

CEREDIGION COUNTY COUNCIL

Report to:	Governance and Audit Committee
Date of meeting:	27 September 2022
Title:	Internal Audit Progress Report 1/4/22 – 30/6/22
Purpose of the report:	To provide Members with an update on the work undertaken by internal audit during the above period

The Committee considered the annual Internal Audit Strategy 2022/23 at its meeting in March 2022 which also identified the main areas of work for the 2022/23 interim operational audit plan. The Plan included reviews carried forward from the previous year's audit plan, routine audits eg grant certifications and work prioritised dependant on risk, on which the Internal Audit Section can form its assurance opinion.

For 2022/23, a risk assessment was undertaken in addition to information from the Council's Corporate Risk Register as new risks to the Council continue to emerge, which are constantly changing. IA will therefore assess its work on an on-going basis, considering the Council's changing needs and priorities regularly.

This progress report notes the steps made to date toward delivery of the audit strategy, by providing a summary of the work undertaken. It also documents the current resource position, and the Section's improvement plan.

Recommendation(s):	To consider the work undertaken and current position of the Internal Audit Section
Reasons for decision:	That the Committee is satisfied that the Internal Audit Section is undertaking sufficient and appropriate work in order to provide a realistic assurance at year-end, whilst adding value and assisting the Council in achieving its objectives.
Appendices:	Internal Audit Progress Report 1/4/22-30/6/22
Corporate Lead Officer:	Elin Prysor CLO-Legal and Governance / Monitoring Officer
Reporting Officer:	Alex Jenkins Corporate Manager – Internal Audit
Date:	27 July 2022

Mae'r adroddiad yma ar gael yn Gymraeg.

This report is available in Welsh.

Gwasanaethau Cyfreithiol a Llywodraethu Legal and Governance Services

Gwasanaeth Archwilio Mewnol

Internal Audit Service



Adroddiad Cynnydd Archwilio Mewnol

Internal Audit Progress Report

1 April 2022 – 30 June 2022



Cyngor Sir
CEREDIGION
County Council

Report Prepared by: Alex Jenkins,
Corporate Manager – Internal Audit

Date of Issue: 27 July 2022

Presented to Governance & Audit
Committee: 21 September 2022

ADRODDIAD CYNNYDD ARCHWILIO MEWNOL

INTERNAL AUDIT PROGRESS REPORT

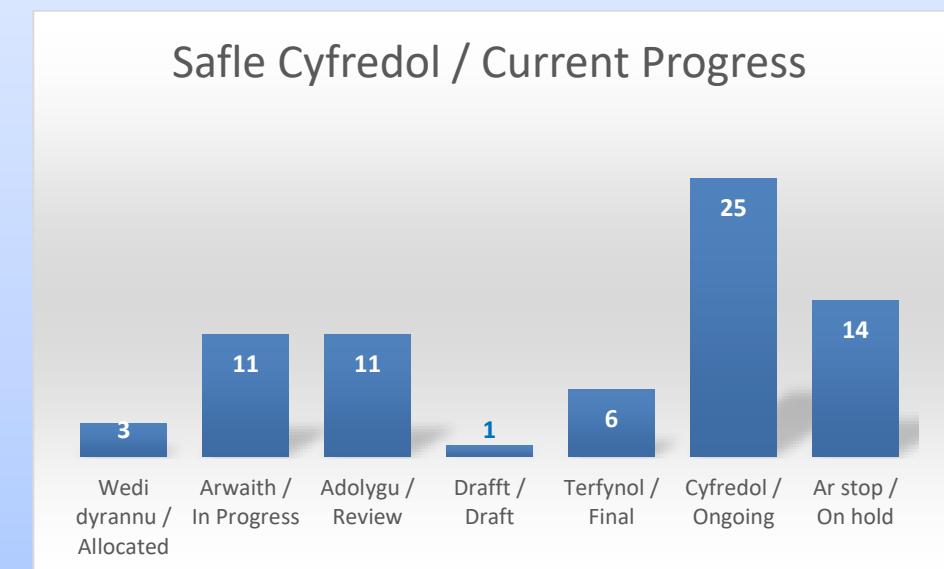
01/04/2022 – 30/06/2022

1 INTRODUCTION

- 1.1 The Internal Audit Strategy and Annual Plan for 2022/23 was approved by the Committee (GAC) on 10 March 2022.
- 1.2 The initial risk assessment has been carried out by the Corporate Manager – Internal Audit (CMIA) and additional consideration was given to risks within the Corporate Risk Register when compiling the operational plan for 2022/23. Risks to the Council continue to emerge from the pandemic and more recently, the Cost of Living crisis. The CMIA has therefore assessed the work on an on-going basis, considering the Council's changing needs and priorities regularly.
- 1.3 The purpose of this report is to update the GAC on the work undertaken by the Internal Audit (IA) service during the first quarter of the 2022/23 financial year and highlight any areas of concern that may have arisen during the completed audits. A copy of the Interim Audit Plan as at 30/6/22 is attached in Appendix 1.

2 AUDIT WORK UNDERTAKEN

- 2.1 Audit Plan Progress:



- 2.2 As at 30/6/2022 a total of 87 items appear in the operational Interim Audit Plan. These are made-up of 71 items that have mainly either been carried-forward from the previous year (eg audits that are already in progress) or are annual pieces of work (eg grants) which have been included as 'planned' items. The remaining 16 items have been added during the first quarter, ie unplanned. (The unplanned items are highlighted in Appendix I).
- 2.3 Six pieces of work were finalised during the quarter, as per table below, which will be considered in determining the IA annual opinion:

Audit Area	Type of Audit	Assurance
Harbours Account Scope: Account audit. The Council must prepare annual accounts following proper practices as set out in the One Voice Wales/Society of Local Council Clerks publication, Governance and Accountability for Local Councils in Wales – A Practitioners' Guide. The Guide states that bodies may prepare their accounts in the form of an annual return prepared by Audit Wales, which includes internal audit input regarding account preparation. The audit is in respect of the 2020/21 account.	Account	N/A
Treasury Management – Key Control Scope: Key financial risk area. Completed every 3-years. The review considers the arrangements for both investments and loans: monitoring registers, reconciliation with MAS, compliance with policy, authorisation, separation of duties and contingency plans. It does NOT include the ICT system	Key Control	High
AGS Framework Review 2021/22 - Update Scope: Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.	Governance	High
Coroners – Revised Report Scope: Requested to undertake a further comparison of CCC FD fees against FD fees of other Welsh LA's	Advisory	N/A

Audit Area	Type of Audit	Assurance
Emergency Welcome Centre Scope: Provide advice for governance arrangements and controls at Emergency Welcome Centre	Advisory / Governance	N/A
Direct Payments – Governance, Control & Documentation Scope: A member of IA staff attends the meetings to ensure governance & controls are considered when implementing new systems and improving existing systems & procedures within the Direct Payments service.	Advisory / Governance	N/A

2.4 Examples of good practice noted from the finalised audits have been listed below, which also form part of the annual assurance process:

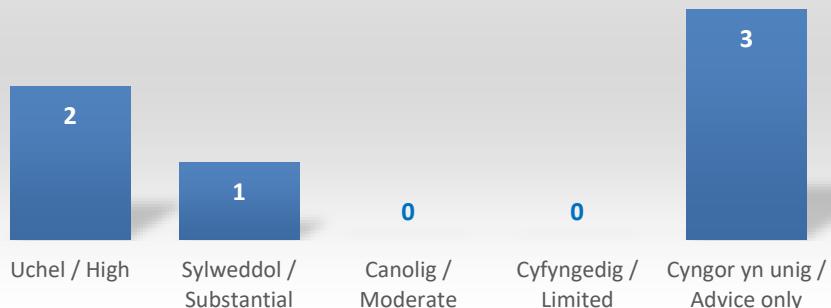
- **Harbour account** – detailed working papers available which reconcile to ledger to support the account.
- **AGS Framework Review** – Effective collaboration throughout relevant services and effective workshop to discuss measures taken. Prompt response by services to improve processes in response to AW report.
- **Treasury Management Key Control** – Regular monitoring is in place and regular reporting is timely, adequate and compliant.
- **Emergency Welcome Centre** – Effective collaboration in consideration of ‘cash’ security, record management and monitoring of Emergency Cash Fund.
- **Direct Payments – Governance, Control & Documentation**– Effective collaboration within the Governance, Control & Documentation Task & Finish Group to ensure consideration to governance, risk & controls throughout the Direct Payment Support Service during their transfer in-house from and external provider.

2.5 A total of 25 items are on-going pieces of work (as noted in Appendix I), from which IA have extracted examples of good practice achieved during the quarter, which again will be considered in forming the IA annual opinion:

- **Grants (paid due to pandemic or Cost of Living crisis)** – good collaboration between CMs, officers & services has supported effectiveness of systems; officers' awareness of error / fraud as well as need for promptness has helped ensure correct payments made in timely manner; auditing claims prior to payment has reduced risk of need to recover incorrect / fraudulent payments; use of 'ActiveData' data analytics system has enabled payments to be checked against intel received from National Anti-Fraud Network and other sources
- **Annual Governance Statement** – framework in place; annual improvement plan standard item on GAC agenda for progress monitoring
- **Direct Payments** – Steering group in place. Phase 1 completed and Governance, Control & Documentations Task & Finish Group ensured that sufficient governance & controls were in place to reduce risks when the Direct Payment Support Service was brought in-house from an external provider. Good collaboration continues throughout the Council in preparation for Phase 2 (improvement).
- **Emergency Planning & Business Continuity** – Corporate Business Continuity Plans being reviewed and updated by services & Civil Contingencies staff. Training was given to CMs in order to develop plans to respond to ransomware attacks. Emergency Rest Centre Procedures Pack produced for staff; volunteers recruited and trained to run the centres, to ensure proper procedures in place in the event of an incident
- **Code of Conduct** – internal audit and governance officer input provided to assist Learning & Development in the production of a training e-module on Code, Ethics & Fraud.
- **LG & Elections (Wales) Act 2021** – arrangements in hand to ensure correct split of Elected Members / Lay Members on GAC from May, as required by Act.
- **Corporate Project Management Panel** – new project proposals put forward & actions requested by panel where appropriate.
- **Corporate Management Workshop** – updates to managers re ways of working, carers policy, wellness strategy and wellbeing objectives for information and role development.
- **Cyber Resilience & Information Governance Group** – the Group will provide operational support, preparedness and direction to address and reduce cyber risks and improve the Council's cyber security, information security and governance. It shall act as a source of knowledge and expertise and will oversee and monitor the Information Governance and Cyber Security Risks and Action Plans.
- **NMWAG** - North & Mid Wales Auditor Group - Fraud aims to share knowledge & skills re countering fraud to build resilience throughout LAs. Fraud responses to Audit Wales shared to determine future direction of group.

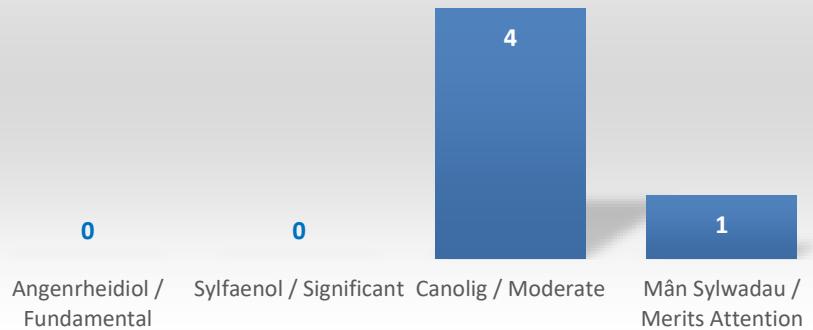
- 2.6 The levels of assurance provided for the audits completed are as follows:

Sicrwydd a Ddarparwyd / Assurance Provided



- 2.8 A total of five 'actions required' are recommended in the finalised reports issued of which none were deemed fundamental or significant:

Camau i'w Cymryd / Actions Required



- 2.7 A guide to the criteria used to determine the overall assurance is shown in Appendix II.

- 2.9 The criteria used to determine the 'actions required' is outlined in Appendix III.

- 2.10 There were no significant or fundamental actions issued in Quarter 1.

3 RESOURCES

- 3.1 The IA Structure, as noted in Appendix IV, has been fully resourced during the first quarter of 2022/23.
- 3.2 A total of 166 days have been dedicated to audit work during the period 1 April 2022 to 30 June 2022, representing 23% of the assessed days estimated as required to complete the audit plan to year-end (or 90% of days required to complete the audit plan for the first quarter).
- 3.3 The CMIA continues to support the Welsh Chief Auditors Group (WCAG) which ensures best practice and consistency between all authorities; and the North & Mid Wales Chief Auditors Group (NMWCAG) to compare practices and share generic documentation. These meeting continue to be held using 'Teams'.
- 3.4 During the year, the NMWCAG introduced a Counter Fraud Sub-Group, which dedicates more time to specific subject. This Sub-Group is attended by the Audit Manager (via Teams).
- 3.5 All members of staff ensure they meet any continuous professional development conditions, and complete the Council's mandatory training requirements. During this period:
 - All members of audit staff have undertaken the required Council's webinars and e-learning training modules, the e-learning system has been redeveloped and several members of audit staff have undertaken refresher e-learning modules.
 - The CMIA has completed all training on the Council's Ceredigion Manager's Programme.
 - The CMIA has 'attended' regular webinars hosted by the Institute of Internal Auditors (IIA), CIPFA, Data Cymru.
 - Two members of staff are continuing their Institute of Internal Auditors' qualification; and
 - All members of staff have 'attended' Pentana's Super User training.
- 3.6 Arrangements are also in place to continuously develop IA staff's audit / digital / ICT and counter fraud skills via training and subscribing to information sources such as CIPFA's Better Governance Forum.
- 3.7 All IA staff are currently working from home.

4 IMPROVEMENT PLAN 2022/23

Ref	Conformance with Standard	Action Required	Target Date
Std 1210	<p>5.3.1 Does the CAE hold a professional qualification, such as CMIIA/CCAB or equivalent?</p> <p>The CMIA in post up to 31/12/21 held the Chartered Institute of Public Finance and Accountancy's qualification, CIPFA, which is a CCAB body. The CMIA in post from 1/1/22 is currently studying for the IIA's Certificate in Internal Audit.</p>	CMIA to achieve CMIIA professional qualification.	Within 3 years of appointment
Std 1311	<p>5.4.5 Does ongoing performance monitoring include obtaining stakeholder feedback?</p> <p>No QCQs issued during pandemic. QCQs to be issued in Q2 for work undertaken in Q1. QCQ template also being setup on Pentana.</p>	Once Audit Plan in place, QCQs to be issued to auditees.	During 2022/23
Std 2010	<p>6.1.1 Has the CAE determined the priorities of the internal audit activity in a risk-based plan and are these priorities consistent with the organisation's goals?</p> <p>The IA Strategy & Plan does not set out the priorities of IA activity nor how they align to the organisation's goals.</p>	Produce risk-based audit plan in accordance with services' road plans which clearly sets out the priorities of audits consistent to the Council's priorities.	During 2022/23
Std 2050	<p>6.1.15 Using other sources of assurance.</p> <p>Assurance mapping system in place and is discussed at weekly team meetings, currently being reviewed and developed – will be input onto Pentana for monitoring and updating.</p>	Assurance mapping system to be reviewed and developed to further embed into IA work.	Throughout 2022/23
Std 2500	<p>6.6.1 Where issues have arisen during the follow-up process has the CAE considered revising the internal audit opinion?</p> <p>Due to the pandemic, no follow-ups were conducted in 2021/22. Follow-ups for ongoing audits will be monitored on Pentana.</p>	The follow-up audits due will be carried forward to 2022/23.	31 March 23

AJ	<p>Pentana (MKI) system not found as useful when working reactively.</p> <p>Pentana (MKI) will implemented fully for planned audits, but some reactive work will continue to be conducted & recorded using shared electronic folders.</p>	<p>The system has been evaluated and IA team have undertaken training on the system. IA plan to be input for Q3&Q4.</p>	31 March 23
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Appendix I

<u>Interim Audit Plan 2022/23</u>		
Audit Area	Scope	Status
Changes due to Pandemic		
Risk assessed reactive work due to pandemic	IA will undertake reviews of systems and procedures and any other work where it is identified that the Service can add value to the Council's operations during the pandemic.	
- Tenancy Hardship Grant	2021 Grants – checking a sample of applications prior to payment; validating information and documentation; other testing as appropriate; sitting on queries / appeals panel.	Unplanned On-going
- Cost of Living Payments	A member of IA staff attends meeting to ensure satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure payments are made effectively and accurately and controls are in place to reduce the risk of fraud.	Unplanned On-going
- Unpaid Carers Payments	2022 Grants – checking a sample of applications prior to payment; validating information and documentation; other testing as appropriate; sitting on queries / appeals panel.	Unplanned On-going
- Registration Service - income collection	Registration Service – independent verification of payments received and banked during office closure. To be undertaken once staff return to offices.	On Hold
- Free School Meals	Scope: Free School Meals – check in-lieu allowances paid - £39/fortnight/pupil by Tesco/Sainsbury voucher or cash (c1,200 pupils) Additional checking to be undertaken.	In Progress
- Personal Protection Equipment (PPE)	During transition from stock-taking spreadsheets to computerised system, audit will ensure correct levels of stocks are transferred between the two systems to provide an independent check to the service.	
Housing Support Grant - Steering Group	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place for Governance with regards to the Housing Support Grant and to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Unplanned On-going
Economic Adjustment - Silver Command	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed

Key Control Audits:		
Main Accounting System	Key financial risk area. Completed every 3-years. The review considers the arrangements for: monitoring, reconciliation, compliance with policy, authorisation, separation of duties and contingency plans for the Council's main accounting system. It does NOT include the ICT system.	In Progress
Council Tax	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing council tax payments: separation between creating and collecting a debit; methods of payment; reconciliation of debit to valuation list; promptness of processing amendments; daily postings to accounts; unidentified items posted to suspense; missed payments; monitoring of collection rates; payments reconciled to ledger; security of system. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review
Treasury Management	Key financial risk area. Completed every 3-years. The review considers the arrangements for both investments and loans: monitoring registers, reconciliation with MAS, compliance with policy, authorisation, separation of duties and contingency plans. It does NOT include the ICT system	Completed Quarter 1
National Non-Domestic Rates	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing NNDR payments: separation between creating and collecting a debit; methods of payment; reconciliation of debit to valuation list; promptness of processing amendments; daily postings to accounts; unidentified items posted to suspense; missed payments; monitoring of collection rates; payments reconciled to ledger; security of system. It does NOT include the ICT system.	In Progress
Creditors	Key financial risk area. Completed every 3-years. The review considers the arrangements for: authorising and paying costs incurred by the Council and the controls over the payment process. The scope does NOT include consideration of the nature of the expenditure or whether VFM was achieved. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Sundry Debtors	Key financial risk area. Completed every 3-years. The review considers the arrangements for raising invoices to recover debt owed to the Council: accuracy of value and coding; promptness of raising bills; monitoring of collection rates; debt independently reconciled to ledger; arrears recovery in progress; invoices accountable; security of system. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review

Payroll	Key financial risk area. Completed every 3-years. The review considers the arrangements for processing payroll: separation between creating and amending job roles and staff details and processing payroll; security of system. It does NOT include the ICT system.	In Progress
HR/Payroll Amendments	System audit of controls in place on amendments to staff payroll e.g. regrading, change in job role etc. The audit will also consider correct authorisation of amendments and separation of duty.	
Follow-up of Recommended Actions 2018/19 onwards	Assurance that previous recommended actions made have been implemented where appropriate. A prepared spreadsheet of all actions requiring re-viewing which is regularly updated.	On Hold
Corporate Governance		
Annual Governance Statement	Contribute to finalising 2021/22 AGS & 2022/23 procedures, as necessary throughout the year.	On-going
Annual Governance Statement Framework Review 2021/22 - Update	Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.	Completed Quarter 1
Annual Governance Statement Framework Review 2022/23	Governance review which considers the effectiveness of the Governance Framework, especially in the areas specifically addressed in the AGS action plan.	
Emergency Planning & Business Continuity Management Group	A member of IA staff attends the group tasked with ensuring satisfactory arrangements are in place within CSC, to provide advice and guidance when required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Business Continuity	Risk review which considers the arrangements in place re Business Continuity. Assurance assessed re procedures in place in Corporate and Service Business Continuity Plans.	In Review
Constitution review	Ensure Constitution kept up to date & relevant	On-going
Risk management & Corporate Risk Register:		
Risk Management	Contribute to RM & procedure, as necessary throughout the year.	

Risk Register: Check mitigating controls in place for risks	Risk management review which assesses the effectiveness of controls in place for ALL risks identified in the corporate risk register. Elements will be selected, and the effectiveness of the stipulated mitigating controls will be reviewed. The scope is limited to the arrangements noted in the report. The sample will be chosen at the commencement of the audit.	In Review
Brexit Group	A member of IA staff attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed
Brexit	Risk review which considers the arrangements in place for the changes due to Brexit.	Unplanned In Progress
Well-Being of Future Generations / Equalities		
IIA Review & Assessment	WFGA review which considers the arrangements in place for preparing and submitting IIAs, and the consistency in approach and compilation.	On Hold
New Socio-Econ requirements	WFGA review which considers the arrangements in place for preparing to comply with the new socio-econ requirements. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Welsh Standards	WFGA review which considers the arrangements in place for compliance with the Welsh Standards requirements.	Unplanned In Review
General Data Protection Regulation / DP		
GDPR / DP Compliance (ICO Guidance)	GDPR. The Regulation became effective in May 2018 and has a significant effect on how data is held and protected. There are reputational implications as well as financial penalties for non-compliance. The review will assess the Council's arrangements for compliance with various elements of the Regulation such as privacy notices, and data audits.	In Progress
GDPR in schools	GDPR. All schools processing personal data must pay a fee to the Information Commissioner's Office. The review consists of a periodic registration check, to ensure all CSC schools hold a valid and up to date registration with the ICO. The review does NOT include a review of the data provided to the ICO.	
Information Governance Team	GDPR. The Information Governance Team meets monthly. The DPO & team review services' Data Privacy Notices & DP assessments. They are in the process of planning a data audit to identify associated risks & to produce a more bespoke retention policy for the Council. IA will catch-up with the DPO periodically.	On-going

Information Governance Health Check	Zurich Municipal to conduct an Information Governance Health check based on the Corporate Risks identified. The Information Governance Health Check will enable CCC to benchmark its approach to information risk management and develop additional mitigation strategies to help reduce the likelihood of information breaches	Unplanned Allocated
Projects		
Corporate Project Management Panel	New projects. A member of IA staff attends the panel to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Panel is adequately supported and achieves its objectives. Meets fortnightly.	On-going
Development Group	A member of IA staff attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Direct Payments - Governance Task & Finish Group	A member of IA staff attends the meetings to ensure governance & controls are considered when implementing new and improving existing systems procedures in the Direct Payments service and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives.	Completed Quarter 1
Corporate Management		
Corporate Management Workshop	The CMIA attends the meetings to ensure awareness of any major changes in systems, and to determine whether IA input is required. Assurance assessed re procedures in place to ensure the Group is adequately supported and achieves its objectives. Meets quarterly.	On-going
Grants		
Post-16 Funding	Grant audit. Covering correspondence and evidence is collected and forwarded to WG to support the declarations made.	
Education Improvement Grant - 2020/21 End of Year audit	Grant audit. Completing an End of Year Audit Checklist and Testing Schedule to provide assurance that the grant is spent and administered in accordance with WG's guidelines. Also, to certify the Year-end Claim Form to confirm the funding provided by the grantor in 2020/21 has been duly allocated to the purposes of the grant, in line with the grant terms and conditions of funding and in line with the Council's compliance and audit requirements.	

Pupil Development Grant - 2020/21 End of Year audit	Grant audit. Completing an End of Year Audit Checklist and Testing Schedule to provide assurance that the grant is spent and administered in accordance with WG's guidelines. Also, to certify the Year-end Claim Form to confirm the funding provided by the grantor in 2020/21 has been duly allocated to the purposes of the grant, in line with the grant terms and conditions of funding and in line with the Council's compliance and audit requirements.	
Other Services & Systems		
CLIC	An evaluation of the service provided - scope to be agreed.	On Hold
Credit Cards	System audit. To concentrate on new system / cards issued. Documentation of systems; ascertain risks in system; and evaluate governance & controls required; test.	On Hold
Change Floats & Petty Cash imprests - Year end reconciliations to ledger	Checking the end of year procedures re reconciliation of imprests to ledger, supported by service declaration returns for 2020/21 & 2021/22.	Unplanned In Progress
Change Floats & Petty Cash imprests - FOLLOW-ON - verification of imprests (annual declarations from imprest holders)	Due to anomalies discovered during initial audit in 2021, follow-on work to 1. verify imprest holders; 2. request declarations from each to confirm imprest sums held & 3. reconciled these sums to ledger to check for consistency / anomalies.	In Progress
Harbours account 2021/22	Account audit. The Council must prepare annual accounts following proper practices as set out in the One Voice Wales/SLCC publication Governance and accountability for local councils in Wales – A Practitioners' Guide (the Practitioners' Guide). The Practitioners' Guide states that bodies may prepare their accounts in the form of an annual return prepared by Audit Wales, which includes internal audit input regarding account preparation. This was in respect of the 2020/21 account.	Completed Quarter 1
Harbours Income - updated to include all supporting info re account	Scope: Testing undertaken to support Harbours account, as stipulated by AW form: appropriate books of account maintained, financial regulations met, risks assessed, adequate budgetary process, expected income fully received, salaries and deductions properly applied, asset and investment registers maintained, accounting statements properly prepared.	Draft
VAT	Scope: Testing undertaken on calculation and coding of VAT payments to include creditor & debtor invoices and property transactions. To consider whether VAT guidance is in line with HMRC requirements. Is VAT calculated at correct rate and issued within basic tax point. VAT return is completed correctly and submitted promptly.	In Progress

Lampeter Wellbeing Centre	New service provision at Lampeter Wellness Centre (previously Leisure Centre). Service will involve IA re new systems to include Gladstone replacement.	Unplanned
Waste	An evaluation of the procedures introduced for waste collection, as discussed with WAO. Consider governance of current system - especially situ re new Strategy. How have problems been dealt with eg seagulls - were they successful - if not, why? What is planned? Public engagement.	On Hold
Sustainable Drainage Systems (SUDS)	Check Council has a system in place that is compliant with regulatory requirements. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Environmental Audit	Carbon Management / Biodiversity / Transport (including Carbon Reduction Plans - Check arrangements planned & in place. No duplication of AW work, but IA to ensure procedures in place to satisfy AW.) Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager AM.	In Review
Museum	System audit. To concentrate on new 'cash' & 'stock' services introduced to Museum i.e. café, shop & bar. (Document systems. Ascertain risks in system; and governance & controls required. Test) Queries arose following quality review which will be addressed once staff return to offices.	On Hold
Houses to Homes - general	Empty property initiative. Request to review procedures. Scope to be agreed.	On Hold
Coroners - Comparison - Revised Report	Requested to undertake a further comparison of CCC FD fees against FD fees of other Welsh LA's	Unplanned Completed Quarter 1
Climate Change & Sustainability	Zurich Municipal to provide assurance on the effectiveness of the controls outlined in the Council's risk register to manage the risk on Climate Change & Sustainability. This Health Check will provide insight into current plans and actions and will provide an assessment to help the Council better understand the key risk exposures and where improvements are needed in supporting and mitigating against a climate emergency.	Unplanned Allocated
Safeguarding		
Section safeguarding procedures	Assurance that all services have introduced a safeguarding policy for staff, which is periodically audited.	On Hold
Corporate Safeguarding procedures	Full system audit - programme compiled using CIPFA TISonline guidance. Some testing not undertaken due to pandemic. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review

Direct Payments	Ensure sufficient controls in place in preparation for Direct Payments Support Service transfer to CCC from April 2021.	Complete
Direct Payments - Second Phase	Member of IA to attend Steering Group meetings to provide oversight and advice on governance, controls on risks identified.	Ongoing
Counter Fraud (including NFI)		
National Fraud Initiative	The review provides assurance against reputational damage and financial losses due to fraudulent activity by partaking in the National Fraud Initiative, which is an exercise that matches electronic data within and between public and private sector bodies to prevent and detect fraud.	Ongoing
Code, Ethics & Fraud Training eModule	Training recommendation from Ethics Audit undertaken by Carmarthenshire CC. Following successful presentation by Zurich to Managers Workshop 28/5/21 arrangements currently in progress to incorporate this info into an e-learning module for all staff.	In Progress
Audit of Ethics - follow-on to Carmarthenshire County Council's work	Scope: System audit, based on CIPFA's recommendations from its TISonline guidelines. Some tests not done due to the pandemic. Audit tests completed, draft report prepared and awaiting quality review by Audit Manager / Corporate Manager IA.	In Review
Code of Conduct review	Code is currently being reviewed & updated by Monitoring Officer & Governance Officer to ensure it remains up to date & relevant. IA input provided when required. Assurance assessed re procedures in place.	Ongoing
ActiveData - Creditors vs Payroll bank details	Data matching / analysing. The review provides assurance against reputational damage and financial losses due to fraudulent activity by using the 'Active Data' data analytics system.	
ActiveData - Covid Grants vs Payroll bank details	Data matching / analysing. The review provides assurance against reputational damage and financial losses due to fraudulent activity by using the 'Active Data' data analytics system. Checks staff members correctly report Declaration and Registration of Interests.	
ActiveData - Business Rates Grants / Hardship grants	ActiveData – Utilise ActiveData by checking Grant payment records against any identified suspicious records e.g. NAFN intel alerts.	Ongoing
Audit Scotland Paper	Audit Scotland paper suggesting counter fraud (& other) questions that can be raised with managers - questionnaire devised for the audit element, but requested by LG to defer due to CMs' workloads	On Hold
Procurement & New Creditors	Check a sample of new creditors to ensure they are genuine businesses.	Ongoing
Recruitment	Check a sample of new appointments to ensure all details required have been provided.	On Hold
Payroll errors / fraud	Check a sample of new appointments to ensure person in post.	Ongoing

ICT Audit		
PCI Standard	Check compliance with the Standard's requirements.	On Hold
Audit logs	Test audit logs produced from a sample of systems and evaluate how they are used by service.	On Hold
Security - physical and environmental	Evaluate security within main buildings (to be rolled out to smaller offices and other establishments such as schools).	On Hold
Cyber Resilience & Information Governance Group	The Group will provide operational support, preparedness and direction to address and reduce cyber risk and improve the council's cyber security, information security and governance. It shall act as a source of knowledge and expertise and will oversee and monitor the Information Governance and Cyber Security Risks and Action Plans. Meets monthly .	Ongoing
North & Mid Wales Auditors - Fraud Group	North & Mid Wales Chief Auditor Group - Fraud: To share knowledge & skills re countering fraud to build resilience throughout LAs. Meets quarterly .	Ongoing
LG & Elections (Wales) Act 2021		
LG & Elections (Wales) Act 2021	Assurance procedures in place to ensure Council has planned, prepared & made arrangements to comply with the new requirements	Ongoing
Intro of CJC's - Group	Check compliance & arrangements made to put in place	Ongoing
Self-assessment arrangements	Check compliance & arrangements made to put in place. No duplication of AW work, but IA to ensure procedures in place to satisfy AW.	
Consultancy (Other)		
Governance & Audit Committee support	Support GAC as necessary.	Ongoing
AW Protocol	Audit Support - Assurance that GAC receive all AW reports accordingly (Rob Starr). Assurance services address AW recommendations. Method re tracking.	Ongoing
AW Management Response Form - Tackling Fraud	Complete, monitor & update AW Management Response Form re Fraud	Ongoing
Additional Reviews / Queries / Contingency		
Childcare Scheme	Initial enquiries & field work - scope to be determined	Unplanned Allocated
Emergency Welcome Centre	Provide advice for governance arrangements and controls on Emergency Welcome Centre	Unplanned Completed Quarter 1

Emergency Welcome Centre - Cash Fund	Provide and independent verification of cash issued from Emergency Cash Fund.	Unplanned In Progress
Effectiveness of Gold Command	Scope to be determined	
Assurance		
Assurance Mapping	Assurance available from other sources	On-going

Guide to the assurance criteria used:

Level:	High	Substantial	Moderate	Limited
Adequacy of Controls:	Controls in place to ensure achievement of service objectives and to protect Council against significant foreseeable risks. No fundamental weaknesses found.	Controls in place to ensure achievement of service objectives and to mitigate significant foreseeable risks. Some areas of improvement identified.	Controls in place to varying degrees. Gaps identified which leaves service exposed to certain risks. Improvement required.	Controls considered insufficient. Need to strengthen procedures significantly and ensure compliance.
Risks:	Minor risks only.	Opportunity exists to improve on risk exposure.	Need to introduce additional controls and/or improve compliance.	Failure to improve controls leaves Council exposed to significant risk (major financial loss, reputation, failure to achieve service's key objectives).
Guide:	No fundamental or significant actions required.	No fundamental actions required. Limited significant actions.	Number of significant actions.	Number of fundamental / significant actions.
Follow-up required:	Initial audit only.	Follow-up of any significant actions only / self-assessment with samples to evidence compliance.	IA follow-up with sample tests undertaken to ensure all actions implemented, and to re-assess assurance.	IA follow-up with full testing undertaken to ensure all actions implemented, and to re-assess assurance.

Guide to the classification of actions used:

Classification of Actions

Fundamental	Significant	Moderate	Merit Attention
Weakness that is crucial to the management of risk within the service. Needs to be notified and requires the attention of the CLO.	Important findings that identify non-compliance with established procedures that could lead to a risk of financial / reputational loss to Service.	Findings that identify non-compliance with established procedures but do not represent any major risk of financial / reputational loss to Service.	Items requiring little or no action. Included as may be of interest to service or best practice advice.

