

## **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Audit & Corporate Governance Committee

**DATE:** 11<sup>th</sup> October 2017

**CONTACT OFFICER:** Neil Wilcox; Assistant Director, Audit & Finance  
**(For all Enquiries)** (01753) 875368

**WARD(S):** All

### **PART I** **FOR COMMENT & CONSIDERATION**

#### **AUDIT & RISK MANAGEMENT UPDATE – QUARTER 2 2017-2018**

1. **Purpose of Report**

The purpose of this report is to:

- Report to members on the progress of finalising draft Internal Audit reports
- Report to members on the progress of the implementation of Internal Audit recommendations
- Note the example Risk Register

2. **Recommendation(s)/Proposed Action**

That Committee Members comment on and note details of the Quarter 2 Audit and Risk Management Update.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

The [Slough Joint Wellbeing Strategy](#) (SJWS) is the document that details the priorities agreed for Slough with partner organisations. The SJWS has been developed using a comprehensive evidence base that includes the Joint Strategic Needs Assessment (JSNA). Both are clearly linked and must be used in conjunction when preparing your report. They have been combined in the Slough Wellbeing Board report template to enable you to provide supporting information highlighting the link between the SJWS and JSNA priorities.

3a. **Slough Joint Wellbeing Strategy Priorities –**

The actions contained within the attached reports are designed to improve the governance of the organisation and will contribute to all of the emerging Community Strategy Priorities

*Priorities:*

- *Economy and Skills*
- *Health and Wellbeing*
- *Regeneration and Environment*
- *Housing*
- *Safer Communities*

### 3b. Five Year Plan Outcomes

The actions contained within this report will assist in achieving all of the five year plan outcomes

### 4. Other Implications

#### (a) Financial

There are no financial implications of proposed action

#### (b) Risk Management

<i>Recommendation</i>	<i>Risk/Threat/Opportunity</i>	<i>Mitigation(s)</i>
<i>That Audit &amp; Risk Committee is requested to comment on and note the attached reports</i>	<i>This report concerns risk management across the Council</i>	

#### (c) Human Rights Act and Other Legal Implications

There are no Human Rights Act or other legal implications in this report

#### (d) Equalities Impact Assessment

There is no identified need for an EIA

### 5. Supporting Information

#### 5.1 Finalising Internal Audit Reports

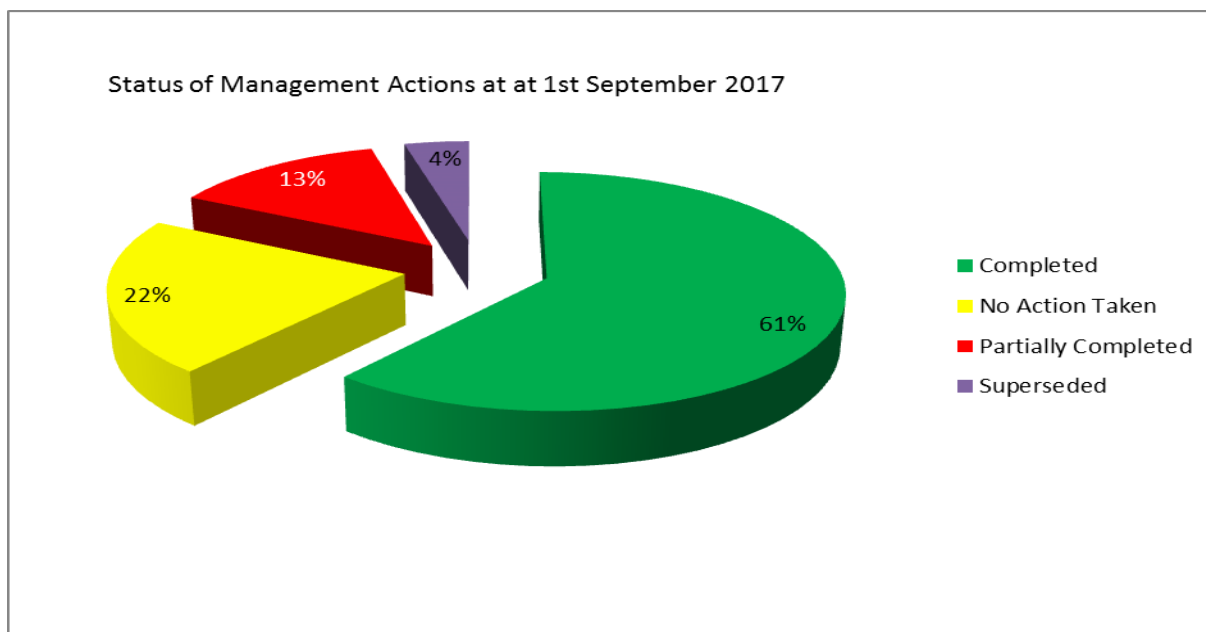
5.1.1 The table below shows those Internal Audits that remain in draft and are yet to be finalised as at 14<sup>th</sup> September 2017

Audit	Audit Plan Year	Audit Sponsor	Assurance Level	Date to be Finalised by	Comments
Management of Pupil Premium	16/17	Cate Duffy	Reasonable Assurance	Early Sept	Waiting for Schools to return
Chalvey Early Years	16/17	Cate Duffy	Reasonable Assurance		No response from Nursery
Special Education Needs Funding	16/17	Cate Duffy	Substantial Assurance	Early Sept	Waiting for Schools to return
Neighbourhood Anti-Social Behaviour Enforcement	16/17	Mike England	Partial Assurance	Early Sept	

#### 5.2 Monitoring Management Actions

5.2.1 The Risk and Insurance Officer regularly monitors the progress of the implementation of made following Internal Audit reports. Below is a graph that shows the percentage of recommendations that have either been

implemented, are in progress, no action has been taken, or the recommendation has been superseded.



5.2.2 Attached at Appendix 1 is a table of Internal Audit from the 2015/16, 2016/17 and 2017/18 Audit Plans where actions are overdue or have been completed within since the last Governance report.

5.2.3 The number of implemented recommendations has increased to 61%, up on the 58% report at the previous Audit and Corporate Governance committee.

The number of Management Actions where “No Action” has been taken has reduced from 13% as the last report to 25%

5.2.4 Attached at Appendix 2 is a list of the “High” Recommendation Actions that remain Outstanding past the target date. Currently there are 4 High Actions that are partially complete and 4 where No Action has been taken

5.2.5 At Appendix 3 is a graph that shows the status of Internal Audit management actions by risk rank.

### 5.3 **Corporate Risk Register**

5.3.1 At the last meeting members were advised that the RSM risk management system would be implement throughout the Council and a refreshed risk register would be available from 1<sup>st</sup> September

5.3.2 The RSM system has been installed and is fully functional.

5.3.3 Throughout July 2017 RSM risk consultants interviewed individual senior officers of the Council to discover the strategic risk/issues that are facing the Council

5.3.4 Appendix 4 shows the results of those discussions. The Corporate Risk Register can be displayed in a number of formats.

5.3.5 In early October there is a workshop scheduled where those who participated in the interviews will discern the current control and the future actions to mitigate the risks.

6. **Comments of Other Committees**

There are no comments from other Committees.

7. **Conclusion**

That details of the Audit and Risk Management Update be noted.

8. **Appendices Attached**

Appendix 1 – Status of Internal Audit Management Actions

Appendix 2 – Details of High Rated Recommendations

Appendix 3 – Graph of the Implementation Status by Risk Ranking

Appendix 4 – Draft Risk register

9. **Background Papers**

None