# Risk Summary

Where possible audit testing is linked directly to risks on the risk register, below is a summary of current assurance levels based on work completed to date.

ID	Risk	Assurance
C&A 1	Inability to contain placement costs for children looked after due to lack of sufficient in house placements	
C&A 10	The Deprivation of Liberty Safeguards Threshold changes significantly increases the amount of people deprived of their liberty resulting in potential for increased legal challenge	
C&A 14a	Failure to respond appropriately to safeguard vulnerable adults, in line with national legislation and safeguarding adults procedures	100%
C&A 14b	Failure to respond appropriately to safeguard vulnerable children, in line with national legislation and safeguarding children, thresholds and procedures.	
C&A 15	Working with other local commissioners to ensure their understanding of their responsibilities within the Childhood pathway.	
C&A 16	Risk of unsuccessful mobilisation of new service - Support, Recovery and Treatment In Darlington through Empowerment (STRIDE).	
C&A 17	Impact of NECA not retaining the Drug & Alcohol Contract on the Stop Smoking Service - Will the provider be able to manage the Stop Smoking staff if the Gate is no longer used by the Service.	
C&A 18	Impact of COVID-19 on team capacity.	
C&A 19	New Director of Public Health transition.	
C&A 3a	Inability to recruit and retain sufficient qualified suitably experienced social workers in Children's Services impacts on cost and quality of service	
C&A 3b	Inability to recruit and retain sufficient qualified suitably experienced social workers in Adult Services impacts on cost and quality of service	
C&A 5	Failure to identify vulnerable schools and broker appropriate support to address needs	
C&A 8a Adult	Increased demand for Adult Services impacts negatively on plans for budget efficiencies	
C&A 8b	Increased demand for Children's Services impacts negatively on budget	
C&A 9a	Market (Domiciliary Care Residential Care providers) failure following the Care Act/Living Wage	
C&A 9b	Market (Domiciliary Care Residential Care providers) for Vulnerable Families with Children (including SEND) experiences provider failure	
C1	Implementation of recommendations from the Capital Process Review is needed to improve effective capital project management	
C17	Brexit could result in changes to laws, regulations, government policy or funding when/if the UK leaves the EU which could impact on Darlington Borough Council's ability to achieve its objectives	
C18	COVID-19: 1. Health and safety of the Council workforce 2. Health and safety of the public of Darlington 3. The impact on the Economy of the Borough and its population 4. Financial impacts on the Council of increased costs and reduced income	
C3	Corporate Premises Risks	100%
C4	Business Continuity Plans not in place or tested for key critical services	97%

C5	Council unable to meet its obligations under the information governance agenda	92%
EG&NS 1	Investment in regeneration projects is not delivered	
EG&NS 12	Planning Performance at risk of Standards Authority intervention	
	Significant impacts arising from the reduction in available cash/resources to the	
EG&NS 13	local economy, Council's GF and HRA and businesses due to the impacts of increased levels of unemployment and Universal Credit payments	
	Regulatory risks associated with provision of services including Street Scene	
EG&NS 14	Environmental Services, Building Services (Gas, Legionella, etc.) and the Lifeline service	
EG&NS 16	Delay in delivering replacement cremators resulting in failure of existing equipment and therefore closure of the service	
EG&NS 17	Impact of COVID-19 on customers and audiences on confidence to return to leisure and cultural facilities	
EG&NS 18	Impacts arising from the ability to progress and complete schemes/projects in the event of further COVID- 19 lockdowns	
	Potential impact on public transport networks if commercial services do not	
EG&NS 19	recover or continue to receive support from Government and routes are withdrawn	
	Inability to cope with significant increase in homelessness cases due to new	
EG&NS 20	requirements by MHCLG to accommodation everyone irrespective of status in	
	order to limit spread of COVID-19 and also increased levels of homelessness due to increased relationship breakdowns and financial difficulties	
EG&NS 7	Financial implications of Maintaining and conserving key capital assets within the	
	borough	
EG&NS 8	Ability to adequately address the affordable housing requirement	
EG&NS 9	Delay to new Local Plan	50%
RE 1	VAT partial exemption breech due to exempt VAT being close to the 5% limit	
RE 2	Fraud in general	
RE 26	Joint Venture Arrangements impacted by a slow down in house building	
RE 3	ICT security arrangements inadequate	
RE 5	Increased sickness absence adversely affects service delivery	
RE 9	Instability within financial markets adversely impacts on finance costs and investments	100%

# Theme Summary

Audit testing is linked to a key governance theme, the results of work and overall assurance level against each theme is shown below.

National Color	Thoma	Assurance	Audit Findings (By Impact)								
1. Accuracy of Decision Making   98%   A	Theme	Assurance		VL	L	М	Н	VH			
2. Monitoring of Decisions    100%     100%			R	0	0	0	0	0			
2. Monitoring of Decisions  100%	1. Accuracy of Decision Making	98%		0	0	3	0	1			
2. Monitoring of Decisions   100%   A   0   1   0   1   0   0   0   0   0   0			G	0	3	9					
G				0	1		0				
3. Information Governance    100%     A	2. Monitoring of Decisions	100%									
3. Information Governance   100%   A											
4. Finance											
A. Finance      100%   A	3. Information Governance	100%									
4. Finance       100%       A       0       0       0       0       0         G       1       2       5       1       1         S. HR - Payments       100%       A       0       0       0       0       0         S. HR - Health & Safety       100%       A       0        0 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>											
S. HR - Payments											
R	4. Finance	100%									
5. HR - Payments       100%       A       0       0       0       0       0         6. HR - Health & Safety       100%       A       0       0       0       0       0         6. HR - Health & Safety       100%       A       0       0       0       0       0         7. HR - Management       100%       A       0       0       0       0       0       0         7. HR - Management       100%       A       0											
G 0 0 0 1 1 1 0 0 6. HR - Health & Safety 100% A 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1000/									
8. Recruitment  100%  R 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5. HR - Payments	100%									
6. HR - Health & Safety    100%   A											
Color   Colo	S 110 11 11 0 S 5 1	100%									
7. HR - Management  100% A 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6. HR - Health & Safety										
7. HR - Management  100%  A 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
Solution   Color   C	7 110 Management										
8. Recruitment  75% A 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7. HK - Management										
8. Recruitment  75%											
G 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	9 Pagruitment	750/									
R	o. Neci ultillerit	73/0									
9. HR - Training/Qualifications/Clearances  85%  A  0  0  3  0  0  10. Accuracy of Payments  100%  A  0  0  0  0  0  0  0  0  0  0  10. Accuracy of Payments  100%  A  0  0  0  0  0  0  0  11. Income - Charging  83%  A  0  10  0  11. Income - Payments  100%  R  100  11. Income - Payments  100%  11. Income - Payments  100%  12. Income - Payments  100%  1											
G 0 6 4 1 0  R 0 0 0 0 0  10. Accuracy of Payments 100% A 0 0 0 0 0  G 3 3 3 3 0 0  R 0 0 0 0 0 0  11. Income - Charging 83% A 0 1 0 0 0  R 0 0 4 0 1 0  R 0 0 0 0 0  12. Income - Payments 70% A 0 1 0 0 0  R 0 0 4 0 1 0  R 0 0 0 0 0  13. Cash Handling A 0 0 0 0 0 0	9 HR - Training/Qualifications/Clearances	85%									
R	5. The Training, Qualifications, cicarances	0370									
10. Accuracy of Payments  100%  A  0  0  0  0  0  0  11. Income - Charging  83%  A  0  100%  R  0  0  0  0  0  0  0  11. Income - Charging  83%  A  0  1  0  0  0  0  0  0  1  1  1  1  1					_		_	-			
G 3 3 3 0 0 0  R 0 0 0 0 0 0  11. Income - Charging 83% A 0 1 0 0 0  G 0 4 0 1 0  R 0 0 0 0 0  12. Income - Payments 70% A 0 1 0 0 0  G 0 4 0 1 0  R 0 0 0 0 0  13. Cash Handling A 0 0 0 0 0 0	10. Accuracy of Payments	100%									
R 0 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1		20075									
11. Income - Charging											
G 0 4 0 1 0 R 0 0 0 0 0 1 1 0 1 1 1 1 0 1 1 1 1	11. Income - Charging	83%									
12. Income - Payments  70%  R  0  0  0  0  0  0  0  0  1  10  0  0  0											
12. Income - Payments  70%  A  0  1  0  0  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  1  0  0											
G 0 4 0 1 0 R 0 0 0 0 0 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 0 A 1 1 1 1	12. Income - Payments	70%									
13. Cash Handling A 0 0 0 0 0			G	0	4	0	1	0			
			R	0	0	0	0	0			
G 0 0 0 0	13. Cash Handling		А	0	0	0	0	0			
			G	0	0	0	0	0			

		R	0	0	0	0	0
14. Procurement/Sourcing	78%	Α	0	1	1	1	0
		G	0	4	1	0	1
		R	0	0	0	0	0
15. Physical Assets/Locations	91%	Α	0	1	0	0	0
		G	0	5	6	3	1
		R	0	0	0	0	0
16. Fraud		Α	0	0	0	0	0
		G	0	0	0	0	0
		R	0	0	0	0	0
17. Business Continuity	100%	Α	0	1	0	0	0
		G	0	2	3	3	0
	100%	R	0	0	0	0	0
18. Procedures		Α	0	0	0	0	0
		G	0	5	3	1	0
		R	0	0	0	0	0
19. Performance Management	100%	Α	0	0	1	0	0
		G	0	0	0	3	1
		R	0	0	0	0	0
20. ICT Infrastructure	91%	Α	0	0	0	0	0
		G	1	4	5	3	0
21 Handling of Paguests / Incident		R	0	0	0	0	0
21. Handling of Requests/Incident Response	100%	А	0	0	0	0	0
Пезропае		G	0	1	0	0	0

### Detailed Analysis by Service

This section of the report will present detail of work undertaken and work planned by Service area.

No

8

Time

7

No

6

							VL	L	М	Н	VH					
						R	0	0	0	0	0					
		Fina	Finance		Finance			Α	0	0	0	0	0			
					G	0	3	1	2	0						
Results of A	Results of Audit Testing for the period:			Octobe	October 2020		Decem	ber 2020		Control	s Tested:		2			
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High		
0	1	0	1	0	0	0	0	0	0	0	0	0	0	0		
Planned Wo	lanned Work January 2021 to I			March	2021											
Very I	ery Low Low Me		Med	edium		gh	Very High			0.4	oitoring					

Time

6.5

No

2

Time

1.5

Monitoring

0

Below is a full list of controls to be examnied in the next period.

Time

1.25

No

3

Time

2

No

1

	Frequency
Clear budget process and timetable is in place which could be followed by team members as and when required.	3
Focussed financial support to commercial ventures	3
Maintain formula and support for funding schools and high needs	6
Prepare statement of accounts	6
Participate in appropriate safeguarding processes and provider serious concern protocol	6
Appropriate financial monitoring is in place in respect of the Better Care Fund.	6
Timely and accurate financial assessments are undertaken for service users wishing to take up a service.	6
Appropriate arrangements are in place to continue managing clients finances in the event of disruption.	6
Deliver the efficiency programme in place with identified lead responsibilities	12
Treasury Management Strategy and its implementation meets the Prudential Code and Treasury Management Code of Practice.	12
Financial appraisal completed as part of business case/options appraisal	12

Undertake forward planning and projections of external factors in respect of income and expenditure and feed into MTFP.	12
Delivery of an effective Internal Audit Service in compliance with Accounts & Audit Regulations.	12
Prepare and submit financial returns by deadlines - RA/RO/Capital	12
Plans are in place to continue to deliver housing/council tax support during an emergency.	12
Income Recompense Scheme is appropriately reported and claimed.	12
Feedback on cases of identified fraud are acted upon appropriately.	24
Council Tax support/housing benefit overpayments are managed effectively.	24
Adequate procedures exist to deliver Council Tax/Benefits/Business Rate services.	24
Operate clear and robust insurance claim management and processing uninsured loss recovery.	48

		VL	L	M	Н	VH
	R	0	0	0	0	0
HR	А	0	0	0	0	0
	G	1	6	2	0	0

Results of	Results of Audit Testing for the period:			Octobe	r 2020	ιο	December 2020			Controls rested:			T	
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Planned W	Vork	Januar	y 2021	to	March	2021								

Planned W	VOLK	Januai	y 2021	ιο	iviarci	1 2021			
Very	/ Low	Lo	ow	Med	dium	Hi	gh	Very	High
No	Time	No	Time	No	Time	No	Time	No	Time
0	0	1	0.25	3	2.5	1	0.25	0	0

	Frequency
Posts requiring a DBS check are identified and requirements are in line with legislation.	6
Corporate initiatives are in place to help prevent sickness absence.	12
Procurement of contracts in place for provision of employee therapy is undertaken in line with contract procedure rules and appropriate monitoring undertaken.	12
There is a system of performance management in place to establish the effectiveness of HR policies, procedures and initiatives.	12
Employee hard copy files are adequately safeguarded.	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Health & Safety	А	0	0	0	0	0
	G	0	0	0	0	0

Results of	Audit Testi	esting for the period:		October 2020		to	December 2020			Control	s Tested:		0	
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Planned W	ork/	January	/ 2021	to	March 2021									
Very	Low	Lo	w	Med	dium	Hi	gh	Very	Very High		Monitoring			
No	Time	No	Time	No	Time	No	Time	No	Time		IVIOI	iitoriiig		
0	0	1	1	1	1	0	0	0	0			0		

Below is a full list of controls to be examnied in the next period.

Appropriate checks have been undertaken prior to placing someone on the Employee Protection Register. 12
Undertake health & safety investigations 24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Strategy, Performance & Communications	Α	0	1	0	0	0
	G	2	3	1	0	0

Results of Audit Testing for the period: October 2020 to December 2020 Controls Tested: 0

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Pla	nned W	/ork	Januar	y 2021	to	March	า 2021			
Very Low		Low		Med	dium	Hi	gh	Very High		
	No	Time	No	Time	No	Time	No	Time	No	Time

Monitoring

|--|

Below is a full list of controls to be examnied in the next period.

	Frequency
An approved Council Plan is in place which sets out the priorities of the council.	3
Website and Intranet content is relevant and up to date.	6
Communication activities are aligned with corporate priorities and are delivered consistently and effectively.	12

		VL	L	M	Н	VH
	R	0	0	0	0	0
Children's Services	А	0	0	1	2	0
	G	0	0	2	4	1

Results of Audit Testing for the period:					Octobe	r 2020	to	December 2020		Controls Tested:				7
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	1	2	1	0	0	1	2	0	0	0	0	0	0

Planned W	/ork	Januar	y 2021	to	March	า 2021			
Very	Low	Lo	w	Med	lium	Hi	gh	Very	High
No	Time	No	Time	No	Time	No	Time	No	Time
0	0	1	0.25	7	12.75	4	4.75	7	6.25

Frequency
3
3
3
3
3
3
3
6
6

Management and oversight of youth offending cases improve outcomes for young people involved in criminal justice system or at risk of becoming involved.	6
Breakdowns/transition arrangements and appeals are handled effectively.	6
Arrangements are in place to manage the breakdown of a placement	12
Health & safety of children's placements is monitored	12
Suitability of emergency unsupported placements.	12
Up to date and accessible procedures available to support the management of children's case files.	12
Pathway plans support care leavers in managing the transition from school to higher education, training or employment.	12
Training, support and development is in place for foster carers/special guardians.	12
Effective recruitment and retention of foster carers, including ongoing campaigns promoting the role.	12
Procedures ensure that staff are aware of the process for making a referral to children's social care.	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Adults	А	0	0	2	1	1
	G	0	1	2	6	2

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	1	3	1	0	0	1	1	0	0	0	0	0	0

to

December 2020

Controls Tested:

8

Planned W	ork/	Januar	y 2021	to	March	n 2021				
Very	Low	Lo	ow	Med	lium	Hi	gh	Very	High	Monitoring
No	Time	No	Time	No	Time	No	Time	No	Time	Monitoring
0	0	1	1	6	7.75	4	3.5	7	8.5	0

Below is a full list of controls to be examnled in the next period.

	Frequency
Adult Services have a service strategy in place and delivery is being monitored.	3
An up to date strategic plan is in place for the Safeguarding Adults Board.	3
Adult Social Care cases are allocated appropriately considering caseloads and qualification requirements.	3
An appropriate ICT system(s) is in place to manage and safeguard adult social care information held.	3

Where the Authority has Deputyship/Appointeeship, appropriate authorisation/legal documentation is in place  There is a system of performance management in place for adult social care.  Referral and Assessment Procedures (Adults) are comprehensive and up to date.  Adult Social Care case files are updated accurately and in a timely manner.  6 Accurate charges for contributions to care costs are made to service users.  All care packages are receiving appropriate approval, and include all relevant information.  6 Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12 Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12 Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  13 Advice, access to support and refuge accommodation for victims of domestic abuse.		
There is a system of performance management in place for adult social care.  Referral and Assessment Procedures (Adults) are comprehensive and up to date.  Adult Social Care case files are updated accurately and in a timely manner.  6  Accurate charges for contributions to care costs are made to service users.  All care packages are receiving appropriate approval, and include all relevant information.  Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12  Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12  Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Appropriate service provision has been identified to meet an Adult Social Care users individual needs, which is accurately charged for as required.	3
Referral and Assessment Procedures (Adults) are comprehensive and up to date.  Adult Social Care case files are updated accurately and in a timely manner.  Accurate charges for contributions to care costs are made to service users.  All care packages are receiving appropriate approval, and include all relevant information.  Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12  Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12  Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Where the Authority has Deputyship/Appointeeship, appropriate authorisation/legal documentation is in place	3
Adult Social Care case files are updated accurately and in a timely manner.  Accurate charges for contributions to care costs are made to service users.  All care packages are receiving appropriate approval, and include all relevant information.  Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12  Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12  Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	There is a system of performance management in place for adult social care.	3
Accurate charges for contributions to care costs are made to service users.  All care packages are receiving appropriate approval, and include all relevant information.  6  Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12  Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12  Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Referral and Assessment Procedures (Adults) are comprehensive and up to date.	6
All care packages are receiving appropriate approval, and include all relevant information.  Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Adult Social Care case files are updated accurately and in a timely manner.	6
Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.  12 Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12 Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Accurate charges for contributions to care costs are made to service users.	6
Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts  12 Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	All care packages are receiving appropriate approval, and include all relevant information.	6
Crisis and emergency/settlement support  Advice, access to support and refuge accommodation for victims of domestic abuse.  12	Procedures for managing referrals (Children's) and undertaking initial assessments are comprehensive and up to date.	12
Advice, access to support and refuge accommodation for victims of domestic abuse. 12	Update and report the risk diagnostic tool (RAG) to assist in risk management in all adults, public health and children's contracts	12
	Crisis and emergency/settlement support	12
Appropriate and timely response to a homelessness Duty to Refer request.	Advice, access to support and refuge accommodation for victims of domestic abuse.	12
	Appropriate and timely response to a homelessness Duty to Refer request.	12
Provide effective short-term support to individuals following a discharge from hospital or to prevent hospital admission. 12	Provide effective short-term support to individuals following a discharge from hospital or to prevent hospital admission.	12
Specialist housing facilities meet demand, provide good quality accommodation and meet the needs of vulnerable residents.	Specialist housing facilities meet demand, provide good quality accommodation and meet the needs of vulnerable residents.	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Education	А	0	0	1	0	0
	G	0	7	3	1	1

Results of Au	dit Testi	ng for the pe	eriod:		Octobe	r 2020	to	Decem	ber 2020		Control	s Tested:		3
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	1	2	0	0	0	0	0	0	0	0	0	0	0	0

Planned W	/ork	Januar	y 2021	to	March	2021			
Very	Low	Lo	w	Med	lium	Hi	gh	Very	High
No	Time	No	Time	No	Time	No	Time	No	Time
0	0	1	1	6	10.5	3	5.5	1	2.25

Monitoring

Education, Health & Care Plans are completed appropriately and in a timely fashion	3
Sufficient school places are available to meet demand.	3
Attainment in schools is appropriately monitored.	6
Education, Health & Care Plans are appropriately monitored	6
School investment plan in place to ensure appropriate number and quality of places available.	6
A robust training and support regime is in place for new teachers	12
School places have been appropriately allocated.	12
Agreements for early years provision are in place and being complied with and monitoring visits are being undertaken.	12
Allocation of school budgets in line with funding formula.	12
Safeguarding training in schools is up to date and a safeguarding lead is in place.	12
Address patterns of absence and promote regular attendance at school.	12
Payments made to early years providers are accurate	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Public Health	А	0	0	0	0	0
	G	0	0	0	0	0

Results of A	Audit Testi	ng for the p	eriod:		Octobe	er 2020	to	Decem	ber 2020		Control	s Tested:		0
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Planned W	ork	Januar	y 2021	to	March	2021								

Р	anned w	ork	Januar	y 2021	το	Marci	1 2021			
	Very	Low	Lo	)W	Med	lium	Hi	gh	Very	High
	No	Time	No	Time	No	Time	No	Time	No	Time
	0	0	0	0	0	0	5	7.25	0	0

	Frequency
Non-financial targets as set out in the Better Care Fund plan are being met.	6
Formal signed agreements in place between LA/CCG in accordance with relevant guidance	6

The council has a strategy in place to deliver public health services to the community.	6
Effective commissioning and procurement of public health services and programmes.	6
Public health research and local needs assessment.	6

		VL	L	M	Н	VH
	R	0	0	0	0	0
Legal	Α	0	1	0	0	0
	G	1	1	3	0	0

1	ery Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0

to

December 2020

Controls Tested:

Planned W	/ork	Januar	y 2021	to	iviarci	1 2021				
Very	Low	Lo	ow	Med	lium	Hi	gh	Very	High	Monitoring
No	Time	No	Time	No	Time	No	Time	No	Time	Widilitating
0	0	1	0.5	2	3.5	0	0	0	0	0

Below is a full list of controls to be examnled in the next period.

	Frequency
Delivery of tender management plan	12
The Council maintains an accurate and up to date land charges register.	12
Accurate charging is made in accordance with approved scale of land charges and fees.	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Democratic Services & Registrars	A	0	0	0	0	0
	G	0	5	1	0	0

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Planned Work		Work January 2021 to		to	March	2021								
Very Low		Low Me		Med	lium	ium Hig		Very	High		Mai	nitoring		
No	Time	No	Time	No	Time	No	Time	No	Time		Monitoring			
0	0	1	1	0	0	0	0	0	0			0		

Below is a full list of controls to be examnied in the next period.

Sufficient and trained staff are available to support Elections held.

Frequency 24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Information Governance	Α	0	0	2	0	0
	G	0	1	2	0	1

Results of Audit Testing for the period: October 2020 to December 2020 Controls Tested: 3

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	1	0	1	0	0	1	0	0	0	0	0	0	0

Planned W	/ork	Januar	y 2021	to	Marcl	h 2021				
Very Low		Lo	w	Med	dium	Hi	gh	Very	High	Monitoring
No	Time	No	Time	No	Time	No	Time	No	Time	Monitoring
0	0	1	0.25	3	5	0	0	1	0.25	0

	Frequency
Update and report the strategic corporate risk register.	3
Requests for information are handled in line with requirements of the Freedom of Information Act.	12
Prepare annual governance statement	12
A central record of Information Asset Registers is maintained and checked for completeness.	12
Corporate privacy notices in place.	24

		VL	L	M	Н	VH
	R	0	0	0	0	0
Xentrall	А	0	1	0	0	0
	G	1	15	19	9	1

						J	_	13	13	9	_			
Results of A	Results of Audit Testing for the period:					er 2020	to	Deceml	ber 2020		Control	s Tested:		13
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	1	7	4	0	0	0	0	0	0	0	0	0	0	0
Planned W	ork	January 2021 to			March	2021								
Very	Low	Lo	Low Med		dium Hi		gh	Very High			Mor	nitoring		
No	Time	No	Time	No	Time	No	Time	No	Time		IVIOI	iitoiiiig		
1	0.5	12	16.5	8	15.5	2	3.5	0	0			0		

	Frequency
Appropriate formal documented ICT project management standards/policies have been established.	6
Appropriate periodic IT Health checks (or other equivalent exercises) are undertaken in order to identify and categorise significant security issues/vulnerabilities. Work is then undertaken to remediate these issues/vulnerabilities where appropriate.	6
ICT equipment located in computer facilities is adequately and appropriately protected from significant environmental threats.	12
Where applicable, appropriate internal disaster recovery arrangements (including backup, replication and snapshot facilities) are in place to cover significant ICT system/servers.	12
Network infrastructure/equipment is appropriately managed and protected.	12
Adequate and appropriate arrangements are in place in respect of business continuity and disaster recovery for the network infrastructure (including backup arrangements and arrangements to ensure network resilience).	12
HMRC reporting requirements are being complied with.	12
Information held in systems relating to HR are accurate and up to date.	12
The authority complies with HMRC CIS scheme.	12
Pension deductions are taken each month from employee's pay at the appropriate rate.	12
Remote access to facilities is adequately controlled.	24

Significant changes to the virtualised infrastructure are adequately managed. Allocation of resources in the virtualised environment is adequately and appropriately controlled.	24
The organisation's establishment is authorised by the managing body.	24
All variable payments other than overtime (control covered elsewhere) are supported by appropriate paperwork and details are promptly and accurately entered onto the system.	24
All fixed salary payments comply with policies and are supported by appropriate paperwork and details are promptly and accurately entered into the system.	24
Financial information is updated in a timely manner and recorded accurately within Business World On!	24
Standard exception reports are produced for subsequent investigation and clearance.	24
Secure procedures operate for immediate payments.	24
A record is kept of all accounts which are not dispatched at the time the accounts are raised. This record indicates why this action was taken, and where appropriate, records the agreement of the budget holder.	24
Amendments and credits can only occur with the authorisation of the responsible officer for the cost centre whose account was originally credited in error.	24
There are clearly defined guidelines and procedures for the recruitment process.	24
The appointment process is fair, robust and managed effectively.	24
Approved absence has been granted in-line with policy and promptly recorded and correctly authorised.	48

		VL	L	М	Н	VH
	R	0	0	0	0	0
Housing & Building Services	А	0	0	1	0	0
	G	0	1	3	1	0

Results of A	Audit Testi	ng for the p	eriod:		October 2020		to	Deceml	December 2020		Controls Tested:			4
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	1	1	0	0	0	0	0	0 0		0	0	0	0
Planned W	ork	January	January 2021 to		March 2021									
Very Low		Low		Med	lium	Hi	High		Very High		Manitarina			
No	Time	No	Time	No	Time	No	Time	No	Time		Monitoring			

Below is a full list of controls to be examnied in the next period.

3.75

0.5

	Frequency
Process council tax support claims	3
Process housing benefit claims	3
Early help and support provided by welfare support service	6
Accurate and timely returns are provided to support New Homes Bonus.	6
Prioritised support and provision to tackle fuel poverty and deliver the Affordable Warmth Strategy.	12
The authority has an adequate, appropriate and up to date Empty Homes Strategy in place.	24
The Travellers Site is secure and maintained effectively	24
Records relating to housing and housing related developments are accurate, up to date and appropriately safeguarded.	24
Decisions to write-off outstanding council tax and NNDR debts are appropriate and have been appropriately approved.	24
Decisions to write-off outstanding housing debts is appropriate and all steps taken to recover the amount.	24

		VL	L	M	Н	VH
	R	0	1	0	0	0
Community Services	А	0	3	0	0	0
	G	0	10	10	1	0

Ve	ry Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
	0	2	4	0	0	0	0	0	0	0	0	0	0	0	0

to

December 2020

Controls Tested:

Planned W	ed Work January 2021 to March 2021											
Very	Low	Lo	)W	Med	dium	Hi	gh	Very	High	Monitoring		
No	Time	No	Time	No	Time	No	Time	No	Time	Worldoning		
2	1.5	11	5.75	9	6.75	2	1.5	0	0	0		

Below is a full list of controls to be examnled in the next period.

	Frequency
Planning and provision of school meals promotes healthy, nutritious eating in compliance with the School Food Standards.	6
Free school meals are provided to eligible pupils.	6
Arrangements are in place for inspection and maintenance of security and surveillance equipment.	12
Civic enforcement decisions are consistent, fair, proportionate and necessary; in line with legislation.	12

Community engagement and communication to highlight and reduce environmental crime.	12
Sensitive personal information in relation to Telecare clients is managed in line with GDPR.	12
Venues for events are appropriate.	12
Library stock is adequately recorded, managed and its condition is 'fit for purpose'.	12
Adequate performance information is maintained and is appropriately utilised within the Highways Department.	12
Trading standards investigations are recorded accurately either as a result of a programmed inspection or in response to a complaint and the results circulated as necessary including general guidance as necessary.	12
Appropriate and up to date emergency plans are in place to guide a coordinated response to a major incident.	12
Public Rights of Way Improvement Plan is in place and progress is being monitored.	24
Ticket sales and admission charges are recorded and income received in full.	24
Library income is securely held and effectively managed.	24
Response to requests for the removal of needles and syringes within two hours.	24
Effective performance management systems are in place to monitor levels of take up of leisure and culture activities with remedial action taken as necessary.	24
Provide a broad selection of accessible leisure and outdoor activities, representing value for money to the public.	24
Safeguarding of assets and equipment used in the delivery of arts and events.	24
Waste and recycling targets are achieved.	24
Parks and green spaces are identified, mapped and promoted.	24
Security and crime prevention measures are in place in relation to parks and green spaces.	24
Provision and upkeep of outdoor public seating and street furniture.	24
Prompt removal of graffiti from public land and street furniture.	48
Prompt and effective response to reports of stray or abandoned animals.	48

		VL	L	M	Н	VH
	R	0	0	0	0	0
Economic Growth	A	0	0	2	0	0
	G	0	1	1	2	0

Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High
0	0	1	0	0	0	0	0	0	0	0	0	0	0	0

to

December 2020

Controls Tested:

1

Very Low		Lo	w	Med	dium	Hi	gh	Very High		
	No	Time	No	Time	No	Time	No	Time	No	Time
	0	0	3	1.5	6	4.75	3	2.5	0	0

Monitoring 0

Below is a full list of controls to be examnled in the next period.

	Frequency
Food & Hygiene premises rating system is updated regularly and published	6
Breaches of planning control are investigated and enforcement action initiated as necessary.	6
Support is provided to new and existing businesses.	6
The authority is committed to reducing it's carbon footprint and supporting residents and businesses to reduce theirs.	12
Building control decisions are appropriately authorised and made in line with Building Regulations.	12
Section 106 agreements utilised effectively and obligations are complied with.	12
Strategic plans and framework are in place to tackle poverty.	12
Tackling town centre property vacancies.	12
Promotion of the borough and town centres as a great place to invest, trade and visit.	12
Records relating to environmental health cases are appropriately recorded and managed.	24
Provision of green spaces is a consideration for new housing developments, regeneration schemes etc.	24
Financial assistance to businesses decisions are accurately recorded.	24

		VL	L	М	Н	VH
	R	0	0	0	0	0
Transport & Capital Projects	А	0	0	1	0	0
	G	0	3	3	1	0

Results of Audit Testing for the period:		October 2020 to		to	December 2020			Controls Tested:		0				
Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High	Very Low	Low	Medium	High	Very High

Planned Work		Januar	y 2021	to	March 2021				
Very Low		Lo	W	Med	dium	High		Very	High
No	Time	No	Time	No	Time	No	Time	No	Time
0	0	5	4.25	11	7.25	4	3.5	0	0

Monitoring 0

	Frequency
Ensure accurate monitoring of capital programme and schemes	6
Vehicles used in the provision of community transport services are suitable and meet requirements for servicing and road worthiness.	6
	6
Client risk assessments are undertaken and appropriate arrangements are in place for provision of social care and education transport to clients.	O
Bridge Inspections are undertaken in accordance with an appropriate specified programme.	6
Appropriate business risk assessments are undertaken within the community transport service and measures are in place to ensure the health and safety of council employees.	12
Council employed drivers and passenger assistants hold the necessary clearances, licences, qualifications and training.	12
Contractors & Sub-Contractors involved in the provision of community transport hold necessary clearances, licences, qualifications and insurance.	12
Highway inspections are undertaken in accordance with an appropriate specified programme.	12
Street Lighting inspections and associated electrical testing are undertaken in accordance with an appropriate specified programme.	12
Car Parking Strategy in place which is up to date and considers resident, disabled and general parking requirements.	12
Road closures are undertaken following appropriate consultation and required notification are undertaken within appropriate timescales.	12
The highways network resilience to extreme events such as weather has been fully established and plans are in place to manage this.	12
The authority has an adequate, appropriate and up to date Highway Infrastructure Asset Management Strategy (HIAMS) in place.	12
Utility works are licensed, inspected and, where applicable, appropriate charges are issued and collected for overruns/fines.	12
Commitment to road safety and reducing road casualties.	12
Transport provision is in line with client eligibility criteria.	24
Procurement of transport routes, goods and services ensures compliance with value for money principles and contract procedure rules.	24
Payments made to community transport staff are appropriate, accurate and authorised.	24
The authority has undertaken appropriate consultation and produced an adequate, appropriate and up to date Local Transport Plan.	24
There is an effective appeals process for transport eligibility decisions.	24

# Quality, Assurance & Improvement Process

Period	Octob	per 2020	to	December 2020		
Stewardship (Cover	age)	Stakeholders				
Measure	Target	Performance	Measure	Target	Performance	
Adequate Resources	15	3.85	Reports Issued	Qtrly	Jan-21	
Portfolio Coverage	108	56	Fraud Strategy Review	31/03/2021	Oct-20	
Presentation of Annual Report (Annual)	June		Client Satisfaction	TBC		
Presentation of Activity Report	Qtrly	Jan-21	Submission of NFI Information	30/10/2020	30/10/2020	
			Recommendation Implementation	TBC		

Process		People				
Measure	Target	Performance	Measure	Target	Performance	
Self assessment against standards (Annual)	March		Productivity	75%	77.6%	
External Assessment (Every 5 Years)	31/03/2023	N/A	Training (Per Financial Year)	20	1.4	
Staff Meetings Held	7	10	Code of Conduct (Annual)	100%	100%	
Up to Date Audit Manual	31/03/2021	On-going	Appraisals (Annual)	100%	100%	