AUDIT COMMITTEE 16 SEPTEMBER 2020

ITEM NO.

AUDIT SERVICES ANNUAL AUDIT PLAN 2019/20 – ANNUAL REPORT

SUMMARY REPORT

Purpose of the Report

1. To provide Members with the annual report against the 2018/19 Annual Audit Plan in accordance with Audit Services' role and terms of reference.

Summary

- 2. The report outlines progress to date on audit assignment work, consultancy/contingency activity and performance indicators.
- 3. The shared service was a new service beginning 1 April 2017 and brought together two teams from different organisations as well as a new approach to delivering the audit opinion.
- 4. In relation to Audit Services' performance a detailed report is provided with all agreed work completed.

Recommendation

5. It is recommended that the annual report against the 2019/20 Annual Audit Plan be noted.

Reasons

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

Andrew Barber Audit & Risk Manager

Background Papers

- (i) Internal Audit Charter
- (ii) Audit Assignment Executive Summaries

Andrew Barber: Extension 156176

S17 Crime and Disorder	Other than any 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	There is no specific relevance to the strategy					
Placed	beyond a reflection on the Council's					
	governance arrangements.					
Efficiency	There is no specific efficiency impact.					

MAIN REPORT

Information and Analysis

- 7. The Annual Audit Plan for 2019/20 was approved by the Audit Committee in June 2019.
- 8. The 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.
- 9. Appendix 1 provides members with detailed feedback on the performance of the service and the position in relation to completion of the audit plan.
- 10. A number of changes were required to the original plan. The service carried 2 vacancies throughout the year and there a significant impact on working arrangements and priorities in response to the COVID-19 outbreak. The service

was however able to deliver 47% coverage of the full audit portfolio. The agreed minimum level of coverage was 45% and as such sufficient work was completed to enable an overall opinion to be provided.

- 11. In line with good practice, at an appropriate time, Audit Services follow up with Managers progress on implementation of audit recommendations agreed in audit reports.
- 12. The Shared Service has also responded to routine requests from Groups for advice and guidance on operational matters.

Outcome of Consultation

13. There was no formal consultation undertaken in production of this report.

Appendix 1

INTERNAL AUDIT ANNUAL REPORT & OPINION STATEMENTS

2019/20

1.0 EXECUTIVE SUMMARY

Introduction

- 1.1 Under the Accounts and Audit Regulations 2015, the Council is required to "undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance". For the purposes of the 2017/18 opinion the standards for proper practices for internal audit are laid down in the CIPFA Local Government Application Note for the United Kingdom Public Sector Internal Audit Standards (PSIAS).
- 1.2 The relevant body must conduct a review, at least once a year, of the effectiveness of its system of internal control. Following the review the Council must approve an Annual Governance Statement prepared in accordance with proper practices. The opinions given in this report provides independent and objective assurance on the overall adequacy and effectiveness of the Council's system of internal control.
- 1.3 It is management's responsibility to establish and maintain appropriate risk management processes, internal control systems, accounting records and governance arrangements. Internal Audit plays a vital role in advising management that these arrangements are in place and operating properly.

Quality Assurance and Improvement Programme

1.4 The Quality Assurance and Improvement Programme (QAIP) required by the PSIAS has been maintained during the year.

Planned Coverage and Output

- 1.5 The 2019/20 Audit Plan was approved by the Audit Committee on 19 June 2019. Best practice requires that audit resources should target those areas that represent the greatest risk to the Council.
- 1.6 In terms of audit engagements delivered by the audit team, the audit plan at the start of the year included 76 audits specific to DBC. The plan has to be flexible to allow for movement in the number of audits in the plan and days delivered to reflect changing client needs. The overall number of audit engagements will always be subject to change over the course of the year as audits may be deferred or no longer be required. Additional audits may be added if concerns are raised about a specific control area.

Original number of planned engagements	76
Unplanned engagements added	0
Planned engagements cancelled	8
/deferred	
Revised number of audit engagements	68
Engagements completed	63
Engagements ongoing	3
Engagements not Started	2

- 1.7 As can be seen from the table 78 reports have been issued, with two reports to be issued. This is covered in more detail in the audit coverage section of the report.
- 1.8 The plan for 2019/20 was based on 6 full time auditors plus 2 part time auditors during the year the audit capacity reduced to 4 full time auditors plus 2 part time auditors. The posts have been successfully filled and the service is back at it's full compliment.
- **1.9** These variations have not impacted on the ability of the Head of Internal Audit to provide assurance on the control environment as sufficient audit work has been completed.

Recommendations Made

- 1.10 Management continues to respond positively to audit reports and recommendations, with positive action taken to remedy any internal control weaknesses highlighted. The 69 audits completed have resulted in the following summary of recommendations made.
- **1.11** Analysis of Recommendations made in 2019/2020

Low	Medium	High	Critical	Total
21	49	5	0	75

This is covered in more detail in the output section.

Assurance Levels

1.12 The 63 completed audits resulted in the following assurance opinions (DBC Only) being made.

Opinion	Definition	No.	%
	A sound system of internal controls is currently being applied which will		
	ensure the system achieves its objectives. Whilst not essential there		
Full Assurance	may still be scope for these controls to be enhanced in some areas.	38	60
	Overall there is a sound system of internal controls that are operating		
Substantial	effectively. The system should achieve its objectives but there are areas		
Assurance	where internal controls need to be improved.	18	29
	A reasonably sound system of internal controls is being applied,		
Moderate	however, there are weaknesses which may put some of the system		
Assurance	objectives at risk.	2	3
	There is either a limited system of internal controls being applied, or		
Limited	there are significant weaknesses in the controls in place, which are		
Assurance	posing a substantial risk to the achievement of system objectives.	0	0
	The system of internal controls in place is failing and system objectives		
No Assurance	are not being met. Urgent management attention is required.	0	0
	This classification covers audit work within a small part of a system.		
	Providing an opinion on this work would misrepresent the system as a		
N/A	whole.	5	8
	Total	63	

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Overall Assurance

- 1.13 As the Head of Internal Audit, I am required to provide the Council with an opinion on the adequacy and effectiveness of the internal control environment. In giving this opinion, it should be noted that assurance can never be absolute and, therefore, only reasonable assurance can be provided that there are no major weaknesses in these processes. In assessing the level of assurance to be given, I based my opinion on:
 - The written reports on all internal audit work completed during the course of the year and the subsequent audit opinions;
 - Any follow up exercises undertaken in respect of previous years' internal audit work.
 - The proportion of Darlington Borough Council's audit need that has been covered within this period;
 - Any limitations which may have been placed on the scope of Internal Audit. (There
 have been no operational constraints placed upon Internal Audit, apart from
 agreed budgetary control provisions).

Opinion on the overall adequacy and effectiveness of the Council's governance, risk and control framework

From the testing undertaken by the Internal Audit Section over the course of the year I am satisfied that sufficient assurance work has been undertaken to allow me to form a reasonable conclusion on the adequacy and effectiveness of the Council's control environment to support the preparation of the Annual Governance Statement.

It is my opinion that the Council continues to have an appropriate, and overall, an effective system of internal control, upon which it can place reasonable reliance to deliver the Council's objectives, and detect fraud and other malpractice within a reasonable period of time.

Where weaknesses have been identified through internal audit work, we have worked with management to agree appropriate corrective actions and a timescale for introduction.

Statement of conformance with the PSIAS

A self-assessment of compliance with the PSIAs has been undertaken using the checklist included in the CIPFA Local Government Application Note to the PSIAS. The checklist runs to 35 pages and contains over 300 conformance targets.

This has been validated by an independent external assessor in-line with the requirements to undertake such a review at least once every 5 years.

The conclusion of the review is that the service conforms with the requirements of the standard. There are minor areas which may warrant further development but they do not have a material impact on the overall opinion.

The areas of non-compliance identified in the self-assessment and validated by the external review are as follows:-

- Feedback is not sought from the Chair of the Audit Committee on the Audit & Risk Manager's performance appraisal,
- Assignments for on-going assurance engagements should be rotated periodically, this is not always possible given the size of the team and some areas that require technical expertise such as ICT. Audits are rotated wherever practical. This is mitigated by the code of conduct signed by auditors.
- Organisational independence expects the Audit and Risk manager to report to an organisational level equal to or higher than corporate management team. For line management purposes the Audit & Risk Manager reports to the Procurement and Governance Manager however this is mitigated by having a secondary reporting line to the Director of Finance & Business Services and other senior management and the Audit Committee as required.

Many of the compliance targets relate to consulting engagements. As the Internal Audit Section does not undertake any such engagements, the answers to these questions have to be "no".

1 QUALITY ASSURANCE AND IMPROVEMENT PROGRAMME (QAIP)

2.1 Internal Audit is defined in the PSIAS as:-

"Internal auditing is an independent, objective and consulting activity designed to add value and improve an organisations operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes".

Adherence to the PSIAS ensures that Internal Audit complies with this definition.

- 2.2 In addition to the performance information shown below the following is evidence demonstrating Internal Audit's compliance with the PSIAS:-
 - Independence/no interference There has been no interference during the year that would require the escalation processes to be invoked.
 - Access to records The service has been provided access to all records/personnel required to undertake the work in the plan.
 - Director of Finance and Business Services' operational responsibility –
 Appropriate arrangements have been put in place to allow an objective opinion of
 the other operational services for which the Director of Finance and Business
 Services has responsibility.
 - Staff skills mix An appropriate mix of staff has been in place throughout the year as defined in the audit competency framework.
 - Staff training Training has been given to staff as required including a staff away day. Staff have also completed a minimum of 20 hours CPD.
 - Code of Conduct for Auditors All auditors have signed up to an audit code of conduct and there is no evidence that this has not been complied with.

Performance Indicators

- 2.3 The PSIAS are unequivocal in that a QAIP must include both internal and external assessments: internal assessments are both ongoing and periodical and external assessments at least once every five years.
- 2.4 An independent external peer review was undertaken to assess the effectiveness of internal audit and compliance with the new standards. The review concluded:-
 - The Internal Audit service complies fully with all key requirements of the Standards, and overall the level of compliance is very high.
 - On the basis of the assessment and supporting evidence the Internal Audit service is shown to be well managed. It provides a good standard of service covering all key aspects of its remit and is well regarded and effectively utilised by senior management.
 - No significant issues have been identified by the assessment process. The
 opportunities for improvement will improve service delivery and effectiveness, but
 they do not in themselves represent a material risk to the Internal Audit service or
 its ability to deliver the audit programme.

3 AUDIT PROGRESS

- 3.1 The plan, approved on 19 June 2019, was based on an audit assessment of risk drawn from a wide variety of sources including:-
 - Findings from previous audit reports and knowledge of Council systems
 - Input from Corporate Management Team and Heads of Service
 - Corporate Risk Register
 - Any areas highlighted by special investigations
 - Susceptibility to Fraud
 - Complexity of systems
 - Service Provider
 - Political/Media Sensitivity
 - Levels of Finance/Budgets

Audit Progress by Service Group

Department	Planned Audits	Cancelled Audits	Unplanned Audits	Revised Audits	Completed	In Progress	Under Review	Drafts Issued	Not Started
Children's and Adult									
Services	17	2	0	15	10	2	1	0	2
Economic Growth &									
Neighbourhood									
Services	17	3	0	14	14	0	0	0	0
Resources	6	0	0	6	6	0	0	0	0
Law & Governance	3	1	0	2	2	0	0	0	0
Schools	2	0	0	2	2	0	0	0	0
Xentrall	11	0	0	11	11	0	0	0	0
Corporate	13	2	0	11	11	0	0	0	0
Contingency	7	0	0	7	7	0	0	0	0
SBC Only	4	0	2	6	6	0	0	0	0
TVCA Only	0	0	0	0	0	0	0	0	0
Totals	80	8	2	74	69	2	1	0	2

3.2 The Audit Plan is constantly revised during the year to take account of changing requirements. Amendments to the Plan agreed on 19 June 2019 can be summarised as follows:

2019/20 Planned Audits Amalgamated/Cancelled/Deferred

- Asset Register Low priority, no issues in previous year, external audit provide oversight
- Absence Management Significant work undertaken in previous year, assurance managers have access to more detailed reporting than previously.
- Development Services Large piece of work undertaken in previous year so lower priority for current year.
- Land Charges Work undertaken in previous year, low risk audit on the plan.

- Building Control Work undertaken in previous year, no issues identified.
- First Contact Service is currently being reviewed.
- Emergency Duty Team Service is currently being reviewed
- Scheme of Delegation Low priority audit.

2019/20 Unplanned Audits Added to the Plan

None

4 AUDIT OUTPUT

Engagement Opinions

- **4.1** For each audit carried out Internal Audit provides an overall conclusion as to whether a sound system of internal control is being maintained. Each opinion is either "Full", "Substantial", "Moderate", "Limited", or "No" assurance depending on the conclusions reached and the evidence to support those conclusions. "Full" and "Substantial" assurance normally indicates that the area under review has a reliable system of internal control.
- **4.2** These individual opinions are summarised below:-

Opinion	Definition	No.	%
	A sound system of internal controls is currently being		
	applied which will ensure the system achieves its		
	objectives. Whilst not essential there may still be scope for		
Full Assurance	these controls to be enhanced in some areas.	38	60
	Overall there is a sound system of internal controls that are		
	operating effectively. The system should achieve its		
Substantial	objectives but there are areas where internal controls need		
Assurance	to be improved.	18	29
	A reasonably sound system of internal controls is being		
Moderate	applied, however, there are weaknesses which may put		
Assurance	some of the system objectives at risk.	2	3
	There is either a limited system of internal controls being		
	applied, or there are significant weaknesses in the controls		
	in place, which are posing a substantial risk to the		
Limited Assurance	achievement of system objectives.	0	0
	The system of internal controls in place is failing and		
	system objectives are not being met. Urgent management		
No Assurance	attention is required.	0	0
	This classification covers audit work within a small part of a		
	system. Providing an opinion on this work would		
N/A	misrepresent the system as a whole.	5	8
	Total	63	

4.3 An analysis of the recommendations supporting these opinions by priority is shown below:-

Priority	Definition	No.	%
	Actions that must be taken immediately to manage significant		
	risks that are likely to prevent the Authority achieving one or		
Critical	more of its corporate objectives.	0	0
	Actions that should be taken as a matter of priority due to the		
	issues identified posing a substantial risk to the achievement		
High	of service/system objectives.	5	7
	Required actions to reduce the risk of systems failing to		
Medium	achieve their objectives.	49	65
	Beneficial to the improvement of internal controls, which will		
Low	support the achievement of objectives.	21	28
	Total	75	

4.4 The following table shows the breakdown of recommendations by audit area.

Details of Audits by Service Group

2019/2020

	No. of Audits								Previous Recommendations			
Department	Issued	Full	Sub	Mod	Lim	None	N/A	Made	Tested	Passed	Failed	N/A
Children's and Adult Services	10	4	5	1	0	0	0	16	12	10	1	1
Economic Growth & Neighbourhood												
Services	14	8	5	1	0	0	0	42	2	2	0	0
Resources	6	5	1	0	0	0	0	8	0	0	0	0
Law & Governance	2	1	0	0	0	0	0	0	0	0	0	0
Schools	2	1	1	0	0	0	0	2	0	0	0	0
Xentrall	11	11	0	0	0	0	0	1	1	1	0	0
Corporate	11	7	4	0	0	0	0	5	0	0	0	0
Contingency	7	1	2	0	0	0	0	0	0	0	0	0
SBC Only	6	0	0	0	0	0	0	1	0	0	0	0
Total	69	38	18	2	0	0	0	75	15	13	1	1

2018/2019

	No. of Audits	Opinions No. of Audits						No. of Recs	Previous Recommendations			
Department	Issued	Full	Sub	Mod	Lim	None	N/A	Made	Tested	Passed	Failed	N/A
Children's and Adult Services	17	3	8	1	0	0	5	24	6	1	3	2
Economic Growth & Neighbourhood												
Services	17	5	11	0	0	0	1	25	43	28	12	1
Resources	6	3	2	1	0	0	0	13	0	0	0	0
Law & Governance	4	2	1	0	0	0	1	5	7	2	1	1
Schools	1	1	0	0	0	0	0	0	0	0	0	0
Xentrall	16	13	2	0	0	0	1	3	1	1	0	0
Corporate	12	3	8	0	1	0	0	16	11	7	4	0
Contingency	8	1	0	0	0	0	1	0	0	0	0	0
SBC Only	2	0	0	0	0	0	0	0	0	0	0	0
TVCA Only	3	0	0	0	0	0	0	0	0	0	0	0
Total	86	31	32	2	1	0	9	86	68	39	20	4

4.5 A further analysis of new recommendations by category is shown below.

Category		Low	Medium	High	Critical
	Current	3	21	0	0
1. Financial Management	Previous	0	1	0	0
	Current	0	0	0	0
2. Information Communication Technology	Previous	1	0	1	0
	Current	6	10	2	0
3. Information Governance / Assurance	Previous	0	4	0	0
	Current	1	1	0	0
4. Procurement	Previous	1	3	1	0
	Current	0	0	1	0
5. Health & Safety	Previous	0	4	0	0
	Current	0	1	0	0
6. Risk Management	Previous	0	0	0	0
	Current	2	5	0	0
7. Asset Management	Previous	1	2	0	0
	Current	4	5	0	0
8. Business Continuity / Disaster Recovery	Previous	0	4	0	0
	Current	0	4	0	0
9. Competencies / Workforce Planning	Previous	0	0	0	0
	Current	1	3	1	0
10. Fraud Management	Previous	0	1	0	0
	Current	0	2	1	0
11. Legislative / Constitutional Compliance	Previous	1	1	2	0
	Current	0	0	0	0
12. Ethical Compliance	Previous	0	0	0	0
13. Performance Management / Service	Current	5	4	0	0
Improvement	Previous	1	0	0	0
	Current	0	0	0	0
14. Partnership / Relationship Governance	Previous	0	0	0	0
	Current	0	0	0	0
15. Authorisation	Previous	0	1	0	0
	Current	0	0	0	0
16. Segregation	Previous	0	0	0	0
	Current	1	0	0	0
17. VAT	Previous	1	1	0	0
	Current	0	0	0	0
18. Safeguarding	Previous	0	0	0	0

4.6 Shown below is a list of all the audit engagements undertaken during the year together with their assurance opinion.

2019/20 Audit Plan

		Name Absence Management Cancelled Active Directory Complete Building Control Cloud Computing Complete Asset Register/Asset Management Cancelled Child Placement - Adoption Creditors Creditors Client Financial Services Complete Co		Reco	mmen	idatio	ons	
	Audit							
Department	ID	Name	Status	Assurance	L	M	Н	С
Corporate	2606	Absence Management	Cancelled					
Xentrall	2607	Active Directory	Complete	Full Assurance	0	0	0	0
Economic Growth & Neighbourhood Services	2610	Building Control	Cancelled					
Xentrall	2611	Cloud Computing	Complete	Full Assurance	0	0	0	0
Economic Growth & Neighbourhood Services	2612	Asset Register/Asset Management	Cancelled					
				Substantial				
Children's and Adult Services	2615	Child Placement - Adoption	Complete	Assurance	0	0	0	0
Xentrall	2617	Creditors	Complete	Full Assurance	0	0	0	0
Resources	2620	Client Financial Services	Complete	Full Assurance	1	3	0	0
Law & Governance	2621	Complaints Review	Complete		0	0	0	0
				Moderate				
Children's and Adult Services	2622	, ,			0	0	1	0
Xentrall	2623	Change Control	Complete	Full Assurance	0	0	0	0
Economic Growth & Neighbourhood Services	2632	Housing Benefits	Complete	Full Assurance	0	0	0	0
Xentrall	2634	Debtors	Complete	Full Assurance	0	0	0	0
Law & Governance	2642	Land Charges	Cancelled					
Children's and Adult Services	2646	Leaving Care	Complete	Full Assurance	0	0	0	0
Children's and Adult Services	2648	First Contact	Cancelled					
				Substantial				
Corporate	2653	DBS Procedures	Complete	Assurance	0	1	0	0
Economic Growth & Neighbourhood Services	2654	Development Services	Cancelled					
Children's and Adult Services	2656	Early Years & Complex Needs	Not Started					
Xentrall	2657	Virtualisation	Complete	Full Assurance	0	0	0	0
Children's and Adult Services	2658	Emergency Duty Team	Cancelled					

				Substantial				
Children's and Adult Services	2659	Looked After Children	Complete	Assurance	0	0	2	0
Corporate	2660	Officer Payments - Mileage	Complete	Full Assurance	0	0	0	0
Resources	2664	Treasury Management	Complete	Full Assurance	4	0	0	0
Resources	2665	VAT	Complete	Full Assurance	0	0	0	0
Economic Growth & Neighbourhood Services	2666	Taxation	Complete	Full Assurance	0	0	0	0
Corporate	2667	Recruitment Services	Complete	Full Assurance	0	0	0	0
Xentrall	2668	Server Operating Systems	Complete	Full Assurance	0	0	0	0
		Personal Budgets & Direct		Substantial				
Resources	2670	Payments	Complete	Assurance	0	0	0	0
Xentrall	2672	Firewalls	Complete	Full Assurance	0	0	0	0
Children's and Adult Services	2673	Referral & Assessment - Adults	Not Started					
Xentrall	2674	Payroll & Absence Recording	Complete	Full Assurance	0	1	0	0
Economic Growth & Neighbourhood Services	2676	Environmental Health	Complete	Full Assurance	0	0	0	0
Economic Growth & Neighbourhood Services	2677	Enforcement	Complete	Full Assurance	0	0	0	0
				Substantial				
Children's and Adult Services	2679	Youth Offending and Prevention	Complete	Assurance	0	1	0	0
		Early Years, Children's Centres &		Substantial				
Children's and Adult Services	2680	Childcare	Complete	Assurance	0	5	0	0
		Declaration of Interests/Gifts &			_	_	_	
Corporate	2700	Hospitality	Complete	Full Assurance	0	0	0	0
Children's and Adult Services	2701	Adult Education	Complete	Full Assurance	1	2	0	0
Xentrall	2702	Bank Reconciliation	Complete	Full Assurance	0	0	0	0
	.=			Substantial		•		
< None >	2703	Catering & Cleaning	Complete	Assurance	0	2	0	0
Children's and Adult Services	2704	Residential Childrens Homes	Complete	Full Assurance	0	0	0	0
Corporate	2705	Data Protection	Complete	Full Assurance	0	0	0	0
		Day Centres, Residential &		Substantial	_	_		
Children's and Adult Services	2706	Supported Living	Complete	Assurance	0	3	1	0
Faculty of County Of Naighbours and County	2707	Footbasses Sports Commission	Campulata	Moderate		0		
Economic Growth & Neighbourhood Services	2707	Eastbourne Sports Complex	Complete	Assurance	2	8	0	0
Children's and Adult Services	2708	Education Improvement Service	In Progress	F. II. A				_
Resources	2709	Employee Benefits	Complete	Full Assurance	0	0	0	0
Resources	2710	Employee Therapy Services	Complete	Full Assurance	0	0	0	0

Children's and Adult Services	2711	Fuel Poverty Reduction	In Progress					
		Highways Maintenance						
Economic Growth & Neighbourhood Services	2712	Management	Complete	Full Assurance	0	0	0	0
				Substantial				
Economic Growth & Neighbourhood Services	2713	Horticultural Services & Allotments	Complete	Assurance	2	4	1	0
				Substantial				
Economic Growth & Neighbourhood Services	2714	Housing Building Maintenance	Complete	Assurance	4	4	0	0
				Substantial				
Economic Growth & Neighbourhood Services	2715	Housing Management	Complete	Assurance	1	4	0	0
Economic Growth & Neighbourhood Services	2716	Housing Rents	Complete	Full Assurance	1	1	0	0
				Substantial				
Economic Growth & Neighbourhood Services	2717	Licensing	Complete	Assurance	1	4	0	0
				Substantial				
Corporate	2718	Information Management	Complete	Assurance	0	0	0	0
Law & Governance	2719	Mayor's Charity Fund	Complete	0	0	0	0	0
		Performance Management		Substantial				
Corporate	2720	Framework	Complete	Assurance	0	0	0	0
Corporate	2721	Anti-Fraud Management	Complete	Full Assurance	0	0	0	0
		Business Continuity & Emergency		Substantial				
Corporate	2722	Planning	Complete	Assurance	2	2	0	0
Corporate	2723	Council Plans	Complete	Full Assurance	0	0	0	0
Corporate	2724	Financial Management	Complete	Full Assurance	0	0	0	0
		Registration & Bereavement						
Economic Growth & Neighbourhood Services	2725	Services	Complete	Full Assurance	1	1	0	0
			Under					
Children's and Adult Services	2726	Safeguarding Children	Review					Ш
Corporate	2727	Scheme of Delegation	Cancelled					
Xentrall	2728	Software Controls	Complete	Full Assurance	0	0	0	0
SBC Only	2729	Stockton Collections	Complete	0	0	0	0	0
SBC Only	2730	Tees Valley Music Service	Complete	0	0	1	0	0
Economic Growth & Neighbourhood Services	2731	Traffic Management & Road Safety	Complete	Full Assurance	0	1	0	0
Children's and Adult Services	2732	Troubled Families Initiative	Complete	Full Assurance	0	0	0	0
Contingency	2733	Advice and Guidance	Complete	0	0	0	0	0
Contingency	2734	Audit Liaison and Planning	Complete	0	0	0	0	0
Contingency	2736	Continuous Monitoring	Complete	0	0	0	0	0

Contingency	2737	Grants Contingency 2019	Complete	Full Assurance	0	0	0	0
SBC Only	2738	SBC Schools - IR35 Self Assessment	Complete	0	0	0	0	0
				Substantial				
Schools	2739	DBC Schools - IR35 Self Assessment	Complete	Assurance	0	0	0	0
< None >	2740	Schools - High Clarence Primary	Complete	0	0	0	0	0
SBC Only	2741	Globe Project Assurance	Complete	0	0	0	0	0
				Substantial				
Contingency	2742	Risk Management	Complete	Assurance	0	0	0	0
		Procurement/Contract		Substantial				
Contingency	2743	Management	Complete	Assurance	0	0	0	0
Contingency	2744	ICT Individual Systems	Complete	0	0	0	0	0
< None >	2745	Schools - Harrowgate Hill Primary	Complete	Full Assurance	1	1	0	0
SBC Only	2746	SBC Library Lost Property	Complete	0	0	0	0	0

Trend Analysis

