

**Committee Name and Date of Committee Meeting**

Audit Committee – 28<sup>th</sup> November 2023.

**Title**

Internal Audit Progress Report for the period 1<sup>st</sup> September 2023 to 31<sup>st</sup> October 2023.

**Is this a Key Decision and has it been included on the Forward Plan?**

No.

**Strategic Director Approving Submission of the Report**

Judith Badger, Strategic Director, Finance and Customer Services.

**Report Author(s)**

Louise Ivens, Head of Internal Audit

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**Ward(s) Affected**

All wards.

**Report Summary**

This Progress Report provides the committee with an up to date position on the Internal Audit Plan, a summary of Internal Audit work completed during the period 1<sup>st</sup> September 2023 to 31<sup>st</sup> October 2023 and the key issues that have arisen from it, and the status of actions arising from audits. It also provides information regarding the performance of the Internal Audit function during the period.

**Recommendations**

The Audit Committee is asked to:

- 1) Note the Internal Audit work undertaken since the last Audit Committee, 1<sup>st</sup> September 2023 to 31<sup>st</sup> October 2023, and the key issues that have arisen from it.
- 2) Note the information contained regarding the performance of Internal Audit and the actions being taken by management in respect of their performance.

**List of Appendices Included**

Appendix A – Internal Audit Plan 2023/24

Appendix B – Summary of work completed since the last meeting

Appendix C – Internal Audit Performance Indicators

**Background Papers**

Public Sector Internal Audit Standards and Associated Local Government Application Note.

Accounts and Audit (England) Regulations 2015.

**Consideration by any other Council Committee, Scrutiny or Advisory Panel**  
No.

**Council Approval Required**  
No.

**Exempt from the Press and Public**  
No.

# Internal Audit Progress Report for the period 1<sup>st</sup> September 2023 to 31<sup>st</sup> October 2023

## 1. Background

- 1.1 CIPFA guidance for Audit Committees in Local Authorities gives the Audit Committee a clear role in supporting the effectiveness of the internal audit process. This role is reflected in the Terms of Reference of the committee. To fulfil this role the committee receives updates on the work of internal audit including key findings, issues of concern and action in hand as a result of internal audit work. In addition, it receives information on performance relative to the audit plan.
- 1.2 Public Sector Internal Audit Standards require that the Head of Internal Audit reports periodically to the Audit Committee. This is reflected in the Audit Charter which provides for Progress Reports to be presented to the Audit Committee regarding the audit plan and progress against it; resource requirements; the results of audit activities; the tracking of audit recommendations; and the performance of the audit team.
- 1.3 This report includes the position up to the end of October 2023 on the completion of the annual plan for 2023/24, the reports finalised in September and October 2023 and performance indicators for the team.

## 2. Key Issues

### 2.1 Internal Audit Annual Plan

Internal Audit produced a risk based Annual Audit Plan for 2023/24 and presented it to the Audit Committee at its meeting on 14<sup>th</sup> March 2023. A revised plan was presented at the July meeting. The revised plan provides sufficient coverage for the Head of Internal Audit to provide their annual opinion at the end of the year and will be kept under review throughout the year. The plan is attached, showing the position at the end of October 2023. In the year to date the department has delivered 601 days of productive work, showing it is on target for the year as a whole.

### 2.2 Audit Work Undertaken During the Period

Internal Audit provides an opinion on the control environment for all systems or services which are subject to audit review. These are taken into consideration when forming our overall annual opinion on the Council's control environment. There are four possible levels of assurance for any area under examination, these being "Substantial Assurance", "Reasonable Assurance" "Partial Assurance" and "No Assurance". Audit opinions and a brief summary of all audit work concluded since the last Audit Committee are set out in **Appendix B**. Nine audits have been finalised since the last Audit Committee, including one with Partial Assurance.

- 2.3 In addition to the planned audit assurance work, Internal Audit also carries out unplanned responsive work and investigations into any allegations of fraud, corruption or other irregularity. There have been no investigation reports issued since the last committee meeting.

### 2.4 Internal Audit Performance Indicators

Internal Audit's performance against a number of indicators is summarised in **Appendix C**. One audit exceeded the time budget and available productive time was affected by staff training.

## 2.5 Management Response to Audit Reports

Following the completion of audit work, draft reports are sent to or discussed with the responsible managers to obtain their agreement to the report and commitment to the implementation of recommendations. This results in the production of agreed action plans, containing details of implementation dates and the officers responsible for delivery. Draft reports are copied to the relevant Head of Service and Assistant Director and final reports are also sent to the Strategic Director.

Confirmation of implementation of audit recommendations is sought from service managers when the implementation date is reached. This is automated, with alerts being sent out a week before the due date to the Responsible Manager and Head of Service, and overdue alerts sent out weekly, copied into the Assistant and Strategic Director. Managers should enter the system and provide an update on the action – either implemented or deferred.

Summary reports of outstanding actions are produced monthly and distributed to Strategic Directors. At the present time there are thirteen actions that have been deferred from their original due dates, nine of which relate to Rothercare where the service is working on a new business operating model.

## 3. Options considered and recommended proposal

- 3.1 This report is presented to enable the Audit Committee to fulfil its responsibility for overseeing the work of Internal Audit. It provides a summary of Internal Audit work completed and the key issues arising from it for the period from 1<sup>st</sup> September 2023 to 31<sup>st</sup> October 2023 and information about the performance of the Internal Audit function during this period.

## 4. Consultation on proposal

- 4.1 The Internal Audit plan was produced after consultation with management teams. All Internal Audit reports referred to in this report have been discussed and agreed with management in the respective service areas.

## 5. Timetable and Accountability for Implementing this Decision

- 5.1 The Audit Committee is asked to receive this report at its 28<sup>th</sup> November 2023 meeting.

## 6. Financial and Procurement Advice and Implications

- 6.1 There are no direct financial or procurement implications arising from this report. The budget for the Internal Audit function is contained within the budget for the Finance and Customer Services Directorate.

## **7. Legal Advice and Implications**

7.1 The provision of Internal Audit is a statutory requirement for all local authorities that is set out in the Accounts and Audit (England) Regulations 2015. These state:

*“A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.”*

7.2 Internal Audit also has a role in helping the Council to fulfil its responsibilities under s.151 of the Local Government Act 1972, which are:

*“each local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs”*

## **8. Human Resources Advice and Implications**

8.1 There are no direct Human Resources implications arising from this report.

## **9. Implications for Children and Young People and Vulnerable Adults**

9.1 This document includes a report of progress against delivery of the Internal Audit Plan. A significant proportion of the Plan is devoted to the examination of risks facing Children and Young People’s Services and Adult Social Care.

## **10. Equalities and Human Rights Advice and Implications**

10.1 There are no direct Equalities and Human Rights Implications arising from this report.

## **11. Implications for CO2 Emissions and Climate Change**

11.1 There are no direct CO2 and Climate Change implications arising from the report.

## **12. Implications for Partners**

12.1 Internal Audit is an integral part of the Council’s Governance Framework, which is wholly related to the achievement of the Council’s objectives, including those set out in the Council Plan.

## **13. Risks and Mitigation**

13.1 An effective Internal Audit Department helps to minimise the Council’s exposure to risk.

## **14. Accountable Officer**

Louise Ivens, Head of Internal Audit.  
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## Appendix A

### Internal Audit Plan 2023/24

| <b><u>CORPORATE</u></b>               |                                 |                             |  |                       |                        |
|---------------------------------------|---------------------------------|-----------------------------|--|-----------------------|------------------------|
| <b>Audit</b>                          | <b>Risk Register and Rating</b> | <b>Audit Classification</b> | <b>Auditable Area</b>  | <b>Number of days</b> | <b>Planned Quarter</b> |
| Contract Management                   |                                 | Risk Based                  | A review of the tracking and management of contract delivery by contract managers, to provide assurance on how outcomes and outputs are tracked. | 15                    | 2                      |
| <b>Total planned days – Corporate</b> |                                 |                             |  | <b>15</b>             |                        |

| <b><u>ASSISTANT CHIEF EXECUTIVE</u></b> |                                 |                             |   |                       |                        |
|---|---------------------------------|-----------------------------|---|-----------------------|------------------------|
| <b>Audit</b>                            | <b>Risk Register and Rating</b> | <b>Audit Classification</b> | <b>Auditable Area</b>   | <b>Number of days</b> | <b>Planned Quarter</b> |
| Payroll 22/23                           | ACX20                           | Systems Based               | Provide assurance on key processes for carrying out reconciliations and error resolution and prevention.      | 5                     | FINAL                  |
| Big Hearts Big Changes (BHBC)           | ACX23                           | Risk Based                  | Provide assurance on the governance arrangements to ensure the effective delivery of the BHBC programme.      | 9                     | WIP                    |
| Council Plan                            | ACX27                           | Risk Based                  | Provide assurance on the governance arrangements and that performance measures are being accurately reported. | 7                     | FINAL                  |
| Payroll 23/24                           | ACX20                           | Systems Based               | Annual review of payroll as a fundamental system.   | 20                    | 4                      |

|   |       |            |  |            |       |
|---|-------|------------|--|------------|-------|
| Workforce Plan  | ACX32 | Risk Based | Review of the impact of the Workforce Plan on the workforce  | 10         | 4     |
| Establishment Control                                 |       | Risk Based | Review of the management of vacancies and their disestablishment, and the match between HR and Finance establishments. | 15         | 3     |
| Risk Management                                       |       | Risk Based | Review of the effectiveness of Risk Management.  | 15         | 4     |
| Annual Governance Statement                           |       | Risk Based | Review of the process for the production of the AGS, after changes introduced in 2023.                                 | 10         | 4     |
| Declarations of Interest                              |       | Risk Based | Review of officers' Declarations of Interest, after the introduction of new procedure.                                 | 10         | FINAL |
| <b>Total planned days – Assistant Chief Executive</b> |       |            |  | <b>101</b> |       |

### **ADULT CARE HOUSING AND PUBLIC HEALTH**

| <b>Audit</b>                                  | <b>Risk Register and Rating</b> | <b>Audit Classification</b> | <b>Auditable Area</b>  | <b>Number of days</b> | <b>Planned Quarter</b> |
|---|---------------------------------|-----------------------------|--|-----------------------|------------------------|
| Housing Management System                     |                                 | Risk Based                  | Review and provide assurance on the adequacy of the new housing management system.   | 1                     | FINAL                  |
| Transition from Children's Care to Adult Care |                                 | Risk Based                  | Review progress in implementing the Ofsted action plan and provide an assurance on the processes taken to address the weaknesses highlighted within the action plan. | 9                     | DRAFT                  |
| Waiting Lists                                 |                                 | Risk Based                  | Management request – addition to the plan. Review of mechanisms in place for dealing with waiting lists for assessments for care.                                    | 1                     | FINAL                  |

|   |                   |            |   |            |       |
|---|-------------------|------------|---|------------|-------|
| Liberty Protection Safeguards.  | ACHPH R3 (ACI R5) | Risk Based | Provide an assurance on the Council's readiness to transfer to the new Liberty Protection Safeguards regulations.   | 20         | WIP   |
| Health & Safety Legislation and Corporate Responsibilities for Council Homes. | ACHPH R9 (H-R12)  | Risk Based | To review compliance with Health and Safety regulations with regard to smoke and carbon monoxide alarms.  | 10         | 4     |
| Housing and Estates – Anti Social Behaviour                                   | H – R10           | Risk Based | Review of current procedures and to ensure compliance with legislation.   | 10         | DRAFT |
| Housing and Estates – Management of Estate Environment                        | H – R11           | Risk Based | Review of procedures in place to ensure effective management of the estate environment.   | 10         | 2     |
| Local Government Ombudsman's Reports  |                   | Risk Based | Management request to examine Ombudsman's report for the last two years and report on how the Council responded to any findings and if any lessons learned were acted upon. | 15         | 2     |
| Public Health   |                   | Risk Based | Review of drug and alcohol working partnerships including needs assessments and plans.  | 15         | WIP   |
| Health Funded Clients   |                   | Follow Up  | Follow up of Partial Assurance audit in 2022/23   | 5          | 2     |
| Homes England   |                   | Risk Based | Review of grant funding drawdowns after new processes have been implemented.  | 5          | WIP   |
| <b>Total Planned Days – Adult Care and Housing</b>                            |                   |            |   | <b>101</b> |       |

**CHILDREN AND YOUNG PEOPLES SERVICE**



| Audit  | Risk Register and Rating | Audit Classification | Auditable Area   | Number of days | Planned Quarter |
|--|--------------------------|----------------------|--|----------------|-----------------|
| Commissioning Services                           | CPQ43                    | Risk Based           | Review of commissioning policies in place to support safeguarding of children and young people; health and safety and Governance, which need to be in place by all contract holders. Assurance would assist Commissioning develop their quality assurance framework. | 5              | WIP             |
| Youth Offending                                  |                          | Risk Based           | Review of progress after HMIP review and peer review   | 1              | FINAL           |
| Supporting Families                              |                          | Risk Based           | Management request – addition to the plan. Review of new systems being developed to prepare for changes to government requirements.  | 9              | WIP             |
| Early Help Provision                             | ES6                      | Risk Based           | Consider the recently published independent review of children's social care report and where areas of concern could be applicable to RMBC. Review to also consider Universal and targeted help.   | 15             | 4               |
| Social; Emotional and Mental Health Needs (SEMH) | ES17                     | Risk Based           | Scope of the audit to be finalised with CYPS, based upon Local Area Provision and inclusion pathways.  | 15             | WIP             |
| Safeguarding                                     | SCF3                     | Risk Based           | Review of procedures for placing 16+ children with external provider regulated accommodation   | 10             | WIP             |
| Unaccompanied Asylum-Seeking Children (UASC)     | SCF6                     | Risk Based           | Review of procedures for age assessments of UASC.  | 10             | WIP             |
| Special Education Needs and Disability (SEND)    | CYPS03                   | Risk Based           | Review of Education, Health and Care Plans (EHCP) across all the domains, including Health and Social Care Partners.   | 20             | 3               |
| Schools CRSA                                     |                          | Risk Based           | Conduct the annual school's Control and Risk Self-Assessment to form the basis for school visits.  | 10             | WIP             |

|  |  |            |  |            |   |
|--|--|------------|--|------------|---|
| Schools Themed Audits  |  | Risk Based | Sample visits to schools, based on the results of the self-assessment. | 20         | 4 |
| <b>Total Planned Days - Children and Young People's Services</b> |  |            |  | <b>115</b> |   |

## **FINANCE AND CUSTOMER SERVICES**

### **Finance**

| <b>Audit</b>                 | <b>Risk Register and Rating</b> | <b>Audit Classification</b> | <b>Auditable Area</b>   | <b>Number of days</b> | <b>Planned Quarter</b> |
|------------------------------|---------------------------------|-----------------------------|---|-----------------------|------------------------|
| NNDR                         | FCS2                            | Systems Based               | Fundamental System. Review of new processes in respect of NNDR reliefs to provide a level of assurance of compliance with these.                    | 1                     | FINAL                  |
| Procurement Governance       | Operational Risk.               | Risk Based                  | Review procurement procedures and assess Directorate adherence to them. To include, where applicable, a review of Directorate procedures.           | 8                     | WIP                    |
| Debtors                      |                                 | Systems Based               | Review debtors procedures and assess Directorate adherence to them. To include, where applicable, a review of Directorate procedures.               | 2                     | FINAL                  |
| Rebate Scheme                |                                 | System Based                | To review the processes used to pay the one-off Council Tax Energy rebate payment to RMBC residents   | 1                     | FINAL                  |
| Council Tax                  |                                 | Systems Based               | Fundamental System. Scope of the audit to be agreed with Assistant Director Finance, to include core systems not currently being externally stored. | 10                    | 4                      |
| Contract Renewals and Expiry |                                 | Systems Based               | Review of Directorate compliance with procedures for planning for renewing contracts, in line with Cabinet Office Best Practice.                    | 20                    | WIP                    |

|   |                         |               |   |    |       |
|---|-------------------------|---------------|---|----|-------|
| Creditors   |                         | Systems Based | Fundamental System. Audit resources to examine procedures regarding move towards “faster payments”, scope to be finalised with the Assistant Director Finance.          | 10 | 4     |
| Rents   |                         | Systems Based | Fundamental system. Audit resources to examine changes to the rents settings in the system and ensure calculated rents are feeding through the system.                  | 10 | 4     |
| Capital Programme   |                         | Systems Based | Review the updated capital procedures and provide assurance that they are being complied with and that expenditure is appropriately approved, controlled and monitored. | 15 | WIP   |
| <b><u>Customer Information &amp; Digital Services</u></b> |                         |               |   |    |       |
| Hosted & Cloud-based systems                              | Operational Risk        | Risk Based    | Provide assurance on the IG policies & procedures for cloud-based storage platforms, including recovery, protection & security arrangements.                            | 1  | FINAL |
| Application Management                                    | Salford Risk Assessment | Risk Based    | Review of controls around access control, system availability. Specific applications to be agreed.  | 10 | 4     |
| PCI/DSS   | Salford Risk Assessment | Risk Based    | Technical audit to be carried out by Salford IAS  | 10 | WIP   |
| Customer Digital Programme                                |                         |               | Audit contribution to projects designed to increase efficiency.   | 20 | n/a   |
| <b><u>Legal Services</u></b>                              |                         |               |   |    |       |
| Registrars  |                         | Risk Based    | Review of processes and controls after external inspection  | 15 | DRAFT |
| Litigation Service  |                         | Risk Based    | Review of the legal support provided to Adult Care and Child Protection   | 20 | 2     |
| Land Terrier  |                         | Risk Based    | Review of the registration of Council land  | 10 | 3     |
| Governance  |                         | Risk Based    | Review of the operation of processes around decision-making within the Council.   | 15 | 4     |

**Total Planned Days – Finance and Customer Services****178****REGENERATION AND ENVIRONMENT**

| <b>Audit</b>                | <b>Risk Register and Rating</b> | <b>Audit Classification</b> | <b>Auditable Area</b>   | <b>Number of days</b> | <b>Planned Quarter</b> |
|-----------------------------|---------------------------------|-----------------------------|---|-----------------------|------------------------|
| Waste                       | CSS13                           | RISK BASED                  | To provide assurance on the efficient and effective management of waste collection data, reporting and invoicing.                     | 17                    | DRAFT                  |
| Cash collection and income  |                                 | RISK BASED                  | Review the arrangements for the collection, monitoring, reconciliation of cash and other forms of income from various establishments. | 13                    | WIP                    |
| Building Security Follow Up |                                 | FOLLOW UP                   | Follow Up of Partial Assurance audit.   | 1                     | FINAL                  |
| Home to School Transport    | R&E 8 & CST 15                  | RISK BASED                  | Provide assurance on the effectiveness of the Home to School Transport service.   | 10                    | 3                      |
| Vehicle Operators Licence   | R&E39 & CSS44                   | RISK BASED                  | Review compliance with regulatory requirements  | 10                    | WIP                    |
| Fire Strategy               | R&E25 & PRT38                   | RISK BASED                  | Provide assurance that RMBC as the corporate landlord has an effective fire strategy.   | 10                    | DRAFT                  |
| Building Control            |                                 | RISK BASED                  | Provide assurance after changes in regulations around payments and inspection visits.   | 10                    | WIP                    |
| Trading Standards           |                                 | RISK BASED                  | Review of the operation of Trading Standards.   | 15                    | WIP                    |

|  |              |            |  |            |       |
|--|--------------|------------|--|------------|-------|
| Green Spaces   |              | RISK BASED | Review over the Health and Safety controls around Green Spaces.  | 15         | 4     |
| Tree Service follow-up                                   | R&E52 & CST9 | RISK BASED | Follow up of No Assurance audit in 2022/23   | 10         | WIP   |
| Museum Collections follow-up                             | CST11        | RISK BASED | Follow up of Partial Assurance audit in 2022/23  | 5          | DRAFT |
| Hand Arm Vibration                                       |              | RISK BASED | To review compliance with the Vibration at Work Guidance   | 10         | DRAFT |
| Hellaby Stores   |              | RISK BASED | To assess the adequacy of the internal control arrangements surrounding the operation of the stores at Hellaby depot | 10         | FINAL |
| <b>Total Planned Days – Regeneration and Environment</b> |              |            |  | <b>126</b> |       |

| <b><u>OTHER</u></b>          | <b>Provision</b> | <b>Used</b> |
|------------------------------|------------------|-------------|
| Grants                       | 100              | 34          |
| Provision for investigations | 150              | 54          |
| Pro-active fraud             | 40               | 3           |
| Contingency                  | 60               | 30          |
| Follow Up                    | 20               | 10          |
|                              |                  |             |
| <b>Other Work Total</b>      | <b>370</b>       | <b>131</b>  |
|                              |                  |             |
| <b>Overall Plan Total</b>    | <b>1000</b>      |             |

**Summary of Audit Work Completed since the last meeting**

Note:- Internal Audit uses an Executive Summary and reporting structure which gives four levels of overall assurance for areas under examination. Within each area audited an overall assurance opinion is assessed as being either “Substantial Assurance”, Reasonable Assurance”, “Partial Assurance” or “No Assurance”, taking into account the results of all the risks assessed.

| Audit Area                                  | Assurance Objective  | Final Report issued | Overall Audit Opinion | Summary of Significant Issues   |
|---|--|---------------------|-----------------------|---|
| <b>Assistant Chief Executive</b>            |  |                     |                       |   |
| Council Plan                                | To provide assurance on the governance arrangements and that performance measures are being accurately reported.                       | 13.9.23             | Substantial           | Controls were in place and KPI’s were accurately reported. No recommendations were made.  |
| Sundry Debtors                              | To review the debtors procedures, specifically the Sundry Accounts Billing and Collection Guide and assess adherence to them.          | 3.10.23             | Reasonable            | Controls were generally in place. Recommendations were raised regarding compliance with the Billing and Collection Guidance and improvements to the reporting and recovery of outstanding debt. |
| Declarations of Interest                    | To provide assurance on the effectiveness of policies and procedures in place and on the ownership and accountability for the process. | 31.10.23            | Reasonable            | Controls were generally in place. Recommendations were raised regarding compliance with the procedures, and for training/e-learning to be provided to managers on undertaking risk assessments. |
| <b>Adult Care Housing and Public Health</b> |  |                     |                       |   |
| Housing Management System                   | To review and provide assurance on the adequacy of the new housing management system.  | 12.9.23             | Reasonable            | Controls were generally in place. One recommendation was raised regarding the review of duplicate records on the system.  |

| Audit Area                                  | Assurance Objective  | Final Report issued | Overall Audit Opinion | Summary of Significant Issues   |
|---|--|---------------------|-----------------------|---|
| Waiting Lists                               | To provide assurance on the validity of the number of people awaiting a Care Act Assessment/Reassessment including the effectiveness and timeliness of the triage process, record keeping in LAS, and reports to management. | 19.9.23             | Substantial           | Controls were in place and no recommendations were raised.  |
| <b>Children and Young People's Services</b> |  |                     |                       |   |
| Sundry Debtors                              | To review the debtors procedures, specifically the Sundry Accounts Billing and Collection Guide and assess adherence to them.  | 6.9.23              | Reasonable            | Controls were generally in place. Recommendations were raised regarding compliance with the Billing and Collection Guidance and improvements to the reporting and recovery of outstanding debt. |
| <b>Finance and Customer Services</b>        |  |                     |                       |   |
| Sundry Debtors                              | To review the debtors procedures, specifically the Sundry Accounts Billing and Collection Guide and assess adherence to them.  | 20.9.23             | Reasonable            | Controls were generally in place. Recommendations were raised regarding compliance with the Billing and Collection Guidance and improvements to the reporting and recovery of outstanding debt. |
| <b>Regeneration and Environment</b>         |  |                     |                       |   |
| Sundry Debtors                              | To review the debtors procedures, specifically the Sundry Accounts Billing and Collection Guide and assess adherence to them.  | 7.9.23              | Reasonable            | Controls were generally in place. Recommendations were raised regarding compliance with the Billing and Collection Guidance and improvements to the reporting and recovery of outstanding debt. |

| Audit Area                  | Assurance Objective  | Final Report issued | Overall Audit Opinion | Summary of Significant Issues   |
|-----------------------------|--|---------------------|-----------------------|---|
| Building Security Follow Up | To provide assurance that the agreed actions from the previous audit of building security have been implemented. | 10.10.23            | Partial               | Recommendations were raised regarding recording the inspection frequencies on the Asset Management System and conducting and recording inspections to the required frequency. |



## Definitions

| Rating                | Definition   |
|-----------------------|--|
| Substantial Assurance | <p>Substantial assurance that the system of internal control is designed to achieve the service's objectives and this minimises risk.</p> <p>The controls tested are being consistently and effectively applied. Recommendations, if any, are of an advisory nature (1 star) to further strengthen control arrangements.</p>   |
| Reasonable Assurance  | <p>Reasonable assurance that the system of internal control is designed to achieve the service's objectives and minimise risk. However, some weaknesses in the design or inconsistent application of controls put the achievement of some objectives at risk.</p> <p>There are some areas where controls are not consistently and effectively applied and / or are not sufficiently developed. Recommendations are no greater than medium (2 star) priority.</p> |
| Partial Assurance     | <p>Partial assurance where weaknesses in the design or application of controls put the achievement of the service's objectives at risk in a significant proportion of the areas reviewed.</p> <p>There are significant numbers of areas where controls are not consistently and effectively applied and / or are not sufficiently developed. Recommendations may include high priority (3 star) and medium priority (2 star) matters.</p>                        |
| No Assurance          | <p>Fundamental weaknesses have been identified in the system of internal control resulting in the control environment being unacceptably weak and this exposes service objectives to an unacceptable level of risk.</p> <p>There is significant non-compliance with basic controls which leaves the system open to error and / or abuse. Recommendations will include high priority (3 star) matters and may also include medium priority (2 star) matters.</p>  |

**Internal Audit Performance Indicators**

| Performance Indicator  | Target | April to June 2023 | July to August 2023 | Sept to October 2023 |
|--|--------|--------------------|---------------------|----------------------|
| Draft reports issued within 15 working days of field work being completed. | 90%    | 80%                | 100%                | 89%                  |
| Chargeable Time / Available Time.  | 80%    | 83%                | 75%                 | 74%                  |
| Audits completed within planned time                                       | 90%    | 90%                | 88%                 | 83%                  |
| Client Satisfaction Survey.  | 100%   | 100%               | 100%                | 100%                 |

Comments received in the Client Satisfaction Surveys

Two surveys received during September and October.

**Good**

Professional, friendly approach.

The approach taken by the auditor was very collaborative and informative at every stage.

**Suggested improvements**

A suggestion was raised regarding the use of SharePoint /a teams channel so that comments can be made on central documents and reduce multiple versions circulating on emails.