



SLOUGH BOROUGH COUNCIL

Internal Audit Progress Report

**For the Audit and Corporate Governance
Committee meeting on 26th July 2017**

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made.

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RSM Risk Assurance Services LLP is a limited liability partnership registered in England and Wales no. OC389499 at 6th floor, 25 Farringdon Street, London EC4A 4AB.

1 INTRODUCTION

The Internal Audit Plan for 2017/18 was approved by the Audit Committee on 16th March 2017. This report provides a summary update on progress against that plan and any remaining audits within the 2016/17 plan as at the 22 June 2017.

2016/17 Internal Audit Plan

The Council have finalised 17 reports since the previous Audit and Corporate Governance Committee meeting. These are in the following areas:

- Capital Expenditure
- Housing Benefits
- Treasury Management
- Governance
- Health and Safety
- Fixed Penalty Notice Enforcement
- Cash Handling
- General Ledger
- Five Year Plan Outcomes
- Tax – Temporary Staff Arrangements, In-House VAT return Completion Process and Follow Up
- Homelessness
- Asset Register
- Allocations
- Creditors
- Procurement
- Adult Safeguarding
- Voluntary Sector Commissioning – Delivery of Outcomes

Of these reports, one report (Fixed Penalty Enforcement) received a 'no' assurance opinion, and six reports (Governance, Health and Safety, General Ledger, Creditors, Adult Safeguarding and Voluntary Sector Commissioning) received only 'partial' assurance opinions. A summary of the review and Medium and High Actions, along with implementation dates and owners has been included within Appendix A below. These opinions, including the areas of significant weakness identified, have been considered as part of our Head of Internal Audit Opinion for 2016/17, for which a qualified opinion has been provided to the Council.

Two of the reports above (Procurement and Tax Arrangements) were conducted as Advisory pieces of work and do not contain an opinion.

The remaining eight reports finalised as part of the 2016/17 Internal Audit Plan provided positive assurance. Of the reports above, one report (Housing Benefits) was given a 'substantial' assurance opinion. The remaining seven audits finalised were given a 'reasonable assurance' opinion (Allocations, Homelessness, Five Year Plan Outcomes, Cash Handling, Treasury Management, Capital Expenditure and Asset Register).

In addition to the above, the following reports have been issued in draft as part of the 2016/17 plan and are in the process of being finalised:

- Follow Up – sponsor is liaising with the Risk and Insurance Officer to complete.
- Follow Up of Financial Controls – sponsor is liaising with the Risk and Insurance Officer to complete.

- Payroll – sponsor is liaising with the Risk and Insurance Officer to complete.
- Debtors Management – recently issued.

2017/18 Internal Audit Plan

The Council have finalised four reports since the previous Audit and Corporate Governance Committee meeting held on 16th March 2017. These are in the following areas:

- IQRA School
- Lea Nursery School
- Holy Family Catholic School
- Schools Financial Value Standard

Three reviews delivered a positive assurance opinion, IQRA being provided with 'substantial' assurance and Lea Nursery and Holy Family Catholic School being provided with 'Reasonable Assurance'.

In addition to the above, the following reports have been issued in draft and we are awaiting responses by management before they are finalised.

- Management of Housing Stock
- Gas Servicing

The rest of this report summarises the progress of our work to date with the 2017/18 plan, and as stated above, contains details of finalised 2016/17 audits where a 'No Assurance' or 'Partial Assurance' opinion has been given in Appendix A. Delivery of the plan is in line with the delivery agreed by the Audit and Corporate Governance Committee.

2 SUMMARY OF PROGRESS TO DATE

Reports shown in bold have been finalised.

Executive summaries and action plans from any negative assurance reports finalised since the previous meeting are appended to the bottom of this progress report.

2017/18 Internal Audit Plan (includes draft opinions)

Assignment area	Timing Per Approved IA Plan	Fieldwork date/status	Draft report	Final report	Opinion	Actions		
						L	M	H
Iqra School	April 2017	Final Report	2nd June 2017	7th June 2017		1	0	0
Lea Nursery School	April 2017	Final Report	2nd June 2017	23rd June 2017		10	3	0
Holy Family Catholic School	April 2017	Final Report	8th June 2017	11th July 2017		4	3	0
SFVS	May 2017	Final Report	23rd June 2017	3rd July 2017	Advisory	3	3	0
Management of Housing Stock	May 2017	Draft Report	23 rd June 2017					
Gas Safety	June 2017	Draft Report	11 th July 2017					
Chalvey Early Years Centre	April 2017	In QA						
Amey Contract Management	May 2017	In progress						
Use of the Pupil Premium	May 2017	In progress						
SEN Funding	June 2017	In progress						
Follow Up Q1	June 2017	In progress						
Neighbourhood ASB Enforcement	June 2017	In progress						
Budgetary Control	July 2017	Scope issued						
Educational Welfare Service*	August 2017	Delay requested						
Information Governance	August 2017	Scope issued						
Delayed Transfers of Care	September 2017	Dates Agreed						

New Facilities Contract	September 2017	Dates Agreed
Council Tax	September 2017	Scope Agreed
Five Year Plan - Performance Reporting	September 2017	Dates Agreed
Business Continuity Advisory Support	September 2017	Scope Issued
Equal Pay Review / Gender Pay Reporting Gap	September 2017	Scope to be issued
Data Flow Mapping	September 2017	Scope Agreed
Follow Up Q2	October 2017	Dates Agreed
Staff Establishment Changes	October 2017	Dates Agreed
Capital Expenditure	October 2017	Scope issued
Debtors	October 2017	Scope issued
Adult Social Care Supervision	November 2017	Dates Agreed
Rent Accounts	November 2017	Scope Agreed
Creditors	November 2017	Scope issued
Fixed Penalty Enforcement*	November 2017	Dates Agreed
Data Protection	November 2017	Dates Agreed
Governance	November 2017	Dates Agreed
Cash Management & Collection / Treasury Management	December 2017	Scope Issued
Assets	December 2017	Scope Issued
Follow Up Q3	December 2017	Dates Agreed
Payroll	December 2017	Scope Agreed
Business Rates	December 2017	Dates Proposed
General Ledger	December 2017	Scope issued
Voids*	January 2018	Dates Agreed
Follow Up Q4	March 2018	Dates Agreed

* Please note change from agreed plan, see details below.

3 OTHER MATTERS

3.1 Changes to the 2017/18 audit plan

Auditable area	Reason for change
Voids	Audit delayed to Q4 (initially agreed to be undertaken in Quarter 2) at the request of the Head of Neighbourhoods, as a new contractor will be in post from December 1 st , and the review would be better placed in January 2018 to provide assurance over the arrangements for voids with the new contractor.
Educational Welfare Service	This audit was initially agreed to be undertaken in Quarter 2, but has been delayed at the request of the Strategic Director, Children, Skills and Learning, as the service has only recently been brought back in house from Mott Macdonald (Cambridge Education).
Fixed Penalty Notices	This audit was due to be undertaken in Quarter 2, but has been delayed at the request of the Head of Neighbourhoods, as the 2016/17 report was only recently finalised, and Housing are in the process of implementing the actions.

3.2 Impact of our work to date on year end opinion

The assurances given in our 2016/17 audit assignments are included within our 2016/17 Annual Assurance report. In particular the Committee should note that any negative assurance opinions (No Assurance or Partial Assurance opinions) have been noted in the annual report and have resulted in a qualified annual opinion.

The Committee should note there are a number of weaknesses that need to be promptly addressed and assurance provided through the recommendation tracking process that timely management action is being taken. Where we have issued 'no assurance' (red) and 'partial assurance' (amber / red) reports, a number of these opinions have impacted our 2016/17 Head of Internal Audit Opinion for the Council. We advised the Committee at the March 2017 meeting that we have qualified the annual opinion for 2016/17 and this opinion is provided as a separate agenda item for the Audit and Corporate Governance Committee as part of our Internal Audit Annual Report.

We have continued and will continue to keep the Section 151 Officer, CMT and Audit and Corporate Governance Committee updated over the coming months on the outcome of our remaining 2017/18 work. We have also agreed a number of areas where negative assurance opinions have been issued in 2016/17, where we can provide further support and advice to the Council to ensure that these weaknesses are addressed in a timely manner. These details are included below.

3.3 Added value work

Area of work	How this has added value
Risk Management Support	We are providing the council with support to embed and re-establish effective risk management processes to aid in the achievement of the Council's objectives. The scope of the support is currently being discussed with the Council.
Business Continuity Support	Following a negative assurance opinion issued within 2016/17, we have agreed to provide support to the Council in improving its processes in relation to Business Continuity and the scope of the work is currently being agreed with the Council.
Data Flow Mapping	Following a negative assurance opinion in 2016/17, we are providing the Council with support to map their flows of data, to aid in the Council's management and security of data. A scope of work has been agreed with the Council

3.4 Information and briefings

The following items were highlighted as part of our information briefings since the last Audit and Corporate Governance Committee in March 2017:

Uncertainty ahead according to CIPFA

The Chief Executive of CIPFA has warned of a 'greater period of uncertainty after the inconclusive result of the general election.' In a wide ranging speech Rob Whiteman anticipated that the new government would change tact from the austerity driven policies of recent years and stated that 'the government is going to get really bogged down in Brexit.'

Crisis communications

The recent ransomware cyber-attack has certainly opened many eyes as to risks faced by organisations. In response, the Local Government Association (LGA) has published guidance for local authorities on how they should approach crisis communications in the event of a cyber-attack. Top tips include:

- Create a crisis communications plan
- Prepare and practicing your emergency response, this could uncover vital learning that will help to mitigate the effect of a crisis should a major incident occur
- As with all crisis situations it is important to communicate as early as possible to help your organisation proactively manage your message rather than reacting to conversations and speculation.
- Appoint a spokesperson to deliver both your internal and external messages
- Brief your contact centre
- Engage with IT and legal colleagues

Code for sports governance

A new Code for sports governance has been published setting out the 'levels of transparency, accountability and financial integrity' required from those bodies seeking government and National Lottery funding. It is applicable to any organisation that seeks funding from Sport England or UK Sport, including national governing bodies of sport, clubs, charities and local authorities.

Integrating health and social care

The Public Accounts Committee (PAC) has published a report on the integration of health services with social care, with a damning verdict on the better care fund (BCF). The PAC opens up with the statement that the BCF has failed once again in its primary objectives (as detailed in a previous report in 2015), with the PAC stating that the BCF 'was little more than a complicated ruse to transfer money from health to local government to paper over the funding pressures on adult social care.' Moving forward the PAC is looking for immediate involvement of local government in the sustainability and transformation planning process, and for stakeholders to take responsibility for the performance of health and social care integration programmes.

Scarce resources

The Local Government Association (LGA) has published a resource for the sector to gain understanding on whether they are making the best use of resources on social care. The report states that 'lead members for adult social care are having to engage in a fundamental re-think about how they use their scarce resources to benefit the most vulnerable members of their communities'. As such, the LGA sets out some key considerations when undertaking this process, including key questions that could be considered when changes to services are made.

Webinars

Public Finance has a number of webinar resources available on topics such as 'how to pay suppliers promptly and support local growth' and 'financial planning and budgeting for health and social care integration.'

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The re-buy of the right to buy

The BBC has published a story on councils buying back homes at discount under right-to-buy laws.

Responses to industrial strategy and housing paper

The Local Government Association has published its responses to the government's [housing white paper](#) and the [industrial strategy paper](#).

Devolution deals

The Department for Communities and Local Government (DCLG) has published guidance explaining the powers that are being transferred to numerous English regions and the subsequent responsibilities of Mayors.

Planning for business rate retention

The Department for Communities and Local Government (DCLG) has made good progress in the design of 100 per cent local business rates retention, but there are still doubts about the 'challenging timescale for delivery', according to the National Audit Office (NAO).

Concerns were raised over the tendency for this type of government project to suffer from over-optimism with the NAO also warning that the financial sustainability of the sector must not be put at risk in the search for local authority self-sustainability.

Social care report

The Communities and Local Government Committee has published the report of its inquiry into adult social care, with some more alarming news for the sector and for the government. The Committee identified just one in twelve directors of adult social care are 'fully confident' that statutory requirements will be met by their local authority in 2017/18, with a high turnover rate of nurses in social care of 35.9 per cent also cited. Indeed these 'severe challenges' in the care workforce is regarded as one of the main reasons for the 'deterioration in overall quality of care', with this 'likely to continue.' Recommendations for the government include: calling on the government to publish a care workers' charter, which would set out what care workers can expect from their employer; and improvements made to pay and conditions, in order to encourage care worker retention in the sector.

Spring budget

The government have in part responded to the 'social care crisis' as the Chancellor confirmed that an additional £2bn of funding for adult social care will be provided to councils over the next three years including £1.2bn upfront in 2017-18. The Local Government Association (LGA) remarked on this 'significant step' towards the protection of care services in the future but remained wary of the challenge of finding a long term solution. Finding a longer term solution to social care is to be the subject of a green paper 'to put the system on a more secure and sustainable long term footing.' The Chancellor also responded to recent criticisms of the business rates revaluation exercise announcing: £300m provided to local authorities to support discretionary relief of 'individual hard cases in their local area'; and a £1,000 discount to small pubs with local authorities fully compensated for these measures.

Right to buy revisited

Housing Minister, Gavin Barwell, has pledged to look at the right to buy rules again stating it was 'only justifiable' if replacement homes were being built by the government.

Council fined over fatal tower block fire

Southwark Council has been fined over half a million pounds over safety deficiencies which tragically led to six people losing their lives in a fire which enveloped a 14 storey block of flats in 2009. The court case was brought about by a London fire brigade inspection that identified a number of issues including the failure to make a fire safety assessment and numerous structural deficiencies for fire safety.

Report of local government finance

The Secretary of State for Communities and Local Government, Sajid Javid, has presented before parliament the 2017 to 2018 report on local government finance in England with negative reaction coming from stakeholders including the Local Government Association (LGA) who stated 'it is hugely disappointing that today's settlement has confirmed that government will not provide any new funding for councils in 2017/18', with further warnings that despite a number of councils planning to increase their council tax rates it would not be enough to prevent cuts to services.

The government has also found itself in a battle regarding the [revaluation of business rates](#) as its original statement regarding the number of authorities seeing business rate cuts has been disputed vociferously in the media by property consultants Gerald Eve.

Further business rate retention consultation

The Department for Communities and Local Government has announced a further consultation on the design of the reformed system for 100 per cent business rate retention. The consultation comes as the government [published](#) its response to the original consultation held which gathered views on giving local government the power to retain 100 per cent of business rates they raise locally. The further consultation seeks views on: how the government should approach the move to a centrally managed appeals risk system; and the proposed approach for partial resets. The consultation concludes 3 May 2017.

Capital funding in schools

The National Audit Office (NAO) has published a report on the government's capital funding for schools with a focus on whether enough school places are being created and whether the government is working well with local bodies to ensure adequate maintenance and improvement is being carried out.

Recruitment and retention of teachers

The Education Committee has delivered a scathing assessment of the government's record regarding the recruitment and retention of teachers, stating that 'although the government recognises that there are issues, it has been unable to address them and consistently fails to meet recruitment targets.' The Committee called for government to follow up on its plan for a national vacancy website, free for schools to use; and for the Department for Education to publish teacher recruitment split at a regional level in order for recruitment to be better informed.


Workbook on fraud and bribery

The LGA in partnership with CIPFA has published 'A councillor's workbook on bribery and fraud prevention.' The workbook is described as a learning aid for elected members and invites the user to think about their own approach to neighbourhood and community engagement with sections including: council and councillor responsibilities in relation to fraud prevention and detection' and the fraud response.

Working with care providers

This guide by CIPFA is aimed at adult social care commissioners and is designed to equip them with the knowledge and skills they need to improve relationships with care providers, working towards agreed fee rates and supporting market.


APPENDIX A: KEY FINDINGS FROM FINALISED 2016/17 INTERNAL AUDIT WORK (HIGH AND MEDIUM PRIORITY MANAGEMENT ACTIONS ONLY WHERE PARTIAL OR NO ASSURANCE REPORTS HAVE BEEN ISSUED)

General Ledger (20.16/17) – PARTIAL ASSURANCE			6 - Low 3- Medium 1- High	
<ul style="list-style-type: none"> We were advised that the Council’s General Ledger is backed up by Trustmarque and the contract between the Council and Trustmarque incorporates the procedures relating to this and disaster recovery. We were unable to obtain the contract with Trustmarque and were therefore unable to provide assurance that the agreements in place are adequate. Following discussions with the Head of Financial Reporting and Assistant Director of Finance, we established that information to confirm back-ups of Agresso (by Trustmarque) are undertaken on a daily basis are not sent to the Council or to arvato. In addition, evidence of disaster recovery tests being conducted by Trustmarque are also not received by either the Finance Team or the IT Team at the Council or through arvato. If the Council does not receive confirmation that back-ups are regularly and successfully undertaken, there is a risk that the Council’s contractor (and therefore the Council) may be unable recover all financial information if backups have not been conducted, or if testing has not been undertaken or assurance received on a contractors disaster recovery arrangements. We have agreed a High priority management action in respect of this. Responsibility for reconciliations is split between arvato and the Finance department at the Council with arvato undertaking the reconciliation of bank accounts. The Council have encountered a number of system problems since the implementation of Agresso in 2016 which has led to the Accounts Receivable and Miscellaneous accounts not being reconciled in a timely manner, only being conducted in December 2016, covering the period from April 2016-December 2016. We also noted that the suspense accounts are yet to be cleared due to technical issues with the system resulting in £1.4m being held in suspense with arvato due to take over the maintenance of the Agresso system as of 13th March 2017. If reconciliations are not undertaken on a monthly basis and reviewed appropriately, there is a risk that material differences or errors may not be identified in a timely manner. We have agreed a medium priority management action in respect of this. Access to Agresso is controlled by username and password and new users are given access according to their job role. We noted however that there was currently not a requirement in place for passwords to be changed on a regular basis. If passwords are not changed on a regular basis, there is a risk of unauthorised access as a result of insecure processes which are not in line with best practice. We have agreed a medium priority management action in respect of this. Any amendments to account codes such as changes to ‘approvers’ within workflow are undertaken by the Financial Systems Administrator following a request from an appropriate individual. We selected a sample of 20 cost centres in order to establish whether these had been accompanied by an appropriate request. We were unable obtain evidence of a request for eight account codes in our sample. In the remaining 12 instances we noted that three were accompanied by a signed form, with seven being amendments to existing codes and therefore not requiring a form. In the remaining two instances we noted that there had not been a form submitted. If the Council does not implement a formal request form which is signed by both HR and a manager for the relevant department, to verify the status of the employee and job role there is a risk that unauthorised access maybe be given. We have agreed a medium priority management action in respect of this. 				
Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible

1	The Council will ensure that the frequency of backups is stated within the contract with Trustmarque and that assurance is received that backups are conducted regularly and disaster recovery arrangements are tested for the ledger.	High	30 June 2017	Vijay Maguire – arvato contract lead
2	BACS Control account reconciliations will be conducted in a timely manner to ensure issues are resolved.	Medium	31 August 2017	Barry Stratfull – Head of Financial Reporting
3	The Council will implement a password policy and activate password control within Agresso, requiring passwords to be changed on a quarterly basis.	Medium	31 August 2017	Kim Bryant – Senior Accountant
4	The Council will ensure that a signed request form is received for all account codes prior to their set up and where the account code is for an emergency purpose, the Council will ensure that the receipt of the form is followed up.	Medium	31 August 2017	Barry Stratfull – Head of Financial Reporting

Creditors (26.16/17) – PARTIAL ASSURANCE				2 - Low 4- Medium 1- High
<ul style="list-style-type: none"> The Council has an Agresso Accounts Payable Handbook which we verified is available on the Council Intranet. However, no Council specific procedure notes have been created, and therefore the roles and responsibilities of the Council and arvato have not been clearly outlined or communicated to all staff. We have raised a medium action to address the risk that staff are not able to discharge their duties effectively since there is no single procedure which can be referred to. Through our review, we also noted that a significant control weakness highlighted within 2014/15 and 2015/16 audit was in regards to the retention of evidence to support amendments to supplier standing data and the lack of verification checks to confirm the legitimacy of request to amend supplier details, which resulted in a high action, which has not yet been addressed. The weaknesses identified increases the risk that fraudulent requests to amend supplier standing data will be processed, resulting in the misappropriation of funds and financial loss to the Council. We have re-raised the high action, and raised an additional two medium actions in relation to issues identified for amendments to supplier details. Finally, we noted that the last general ledger to creditor's ledger reconciliation took place in November 2016 and it was not evidenced as dual reviewed or signed off. Monthly reconciliations have not occurred consistently over the year and therefore we have raised a medium management action to address this compliance issue. 				
Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible

1	<p>The Supplier Amendment Form will be updated to include a section for capturing verification checks undertaken to confirm the legitimacy of requests to amend supplier details.</p> <p>All amendments to supplier standing data (including changes to email addresses and bank details) will be supported by a fully completed and authorised form (with any relevant correspondence), clearly evidencing the verification checks undertaken.</p>	High	30 July 2017	Barry Stratfull – Head of Financial Reporting
2	<p>The Council will create a procedural document for the creditors module of Agresso.</p> <p>This will include;</p> <ul style="list-style-type: none"> • Roles and responsibilities of key council staff; • Roles and responsibilities of Arvato; • Key functionalities of Agresso; and • Reporting arrangements <p>This procedural document will be approved by a relevant body, uploaded to the intranet, and then notified to all appropriate finance staff by email.</p>	Medium	31 May 2017	Vijay McGuire – arvato contract lead
3	<p>The Council will investigate and resolve the 'Amendment Logging' issue on Agresso. Changes in supplier details will then be able to be monitored and reviewed.</p>	Medium	30 June 2017	Barry Stratfull – Head of Financial Reporting
4	<p>The workflow on the Agresso system will be changed for amendments to supplier details. A comprehensive segregation of duties to approve and verify amendments of supplier details will be implemented between arvato P2P and Council Procurement.</p>	Medium	31 July 2017	Fred Narmh – Head of Procurement
5	<p>The Council will reconcile the creditor's ledger to the general ledger and will continue to do so on a monthly basis. Reconciliations will be checked and signed off by an additional member of staff within Finance, with any discrepancies investigated and resolved.</p>	Medium	31 May 2018	Barry Stratfull – Head of Financial Reporting


<p>Fixed Penalty Enforcement (9.16/17) – NO ASSURANCE</p>		<p>3 - Low 5- Medium 4- High</p>
<p>We have identified a number of weaknesses and issues which have resulted in four high and five medium priority management actions:</p> <ul style="list-style-type: none"> • Through interviews with all Neighbourhood Managers, we confirmed that no formal processes are in place to systematically track income due through to the collection, receipting and banking. No formal payment monitoring / reconciliation process increases the risk of income being unaccounted. . This has resulted in a High priority action for management. 		

- DEFRA, the Government body, responsible for 'sustaining the natural environment' issued guidance based on a number of pieces of legislation in relation to how Councils should issue Fixed Penalty Notices. The guidance states that income received from FPNs have to be reinvested in this service area, however we could not clearly identify how the income received from this function has been spent, risking reputational damage for the Council as a result of not complying with national guidance. This has resulted in a **High** priority action.
- A formal agreement was not in place between the Council and the external contractor, Kingdom Security Ltd. By not maintaining a formal contract between the Council and the contractor; with performance metrics in place to monitor activity, there are financial risks which could arise as a result of payment disputes and wider legal risks if the Council have not agreed standards and performance levels with a contractor. This has resulted in a **High** priority action for management.
- Testing identified that the Council does not receive formal reports from the external contractor (Kingdom) of all notices issued within the respective month or copies of notices issued to ensure that the appropriate information has been recorded. This has resulted in a **High** priority action for management as a lack of management information hinders the capability of the Council to effectively govern the enforcement process and reconcile notices issued to those paid to ensure that it is receiving all income due for enforcement notices issued. There is a risk therefore that the Council is not receiving all income due and has no current control mechanism in place to be sighted on this or monitor income collection.
- We identified that while the Council does have an overarching Enforcement Policy, it does not have an Enforcement Strategy that is available for the public which clearly documents the following in relation to Fixed Penalty Notices (in line with government guidance):
 - offences included in the fixed penalty notice scheme;
 - fines for each offence; details of any early payment discounts;
 - how notices are issued;
 - how juvenile offenders are dealt with;
 - what will happen with offenders that don't pay;
 - how to appeal (if option is offered);
 - how money will be spent; and
 - records that will be kept from notices served.
- The council does have an Enforcement Policy; however this information is not included. This has resulted in a **Medium** priority action for management as the Council may not be complying with government guidance and are not providing sufficient guidance for the public to be aware of what is covered under the Policy.
- We were informed by staff within the FPN area and we confirmed through sample testing that due to the disproportionate costs associated with court proceedings compared to fines imposed; no court proceedings would be exercised for notices issued by the external contractor Kingdom Security Ltd. Evidence of the decision made by the Neighbourhoods and Community Services Scrutiny Panel was requested. However, we could not evidence any decision made by the panel. This has resulted in a **Medium** priority action for management; as the Council may therefore be limiting the recovery of notice fees where they have a 'no recovery' process in place with alleged offenders.
- We also identified that limited information is provided to the Neighbourhoods and Community Services Scrutiny Panel on the collection of income from FPN's issued. In addition there was limited information of the numbers and types of offences. Without sufficient information the Panel cannot scrutinise the work of the function. This has resulted in a '**Medium**' priority action.
- We identified that the Council does not maintain a record of appeals. While we accept that there is no obligation to offer an appeals process there is a risk to the reputation of the Council if they cannot demonstrate how many appeals they have received and how they have responded to these. This has resulted in a **Medium** priority management action.

- We confirmed through review with staff at the time of audit that the Council is not aware of whether Kingdom Security sends payment reminders to alleged offenders. A failure to either not issue payment reminders or have specific timeframes for the issuing of payment reminders may hinder the capability of the Council to obtain fixed penalty notice income in a timely manner. A **Medium priority** action has been agreed in relation to this issue.

Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible
1	A supplier agreement / contract will be implemented to govern the arrangements in place between the contractor and the Council for the provision of the enforcement scheme. This should incorporate performance metrics to allow the Council to monitor the performance of the contractor on a periodic basis.	High	31 May 2017	John Griffiths
2	The council will develop a formal process to systematically track income due through to collection, receipting and banking. This will include guidance for undertaking regular, formal reconciliations between income received and records maintained.	High	31 May 2017	Baljinder Sangha
3	The Council will develop more detailed performance metrics which are reported to the Neighbourhoods and Community Services Scrutiny Panel which provides data on: <ul style="list-style-type: none"> Number of fixed penalty notices issued (and a breakdown by offence); and The success of the Council in collecting income due from offenders. This will be reported through the scrutiny panel on at least a quarterly basis.	High	30 July 2017	Kevin Smith
4	A clear control framework will be put in place to ensure that, in line with government guidance, income received from the serving of fixed penalty notices is spent on related functions.	High	31 May 2017	Baljinder Sangha
5	We will review the existing Enforcement Policy and amend it to ensure that it includes all areas outline within the 2015 DEFRA guidance on Fixed Penalty Notices. As part of this, the policy will be subject to annual review.	Medium	31 July 2017	John Griffiths
6	The Council will liaise with the external contractor Kingdom Security Ltd to determine whether: <ul style="list-style-type: none"> Reports can be produced on a monthly basis which document all fixed penalty notices issued; and Copies of notices issued can be provided. 	Medium	31 st May 2017	John Griffiths

7	The Council will identify whether payment reminders are sent to alleged offenders for notices issued by the external contractor Kingdom Security Ltd. If these are not issued, the Council will provide guidance on the timeframes under which these should be issued and require the contractor to report on this through a key performance indicator.	Medium	31 st May 2017	John Griffiths
8	Explicit clarification will be sought from the members of the Neighbourhood and Community Services Scrutiny Panel to determine whether a council decision has been made for no recovery action to be taken against alleged offenders who have been served fixed penalty notices by Kingdom Security Ltd.	Medium	31 st May 2017	John Griffiths
9	The Neighbourhood Manager (Resilience and Enforcement) will maintain a central record of: <ul style="list-style-type: none"> • Appeals received; and • Responses given. 	Medium	31 st July 2017	Ian Blake

Health and Safety (9.16/17) – PARTIAL ASSURANCE		4 - Low 6- Medium 1- High
<p>The key findings from this review are as follows:</p> <p>Policies and Procedures</p> <p>We selected a sample of three relevant Health and Safety codes of practice (procedures) and whilst we confirmed that they contained adequate detail regarding processes, we found that the Risk Assessment Procedure had not been updated since May 2011. From a review of several other procedures on the Council’s intranet, we found that some had not been updated since 2008. If procedures are not kept up to date regularly, there is a risk that any changes to legislation and/or best practice may not be included and therefore not followed by staff. Due to this we have agreed a medium priority management action.</p> <p>Training</p> <p>We found that mandatory health and safety training for all staff was being reported on; however our review also demonstrated low levels of compliance with training across the directorates, with only the CEO’s directorate having more than 90% compliance with mandatory Health and Safety Training at the end of August 2016 (reported in January 2017). All other directorates had between 40-60% compliance. If mandatory health and safety training compliance is not robustly challenged, there is a risk of Health and Safety failings as a result of staff not being trained. We have agreed a medium priority action in this area.</p> <p>Risk Assessments, Self-Audits, Action Plans and Incident Reporting</p> <p>From review of the four directorates we found the following:</p>		

- We could not evidence adequate discussion or monitoring of the risk assessment action plans or incident reporting for RHR and CE. If action plans are not regularly reviewed at Directorate level, there is an increased chance of risks being realised as a result of a lack of review. Due to this, we have agreed a **medium** priority management action.
- Target dates had not been identified for all actions raised within risk assessments or the action plans. When target dates had been set, we found that no explanations were given for incomplete actions which had passed the due date and revised target dates had not been set. If timescales are not set and monitored, there is a risk that issues highlighted on the assessments/action plans may not be addressed, leading to the risk being realised. On this basis, we have agreed a **medium** priority management action.
- We were unable to obtain the risk assessments or self-audit for Chief Executive's Directorate as well as the action plan for Adult Social Care. This does not comply with the Health and Safety Policy which states: 'The Level 3 manager is responsible for ensuring that there are suitable and sufficient records. Records may be kept on computer or in hard copy, but must be readily available and secure.' If records are not maintained or kept accordingly, this could increase the likelihood of risks being realised. The Council may also not be able to produce the required evidence should these be required by either the insurers or the Health and Safety executive. Consequently, we have agreed a **medium** priority management action.

Governance

From review of meeting minutes from each Directorate Health and Safety Committee, we found that high priority risks were not being escalated up from the service lines. We also found this to be the case between the Directorate Health and Safety Committees and the Corporate Health and Safety Committee as it was not clear how high risks are being reported to these committees. If high priority risks are not escalated up through the governance structure, there is a risk that mitigating actions may not be implemented in a timely manner causing the risks identified to remain and potentially lead to the Council being liable for incidents which could occur as a result of the risk not being mitigated. Due to this we have agreed a **high** priority management action.

Additionally we found that within the RHR and CE Health and Safety Committee, there was minimal discussion around health and safety risk assessments and a directorate Health and Safety action plan. This raises the risk of issues not being discussed or rectified, leading to potential hazard causing injury or harm to employees. As a result, we have agreed a **medium** priority management action.

Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible
1	High risks identified in Health and Safety Risk Assessments will be reported up from service lines to their respective Directorate Health and Safety meeting for monitoring. Higher level risks will also be reported up from the Directorate Health and Safety meeting to the Corporate Health and Safety Committee for regular review	High	31 March 2017	Roger Parkin – Interim Chief Executive
2	An exercise will be undertaken to update all procedural documents (Codes of Practice) regarding Health and Safety to ensure that they include areas of best practice. Once updated, procedures will be approved by the Corporate Health and Safety Committee.	Medium	30 June 2017	Robin Pringle – Health and Safety Manager

3	<p>An exercise will be carried out to identify all staff eligible for the mandatory and optional training courses regarding health and safety along with staff that have already completed this training.</p> <p>Following this, a Health and Safety Compliance Report will be presented and challenged at the Corporate Management Team and the Senior Management Team.</p> <p>This report will include the compliance rates of health and safety training for all levels of staff across all directorates.</p>	Medium	30 June 2017	Roger Parkin – Interim Chief Executive
4	<p>A Health and Safety Report will be produced to replace the action plan. This will include:</p> <ul style="list-style-type: none"> • Compliance of risk assessments and self-audits completed. completed • Risks and respective actions raised from risk assessments • Risks and respective actions raised from self-audits • Accident and incident statistics along with detailed of cases and action taken. <p>This report will be completed and updated for each directorate and reviewed at each directorate Health and Safety meeting. This will ensure actions are being monitored and therefore completed in a timely manner</p>	Medium	30 June 2017	Roger Parkin – Interim Chief Executive
5	<p>As per the H&S Policy, H&S leads will ensure that risk assessments and self-audits are readily available and stored securely.</p>	Medium	31 April 2017	Roger Parkin – Interim Chief Executive
6	<p>The following will be included as standing agenda items for each Directorate Health and Safety Committee to ensure that relevant matters are regularly discussed and monitored:</p> <ul style="list-style-type: none"> • Update from Service Lines; • Review of high level risks and actions arisen from risk assessments and self-audits; • Compliance of risk assessments and self-audits; • Accident and Incident Reports/Statistics; and • Training compliance. 	Medium	30 April 2017	Roger Parkin – Interim Chief Executive
7	<p>Target dates will be set for all actions identified as a result of self-audits. These will also be added to the Directorate Health and Safety Action Plan.</p> <p>Where the target date has passed for a particular action, explanations will be provided and revised targets dates will be set.</p>	Medium	30 April 2017	Roger Parkin – Interim Chief Executive

Governance – Transparency Code Compliance (9.16/17) – PARTIAL ASSURANCE



18 - Low
9- Medium
0- High

The key findings from this review resulted in nine **Medium** priority actions being agreed and these are as follows:

Responsibility for compliance with the Transparency Code 2015

From the list of staff responsible to update various information categories, we confirmed that a number of staff were no longer in post which has affected the regular publication of such information. This was evident from the results of our compliance testing where information published against 9 of the 15 categories was out of date. Due to responsibility not being assigned to maintain and update the information published under the Code there is a risk of non-compliance which may lead to reputational damage. We have agreed that staff will be allocated to all 15 information categories of the Code to ensure timely updates to information published on the Council Website. **Medium**

Information which must be published

We reviewed information available on the Council website for compliance with the ‘must be published’ information and confirmed that:


- Information was published against 11/15 categories, whereas 4 categories were not published. The unpublished 4 categories were:
 - Government Procurement Card transactions;
 - Grants to voluntary, community and social enterprise organisations;
 - Parking account; and
 - Parking spaces.
- Of the 11 published categories, the required frequency of publication was not met for 9 categories; and
- 7 of the 11 published categories did not meet all the specific requirements of the code.

Due to gaps in ‘must be published’ information and this being out of date there is a risk of non-compliance, reputational damage and a potential increase in FOI requests for information which should have been published under the Code. This has resulted in a total of eight **Medium** category priority actions being agreed.

Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible
1	Staff will be allocated to all 15 information categories of the Transparency Code to ensure timely updates to information are published on the Council Website	Medium	31 March 2017	Tracy Luck – Assistant Director, Strategy and Engagement
2	The transactions list for expenditure exceeding £500 will be updated and the latest version will be uploaded and maintained on a quarterly basis	Medium	31 March 2017	Claire Portsmouth – Procurement Specialist
3	Details of every transaction on a Government Procurement Card will be published. If such cards are not used, this should be clearly stated on the Council website.	Medium	30 April 2017	Claire Portsmouth – Procurement Specialist

4	<p>The Council will ensure that the contract register format and information published against each contract will be updated to comply with the requirements stated within Annex A of the Local Government Transparency Code 2015, and include:</p> <ul style="list-style-type: none"> • Reference number • Title of agreement • Local authority department responsible • Description of the goods and/or services being provided • Supplier name and details • Sum to be paid over the length of the contract or the estimated annual spending or budget for the contract • Value Added Tax that cannot be recovered • Start, end and review dates • Whether or not the contract was the result of an invitation to quote or a published invitation to tender • Whether or not the supplier is a small or medium sized enterprise and/or a voluntary or community sector organisation and where it is, provide the relevant registration number. 	Medium	30 April 2017	Frederick Narmh – Head of Procurement
5	<p>The Council will meet the requirement to publish details of all grants to voluntary, community and social enterprise organisations on an annual basis.</p> <p>For each identified grant, the following information will be published as a minimum:</p> <ul style="list-style-type: none"> • Date the grant was awarded • Time period for which the grant has been given • Local authority department which awarded the grant • Beneficiary • Beneficiary's registration number • Summary of the purpose of the grant amount 	Medium	30 April 2017	Craig Brewin – Head of Service: Commissioning
6	<p>The Council will publish parking account information to comply with the Local Government Transparency Code. The information will include:</p> <ul style="list-style-type: none"> • A breakdown of income and expenditure on the authority's parking account. The breakdown of income must include details of revenue collected from on-street parking, off-street parking and Penalty Charge Notices • A breakdown of how the authority has spent a surplus on its parking account. 	Medium	30 April 2017	Kam Hothi - Team Leader Parking
7	<p>The published Senior Salaries over £50k document will be updated.</p>	Medium	30 April 2017	Surjit Nagra, OD/HR Business Partner

8	The Fraud information published on the Council Website will be updated	Medium	30 April 2017	Lyn Davies – Corporate Fraud Manager
9	The Council will publish parking spaces information to comply with the Local Government Transparency Code. The information will include: The number of marked out controlled on and off-street parking spaces within their area, or an estimate of the number of spaces where controlled parking space is not marked out in individual parking bays or spaces.	Medium	30 April 2017	Kam Hothi, Team Leader Parking


Adult Safeguarding (28.16/17) – PARTIAL ASSURANCE		8 - Low 8- Medium 1- High
<p>In total we have raised one high, eight medium and eight low priority actions relating to the design and application of and compliance with the control framework. The high and medium priority actions are summarised below:</p> <ul style="list-style-type: none"> For staff training we tested a sample of 10 Adult Social Care staff and found three staff (employment start dates 12 December 2016, 9 January and 16 January 2017) who were required to be trained to Level 2 but had only received training up to Level 1. We confirmed that the Council training calendar for the year had now ended and new dates were yet to be planned for Level 2 training. There is a risk that safeguarding cases are not appropriately handled which may lead to reputational damage to the Council. (Medium) No multi agency audits have taken place during the year and from the meeting minutes of the SAB Performance Sub Group; it is not clear whether any lessons from the previous year's audit have been addressed. Further, meeting minutes of the SAB Performance Sub Group indicated that the group had not been attended in full consistently. There is a risk that the sub group loses focus and is not effective to highlight learning from audits undertaken. The audit plan and key themes for audit should be identified and timelines agreed in conjunction with objectives identified in the SAB Strategic Business Plan. (Medium) Our walkthrough of the case management process confirmed that the triage on referral was being undertaken by a Social Worker and two other Designated Safeguarding Managers (DSMs). As per Council staff guidance on the use of IAS, only a DSM is required to review all referrals when received. Therefore this is not in compliance with the Council's staff guidance. Secondly, there is a risk of making an incorrect triage which may lead to harm to the user and reputational damage for the Council. The Council should ensure all triages for referrals received are undertaken by a DSM. (Medium) Our walkthrough of the case management process also confirmed that there is no designated case manager for open cases who is accountable for managing the case from referral to closure. There is a risk that key decisions are not taken in a timely manner due to inconsistency in safeguarding staff involved on a case with no overall responsibility. (Medium) For our deep dive we noted that in 3/10 cases, the first date of contact was not within the required one working day from the date of the concern received. In addition, from our sample, 6 cases progressed to the strategy meeting stage, of which for 5 cases, the strategy meeting did not take place within the indicative timeframe of 5 working days. There is a risk of inconsistent practice and understanding of timescales required to meet, which may lead to safeguarding concerns raised not managed in a timely manner. (High) For our deep dive we identified 2 cases which based on the case notes and discussion with the relevant practice lead, should have been closed however both cases were showing as open and no closure forms were completed or signed off. There is a risk of inconsistent practice and understanding of 		

timescales required to meet, which may lead to safeguarding concerns raised not managed in a timely manner. **(Medium)**

- As part of our deep dive of 10 cases, we matched key case dates between IAS and the safeguarding spreadsheet and noted a number of dates which did not match (4/10 referral dates and 8/10 dates pertaining to first contact made did not match) and other exceptions where the spreadsheet was not updated. This was due to input errors on the spreadsheet or delays in updating it. Due to the above, we do not consider the maintained spreadsheet whose main function is reporting and preparing the monthly performance report, to be a true and accurate reflection of case progress made on the primary system, IAS. The current process of updating the spreadsheet does not appear to be reliable and there is an increased risk of incorrect case progress being reported internally and externally which may lead to reputational damage. **(Medium)**
- Based on our tests where we matched the key case dates between IAS and the safeguarding spreadsheet, the current process of updating the spreadsheet does not appear to be reliable and there is an increased risk of incorrect case progress being reported. We confirmed that the Council was looking into options to enhance functionality of IAS to enable reporting from IAS itself. We consider this to be the preferable option to ensure accuracy of reported information and reduced time spent by staff on duplication. **(Medium)**
- In relation to action reference 1.4 from our previous year's report, we confirmed that the Quality Management Framework and Terms of Reference for the Care Governance Board will be revised once the Adult Social Care reorganisation is complete in April 2017. The revision will reflect the new structure and connection with the new East Berkshire Care Home Quality Group. The sign off process will be to Care Governance Board and then to Adult Social Care DMT, which is a new management body created following the restructuring of the top tier within the Council. We have therefore reiterated our action from last year's report. Without ensuring the Framework is reflective of current reporting and governance structures, including frequency of meetings and reporting to the various groups, there is a risk that the groups that form the Framework do not adequately discharge their duties and Adult Social Care is not managed within a sufficiently robust performance reporting framework. **(Medium)**

Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible
1	Staff will be reminded to adhere to expected timescales for all stages of the case management process	High	31 April 2017	Dianne Martin, Interim Safeguarding Team Manager
2	The Council will ascertain all Level 2 staff that have not received training and ensure their training is expedited. As an interim measure, the Council will ascertain their current role and responsibility and ensure it matches their current level of skill.	Medium	30 June 2017	Simon Broad – Head of Adult Social Care
3	The Council will agree the work plan, terms of reference and membership of the SAB Performance Sub Group.	Medium	30 June 2017	Simon Broad – Head of Adult Social Care
4	The Council will ensure that all triages for referrals received are undertaken by a DSM.	Medium	30 April 2017	Simon Broad – Head of Adult Social Care

5	The Council, as part of the new pathway for case management will ensure a designated case manager is accountable to all cases which progress to an initial enquiry stage.	Medium	30 April 2017	Dianne Martin, Interim Safeguarding Team Manager
6	The Council will ensure DSMs are reminded to complete and sign off the case closure forms on IAS.	Medium	30 April 2017	Dianne Martin, Interim Safeguarding Team Manager
7	The Council will enhance IAS to ensure its reporting functionally is fit for purpose.	Medium	30 March 2018	Alex Cowen, Transformation Manager
8	The Council will agree the timing to phase out the use of the safeguarding spreadsheet once the IAS reporting function goes live.	Medium	30 March 2018	Alex Cowen, Transformation Manager
9	<p>The Council will ensure that the Quality Management Framework is updated to ensure that it is reflective of the governance and reporting structures within Adult Social Care, including frequency of reporting.</p> <p>In addition, the Terms of Reference for the Care Governance Board will be updated to correctly reflect the remit of Board and its responsibility to the Slough Safeguarding Adults Partnership Board and the Adult Social Care DMT.</p> <p>The Framework will be subject to approval by the Adult Social Care DMT, detail a next review date and be subject to regular review thereafter. Once approved, the Framework will be circulated to all relevant staff and made accessible via the intranet.</p>	Medium	30 September 2017	Craig Brewin – Head of Commissioning

Voluntary Sector Commissioning – Delivery Of Outcomes (7.16/17) – PARTIAL ASSURANCE		1 - Low 4- Medium 1- High
<p>The key findings from this review are as follows:</p> <p>We confirmed that Slough Council for Voluntary Services (Slough CVS) had been commissioned as the lead contractor, with the SPACE consortium consisting of Slough CVS and the following three organisations:</p> <ul style="list-style-type: none"> • Royal Voluntary Service (RVS); • Slough Community Transport and Shop Mobility (SCT); and • Slough Crossroads Caring for Carers. <p>Whilst a contract was in place for the partnership covering key terms including the service specifications, outcomes required, the length of the contract and parties</p>		

involved, we noted that it was only signed by both parties and sealed on 4 October 2016, nine months following the commencement of the partnership. We identified through discussion with the Commissioning Project Manager that the delay in finalising and agreeing the contract had been as a result of performance measures not being finalised prior to the commencement of the partnership.

However, where a signed agreement is not in place prior to commencement of a contractual relationship, the Council may be exposed to legal risks in the event of a dispute, as it may be unable to hold providers/partners to account should they default on any of the terms and conditions of the contract. A **(Medium) priority** management action has been agreed in respect of ensuring the timely agreement of future commissioning contracts.

We noted that SPACE had individual Service Level Agreements (SLAs) with a wide range of voluntary organisations to deliver the services to meet the agreed outcomes as per the partnership contract and review of a sample of these confirmed that these had been signed by both parties and were aligned to the service specification within the partnership contract.

Through review and discussion with the Commissioning Project Manager, we identified that performance measures and targets for monitoring the delivery of the partnership outcomes had yet to be finalised at the time of the audit. There has therefore been a lack of outcomes-focused monitoring to date. There was also a lack of a defined governance structure for monitoring performance of the SPACE contract within Council and for upward reporting of performance to senior management and Members, and a dedicated forum had not been established within the Council for this purpose. There have therefore not been any reports presented to these forums to date.

We also noted that there was an absence of a defined and documented Terms of Reference for the contract monitoring meetings held with SPACE to set out the purpose and format of the meetings and the required representatives of both parties.

Without finalising and agreeing performance monitoring arrangements, and ensuring suitable performance measures and targets are in place for monitoring delivery against the partnership outcomes, there is a risk that a lack of adequate monitoring may result in desired outcomes not being delivered in line with the Voluntary Sector Partnership Strategy 2015-20. We have agreed one **(High)** and three **(Medium priority)** management actions in respect of these issues.

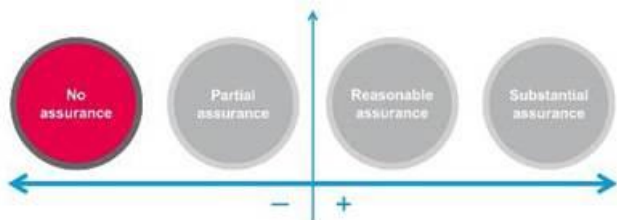
Ref	Findings Summary Management Action	Priority	Implementation Date	Manager Responsible
1	<p>The Council will finalise and agree the outcomes framework and performance monitoring arrangements for the SPACE contract.</p> <p>As part of this, the Council will;</p> <ul style="list-style-type: none"> • Review the targets for the outcome measures to ensure these are appropriate based on collated data; • Finalise and agree the outcome sub-measures and suitable targets for these; <p>Develop and agree the method for collating the necessary data to report against the measures, i.e. through the use of a questionnaire/survey or other methods;</p>	High	Immediate	<p>Ian McIlwain – Commissioning Project Manager</p> <p>Suzanne Binns – Supply Chain Relationship Manager</p>

2	<p>Terms of Reference will be developed and agreed for the SPACE contract monitoring meetings to set out;</p> <ul style="list-style-type: none"> • Remit/purpose of the meetings; • Responsibilities; • Membership and required attendees; • Meeting frequency; Required reports; and • Accountability 	Medium	29 September 2017	<p>Craig Brewin – Head of Commissioning</p> <p>Suzanne Binns – Supply Chain Relationship Manager</p>
3	<p>An action log will be maintained for the SPACE contract monitoring meetings to record details of assigned actions, deadlines and owners, and the completion of these</p>	Medium	29 September 2017	<p>Craig Brewin – Head of Commissioning</p>
4	<p>The operational monitoring and reporting arrangements for the SPACE contract will be reviewed to ensure that;</p> <ul style="list-style-type: none"> • A dedicated forum is established to oversee the monitoring of contractual performance and delivery of agreed outcomes; and • Arrangements are in place for upward reporting of performance to senior management and Members. 	Medium	Immediate	<p>Craig Brewin – Head of Commissioning</p> <p>Suzanne Binns – Supply Chain Relationship Manager</p>
5	<p>The Commissioning Service will ensure that all appropriate governance arrangements are agreed and signed by relevant parties prior to commencement of the agreement.</p> <p>Timescales will be set that enable all actions required for achievement of this to be completed.</p>	Medium	Immediate	<p>Craig Brewin – Head of Commissioning</p>

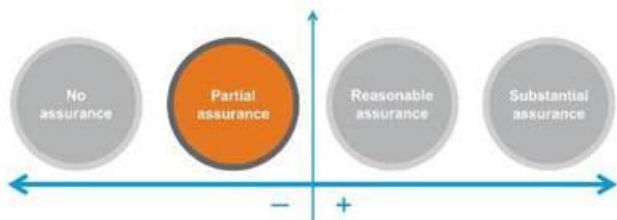
2016/17 AND 2017/18 ASSURANCE OPINIONS

For 2016/17, we are constantly developing and evolving the methods used to provide assurance to our clients. As part of this, we have refreshed our opinion levels in line with the graphics below.

We use the following levels of opinion classification within our internal audit reports. Reflecting the level of assurance the board can take:



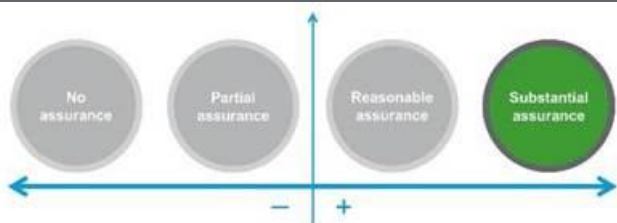
Taking account of the issues identified, the Board **cannot take assurance** that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective. Urgent action is needed to strengthen the control framework to manage the identified risk(s).



Taking account of the issues identified, the Board can take **partial assurance** that the controls to manage this risk are suitably designed and consistently applied. Action is needed to strengthen the control framework to manage the identified risk(s).



Taking account of the issues identified, the Board can take **reasonable assurance** that the controls in place to manage this risk are suitably designed and consistently applied. However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk(s).



Taking account of the issues identified, the Board can take **substantial assurance** that the controls upon which the organisation relies to manage the identified risk(s) are suitably designed, consistently applied and operating effectively.

FOR FURTHER INFORMATION CONTACT

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