic Growth	31/05/2023	N/A	0	Outstanding	No update received.
BRD2312 Community Assets	Regularly review outstanding tasks assigned to contractors to ensure that they are not taking an excessively long time to complete.	Important	AD Economic Growth	30/03/2023	31/07/2023	1	Outstanding	Tasks assigned are regularly reviewed and prioritised. Working with procurement to include penalty clauses and performance metrics in all future contracts for Community Assets to ensure work is completed in a timely manner.
BRD2312 Community Assets	Review how actions are recorded, assigned and closed on PSS Live to ensure that the system is being used effectively and reflects the tasks that are currently outstanding.	Important	AD Economic Growth	30/03/2023	31/07/2023	1	Outstanding	All historic actions and tasks are being reviewed and closed down, as appropriate. The system is now being used effectively and reflects actions that are not part of a scheduled maintenance program.