
AUDIT SERVICES' ANNUAL REPORT 2012/13

Purpose of Report

1. To provide the Committee with Audit Services' Annual Report for 2012/13 in accordance with its role and terms of reference.

Information and Analysis

2. The Annual Audit Plan for 2012/13 was approved by this Committee in March 2012 (Minute No. A40/March/12) and Audit Services' Annual Report against this plan is attached at **Appendix A**.
3. The Annual Report should be considered in the context of fulfilling the function to monitor the adequacy and effectiveness of the Council's internal control environment and the Internal Audit service provided.
4. The report details the internal audit service provided; operational performance achieved; audit assignment, consultancy/corporate arrangements work and contingency activity undertaken; outcomes against key performance indicator targets; and looks forward to the next financial year.
5. The outcomes from the audit assignments undertaken, together with the positive responses from management to accept and implement required improvements to control systems, complemented by consultancy work carried out to advise and assist management to establish appropriate controls at source, demonstrate that the Council continues to operate within a control environment that is generally sound.
6. This positive position upon the Council's internal control environment will be reflected in the Council's Annual Governance Statement which will accompany the Statement of Accounts for 2012/13.

Recommendations

7. It is recommended that Audit Services' Annual Report for 2012/13 be noted.

Reasons

8. The recommendation is supported to provide the Audit Committee with evidence to reflect on the Council's governance arrangements.

Brian James
Head of Corporate Assurance

Background Papers

- (i) Audit Services' Role and Terms of Reference
- (ii) Audit Assignment Executive Summaries
- (iii) Annual Audit Letter 2011/12
- (iv) CIPFA Audit Benchmarking Statistics for Unitary Authorities

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EAC

S17 Crime and Disorder	Other than the special investigation work there is no crime and disorder impact.
Health and Well Being	There is no specific health and well being impact.
Carbon Impact	There is no specific carbon impact.
Diversity	There is no specific diversity impact.
Wards Affected	All wards are affected equally.
Groups Affected	All groups are affected equally.
Budget and Policy Framework	This report does not affect the budget or policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision.
One Darlington: Perfectly Placed	There is no specific relevance to the strategy beyond a reflection on the Council's governance arrangements.
Efficiency	There is no specific efficiency impact.

**AUDIT SERVICES'
ANNUAL REPORT
2012/13**

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1. Introduction

- 1.1 Audit Services comprises an establishment of 4.3 full time equivalent staff and operates in accordance with professional standards.
- 1.2 The aim of the Section is to provide an independent and objective service that wherever possible adds value to the business of clients by being responsive to their needs, constructive in approach, appraisal and recommendations, whilst satisfying statutory responsibilities.
- 1.3 The position on performance targets and objectives set for the year upon service standards, staffing and customer/service quality was positive and this solid base of internal audit service delivery is a major benefit to the Council with the increased importance of the corporate governance agenda.
- 1.4 The remainder of this report chronicles in more detail operational performance during the year.

2. Service Provided

- 2.1 The requirement for an internal audit function for local authorities is implied by Section 151 of the Local Government Act 1972, which requires that authorities “make arrangements for the proper administration of their financial affairs and shall ensure that one of their officers has responsibility for the administration of those affairs”. The Accounts and Audit (England) Regulations 2011 (SI 2011/817), regulation 6, specifically requires that a “relevant body must undertake an adequate and effective internal audit of its accounting records and of its system of internal control in accordance with the proper practices in relation to internal control”. The Director of Resources has been delegated with this requirement by the Council and the Audit Services Section carry out the internal audit role.
- 2.2 The guidance accompanying the legislation states that proper internal control practice for internal audit are those contained within the CIPFA Code of Practice for Internal Audit in Local Government in the United Kingdom.
- 2.3 The system of internal control is the broad framework of assurance established to satisfy the Council that the risks to achieving its objectives, and the risks inherent in undertaking its work, have been properly identified and are being managed by controls that are adequately designed and effective in operation. This assurance framework is documented at **Appendix 1**.
- 2.4 Although internal audit has a statutory basis and therefore, has a major corporate inspection and monitoring role, it is operated as a service to management and provides assurance and consultancy upon all aspects of management and administration. Audit Services has limited resources and consequently its workforce is deployed in accordance with an audit strategy having regard to relative risks and levels of assurance required, translated into an agreed annual plan.
- 2.5 Service level agreements are in place across the client base that include details upon audit assignments, consultancy tasks, charges, working protocols, response times and client responsibilities.

3. Operational Performance

- 3.1 A summary of the year in person days is outlined in the following table, which analyses chargeable time, by category, as well as non chargeable and non productive time

Summary of 2012/13 Year In Person Days				
	Annual Plan	Actual Allocation	Variance	
			+	-
Chargeable Time				
• Audit Assignments	530	457		73
• Advice and Consultancy	120	128	8	
• Corporate Arrangements	100	105	5	
• Contingency Allocation	80	154	74	
SUB TOTAL	830	844	87	73
Non Chargeable Time				
• Training, ISO Administration, Supervision and Management etc.	88	87		1
Non Productive Time				
• Annual Leave, Bank Holidays, Sickness etc.	208	195		13
TOTAL	1126	1126	87	87

- 3.2 Actual chargeable time in total during the year was slightly higher than that planned. The increase of 14 person days resulted from less sickness than estimated which also reflects in the decrease in non productive time.
- 3.3 Variations to the audit assignment element of the plan were discussed at the Audit Committee during the year and the range of activity undertaken on consultancy work and contingency tasks were agreed with Directors.

4. Review of Audit Assignment Work

- 4.1 Planned audit assignments for the year totalled 43 of which 40 were completed i.e. 93%. These audits spanned all Groups of the Council and details of the assignments undertaken, together with the audit opinion and relevant commentary where the assurance opinion was less than substantial, is shown at **Appendix 2**.
- 4.2 Audit work was undertaken on the core financial systems of corporate income, creditors, payroll, council tax/NDR, housing rents and housing benefits. All resulted in substantial assurance opinions with the exception of credit and debit card processing within Corporate Income, Council Tax/NDR, Creditors, and Overpayments within the Housing Benefits Service where limited assurance opinions were given. Management responded positively to the audit findings and as regards:
- Credit and Debit Card Processing – progress continues to achieve compliance with the voluntary PCI Standard.
 - Council Tax/NDR – improvements agreed to the control processes in respect of new property inspections, monitoring of discounts and exemptions and debt recovery.
 - Creditors – improvements agreed to the procure to pay process.
 - Housing Benefit Overpayments – additional resource is to be allocated to the function to assist in recovery and to provide greater resilience to the service.
- 4.3 Other instances of less than substantial assurance were more service/establishment based and again, in all cases, management have responded positively to the audit reviews. In respect of:
- Dolphin Centre - Improvements being implemented to income, stock and inventory control and utilisation of Leisure Management software.
 - Mobile Phones – progress ongoing, examining policy changes and improved monitoring arrangements.
 - Car Mileage – Progress ongoing, online recording system on Agresso rolled out across the Council, examining improved monitoring regimes.
 - Business Continuity – revised strategy endorsed by COB, timetable being produced for category 3 and 4 services for implementation, further progress being made on testing Business Continuity Plans
- 4.4 As regards audit assignments in general, in line with good practice, at an appropriate time Audit Services follow up with Managers progress upon the implementation of recommendations agreed in audit reports. As part of this follow up process, any significant recommendations remaining outstanding are reported quarterly to the Audit Committee. It is pleasing to report generally no matters of concern on this point.
- 4.5 The overall outcomes from the audit assignments undertaken, together with the positive responses from management to accept and implement required improvements to internal control systems, demonstrate that the Council continues to operate within a control environment that is generally sound.

5. Review of Outputs from Consultancy and Corporate Arrangements Work/Contingency Activity

- 5.1 The Section worked upon a number of corporate arrangements and consultancy projects identified in the original Audit Plan but with recognised flexibility some were replaced by others at the request of Directors or given up to contingency activity with their agreement. A summary of the more significant outputs from this work is given at **Appendix 3**.
- 5.2 The work undertaken included governance matters; systems improvement support through contributing to the transformation projects on for example the Sales Ledger and implementation of the Business Improvement District Initiative; and carrying out investigations into irregularities following which appropriate action was taken by management on findings.
- 5.3 In addition to the outputs stated in **Appendix 3**, the Section responded to numerous and wide ranging requests from Groups, including schools, for advice and assistance upon all aspects of the Council's internal control framework.
- 5.4 Generally, the aim of the consultancy work is to complement the audit review process by advising and assisting management to implement, at source, appropriate internal controls within systems. This approach is seen as an effective way to help underpin the sound nature of the Council's control environment.

6. Annual Governance Statement

- 6.1 In accordance with statutory requirements the Council must publish an Annual Governance Statement to accompany the Statement of Accounts for 2012/13.
- 6.2 Audit Services' contribution to this statement will be positive since, as a result of the range of audit work undertaken, it is concluded that overall the Council continues to operate within a control environment that is generally sound.
- 6.3 This conclusion is consistent with the outcomes from the broader assurance framework documented at **Appendix 1**.

7. Performance Indicators

- 7.1 A summary of outcomes against targets and objectives for the year covering service standard, customer satisfaction and service quality and staffing is included at **Appendix 4**. The position shown is positive.
- 7.2 Audit Services maintained accreditation under the ISO 9001:2008 Quality Standard for all aspects of business following external scrutiny by the accreditation body. The system itself reflects Audit Services' proactive approach to involving clients in the audit process with the belief that by working in partnership the more both parties will benefit. Indeed, the results from client satisfaction surveys undertaken following each audit assignment remain impressive and demonstrate the high regard clients have for the service provided.
- 7.3 Productive days per auditor were top quartile as measured by the CIPFA Benchmarking Statistics for Unitary Authorities and costs per audit day were bottom quartile. All other operational targets were achieved with the exception of audit assignments completed within 10% of the planned time allocated where an outturn of 88% was attained against a target of 92%, explained by an increase in the scope of audit work on particular audits agreed with management.

8. The Future

The aim of Audit Services for the year ahead is to address the requirements of the new Public Sector Internal Audit Standards (PSIAS) and the Application Note to local government, produced by CIPFA in collaboration with the Chartered Institute of Internal Auditors, that together from April 2013 constitute proper practices in relation to internal control in accordance with the Accounts and Audit Regulations 2011. In so doing the Section will continue to deliver an efficient and effective service as the Council continues to respond to the challenge of significant reductions in funding levels with delivery of its New Business Model, approved by Cabinet in November 2009.

System of Internal Control

The Framework of Assurance established to satisfy the Council that the risks to achieving its objectives, and the risks inherent in undertaking its work, have been properly identified and are being managed by controls that are adequately designed and effective in operation

Risk	Assurance Provider	Sources of Assurance	Links to Internal Audit Work Plan	Reporting to Members
Internal Control environment inadequate/ineffective.	Internal Audit	Internal Audit Strategy. Internal Audit's Role and Terms of Reference. Risk based Annual Internal Audit Plan. Internal Audit Reports/opinions and outcomes from consultancy work undertaken.	Internal Audit Strategy. Internal Audit's Role and Terms of Reference. Risk based Annual Internal Audit Plan. Internal Audit reports/opinions and outcomes from consultancy work undertaken.	Internal Audit's Strategy, Role and Terms of reference and Annual Audit Plan approved by the Audit Committee. Quarterly/Annual Reports to the Audit Committee on progress/outcomes against the Annual Audit Plan. Annual Report includes an overall opinion on the Council's control environment.
The financial position of the Council not presented fairly in the Financial Statements; the Annual Governance Statement not presented in accordance with relevant requirements; and proper arrangements are not in place to secure economy, efficiency and effectiveness in the use of resources.	External Audit	Risk based External Audit Plan. External Audit Reports/opinions.	Internal Audit's Annual Audit Plan discussed with External Audit to facilitate External audit planning and minimise the duplication of audit effort wherever possible.	External Audit Plan and External Audit Reports, including the Annual Audit Letter, considered by the Audit Committee. Annual Audit Letter considered by Cabinet.

Inadequate provision of services to the people of Darlington.	External Inspection Agencies	External Inspection Agencies' reports.	External Inspection reports reflected upon in the Internal Audit planning process.	External Inspection reports considered by relevant Scrutiny Committee/Cabinet/Council.
Business risk processes inadequate/ineffective.	Risk Management and Insurance Section	Risk Management Strategy Corporate/Group Risk Registers. Risk Management Group's Agendas and Minutes. Officer/Member Training.	Annual Audit Plan developed with reference to Corporate/Group Risk Registers. Risk Management function subject to periodic Internal Audit review as part of the cyclical audit process.	Risk Management Strategy endorsed by the Audit Committee and approved by Cabinet. Six-monthly/Annual Reports to the Audit Committee on the outcomes from the Council's risk management processes.
Fraud and corruption arrangements inadequate/ineffective.	Internal Audit and Benefits Enquiry Unit.	Anti-Fraud and Corruption Strategy, Policy, Fraud Response Plan, Anti-Money Laundering Policy and Anti-Bribery Policy and Procedures. Housing Benefit/Council Tax Anti-Fraud Strategy, Policy and Sanctions Policy. Confidential Reporting Policy. Internal Audit reviews of arrangements. Outcomes from bi-annual National Fraud Initiative exercises co-ordinated by the Audit Commission. Internal Audit/Benefits Enquiry Unit case files.	Anti-Fraud and Corruption arrangements, including National Fraud Initiative exercises, administered by Internal Audit. The potential for a service to be susceptible to fraud reflected within Internal Audit's risk assessment model that underpins the annual audit planning process. Internal Audit review of Housing Benefits conducted on an annual basis.	Fraud related Policies and Strategies approved by the Audit Committee/Council. Confidential Reporting Policy approved by Council. Annual Reports to the Audit Committee on the outcomes from the Council's anti-fraud and corruption arrangements.
Information governance arrangements inadequate/ineffective.	Information Security Section within Xentrall, Legal Services and External Audit.	Corporate Policy Statement on Information Governance Employees/Members Guide to Information Security Information Risk Management process that informs the information governance work programme. COB Agendas/Minutes. Officer/Member Training. Data Quality reflected upon by External Audit in their VFM assessment.	Information Governance/Sensitivity of data is reflected within Internal Audit's risk assessment that underpins the annual audit planning process. Information Governance subject to periodic Internal Audit review as part of the cyclical audit process.	Corporate Policy Statement on Information Governance approved by Cabinet. Six-monthly reports to the Audit Committee on progress with implementation of the information governance work programme. External Audit VFM assessment considered by the Audit Committee and Cabinet.

Internal control environment of relevant areas of Xentrall inadequate/ineffective.	Stockton BC Internal Audit	Risk based Annual Internal Audit Plan. Internal Audit reports/opinions and outcomes from consultancy work undertaken.	Joint working protocol agreed between the Internal Audit Services of Stockton and Darlington to cover Xentrall audits. Copies of all relevant Stockton BC Internal Audit Reports on Xentrall forwarded to Darlington Internal Audit for information.	Stockton BC's Annual Audit Plan related to Xentrall considered by the Audit Committee. Quarterly Reports to the Audit Committee on progress/outcomes against the Annual Audit Plan.
Local Code of Corporate Governance not implemented.	Corporate Group responsible for drafting the Annual Governance Statement.	Local Code of Corporate Governance Local Code individual key documents/functions matrices, completed by relevant Lead Officers, posted on the intranet covering awareness, monitoring and review.	Internal Audit direct effort annually to validate evidence quoted in the individual key documents/functions matrices posted on the intranet.	Local Code endorsed by the Audit Committee and approved by Council. Six-monthly reports to the Audit Committee on progress with implementation of the Code.
Grant processes inadequate.	External Audit	External Audit Report on audited Grant Claims and Returns.	Grant process arrangements subject to annual review by Internal Audit.	External Audit Report on Grant Claims and Returns considered by the Audit Committee.
Health and Safety practices and processes inadequate/ineffective.	Health and Safety Unit	Corporate Health and Safety Policy Heads of Service Health and Safety Management self assessments and action plans. Risk Assessments Reportable Accident Statistics Outcomes from audits undertaken by the Health and Safety Unit. Officer/Member Training.	Health and Safety function subject to periodic Internal Audit review as part of the cyclical audit process.	Corporate Health and Safety Policy approved by Cabinet. Council's performance on health and safety reported annually to the Audit Committee.
Property management arrangements inadequate.	Corporate Landlord Function	Corporate Premises Database System and supporting documentation.	Corporate Premises Database System subject to periodic Internal audit review as part of the cyclical audit process.	Property management arrangements included in Council Risk Registers and, as such, included within member reporting arrangements for business risk processes.

Management control in respect of operational aspects of the business inadequate.	Chief Officers Board	Annual signed Assurance Statements from Assistant Directors.	Arrangements administered and outputs scrutinised by Internal Audit.	Annual report to the Audit Committee on the outcomes from the Assurance Statement process.
Capital Project management arrangements inadequate/ineffective.	Asset Management and Capital Programme Review Board	Asset Management and Capital Programme Review Board Agendas/Minutes and supporting documentation.	Project Office function subject to periodic Internal Audit review as part of the cyclical audit process.	Project Position Statement reported regularly to Cabinet.
Partnership governance arrangements inadequate.	Partnership Lead Officers	Annual Partnership Toolkit Questionnaires completed by relevant Council Partnership Lead Officers and supporting documentation.	Partnership Governance Arrangements subject to periodic Internal Audit review as part of the cyclical audit process.	Partnership Toolkit approved by Cabinet. Annual report to Cabinet on the operations of significant partnerships.
Treasury management arrangements inadequate.	Corporate Assurance Division	Treasury Management Policy Statement, Strategy, Prudential Indicators and Procedures.	Treasury Management function subject to periodic Internal Audit review as part of the cyclical audit process.	Treasury Management Policy Statement, Strategy and Prudential Indicators considered by the Audit Committee and approved by Council. Treasury Management Procedures approved by the Audit Committee. Regular/Annual Reports to the Audit Committee and Cabinet on the performance of the Treasury Management function.
Financial management arrangements inadequate/ineffective.	Accounting Services	Medium Term Financial Plan. Corporate Budget Setting/Monitoring processes and supporting documentation. Officer/Member Training.	Financial management arrangements subject to periodic Internal Audit review as part of the cyclical audit process.	Medium Term Financial Plan approved by Council. Quarterly Reports to Cabinet on Financial Performance.
Financial management arrangements in local authority maintained	School Governing Bodies	Schools annual self assessment returns against the Schools Financial Value Standard (SFVS).	Financial arrangements in schools subject to periodic Internal Audit review as part of the cyclic audit process.	School balances reported to Cabinet quarterly.

schools inadequate/ineffective.				
Ineffective management of change and transformation.	Transformation Board	Transformation Board Agendas/Minutes and supporting documentation	Internal Audit support/contribute to delivery of the Transformation Programme as relevant.	Monthly update reports and annual report provided to Cabinet Members and Scrutiny Committee Chairs on the progress and issues associated with the Transformation Programme.
Ineffective challenge to the procurement process.	Procurement Board	Procurement Board Agendas/Minutes and supporting documentation.	Procurement process subject to periodic Internal Audit review as part of the cyclical audit process.	Annual Procurement Plan approved by Cabinet.
Ethical health arrangements inadequate.	Legal Services	Member Code of Conduct. Officer Code of Conduct. Member/Officer Training.	Standards Committee reports reflected upon in the audit planning process.	Members and Officers Codes of Conduct endorsed by Standards Committee and approved by Council. Standards Committee receive reports on ethical indicators.
Lessons not learned from complaints received.	Complaints and Information Governance Team	Corporate Complaints, Compliments and Comments Procedure. Adult Social Care Complaints, Compliments and Comments Procedure. Children's Social Care Complaints Procedure. Complaints Records. Ombudsman complaints and outcomes.	Complaints and Ombudsman reports reflected upon in the audit planning process.	Complaints Procedures approved by Cabinet. Annual report to Cabinet on complaints received and the resultant organisational learning. Regular reports to Cabinet on Ombudsman complaints and outcomes.
Inadequate arrangements for the transfer of the Public Health function from the NHS to the Council with effect from 1 st April, 2013	Public Health Transition Reference Group	Public Health Transition Reference Group Agendas/Minutes and supporting documentation.	Internal Audit support/contribute to the transition arrangements as relevant. An audit of the transition arrangements was carried out by Internal Audit at the NHS.	Regular reports to Cabinet and the Shadow Health and Wellbeing Board during the transition.
Ineffective system of internal audit	Senior Group of Officers	Annual Review of the system of internal audit and supporting documentation conducted in accordance with the Accounts and	Internal Audit direct effort annually to support the review process.	Annual Review of the system of internal audit considered by the Audit Committee.

		Audit Regulations.		
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SUMMARY OF AUDIT ASSIGNMENTS UNDERTAKEN FOR 2012/13

Group	Audit Assignment	Assurance Opinion	Where Assurance Opinion Less Than Substantial	
			Audit Comment	Management Response
Resources	Corporate Income System	Departmental Controls – Substantial Plastic Card Industry Data Security Standard - Limited	Upgrades to the Corporate Income System and the Civic Theatre System remain outstanding which are required to achieve a satisfactory level of compliance.	The upgrades to both systems have now been approved and implementation is to commence during 2013.
	Payroll	Substantial		
	Sales Ledger	Substantial		
	Budget Management	Substantial		
	Balance Sheet Management	Substantial		
	Treasury Management	Full		
	Property Risk Management System	Substantial		
	Creditors	Limited	Generic issues identified in the working of the procure to pay system.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
Place	Cemeteries and Crematorium	Substantial		
	Horticulture	Substantial		
	Countryside and Allotments	Substantial		
	Trade Refuse	Substantial		
	Libraries	Substantial		

Group	Audit Assignment	Assurance Opinion	Where Assurance Opinion Less Than Substantial	
			Audit Comment	Management Response
	Dolphin Centre	Limited	Improvements required in income, stock and inventory control and utilisation of Leisure Management software.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
	Dolphin Centre Catering Contract Audit	Substantial N/A	Opinion not given as work non-standard appraisal. Focus of the work was around the further development of framework agreements and improvements to the procurement process utilising the NEPO Portal facilities.	
	Creditors	Limited	Generic issues identified in the working of the procure to pay system.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
People	Primary/Nursery Schools x 4	2 x Full 2 x Substantial		
	Supporting People	Substantial		
	Administration of Blue Badges	Substantial		

Group	Audit Assignment	Assurance Opinion	Where Assurance Opinion Less Than Substantial	
			Audit Comment	Management Response
	Housing Benefits	Assessment, Fraud, Payments – Substantial Recovery of Overpayments - Limited	Issues identified in respect of a backlog of outstanding overpayments to be recovered by Sundry Debtor accounts Additional controls required in respect of write offs, bailiffs and recovery from other state benefits.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
	Housing Rents	Substantial		
	Housing Management	Substantial		
	School Places	Substantial		
	Direct Payments and Assessments	Substantial		
	Foster Care Payments	Substantial		
	Local Taxation	Limited	Issues identified in respect of new property inspections, monitoring of reliefs and exemptions and debt recovery.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
	Creditors	Limited	Generic issues identified in the working of the procure to pay system.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.

Group	Audit Assignment	Assurance Opinion	Where Assurance Opinion Less Than Substantial	
			Audit Comment	Management Response
	PFI Scheme Contract Monitoring	N/A	Opinion not given as work non standard appraisal. Assistance provided to PwC in their work to support their value for money conclusion and to follow up on previous internal control recommendations raised in relation to the management of this contract.	
	Funds and Trusts	N/A	Accounts audited in accordance with Charity Commission guidelines. A satisfactory position was noted.	
Corporate Core	Grants	Substantial		
	Mobile Phones	Limited	Issues identified in respect of a lack of compliance with corporate policy requirements.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
	Car Mileage	Limited	Issues identified around the need for clear corporate policy guidance in respect of the scheme employed.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.
	Business Continuity	Limited	Issues identified in respect of the lack of fully complete, up to date and tested Business Continuity Plans in areas of the Council.	Management have responded positively to the audit findings and agreed an improvement action plan to address the matters raised.

Group	Audit Assignment	Assurance Opinion	Where Assurance Opinion Less Than Substantial	
			Audit Comment	Management Response
	Mayors Charity Fund	N/A	Annual audit of accounts completed.	
	T.M. Barron Charity	N/A	Annual audit of accounts completed.	
	Corporate Governance	N/A	Opinion not given as work non standard appraisal. Effort directed to validating evidence quoted in documents/functions on the implementation of the Local Code of Corporate Governance posted on the intranet.	

OPINION	DEFINITION
Full Assurance	All controls in place and operating effectively – the system will achieve its objectives.
Substantial Assurance	The majority of controls in place and operating effectively although some control improvements required- the system should achieve its objectives.
Limited Assurance	Certain important controls inadequate or in place but operating ineffectively – there is a risk that the system may not achieve its objectives.
Minimal Assurance	The majority of controls weak, not present or failing – it is likely that the system will not achieve its objectives.

**SUMMARY OF THE MORE SIGNIFICANT OUTPUTS FROM CONSULTANCY/CORPORATE ARRANGEMENTS
WORK/CONTINGENCY ACTIVITY UNDERTAKEN FOR 2012/13**

Group	Description	Output
Core Corporate	National Fraud Initiative (NFI) 2012	Co-ordinating the Initiative. Data files supplied to the NFI in October 2012 for matching to other Authorities' data, DWP and Inland Revenue records etc covering a range of Council Services including Blue Badge Parking Permits, Creditors, Housing Benefits, Insurance Claims, Payroll and Housing Tenancies. Some 5,365 data matches received across all service areas are in the process of being investigated.
	Transformation Projects	Audit Manager continues to lead and progress implementation of the Sales Ledger review. Assistance provided in the implementation of the Business Improvement District Initiative which went live in August 2012. Audit participation continuing in respect of an upgrade to the Council's Income System; the review of Care First; introduction of purchasing cards within the Housing/Building Maintenance service; and in supporting the examination of future payment initiatives around proposed welfare reforms.
	Annual Governance Statement	Annual Governance Statement drafted in conjunction with the Management Group responsible and approved by the Audit Committee in June 2012.
	Annual Review of Internal Audit Effectiveness	Participated in the independent review of internal audit effectiveness required by the Accounts and Audit (England) Regulations 2011. Outcome of the review, that concluded the Council has an effective system of internal audit, was reported to the Audit Committee in June 2012.
Place	Depot Relocation	Advice and assistance being provided in respect of a range of control issues in relation to the proposed relocation.
People	Special Investigation	Provided assistance with a case regarding submitted car mileage claims. The investigation proved inconclusive with no further action taken.
	Special Investigation	Examination of business arrangements within a primary school.

AUDIT SERVICES – KEY PERFORMANCE INDICATORS

	2012/13	
	Target	Outcome
1. Outcome from annual review of internal audit effectiveness.	Effective	Effective
2. Days per auditor as per CIPFA Benchmarking Statistics for Unitary Authorities.	190 Top Quartile	196 Top Quartile
3. Cost per audit day as per CIPFA Benchmarking Statistics for Unitary Authorities	£296 Second lowest quartile	£242 Bottom Quartile
4. Customer satisfaction rating received from client surveys following the completion of each audit assignment (where 1 = Very Poor to 5 = Very Good)	Average 4	Average 4.7
5. Maintain ISO 9001 : 2000 Quality Accreditation	Achieve	Achieved
6. % of planned pre determined audit assignments completed within the year relative the agreed audit plan.	92%	93%
7. % of audit recommendations accepted by client, with a priority of high or medium priority	100%	100%
8. % of agreed audit assignments carried out within the year on core financial systems	100%	100%
9. % of audit assignments completed within 10% of the planned time allocated for each assignment	92%	88%
10. % of draft audit reports for each audit assignment completed within 7 working days of the exit meeting	100%	100%
11. % of final reports for each audit assignment issued within 3 working days of receipt of response to draft	100%	100%
12. % of agreed consultancy project work concluded to the satisfaction of the client manager	100%	100%
13. Maintain service costs within budget	Achieve	Achieved
14. % of workforce receiving PDRs	100%	100%
15. % of planned audit assignments where the client was given 5 working days notice of, or agreed a timescale for, the commencement of the audit	100%	100%