# AUDIT AND STANDARDS COMMITTEE

TUESDAY 9<sup>TH</sup> JULY 2013

AT 6.00PM IN COMMITTEE ROOM 3 THE COUNCIL HOUSE DUDLEY

If you (or anyone you know) is attending the meeting and requires assistance to access the venue and/or its facilities, could you please contact Democratic Services in advance and we will do our best to help you

JOSEF JABLONSKI ASSISTANT PRINCIPAL OFFICER (DEMOCRATIC SERVICES) Internal Ext – 5243 External – 01384 815243 Email: josef.jablonski@dudley.gov.uk You can view information about Dudley MBC on www.dudley.gov.uk



### **IMPORTANT NOTICE**

### **MEETINGS IN DUDLEY COUNCIL HOUSE**

Welcome to Dudley Council House

In the event of the alarm sounding, please leave the building by the nearest exit. There are Officers who will assist you in the event of this happening, please follow their instructions.

There is to be no smoking on the premises in line with national legislation. It is an offence to smoke in or on these premises.

Please turn off your mobile phones and mobile communication devices during the meeting.

Thank you for your co-operation.

### **Directorate of Corporate Resources**

**Law and Governance,** Council House, Priory Road, Dudley, West Midlands DY1 1HF Tel: (0300 555 2345) www.dudley.gov.uk



Your ref:

Our ref: JJ/jj Please ask for: Mr J Jablonski Telephone No. 01384 815243

27<sup>th</sup> June, 2013

Dear Member

### Audit and Standards Committee - Tuesday 9th July, 2013.

You are requested to attend a meeting of the Audit and Standards Committee to be held on Tuesday 9<sup>th</sup> July, 2013 at 6.00pm in Committee Room 3 at the Council House, Dudley to consider the business set out in the Agenda below.

The agenda and public reports are available on the Council's Website <u>www.dudley.gov.uk</u> and follow the links to Councillors in Dudley and Committee Management Information System.

Yours sincerely

**Director of Corporate Resources** 

### <u>A G E N D A</u>

1 APOLOGIES FOR ABSENCE

To receive apologies for absence from the meeting.

2. APPOINTMENT OF SUBSTITUE MEMBERS

To report the appointment of any substitute members serving for this meeting of the Committee.

3. DECLARATIONS OF INTEREST

To receive Declarations of Interest in accordance with the Members' Code of Conduct.



### 4. MINUTES

To approve as a correct record and sign the Minutes of the meeting of the Committee held on 25<sup>th</sup> April, 2013 (copy attached).

5. GRANT THORNTON – AUDIT OPINION PLAN 2012/13 (PAGES 1 - 21)

To consider a report of the Treasurer

6. INTERNAL AUDIT SERVICES ANNUAL PERFORMANCE AND REVIEW REPORT 2012/13 (PAGES 22 - 49)

To consider a report of the Treasurer

7. REVIEW OF CURRENT CORPORATE RISKS (PAGES 50 – 55)

To consider a report of the Treasurer

8. COMMITTEE WORK PLAN 2013/14 (PAGES 56 - 58)

To consider a joint report of the Treasurer and the Director of Corporate Resources

9. REAPPOINTMENT OF THE STANDARDS SUB-COMMITTEE (PAGES 59 – 60)

To consider a report of the Director of Corporate Resources

10. TO ANSWER QUESTIONS UNDER COUNCIL PROCEDURE RULE 11.8 (IF ANY)

### PRIVATE SESSION

In accordance with Paragraph 10 of Schedule 12A to the Local Government Act 1972, the Proper Officer has determined that there will be no advance disclosure of the following reports because the public interest in disclosing the information set out in the following items is outweighed by the public interest in maintaining the exemption from disclosure

### 11. RESOLUTION TO EXCLUDE THE PUBLIC

To consider the adoption of the following resolution:-

That the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A to the Local Government Act 1972 as indicated below:-

| <u>Agenda Item No</u>   | Description of Item   | <u>Relevant Paragraph(s)</u><br>of Part I of Schedule<br>12A |  |  |  |
|---|---|--|--|--|--|
| 12  | Annual Audit Report in relation to the Chief Executive's Directorate      | 2 and 7  |  |  |  |
| 13  | Annual Audit Report in relation to the Directorate of Corporate Resources | 2 and 7  |  |  |  |
| ANNUAL AUDIT REPORT IN RELATION TO THE CHIEF<br>EXECUTIVE'S DIRECTORATE (PAGES 61 – 70) |   |  |  |  |  |
| To consider a report of the Treasurer   |   |  |  |  |  |

13. ANNUAL AUDIT REPORT IN RELATION TO THE DIRECTORATE OF CORPORATE RESOURCES (PAGES 71 – 92)

To consider a report of the Treasurer

12.

To: All Members of the Audit and Standards Committee, namely:

| Arshad  | Cowell | Harris | Hill      | Mrs. P Martin |
|---------|--------|--------|-----------|---------------|
| Russell | Taylor | Tyler  | C. Wilson |               |

### AUDIT AND STANDARDS COMMITTEE

### <u>Thursday, 25<sup>th</sup> April, 2013 at 6.00 p.m.</u> in Committee Room 3, The Council House, Dudley

### PRESENT:-

Councillor Zada (Chair) Councillor Arshad (Vice-Chair) Councillors Branwood, Burston (From Minute No. 41), Cowell, Hill, Taylor, Tyler (From Minute No. 41) and Mrs. Westwood.

### **Officers**

Treasurer, Head of Audit Services, Head of Accountancy, Audit Manager, Principal Auditors and Mrs K Taylor (All Directorate of Corporate Resources).

#### Also in Attendance

Mr S Turner (Audit Manager) (Grant Thornton) Councillor S. Turner (Observer)

### 39 DECLARATIONS OF INTEREST

No Member made a declaration of interest, in accordance with the Members' Code of Conduct, in respect of any matter to be considered at this meeting.

### 40 <u>MINUTES</u>

During consideration of the minutes, reference was made to the preamble to minute 29, in particular, that Councillor Taylor had not received a response from the Director of Adult, Community and Housing Services in relation to the introduction of a policy for deceased clients balances.

#### RESOLVED

That the minutes of the meeting held on 14<sup>th</sup> February, 2013 be approved as a correct record and signed.

### 41 GRANT THORNTON AUDIT AND STANDARDS COMMITTEE UPDATE

A report of the Treasurer was submitted on a report published by Grant Thornton updating members on progress in delivering their responsibilities as Dudley's external auditors. Attached as Appendix A was a list of the questions that Grant Thornton believed Audit and ASC/22 Standards Committee members should consider and the management responses.

Mr Turner, Audit Manager, presented the report and appendix to the report submitted and commented in particular that the purpose of the report was to report progress and highlight emerging national issues.

Mr Turner further reported that the audit was on track, and that a report outlining the final results would be submitted to the September meeting of the Committee.

#### RESOLVED

That the information contained in the report, and Appendix to the report, submitted on an Audit and Standards Committee Update published by the Grant Thornton, be noted.

#### 42 <u>CONFIDENTIAL REPORTING POLICY</u>

A report of the Monitoring Officer was submitted on the monitoring of the operation of the Council's Confidential Reporting Policy.

The Treasurer in his presentation of the content of the report and Appendix 1 to the report submitted, which was a copy of the Policy, commented that there had been no incidents of use of the Policy by staff reported this year for any of the Directorates.

Arising from the presentation given Members asked a number of questions and made comments which were responded too, in particular in respect of the various avenues where employees could report any issues and the support available for those reporting serious allegations.

### RESOLVED

43

That the information contained in the report, and Appendix to the report, submitted on the outcome of the recent monitoring of the Confidential Reporting Policy, be noted.

### <u>UPDATE ON ANNUAL AUDIT REPORT – DIRECTORATE OF CHILDREN'S</u> <u>SERVICES</u>

A verbal update was given by the Head of Audit Services updating members in relation to the Annual Audit Report of the Directorate of Children's Services submitted to the previous meeting of the Committee.

Arising from the presentation given, the Head of Audit Services informed the Committee that he had received assurances from the Directorate of Children's Services in relation to monitoring actions, and that a number of actions had been taken in order to address the issues raised at the previous meeting. That the information reported on be noted.

### 44. <u>AUDIT PLAN FOR THE PERIOD 2013/14</u>

A report of the Treasurer was submitted on the work that the Audit Services Division planned to undertake during the period from 1<sup>st</sup> April, 2013 to 31<sup>st</sup> March, 2014, further details of which together with the Audit Charter and Audit Strategy were appended to the report submitted.

The Head of Audit Services highlighted one discrepancy in Appendix B to the report in that the figure for the number of Audits in 13/14 should be 167.

### RESOLVED

That the information contained in the report, and Appendices to the report, submitted be noted and that the Audit Plan for the period 2013/2014, as set out in Appendix A together with the Audit Charter and Audit Strategy as set out in Appendices C and D to the report submitted be approved.

### 45. <u>REVIEW OF THE CODE OF CORPORATE GOVERNANCE</u>

A report of the Treasurer was submitted providing a short history on the Code of Corporate Governance in the Council and on the result of a review of the Code of Corporate Governance. A copy of the revised Code of Corporate Governance was appended to the report submitted.

### RESOLVED

- (1) That the information contained in the report, and Appendix to the report, submitted be noted.
- (2) That the revised Code of Corporate Governance, attached as Appendix A to the report submitted, be approved.
- (3) That the Director of Corporate Resources be authorised to take the necessary action to incorporate the revised Code into the Constitution.

### 46. <u>COMMITTEE BENCHMARKING REPORT</u>

A report of the Treasurer was submitted on a comparison of the practices of the Committee with other Black Country Authorities and Birmingham, which was appended to the report submitted.

### RESOLVED

- (1) That the information contained in the report, and Appendix to the report, submitted be noted.
- (2) That the Committee receive information on assurance mapping.
- (3) That Directors or their nominated Assistant Director representatives be required to attend to give explanations if and when "minimal" or "nil" assurance reports have not improved, that is, if the rating had not improved at follow up visit(s).
- (4) That a work plan report be introduced setting out scheduled agenda items for the Committee at the first meeting of the Committee in the next and subsequent Municipal years.
- (5) That the Committee receive reports on the Corporate Risk Register at three meetings per year and that a specific risk in each report be identified to focus on.
- (6) That the frequency of meetings of the Committee be increased from four to five per year.

### 47 <u>EXCLUSION OF THE PUBLIC</u>

That the public be excluded from the meeting for the following item of business on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A of the Local Government Act, 1972, as indicated below: and that in all the circumstances, the public interest in disclosing the information is outweighed by the public interest in maintaining the exemption from disclosure.

| Description of Item                      | Relevant Paragraph of Part I<br>of Schedule 12A |
|--|---|
| Report required under Standing<br>Orders | 2 and 7   |
| Audit Services Annual Fraud<br>Report    | 2 and 7   |

### 48. <u>REPORT REQUIRED UNDER STANDING ORDERS</u>

A report of the Treasurer was submitted on any instances arising under Standing Order 3.2 and 9.8 during the period July to December, 2012 inclusive.

RESOLVED

### 49. <u>AUDIT SERVICES ANNUAL FRAUD REPORT</u>

A report of the Treasurer was submitted on the work that the Audit Services Division had undertaken and was planning to undertake on the issue of fraud, and on the work of the Benefit Fraud Team. The Audit Services Fraud Action Plan, a checklist for those responsible for governance to assess their organisation's approach to Fraud, details of special investigations, and a copy of the Anti-Fraud and Corruption Strategy were appended to the report submitted.

In presenting the report, the Head of Audit Services referred to the Fraud hotline, and that on average the division received two to three calls per weeks.

Arising from the presentation given Members asked a number of questions and made comments which were responded too, in particular in respect of the Benefit Fraud Team now nominally being part of a Single Investigation Service associated with the Department for Work and Pensions and, the support provided and monitoring of Personal Budgets.

Reference was made by a Member in relation to the comprehensive report submitted, and referred to the increase of fraud investigations and noted that further work was planned to improve detection of fraud.

RESOLVED

- (1) That the information contained in the report, and Appendices to the report, submitted, be noted.
- (2) That the Anti Fraud and Corruption Strategy, be approved, and that the Director of Corporate Resources be authorised to take the necessary action to incorporate the revised Strategy into the Constitution.

The meeting ended at 7.10 p.m.

CHAIR

Agenda Item No. 5



### Audit and Standards Committee – 9<sup>th</sup> July 2013

### Report of the Treasurer

### Grant Thornton Audit Opinion Plan 2012/13

### Purpose of Report

1. The External Auditor's Audit Opinion Plan for 2012/13 is attached and the Audit Manager will be available at the meeting to deal with any issues.

### **Background**

2. The Audit Opinion Plan 2012/13 is attached as Appendix 1. This document is produced by the Grant Thornton. It assesses the risk of material mis-statements in the Accounts and sets out audit procedures to address those risks.

### **Finance**

3. The attached report explains the methodology applied in testing and forming the audit opinion and risk determination. There are no resource implications as a consequence of the report.

### Law

4. Legislation appertaining to Local Authority Audit and Accounts is contained in the Local Government Act 1999, the Audit Commission Act, 1998, and regulations made therein.

### Equality Impact

5. There are no direct implications for children and young people.

### **Recommendation**

6. That Members note the Audit Opinion Plan 2012/13

Mermon

Iain Newman <u>Treasurer</u> Contact Officer: Jan Szczechowski - Head of Accountancy (ext. 4805)



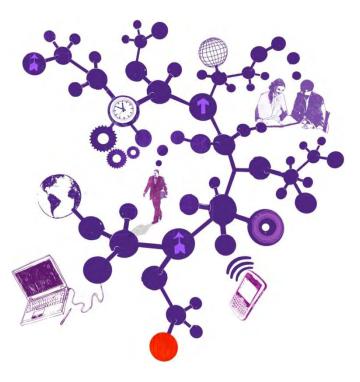
# The Audit Plan for Dudley Metropolitan Borough Council

Year ended 31 March 2013 June 2013

Kyla Bellingall Director T 0121 232 5383 E kyla.bellingall@uk.gt.com

Simon Turner Manager T 0121 232 5273 E simon.a.turner@uk.gt.com

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The contents of this report relate only to the matters which have come to our attention, which we believe need to be reported to you as part of our audit process. It is not a comprehensive record of all the relevant matters, which may be subject to change, and in particular we cannot be held responsible to you for reporting all of the risks which may affect the Council or any weaknesses in your internal controls. This report has been prepared solely for your benefit and should not be quoted in whole or in part without our prior written consent. We do not accept any responsibility for any loss occasioned to any third party acting, or refraining from acting on the basis of the content of this report, as this report was not prepared for, nor intended for, any other purpose.

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- 9. Logistics and our team
- 10. Fees and independence
- 11. Communication of audit matters with those charged with governance

# Understanding your business

In planning our audit we need to understand the challenges and opportunities the Council is facing. We set out a summary of our understanding below.

|   | Challenges/opportunities  |   |   |   |   |  |  |
|---|---|---|---|---|---|--|--|
| <ol> <li>Equal pay</li> <li>The Council is making<br/>provision for outstanding<br/>settlements with current and<br/>former employees in respect<br/>of actual or potential claims<br/>under Equal Pay legislation.</li> </ol>          | <ul> <li>2. Revaluation of assets</li> <li>The Council is carrying out a revaluation of its housing stock in 2012/13</li> <li>The Council carries out a rolling programme of valuations over a five year cycle.</li> </ul>  | <ul> <li>3. Use of MRA as a proxy for depreciation</li> <li>The Council uses the major repairs allowance (MRA) as a proxy when depreciating council dwellings.</li> </ul> | <ul> <li>Reductions in Central<br/>Government funding</li> <li>Central government funding<br/>continues to fall year on year,<br/>with the latest settlement for<br/>2013-14 reducing local<br/>government spending by a<br/>further 1.7%. This places<br/>continued pressure on the<br/>Council to identify and deliver<br/>savings on an on going<br/>basis.</li> </ul> | <ul> <li>5. Business rates retention scheme</li> <li>The Local Government<br/>Finance Act 2012 introduces from April 2013 a business rates retention scheme. The Council will be able to keep a proportion of the business rates revenues received as well as growth on the revenue that is generated in the area.</li> </ul> | <ul> <li>6. Localisation of Council Tax<br/>Benefit and welfare reform</li> <li>Council tax support is now<br/>localised and local<br/>authorities are responsible<br/>for implementing their own<br/>Council Tax reduction<br/>schemes.</li> <li>Universal credit is to be<br/>introduced from October<br/>2013.</li> </ul>                                |  |  |
| $\checkmark$  | $\checkmark$  | $\checkmark$  | $\checkmark$  | $\checkmark$  | $\checkmark$  |  |  |
|   |   | Our res   | sponse  |   |   |  |  |
| <ul> <li>We will discuss progress to<br/>settle these claims with<br/>senior finance staff during<br/>the audit</li> <li>We will review the Council's<br/>estimate of the provision<br/>within the financial<br/>statements.</li> </ul> | <ul> <li>We will review the Council's arrangements for instructing the valuer</li> <li>We will perform procedures to confirm our ability to rely on the work of the valuer</li> <li>We will perform tests of detail on valuations to confirm that valuations are appropriately reflected in the accounts</li> <li>We will consider the Council's arrangements for ensuring that asset valuations remain current.</li> </ul> | • We will review the Council's justification for using MRA as a proxy for depreciation.   | <ul> <li>We will assess the Council's financial resilience and its financial plans as part of our Value for Money conclusion and 'going concern' assessment</li> <li>We will report our audit findings to the Treasurer and the Audit and Standards Committee.</li> </ul>   | <ul> <li>We will continue to discuss<br/>the impact of the changes<br/>through our regular meetings<br/>with senior management.</li> <li>We will assess the impact of<br/>these changes in the<br/>Council's medium term<br/>financial plan through our<br/>financial resilience work.</li> </ul>                             | <ul> <li>We will discuss the impact of<br/>the legislative changes with<br/>the Council through our<br/>regular meetings with senior<br/>management and those<br/>charged with governance</li> <li>We will assess the impact of<br/>these reforms on the<br/>Council's medium term<br/>financial plan through our<br/>financial resilience work.</li> </ul> |  |  |

## Developments relevant to your business and the audit

In planning our audit we also consider the impact of key developments in the sector and take account of national audit requirements as set out in the Code of Audit Practice and associated guidance.

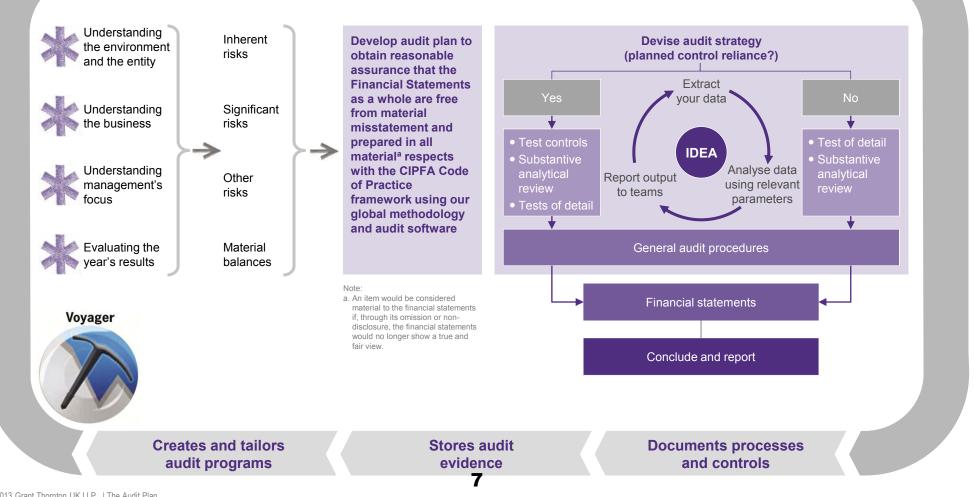
| Developments and other requirements  |   |   |  |  |   |  |
|--|---|---|--|--|---|--|
| <ul> <li>1.Financial reporting</li> <li>Changes to the CIPFA Code of Practice</li> <li>Transfer of assets to Academies</li> <li>Recognition of grant conditions and income.</li> </ul> | <ul> <li>2. Legislation</li> <li>Local Government Finance settlement 2012/13</li> <li>Welfare reform Act 2012.</li> </ul> | <ul> <li>3. Corporate governance</li> <li>Annual Governance<br/>Statement (AGS)</li> <li>Explanatory foreword.</li> </ul> | <ul> <li>Pensions</li> <li>Planning for the impact of 2013/14 changes to IAS19 Employee Benefits that will impact on how the Local Government pension Scheme (LGPS) is accounted for.</li> </ul> | <ul> <li>5. Financial Pressures</li> <li>Managing service provision with less resource</li> <li>Progress against savings plans.</li> </ul> | <ul> <li>6. Other requirements</li> <li>The Council is required to submit a Whole of Government accounts pack on which we provide an audit opinion</li> <li>The Council completes grant claims and returns on which audit certification is required.</li> </ul> |  |
|  |   |   |  |  |   |  |

|   | Our response   |   |  |   |  |  |  |
|---|--|---|--|---|--|--|--|
| <ul> <li>We will ensure that</li> <li>the Council complies with the requirements of the CIPFA Code of Practice through our substantive testing</li> <li>schools are accounted for correctly and in line with the latest guidance</li> <li>grant income is recognised in line with the correct accounting standard.</li> </ul> | • We will discuss the impact of<br>the legislative changes with<br>the Council through our<br>regular meetings with senior<br>management and those<br>charged with governance,<br>providing a view where<br>appropriate. | <ul> <li>We will review the arrangements the Council has in place for the production of the AGS</li> <li>We will review the AGS and the explanatory foreword to consider whether they are consistent with our knowledge.</li> </ul> | • We will discuss how the<br>Council is planning to deal<br>with the impact of the<br>2013/14 changes through<br>our meetings with senior<br>management. | <ul> <li>We will review the Council's performance against the 2012/13 budget, including consideration of performance against the savings plan</li> <li>We will undertake a review of Financial Resilience as part of our VFM conclusion.</li> </ul> | <ul> <li>We will carry out work on the WGA pack in accordance with requirements</li> <li>We will certify grant claims and returns in accordance with Audit Commission requirements.</li> </ul> |  |  |

# Our audit approach



### **Ensures compliance with International** Standards on Auditing (ISAs)



### An audit focused on risks

We undertake a risk based audit whereby we focus audit effort on those areas where we have identified a risk of material misstatement in the accounts. The table below shows how our audit approach focuses on the risks we have identified through our planning and review of the national risks affecting the sector. Definitions of the level of risk and associated work are given below:

**Significant** – Significant risks are typically non-routine transactions, areas of material judgement or those areas where there is a high underlying (inherent) risk of misstatement. We will undertake an assessment of controls (if applicable) around the risks and carry out detailed substantive testing.

**Other** – Other risks of material misstatement are typically those transaction cycles and balances where there are high values, large numbers of transactions and risks arising from, for example, system changes and issues identified from previous years audits. We will assess controls and undertake substantive testing, the level of which will be reduced where we can rely on controls.

**None** – Our risk assessment has not identified a risk of misstatement. We will undertake substantive testing of material balances. Where an item in the accounts is not material we do not carry out detailed substantive testing.

| Account  | Material (or<br>potentially<br>material)<br>balance? | Transaction Cycle                   | Inherent risk | Material<br>misstatement<br>risk? | Description of Risk                       | Substantive<br>testing? |
|--|--|-------------------------------------|---------------|-----------------------------------|---|-------------------------|
| Cost of services -<br>operating expenses                 | Yes  | Operating expenses                  | Medium        | Other                             | Operating expenses<br>understated         | $\checkmark$            |
| Cost of services –<br>employee<br>remuneration           | Yes  | Employee remuneration               | Medium        | Other                             | Remuneration expenses not<br>correct      | $\checkmark$            |
| Costs of services –<br>Housing & council<br>tax benefit  | Yes  | Welfare expenditure                 | Medium        | Other                             | Welfare benefits improperly computed      | $\checkmark$            |
| Cost of services –<br>Housing revenue                    | Yes  | HRA                                 | Medium        | Other                             | Housing revenue transactions not recorded | $\checkmark$            |
| Cost of services –<br>other revenues (fees<br>& charges) | Yes  | Other revenues                      | Low           | None                              |   | $\checkmark$            |
| (Gains)/ Loss on<br>disposal of non<br>current assets    | Yes  | Property, Plant and<br>Equipment    | Low           | None                              |   | $\checkmark$            |
| Payments to Housing<br>Capital Receipts Pool             | No   | Property, Plant &<br>Equipment      | Low           | None                              |   | ×                       |
| Precepts and Levies                                      | Yes  | Council Tax / Operating<br>expenses | Low           | None 8                            |   | $\checkmark$            |

# An audit focused on risks (continued)

| Account  | Material (or<br>potentially<br>material)<br>balance? | Transaction Cycle              | Inherent risk | Material<br>misstatement<br>risk? | Description of Risk | Substantive<br>testing? |
|--|--|--------------------------------|---------------|-----------------------------------|---------------------|-------------------------|
| Interest payable and similar charges   | Yes  | Borrowings                     | Low           | None                              |                     | V                       |
| Pension Interest cost  | Yes  | Employee remuneration          | Low           | None                              |                     | $\checkmark$            |
| Interest &<br>investment income  | No   | Investments                    | Low           | None                              |                     | ×                       |
| Return on Pension assets   | Yes  | Employee remuneration          | Low           | None                              |                     | V                       |
| Dividends receivable   | No   | Revenue                        | Low           | None                              |                     | ×                       |
| Impairment of<br>investments   | No   | Investments                    | Low           | None                              |                     | ×                       |
| Investment<br>properties: Income<br>expenditure,<br>valuation, changes &<br>gain on disposal | No   | Property, Plant &<br>Equipment | Low           | None                              |                     | ×                       |
| Income from council tax  | Yes  | Council Tax                    | Low           | None                              |                     | $\checkmark$            |
| NNDR Distribution  | Yes  | NNDR                           | Low           | None                              |                     | V                       |
| Revenue support<br>grant & other<br>Government grants  | Yes  | Grant Income                   | Low           | None                              |                     | $\checkmark$            |
| Capital grants &<br>Contributions<br>(including those<br>received in advance)                | Yes  | Property, Plant &<br>Equipment | Low           | None                              |                     | 4                       |

# An audit focused on risks (continued)

| Account   | Material (or<br>potentially<br>material)<br>balance? | Transaction Cycle               | Inherent risk | Material<br>misstatement<br>risk? | Description of Risk   | Substantive<br>testing? |
|---|--|---------------------------------|---------------|-----------------------------------|---|-------------------------|
| (Surplus)/ Deficit on<br>revaluation of non<br>current assets           | Yes  | Property, Plant &<br>Equipment  | Low           | None                              |   | $\checkmark$            |
| Actuarial (gains)/<br>Losses on pension<br>fund assets &<br>liabilities | Yes  | Employee remuneration           | Low           | None                              |   | $\checkmark$            |
| Other comprehensive (gains)/ Losses                                     | No   | Revenue / Operating<br>expenses | Low           | None                              |   | ×                       |
| Property, Plant & Equipment   | Yes  | Property, Plant &<br>Equipment  | Medium        | Other                             | PPE activity not valid<br>Revaluation measurements not<br>correct | $\checkmark$            |
| Heritage assets &<br>Investment property                                | Yes  | Property, Plant & Equipment     | Low           | None                              |   | $\checkmark$            |
| Intangible assets   | No   | Intangible assets               | Low           | None                              |   | ×                       |
| Investments (long term)   | Yes  | Investments                     | Low           | None                              |   | $\checkmark$            |
| Investments ( short term)   | No   | Investments                     | Low           | None                              |   | ×                       |
| Debtors (long & short term)   | Yes  | Revenue                         | Low           | None                              |   | $\checkmark$            |
| Assets held for sale  | No   | Property, Plant & Equipment     | Low           | None                              |   | ×                       |
| Inventories   | No   | Inventories                     | Low           | None                              |   | ×                       |
| Cash & cash<br>Equivalents  | Yes  | Bank & Cash                     | Low           | None                              |   | $\checkmark$            |

# An audit focused on risks (continued)

| Account                                  | Material (or<br>potentially<br>material)<br>balance? | Transaction Cycle     | Inherent risk | Material<br>misstatement<br>risk? | Description of Risk   | Substantive<br>testing? |
|--|--|-----------------------|---------------|-----------------------------------|---|-------------------------|
| Borrowing (long & short term)            | Yes  | Debt                  | Low           | None                              |   | $\checkmark$            |
| Creditors (long & Short term)            | Yes  | Operating Expenses    | Medium        | Other                             | Creditors understated or not recorded in the correct period | $\checkmark$            |
| Provisions (long & short term)           | Yes  | Provision             | Low           | None                              |   | $\checkmark$            |
| Deferred liabilities (long & short term) | Yes  | Debt                  | Low           | None                              |   | $\checkmark$            |
| Pension liability                        | Yes  | Employee remuneration | Low           | None                              |   | $\checkmark$            |
| Reserves                                 | Yes  | Equity                | Low           | None                              |   | $\checkmark$            |

# Significant risks identified

'Significant risks often relate to significant non-routine transactions and judgmental matters. Non-routine transactions are transactions that are unusual, either due to size or nature, and that therefore occur infrequently. Judgmental matters may include the development of accounting estimates for which there is significant measurement uncertainty' (ISA 315).

In this section we outline the significant risks of material misstatement which we have identified. There are two presumed significant risks which are applicable to all audits under auditing standards (International Standards on Auditing – ISAs) which are listed below:

| Significant risk                                      | Description  | Substantive audit procedures  |
|---|--|---|
| The revenue cycle includes<br>fraudulent transactions | Under ISA 240 there is a presumed risk that revenue may be misstated due to the improper recognition of revenue.     | <ul> <li>Further work planned:</li> <li>Review and testing of revenue recognition policies</li> <li>Performance of attribute testing on material revenue streams</li> </ul>   |
| Management over-ride of controls                      | Under ISA 240 there is a presumed risk that the risk of management over-ride of controls is present in all entities. | <ul> <li>Further work planned:</li> <li>Review of accounting estimates, judgments and decisions made by management</li> <li>Testing of journal entries</li> <li>Review of unusual significant transactions</li> </ul> |

### Other risks

The auditor should evaluate the design and determine the implementation of the entity's controls, including relevant control activities, over those risks for which, in the auditor's judgment, it is not possible or practicable to reduce the risks of material misstatement at the assertion level to an acceptably low level with audit evidence obtained only from substantive procedures (ISA 315).

| Other<br>reasonably<br>possible<br>risks | Description   | Work completed to date  | Further work planned  |
|--|---|---|---|
| Operating<br>expenses                    | Operating expenses<br>understated                                 | <ul> <li>Walkthrough tests were completed in relation to the specific<br/>accounts assertion risks which we consider to present a risk of<br/>material misstatement to the financial statements.</li> </ul> | <ul> <li>Testing of key controls</li> <li>Performance of substantive testing on material expenditure streams</li> <li>Review of accounting estimates, judgments and decisions made by management</li> </ul>                       |
| Operating<br>expenses                    | Creditors understated or<br>not recorded in the correct<br>period | • Walkthrough tests were completed in relation to the specific accounts assertion risks which we consider to present a risk of material misstatement to the financial statements.                           | <ul> <li>Performance of attribute testing on material expenditure streams</li> <li>Review of accounting estimates, judgments and decisions made by management</li> </ul>  |
| Employee<br>remuneration                 | Remuneration expenses not correct                                 | <ul> <li>Walkthrough tests were completed in relation to the specific<br/>accounts assertion risks which we consider to present a risk of<br/>material misstatement to the financial statements.</li> </ul> | <ul> <li>Performance of attribute testing on material expenditure streams</li> <li>Review of accounting estimates, judgments and decisions made by management</li> </ul>  |
| Welfare<br>Expenditure                   | Welfare benefits<br>improperly computed                           | • Walkthrough tests were completed in relation to the specific accounts assertion risks which we consider to present a risk of material misstatement to the financial statements.                           | • Testing of the final Housing Benefit claim will be completed<br>using the HB COUNT methodology, with assurance for the<br>financial statements taken from the testing of the initial sample<br>of 20 cases per benefit category |
| Housing Rent<br>Revenue<br>Account       | Revenue transactions not recorded.                                | • Walkthrough tests were completed in relation to the specific accounts assertion risks which we consider to present a risk of material misstatement to the financial statements.                           | <ul> <li>Performance of attribute testing on material revenue streams</li> <li>Review of accounting estimates, judgments and decisions made by management</li> </ul>  |

# Other risks (continued)

| Other<br>reasonably<br>possible<br>risks | Description                            | Work completed to date  | Further work planned  |
|--|--|---|---|
| Property,<br>Plant &<br>Equipment        | PPE activity not valid                 | <ul> <li>Walkthrough tests were completed in relation to the specific<br/>accounts assertion risks which we consider to present a risk of<br/>material misstatement to the financial statements.</li> </ul> | <ul> <li>Performance of substantive testing on material expenditure streams</li> <li>Review of accounting estimates, judgments and decisions made by management</li> </ul>  |
| Property,<br>Plant &<br>Equipment        | Revaluation measurement<br>not correct | Walkthrough tests were completed in relation to the specific accounts assertion risks which we consider to present a risk of material misstatement to the financial statements.                             | <ul> <li>Review of the Council's arrangements for instructing the valuer</li> <li>Performance of procedures for relying on the work of the valuer</li> <li>Performance of tests of detail on valuations</li> <li>Review of accounting estimates, judgments and decisions made by management including the assessment of whether valuations remain current between valuation dates.</li> </ul> |

### Results of interim audit work

#### Scope

As part of the interim audit work and in advance of our final accounts audit fieldwork, we have considered:

- the independence of the internal audit function (Audit Services)
- Audit Service's work on the Council's key financial systems
- walkthrough testing to confirm whether controls are implemented as per our understanding in areas where we have identified a risk of material misstatement
- a review of Information Technology (IT) controls

|                     | Work performed  | Conclusion / Summary  |
|---------------------|---|---|
| Audit Services      | We have reviewed the independence of Audit Services and have considered their work on the Council's key financial systems.  | Overall, we have concluded that Audit Services continue to<br>provide an independent service to the Council and that we can<br>take assurance from their work in contributing to an effective<br>internal control environment at the Council. |
| Walkthrough testing | Walkthrough tests were completed in relation to the specific accounts assertion risks which we consider to present a risk of material misstatement to the financial statements. | In-year internal controls were observed to have been implemented in accordance with our documented understanding.   |

# Results of interim audit work (continued)

|   | Work performed  | Conclusion/ Summary  |
|---|---|--|
| Review of information technology<br>(IT) controls | Our information systems specialist performed a high level review of<br>the general IT control environment, as part of the overall review of<br>the internal controls system. We have also performed a follow up of<br>the issues that have been raised in the previous year. We concluded<br>that, from the work undertaken to date, there are no material<br>weaknesses which are likely to adversely impact on the Council's<br>financial statements. | No significant issues were noted. Some minor deficiencies were identified and these have been reported to management.                        |
| Journal entry controls                            | We have reviewed the Council's journal entry policies and<br>procedures as part of determining our journal entry testing strategy<br>and have not identified any material weaknesses which are likely to<br>adversely impact on the Council's control environment or financial<br>statements.   | No significant issues noted by work to date. Detailed testing on journal transactions will be performed as part of the final accounts visit. |

### Value for Money

#### Introduction

The Code of Audit Practice requires us to issue a conclusion on whether the Council has put in place proper arrangements for securing economy, efficiency and effectiveness in its use of resources. This is known as the Value for Money (VfM) conclusion.

#### 2012/13 VFM conclusion

Our Value for Money conclusion will be based on two reporting criteria specified by the Audit Commission.

We will tailor our VfM work to ensure that as well as addressing high risk areas it is, wherever possible, focused on the Council's priority areas and can be used as a source of assurance members. Where we plan to undertake specific reviews to support our VfM conclusion, we will issue a Terms of Reference for each review outlining the scope, methodology and timing of the review. These will be agreed in advance and presented to Audit Committee.

The results of all our local VfM audit work and key messages will be reported in our Audit Findings report and in the Annual Audit Letter. We will agree any additional reporting to the Council on a review-by-review basis.

| Code criteria   | Work to be undertaken  |
|---|--|
| The Council has<br>proper arrangements<br>in place for:<br>• securing financial<br>resilience<br>• challenging how it<br>secures economy,<br>efficiency and<br>effectiveness in its<br>use of resources<br>We will consider<br>whether the Council<br>is prioritising its<br>resources with tighter<br>budget | Risk-based work focusing on arrangements relating<br>to financial governance, strategic financial planning<br>and financial control.<br>We will produce a separate report on the Council's<br>financial resilience |

### Logistics and our team



### Fees and independence

#### Fees

|                                      | £       |
|--------------------------------------|---------|
| Council audit                        | 178,177 |
| Grant certification - indicative fee | 41,000  |
| Total                                | 219,177 |

#### **Fees for other services**

| Service | Fees £ |
|---------|--------|
| None    | Nil    |
|         | 1      |

#### **Our fee assumptions include:**

- Our fees are exclusive of VAT
- Supporting schedules to all figures in the accounts are supplied by the agreed dates and in accordance with the agreed upon information request list
- The scope of the audit, and the Council and its activities have not changed significantly
- The Council will make available management and accounting staff to help us locate information and to provide explanations

#### **Independence and ethics**

We confirm that there are no significant facts or matters that impact on our independence as auditors that we are required or wish to draw to your attention. We have complied with the Auditing Practices Board's Ethical Standards and therefore we confirm that we are independent and are able to express an objective opinion on the financial statements.

Full details of all fees charged for audit and non-audit services will be included in our Audit Findings report at the conclusion of the audit.

We confirm that we have implemented policies and procedures to meet the requirement of the Auditing Practices Board's Ethical Standards.

### Communication of audit matters with those charged with governance

International Standards on Auditing (ISA) 260, as well as other ISAs, prescribe matters which we are required to communicate with those charged with governance, and which we set out in the table opposite.

This document, The Audit Plan, outlines our audit strategy and plan to deliver the audit, while The Audit Findings will be issued prior to approval of the financial statements and will present key issues and other matters arising from the audit, together with an explanation as to how these have been resolved.

We will communicate any adverse or unexpected findings affecting the audit on a timely basis, either informally or via a report to the Council.

**Respective responsibilities** 

This plan has been prepared in the context of the Statement of Responsibilities of Auditors and Audited Bodies issued by the Audit Commission (<u>www.audit-commission.gov.uk</u>).

We have been appointed as the Council's independent external auditors by the Audit Commission, the body responsible for appointing external auditors to local public bodies in England. As external auditors, we have a broad remit covering finance and governance matters.

Our annual work programme is set in accordance with the Code of Audit Practice ('the Code') issued by the Audit Commission and includes nationally prescribed and locally determined work. Our work considers the Council's key risks when reaching our conclusions under the Code.

It is the responsibility of the Council to ensure that proper arrangements are in place for the conduct of its business, and that public money is safeguarded and properly accounted for. We have considered how the Council is fulfilling these responsibilities.

| Our communication plan   | Audit<br>plan | Audit<br>findings |
|--|---------------|-------------------|
| Respective responsibilities of auditor and management/those charged with governance  | ~             |                   |
| Overview of the planned scope and timing of the audit. Form, timing and expected general content of communications   | ~             |                   |
| Views about the qualitative aspects of the entity's accounting and financial reporting practices, significant matters and issue arising during the audit and written representations that have been sought |               | ~                 |
| Confirmation of independence and objectivity   | ~             | ✓                 |
| A statement that we have complied with relevant ethical requirements regarding independence, relationships and other matters which might be thought to bear on independence.                               | ~             | ~                 |
| Details of non-audit work performed by Grant Thornton UK LLP and network firms, together with fees charged.  |               |                   |
| Details of safeguards applied to threats to independence   |               |                   |
| Material weaknesses in internal control identified during the audit  |               | ~                 |
| Identification or suspicion of fraud involving management and/or others which results in material misstatement of the financial statements   |               | ~                 |
| Non compliance with laws and regulations   |               | ~                 |
| Expected modifications to the auditor's report, or emphasis of matter  |               | ~                 |
| Uncorrected misstatements  |               | ✓                 |
| Significant matters arising in connection with related parties   |               | ✓                 |
| Significant matters in relation to going concern   |               | ✓                 |



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Agenda Item No. 6

### Audit & Standards Committee – 9<sup>th</sup> July 2013

### Report of the Treasurer

### Internal Audit Services Annual Performance & Review Report 2012/2013

### Purpose of the Report

 To give Members an overview of the performance of Dudley Audit Services in the year to 31<sup>st</sup> March 2013. and also to inform members of the Head of Audit Services' review of Audit Services in line with the Accounts and Audit Regulations 2011 which requires the Council to conduct an annual review of the effectiveness of internal audit.

### **Background**

### Performance Measured Against the Strategic Plan

- 2. We are able to report that 93% of the planned work had been completed by the end of the year [compared with 96% in 2011/12]. The reduction was largely due to one member of staff being off on sick leave for the majority of the year. The following statistics give a broad indication of the extent of the work undertaken in 2012/13 :-
  - Internal Audit reviewed 136 areas of activity. These are summarised in Appendix A.
  - 818 recommendations were made, the overwhelming majority of which had been discussed and agreed with management by the year-end. 128 of these were classified as high, the breach rating having been scrapped at the start of April 2012. A summary of the number of recommendations by Directorate is contained in Appendix B. This shows a sharp decrease in the total number of recommendations made compared to 2011/12 when 2,081 recommendations were made. Whilst there are many factors behind a reduction in the number of recommendations two stand out :-
    - 46 Schools accounted for 1,018 of the 2,081 recommendations in 2011/12 whereas we concentrated on Secondary Schools in 2012/13 and 19 Schools accounted for 337 recommendations out of the total of 818.
    - We carried out fewer audits in 2012/13 which was due in part to the resources redirected to fraud work.

• A thematic analysis of the recommendations raised has identified common themes and the following table identifies the top five as well as how Audit will promote practices to reduce the numbers of recommendations in these areas :-

| Subject              | Note   |
|----------------------|--|
| Procurement          | Aim to facilitate simplified Standing Orders and on line training course                               |
| Inventories          | Promote the "Simple Guide to Systems" procedural guide   |
| Information Security | As above   |
| Income               | As above   |
| Payroll/Personnel    | The roll out of more "Yourself" elements of<br>PSE should help reduce the number of<br>recommendations |

Audit Services will write to all Directorates giving them details of the thematic analysis and ask them to co-operate in finding/implementing solutions.

- Audit Services was involved in 37 special investigations and provided assistance to other Fraud Teams [e.g. Housing] on 38 occasions. In addition Audit handled 167 calls, letters or emails sent to the Fraud Hotline which has now been in operation since October 2011.
- 33 honorary audits were carried out.
- Consultancy work was carried out in various Directorates.
- We have continued to develop our input to value for money audits and identified approximately £900,000 in efficiency savings during the year. Of this nearly 15% was directly cashable. The savings were identified in a range of reports and information provided to the Committee in February has been updated :-

| Project   | £,000 |
|---|-------|
| Analysis of procurement invoices, commitments and VAT | 62    |
| VFM Health Checks in Schools                          | 121   |
| Recovery of water utility costs                       | 89    |
| Review of Energy Management Strategy                  | 410   |
| Rationalisation of rooms for hire                     | 65    |
| Postage arrangements in Schools                       | 20    |
| CCTV/Security arrangements                            | 100   |
| Income generating work at Schools                     | 34    |

The development of value for money audit work has hopefully demonstrated an added value aspect to our service at a time when service & funding pressures mount against a background of transformation taking more prominence. Periodically, we present details on value for money audit work to appropriate Corporate Groups.

### Performance Measured Against Customer Expectation

- 3. To obtain feedback about the quality of work, post-audit questionnaires are issued to auditees after each audit. Auditees are asked to respond to questions relating to the various stages of the audit and are also offered the opportunity to respond to one question indicating whether they found the audit satisfactory overall. For all questionnaires returned the auditee had responded yes to this question, assessing the audit as satisfactory or better.
- 4. 50 questionnaires were returned in 2012/13. This represents a response rate of about 50%, compared to 57% for 2011/12. The reduction will be discussed at the Nominated Officer Group, which is made up of a representative from each Directorate to act as a liaison officer with Audit.

For 90% of the questionnaires received the overall score was good to excellent. The remaining 10% were satisfactory to good with no questionnaires scoring poor to satisfactory.

|                      | 2012/13<br>(%) | 2011/12<br>(%) | 2010/11<br>(%) |
|----------------------|----------------|----------------|----------------|
| Received             | 50             | 57             | 54             |
| Good to excellent    | 90             | 88             | 92             |
| Satisfactory to Good | 10             | 12             | 8              |
| Poor to Satisfactory | 0              | 0              | 0              |

The results compare favourably with previous years :-

We also received 33 compliments about the services delivered by Audit.

5. In 2012 in conjunction with other Divisions of the Corporate Resources Directorate, we achieved "Customer Service Excellence" status for excellent customer service.

### Other Performance Measures

6. Over a number of years we have hardened targets to reduce the time taken from the start of audit work to the issue of draft audit report from a maximum of eight weeks to seven weeks. We achieved this target in 95% of the audits we carried out against 93% in 2011/12.

We operate Audit Process protocols with all Directors which set out our targets and also ask them to co-operate in finalising draft audit reports within six weeks of the report being issued. We achieved this in 83% of reports in 2012/13, which is an improvement over the 68% in 2011/12. The improvement was influenced by informing Directors about the concerns of the Audit & Standards Committee over previously reported poor performance.

### <u>Training</u>

7. We no longer run seminars on "Fraud Awareness" and "An Introduction to Audit & Control", rather a series of on line courses have been developed to cover these subjects as well as a course on Financial Regulations. A number of workshops / briefings are provided to school staff and governors :-

| Training                             | 12/13 | 11/12 | 10/11 |
|--------------------------------------|-------|-------|-------|
| Introduction to Audit seminar        | N/A   | 37    | 90    |
| Introduction to Audit on line course | 642   | N/A   | N/A   |
| Fraud Awareness seminar              | N/A   | 15    | 48    |
| Fraud Awareness on line course       | 420   | 165   | N/A   |
| Fin Regulations on line course       | 532   | 291   | N/A   |
| School FMS/FVS Workshop              | 107   | 0     | 30    |
| School Finance M'ment Workshop       | 80    | N/A   | N/A   |
| School Controls Workshop             | 30    | 20    | 50    |
| Schools Bench Marking Workshop       | 30    | 40    | 31    |
| Deputy Head Teacher seminar          | 6     | 10    | 10    |
| Governors FMS Briefing               | 20    | 0     | 6     |

### **Benchmarking**

8. We are members of the CIPFA Benchmarking Club for Internal Audit and supply details to enable comparison of costs with other Authorities. The results of the 2012 exercise produced the following estimates for the financial year 2013/14 :-

|                    |               | Similar         |
|--------------------|---------------|-----------------|
|                    | <u>Dudley</u> | <u>Boroughs</u> |
|                    | [£]           | [£]             |
| Cost per auditor   | 49,774        | 52,509          |
| Cost per audit day | 276           | 292             |

Sandwell and Wolverhampton dropped out of the CIPFA Benchmarking Club so we are unable to compare Dudley with the rest of the Black Country. We have reduced staffing and costs over several years so that the outturn costs for Audit continue to fall.

### Internal Audit Standards

9. Historically we have complied with CIPFA's Code of Practice for Internal Audit and judged our level of compliance against self assessment checklists covering both audit standards and the characteristics of effectiveness. Our self assessment on all aspects of compliance with the Code of Practice indicates a high level of compliance.

- 10. Quality control of audit work is governed by the standards set out in the Code of Practice for Internal Audit and our own Audit Manuals. All audits are subject to ongoing supervisory input before and during the audit. Once the audit work has been completed the file is subject to review by Audit Managers who ensure that the work is to acceptable standards. In line with the Code, the Head of Audit Services carries out a series of file overviews to ensure that standards have been achieved in the work, reviews and reports of all staff. These reviews assist in ensuring that the two teams operate to the same working practices.
- 11. From the 1<sup>st</sup> April 2013, CIPFA has endorsed a new set of internal audit standards which have been produced for the whole of the public sector and which are based on the Chartered Institute of Internal Audit published standards.
- 12. The Head of Audit has carried out an assessment of Audit Services compliance against the new standards and this is attached as Appendix C. The assessment indicates that Audit Services are largely compliant with the standards but will need to amend the Audit Operations Manual, which will replace the old Audit Manual, to reinforce the Standards to all Auditors. The Audit Charter will also be amended and this will be presented to the September meeting of this Committee.

### Audit & Standards Committee

- 13. The roles, responsibilities and meetings of the Audit & Standards Committee are a key part of the system of internal audit, and it's Terms of Reference are in line with guidance issued by CIPFA.
- 14. CIPFA guidance on the review of the effectiveness of internal audit suggests that the effectiveness of the Audit & Standards Committee should also be assessed. The Committee has previously considered a self assessment checklist [issued by CIPFA's Better Governance Forum] and this has been updated [see Appendix D] to reflect the Head of Audit's opinion of the current level of compliance, who considers the assessment demonstrates the operation of the Audit & Standards Committee is effective in terms of audit matters.
- 15. In line with CIPFA best practice, reports covering a range of issues are presented by Audit Services to the Audit & Standards Committee e.g. :-
  - Planning
  - Performance
  - Results of work on each Directorate
  - Interim Performance
  - Fraud

16. Benchmarking of the Committee against other local authorities was undertaken in 2012 and a report was submitted to the April meeting of the Committee. This identified no significant differences but did make some recommendations [e.g. increased reporting on risk management] which were accepted by the Committee.

#### **External Audit**

17. The Audit Commission had previously relied on Audit Services for audits on the major financial systems, and this prevented unnecessary duplication of work and also contributed to lower audit fees.

It appears that Grant Thornton have a different way of working in line with their usual practice and the reduced fee structure. There is on going dialogue with Grant Thornton to ensure we work in the right spirit of co-operation and avoid unnecessary duplication.

18. We have previously reported on the abolition of the Audit Commission and that has come a step closer with the publication of the intended "Local Audit and Accountability" Bill in the Queen's Speech. The Bill still provides for each Authority to use an "Audit Panel" to procure the external auditors and assist in managing any such contract. For Dudley this will take effect when we are assessing the next contract which will need to be in place for 2017.

#### Annual Governance Statement [AGS]

- 19. A separate report will be submitted in September to the Audit & Standards Committee on the 2012/13 AGS. The Head of Audit reports that in his opinion there are currently no significant deficiencies in the system of risk management and internal control at Dudley MBC of such fundamental significance that will need to be reported in the AGS.
- 20. This opinion is based principally on the work carried out by the Audit Services Division during 2012/2013. It must be acknowledged, however, that it is not possible to review all aspects of risk management and internal control within a single year. In forming this opinion, it has also been necessary to take into account the results of work by :-
  - Internal Audit in previous years
  - External Audit
  - External inspectorates
  - Audit & Standards Committee
  - Other Scrutiny Committees

#### **Finance**

21. There are no direct financial implications arising from this report. The cost of internal audit is met from within the base budget of the Directorate. Audit Services budget for 2013/14 envisages an out turn of £409,000 against £434,000 for 2012/13.

#### Law

- 22. The Council is required under Section 151 of the Local Government Act 1972 to appoint an officer to be responsible for its financial affairs.
- 23. The Accounts and Audit Regulations 2011 require the Council to 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. They also require the Council to conduct a review at least once a year of the effectiveness of its internal audit and the findings of the review shall be considered by a committee of the relevant body.

#### Equality Impact

- 24. This report does not raise any equal opportunities issues.
- 25. The work of Internal Audit helps to protect the interests of children and young people, albeit they were not consulted on, or involved, with the development of the work carried out.

#### **Recommendations**

26. That the Committee accept this report on the performance and review of Audit Services in 2012/13.

Mermon

lain Newman Treasurer

Contact Officer: Les Bradshaw (ext. 4853)

# PLANNED AUDITS CARRIED OUT DURING 2012/13

# Adult Community & Housing Services

| New Bridge House                       | Russell Court                             |
|--|---|
| Asset Management Strategy              | Contracts [All stages] Review             |
| IT Application Review - Keystone Asset | Business Support                          |
| Management                             |   |
| Directorate Security                   | Directorate Performance & Risk            |
|  | Management                                |
| Directorate Procurement                | Adult Commissioning                       |
| Homecare Debt Collection               | IT Application Review – Northgate Housing |
| Rent Collection and Setting            | Lettings policies/procedures              |
| Housing Rent Arrears                   | Housing Strategy Programme                |
|  | Management                                |
| Residential Debt Collection            | Directorate Payroll & Personnel           |

#### **Chief Executive**

| Directorate Partnerships        | Directorate Procurement       |
|---------------------------------|-------------------------------|
| Directorate Payroll & Personnel | Community Safety              |
| Directorate Performance & Risk  | Community Engagement Strategy |
| Management                      |                               |
| Corporate Grants                | Annual Governance Statement   |
| Corporate Governance            | Value for money               |
| Transformation                  | Partnership Governance        |

# **Children's Services**

| 16 Plus Team                          | Visual Impairment Service             |
|---------------------------------------|---------------------------------------|
|                                       |                                       |
| Physical Impairment Medical Inclusion | Autism Outreach Service               |
| Service                               |                                       |
| Hearing Impairment Service            | Specialist Early Years Service        |
| Language Units                        | Care Management North Team 2 (Dudley) |
| Directorate Security                  | Information Governance                |
| Business Continuity                   | Counselling                           |
| Project Management                    | Procurement                           |
| Commissioning                         | School Governance Team                |
| Psychology                            | Astley Burf                           |
| Kitchens                              | Connexions                            |
| School Purchasing Procurement and     | 16-19 Provision                       |
| General Management                    |                                       |
| Central Area Youth                    | Halesowen Area Youth                  |
| Youth Services - Central Office       |                                       |

# **Corporate Resources**

| Bank Reconciliation Review       | Treasury                               |
|----------------------------------|--|
| Control Accounts                 | Housing Benefits Review                |
| Administrative Systems           | Computer Assisted Audit Technique      |
|                                  | Exercises                              |
| Project Management - Office      | Land Charges                           |
| Accommodation Strategy           |  |
| Construction Industry Tax Scheme | Creditors System                       |
| Debtors System Review            | IT Application Review - Northgate      |
|                                  | Revenues & Benefits                    |
| Teachers Pension Scheme          | IT Physical & Environmental Management |
| IT Security Defences             | IT Business Continuity Planning        |
| IT Project Management            | RIPA                                   |
| Payroll System                   | IT Application Review - HSBCnet        |
| HR First                         | IT Application Review - Logotech       |
| Temp Solutions                   | Crown Centre                           |
| Procurement Team                 | CRC Annual Report                      |
| Business Rates                   | Revenues Exchequer Team                |
| Council Tax Review               |  |

## Schools

| Schools Financial Value Standard | Procurement                       |
|----------------------------------|-----------------------------------|
| The Wordsley School              | Coseley School and Sports College |
| Dormston School                  | Ellowes Hall Foundation School    |
| Belle Vue School                 | Pedmore Technology College and    |
|                                  | Community School                  |
| Old Swinford Hospital School     | Bishop Milner R.C. School         |
| Amblecote                        | Hillcrest School                  |
| Ridgewood School                 | Redhill School                    |
| Castle High School               | Crestwood School                  |
| Summerhill School                | Leasowes School                   |
| Lapal                            |                                   |

# **Urban Environment**

| New Heritage Regeneration                  | Safeguarding            |
|--|-------------------------|
| Parks Management                           | Crystal Leisure Centre  |
| Collection Management                      | Trading Standards       |
| Directorate Personnel & Payroll Procedures | Highways Minor Schemes  |
| Project management                         | Local Transport Grant   |
| Landscapes (all contract stages)           | Street Cleansing        |
| Grounds Maintenance                        | Directorate Procurement |
| Electrical and Mechanical Team             |                         |

#### Deferred/Cancelled

| Chief Executive                           |                                 |
|---|---------------------------------|
| Corporate Data Quality **                 | Public Health *                 |
| Corporate Resources                       |                                 |
| IT Operations and Facilities Management * | IT PSE *                        |
| IT Radius Icon *                          | Capital Accounting **           |
| DACHS                                     |                                 |
| Income Collection **                      | Grant Income **                 |
| Making it Real *                          | Tenant Empowerment **           |
|   |                                 |
| Children's Services                       | Directorate Personnel & Payroll |
|   | Procedures *                    |
| Urban Environment                         | Refuse Collection **            |

#### <u>NOTES</u>

- NB 1 \* The audit is carried forward to the 2013/14 Audit Plan
- NB 2 \*\* Due to changes in operations, materiality, or other circumstances, the audit was cancelled
- NB 3 The list of audits completed includes some carried out as "consultancy" offering which would not necessarily result in the normal type of audit report

#### **APPENDIX B**

# TOTAL SUMMARY OF PLANNED WORK COMPLETED FOR EACH DIRECTORATE 2012/13

| Department                                  | No. of audits | Number of<br>Recommen<br>-dations | Number of<br>Breach | Number of<br>High<br>Priority<br>Findings | Number of<br>Unimplemented<br>Recommend-<br>dations |
|---|---------------|-----------------------------------|---------------------|---|---|
| Adult, Community<br>and Housing<br>Services | 16            | 89                                | N/A                 | 17  | 6   |
| Chief Executives                            | 4             | 19                                | N/A                 | 2   | 5   |
| Children's Services                         | 23            | 189                               | N/A                 | 14  | 27  |
| Corporate<br>Resources                      | 27            | 93                                | N/A                 | 12  | 3   |
| Schools                                     | 19            | 337                               | N/A                 | 65  | 61  |
| Urban Environment                           | 14            | 91                                | N/A                 | 18  | 6   |
| Honorary                                    | 33            | N/A                               | N/A                 | N/A                                       | N/A   |
| TOTAL [NB1]                                 | 136           | 818                               | N/A                 | 128                                       | 108   |
| 2011/12                                     | 192           | 2081                              | 1039                | 39 [NB2]                                  | 203   |
| 2010/11                                     | 178           | 1838                              | 690                 | 47  | 151   |
| 2009/10                                     | 195           | 1624                              | 723                 | 70  | 169   |
| 2008/09                                     | 199           | 1657                              | 696                 | 114                                       | 226   |
| 2007/08                                     | 189           | 1803                              | 340                 | 114                                       | 193   |

# **NOTES**

NB 1 The number of audits in 2013/14 increases to 167

NB 2 The number of High and High Breach in 2011/12 was 515

## APPENDIX C

#### UK Public Sector Internal Audit Standards [PSIAS]

The Chartered Institute of Public Finance and Accountancy [CIPFA] representing local government was involved with central government departments in agreeing a new set of standards for internal audit across the UK public sector effective from 1 April 2013.

The standards encompass the mandatory elements of the Chartered Institute of Internal Auditors International Professional Practices Framework with additional requirements and interpretations for the UK public sector included where required.

The PSIAS replace previous codes and standards, including the "Code of Practice for Internal Audit in Local Government" published by CIPFA. While the PSIAS come into force from April it was not expected that all elements will be in place on day one. Many of the standards apply to activities that will happen later on in the audit year, for example audit reports, annual audit reporting and quality assurance and improvement processes. Some of the standards will need to be addressed early on however, in particular the development and approval of the audit charter and the completion of the risk-based audit plan.

The PSIAS comprise the definition of internal audit, a code of ethics and a series of attribute and performance standards. The new definition of internal audit is:

"Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's 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."

CIPFA is also publishing a "Local Government Application Note" (LGAN) to support internal auditors transferring from the CIPFA Code of Practice to the PSIAS. The Application Note includes a checklist for assessing conformance with the PSIAS and LGAN which can be used to support the external assessment requirements of the PSIAS. This publication will be available from the CIPFA shop shortly.

The Department for Communities and Local Government has given both the PSIAS and LGAN the status of "proper practices" for internal audit in organisations covered by the Accounts and Audit Regulations 2011. This includes local authorities, police and fire bodies in England.

The PSIAS use the term "board" throughout the standards to define particular governance and accountability roles, and in Dudley this is considered to be the Audit & Standards Committee [ASC]. The term "Chief Audit Executive" is also used and in Dudley this is the Head of Audit [HoA]. These alternative terms have been used in the document below, which is an extract of the Standards. The level of compliance has been assessed by the Head of Audit.

The current Audit Services Manual has been in existence for several years and is related to the CIPFA Code of Practice. The Manual covers all of the new Standards in principle if not in detailed wording but will not be amended. The Standards will instead be incorporated in the into the Divisional Operations Manual.

In the opinion of the Head of Audit we will always take a professional approach to audit work and this will incorporate standard audit techniques and approaches. Details have been entered for the principle standards only.

| INTERNAL AUDIT STANDARDS  | AUDIT SERVICES<br>COMPLIANCE/COMMENT  |
|---|---|
| DEFINITION OF INTERNAL AUDIT  |   |
| Internal auditing is an independent, objective<br>assurance and consulting activity designed to<br>add value and improve an organisation's<br>operations. It helps an organisation accomplish<br>its objectives by bringing a systematic,<br>disciplined approach to evaluate and improve<br>the effectiveness of risk management, control<br>and governance processes.                       | The current Audit Charter<br>was approved in April 2013<br>and includes a CIPFA<br>definition. A revised Audit<br>Charter will be presented to<br>the September meeting of<br>the ASC   |
| CODE OF ETHICS  | The Operations Manual will<br>be amended to reinforce<br>these Standards  |
| Internal auditors in UK public sector<br>organisations must conform to the Code of<br>Ethics as set out below. If individual internal<br>auditors have membership of another<br>professional body then he or she must also<br>comply with the relevant requirements of<br>that organisation.  | All members of Audit<br>Services management team<br>hold professional<br>qualifications and are aware<br>of the need to comply with<br>associated codes of ethics.<br>All auditors also adhere to<br>Audit Services code of<br>ethics and the Authority's<br>Code of Conduct for<br>Employees |
| <b>Integrity :</b> The integrity of internal auditors establishes trust and thus provides the basis for reliance on their judgement.  | Noted, and included in all Person Specifications  |
| <b>Objectivity</b> :Internal auditors exhibit the highest<br>level of professional objectivity in gathering,<br>evaluating and communicating information about<br>the activity or process being examined.<br>Internal auditors make a balanced assessment<br>of all the relevant circumstances and are not<br>unduly influenced by their own interests or by<br>others in forming judgements. | Noted, and included in all<br>Person Specifications   |
| <b>Confidentiality :</b> Internal auditors respect the value and ownership of information they receive and do not disclose information without appropriate authority unless there is a legal or professional obligation to do so.   | Already covered in our<br>Information Security Charter<br>and the Authority's Code of<br>Conduct  |

| <b>Competency</b> : Internal auditors apply the  | We have a Skills &              |
|--|---------------------------------|
| knowledge, skills and experience needed in the   | Competency Framework            |
| performance of internal auditing services.   | which is used in conjunction    |
|  | with the Performance            |
|  | Review & Development            |
|  | policy for employees            |
| Internal auditors must also have regard to the   | Noted, and will be              |
| Committee on Standards of Public Life's Seven  | reinforced in the Operations    |
| Principles of Public Life  | Manual                          |
| ATTRIBUTE STANDARDS  |                                 |
| 1000 Purpose, Authority and Responsibility   | Annual review of the Audit      |
| The purpose, authority and responsibility of the   | Charter and reporting to        |
| internal audit activity must be formally defined in  | ASC                             |
| an internal audit charter, consistent with the   |                                 |
| Definition of Internal Auditing, the Code of Ethics  |                                 |
| and the <i>Standards</i> . The HoA must periodically   |                                 |
| review the internal audit charter and present it to  |                                 |
| senior management and the ASC for approval.  |                                 |
| 1010 Recognition of the <i>Definition of Internal</i>  | HoA discusses compliance        |
| Auditing, the Code of Ethics and the   | in annual report to ASC         |
| Standards in the Internal Audit Charter : The  |                                 |
| mandatory nature of the <i>Definition of Internal</i>  |                                 |
| Auditing, the Code of Ethics and the Standards   |                                 |
| must be recognised in the internal audit charter.  |                                 |
| The HoA should discuss the Definition of   |                                 |
| Internal Auditing, the Code of Ethics and the  |                                 |
| Standards with senior management and the   |                                 |
| ASC.   | Audit is considered             |
| <b>1100 Independence and Objectivity :</b> The   |                                 |
| internal audit activity must be independent and  | independent and objective       |
| internal auditors must be objective in performing  |                                 |
| their work.  | HeA reports to the              |
| <b>1110 Organisational Independence :</b> The  | HoA reports to the<br>Treasurer |
| HoA must report to a level within the  | Treasurer                       |
| organisation that allows the internal audit activity<br>to fulfil its responsibilities. The HoA must confirm | Covered in Audit Charter        |
| to the ASC, at least annually, the organisational  | Covered III Audit Charter       |
| independence of the internal audit activity.   |                                 |
| 1111 : Direct Interaction with the Board : The   | HoA liaises with ASC on a       |
| HoA must communicate and interact directly   | regular basis                   |
| with the ASC.  |                                 |
| 1120 : Individual Objectivity : Internal auditors  | Audit Management reflect        |
| must have an impartial, unbiased attitude and  | on results of annual            |
| avoid any conflict of interest.  | declaration of interest         |
|  | before assigning work           |
|  |                                 |
| 1130 : Impairment to Independence or   | As above                        |
| <b>Objectivity :</b> If independence or objectivity is   |                                 |
| impaired in fact or appearance, the details of the   |                                 |
| impairment must be disclosed to appropriate  |                                 |
| parties. The nature of the disclosure will depend  |                                 |
| upon the impairment.   |                                 |
|  |                                 |

| 1200 Proficiency and Due Professional Care   | Noted, and is subject to                        |
|--|---|
| Engagements must be performed with   | review by Management                            |
| proficiency and due professional care.   | Covered in our Skille 8                         |
| <b>1210 Proficiency :</b> Internal auditors must possess the knowledge, skills and other   | Covered in our Skills &<br>Competency Framework |
| competencies needed to perform their individual  | Competency Framework                            |
| responsibilities. The internal audit activity  |   |
| collectively must possess or obtain the  |   |
| knowledge, skills and other competencies   |   |
| needed to perform its responsibilities.  |   |
| 1220 Due Professional Care : Internal auditors   | Covered in our Operations                       |
| must apply the care and skill expected of a  | Manual  |
| reasonably prudent and competent internal  |   |
| auditor. Due professional care does not imply  |   |
| infallibility.   |   |
| 1230 Continuing Professional Development   | Already covered in our                          |
| Internal auditors must enhance their knowledge,  | Skills & Competency                             |
| skills and other competencies through  | Framework and we develop                        |
| continuing professional development.   | training plans each year to                     |
|  | ensure appropriate training                     |
|  | is arranged. This aims to                       |
|  | assist in continuing                            |
| 1000 Quality Assurance and Improvement   | professional development.                       |
| 1300 Quality Assurance and Improvement   | Covered in our Operations                       |
| <b>Programme :</b> The HoA must develop and  | Manual  |
| maintain a quality assurance and improvement programme that covers all aspects of the  |   |
| internal audit activity.   |   |
| 1310 Requirements of the Quality Assurance   | We have an internal                             |
| and Improvement Programme : The quality  | assessment programme but                        |
| assurance and improvement programme must   | have previously relied on                       |
| include both internal and external assessments.  | External Audit to carry out                     |
|  | the external assessment.                        |
|  | The HoA is tasked with                          |
|  | organising an external                          |
|  | assessment during 2013/14.                      |
| 1311 Internal Assessments : Internal   | We comply, and use the                          |
| assessments must include :-  | Corporate Governance                            |
| a. Ongoing monitoring of the performance of the  | Group to assist.                                |
| internal audit activity;   |   |
| b. Periodic self-assessments or assessments by   |   |
| athor powers with a second start second  |   |
| other persons within the organisation with   |   |
| sufficient knowledge of internal audit practices.  | The HeA is tasked with                          |
| sufficient knowledge of internal audit practices.<br>1312 External Assessments : External  | The HoA is tasked with                          |
| sufficient knowledge of internal audit practices.<br>1312 External Assessments : External<br>assessments must be conducted at least once   | organising an external                          |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent  |   |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent<br>assessor or assessment team from outside the  | organising an external                          |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent<br>assessor or assessment team from outside the<br>organisation. The chief audit executive must  | organising an external                          |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent<br>assessor or assessment team from outside the<br>organisation. The chief audit executive must<br>discuss with the board :-   | organising an external                          |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent<br>assessor or assessment team from outside the<br>organisation. The chief audit executive must<br>discuss with the board :-<br>a. The form of external assessments; | organising an external                          |
| sufficient knowledge of internal audit practices.<br><b>1312 External Assessments :</b> External<br>assessments must be conducted at least once<br>every five years by a qualified, independent<br>assessor or assessment team from outside the<br>organisation. The chief audit executive must<br>discuss with the board :-   | organising an external                          |

| including any notacticl conflict of interact  |                                    |
|---|------------------------------------|
| including any potential conflict of interest.   |                                    |
| 1320 Reporting on the Quality Assurance   | Monthly reports to the             |
| and Improvement Programme : The HoA must  | Treasurer and various              |
| communicate the results of the quality  | reports to ASC.                    |
| assurance and improvement programme to  |                                    |
| senior management and the ASC.  |                                    |
| 1321 Use of "Conforms with the International  | HoA covers in annual               |
| Standards for the Professional Practice of  | review of audit                    |
| Internal Auditing": The HoA may state that the  |                                    |
| internal audit activity conforms with the   |                                    |
| International Standards for the Professional  |                                    |
| Practice of Internal Auditing only if the results of                                    |                                    |
| the quality assurance and improvement   |                                    |
| programme support this statement.   |                                    |
|   |                                    |
| 1322 Disclosure of Non-conformance :  | HoA would report matters to        |
| When non-conformance with the <i>Definition of</i>                                      | Treasurer and ASC                  |
| Internal Auditing, the Code of Ethics or the  |                                    |
| Standards impacts the overall scope or  |                                    |
| operation of the internal audit activity, the HoA                                       |                                    |
| must disclose the non-conformance and the   |                                    |
| impact to senior management and the ASC.  |                                    |
| PERFORMANCE STANDARDS   |                                    |
| 2000 Managing the Internal Audit Activity   | Providing added value is a         |
| The HoA must effectively manage the internal  | core part of our service           |
| audit activity to ensure it adds value to   | offering                           |
| the organisation.   | ccg                                |
| <b>2010 Planning :</b> The HoA must establish risk-                                     | Risk based planning is in          |
| based plans to determine the priorities of the  | place                              |
| internal audit activity, consistent with the  |                                    |
| organisation's goals.   |                                    |
| 2020 Communication and Approval : The HoA   | Report to ASC covers Audit         |
| must communicate the internal audit activity's  | Plan                               |
| plans and resource requirements, including  |                                    |
| significant interim changes, to senior  |                                    |
| management and the ASC for review and   |                                    |
| approval. The HoA must also communicate the   |                                    |
| impact of resource limitations.   |                                    |
| •   | Roport to ASC obviors Audit        |
| <b>2030 Resource Management :</b> The HoA must ensure that internal audit resources are | Report to ASC covers Audit<br>Plan |
|   | r Iall                             |
| appropriate, sufficient and effectively deployed  |                                    |
| to achieve the approved plan.   | Ma have an Onerstand               |
| 2040 Policies and Procedures : The HoA must   | We have an Operations              |
| establish policies and procedures to guide the  | Manual                             |
| internal audit activity.  |                                    |
| 2050 Coordination : The HoA should share  | We liaise with external audit      |
| information and coordinate activities with other  | to ensure no duplication of        |
| internal and external providers of assurance and  | effort. We also liaise with        |
| consulting services to ensure proper coverage   | relevant Directors to avoid        |
| and minimise duplication of efforts.  | duplication e.g. Schools and       |
|   | OFSTED                             |
|   |                                    |

| 2060 Reporting to Senior Management and                | We cover these matters in    |
|--|------------------------------|
| the ASC : The HoA must report periodically to          | various reports to ASC       |
| senior management and the ASC on the internal          |                              |
| audit activity's purpose, authority, responsibility    |                              |
| and performance relative to its plan. Reporting        |                              |
| must also include significant risk exposures and       |                              |
| control issues, including fraud risks, governance      |                              |
| issues and other matters needed or requested           |                              |
| by senior management and the ASC.                      |                              |
| 2070 External Service Provider and                     | We do not use external       |
| Organisational Responsibility for                      | providers but would comply   |
| Internal Auditing : When an external service           | if that occasion arose       |
| provider serves as the internal audit activity, the    |                              |
| provider must make the organisation aware that         |                              |
| the organisation has the responsibility for            |                              |
| maintaining an effective internal audit activity.      |                              |
| 2100 Nature of Work : The internal audit               | Based on plans,              |
| activity must evaluate and contribute to the           | performance and operating    |
| improvement of governance, risk management             | manuals we comply            |
| and control processes using a systematic and           |                              |
| disciplined approach.                                  |                              |
| <b>2110 Governance :</b> The internal audit activity   | Based on the evidence of     |
| must assess and make appropriate                       | Audit Reports this confirms  |
| recommendations for improving the governance           | we comply                    |
| process in its accomplishment of the following         |                              |
| objectives :-  |                              |
| a. Promoting appropriate ethics and values             |                              |
| within the organisation;                               |                              |
| b. Ensuring effective organisational performance       |                              |
| management and accountability;                         |                              |
| c. Communicating risk and control information to       |                              |
| appropriate areas of the organisation;                 |                              |
| d. Coordinating the activities of and                  |                              |
| communicating information among the board,             |                              |
| external and internal auditors and management.         |                              |
| <b>2120 Risk Management :</b> The internal audit       | We carry out a wide range    |
| activity must evaluate the effectiveness and           | of risk management audits    |
| contribute to the improvement of risk                  | or non management audito     |
| •  |                              |
| management processes.                                  | All audits are geared toward |
| <b>2130 Control :</b> The internal audit activity must | All audits are geared toward |
| assist the organisation in maintaining effective       | maintaining effective        |
| controls by evaluating their effectiveness and         | controls                     |
| efficiency and by promoting continuous                 |                              |
| improvement.   | An Audit Priofic property    |
| 2200 Engagement Planning : Internal auditors           | An Audit Brief is prepared   |
| must develop and document a plan for each              | for each assignment          |
| engagement, including the engagement's                 |                              |
| objectives, scope, timing and resource                 |                              |
| allocations.   |                              |
|  |                              |
|  |                              |
|  |                              |

| 2201 Planning Considerations : In planning         | An Audit Brief is prepared                        |
|--|---|
| the engagement, internal auditors must             | for each assignment                               |
| consider :-  |   |
| a. The objectives of the activity being reviewed   |   |
| and the means by which the activity controls       |   |
| its performance;                                   |   |
| b. The significant risks to the activity, its      |   |
| objectives, resources and operations and the       |   |
| means by which the potential impact of risk is     |   |
| kept to an acceptable level;                       |   |
| c. The adequacy and effectiveness of the           |   |
| activity's governance, risk management and         |   |
| control processes compared to a relevant           |   |
| framework or model;                                |   |
| d. The opportunities for making significant        |   |
| improvements to the activity's governance, risk    |   |
| management and control processes.                  |   |
| 2210 Engagement Objectives :Objectives must        | An Audit Brief is prepared                        |
|  | An Audit Brief is prepared                        |
| be established for each engagement.                | for each assignment                               |
| 2220 Engagement Scope :The established             | An Audit Brief is prepared<br>for each assignment |
| scope must be sufficient to satisfy the objectives | for each assignment                               |
| of the engagement.                                 |   |
| 2230 Engagement Resource Allocation :              | Appropriate time allocations                      |
| Internal auditors must determine appropriate       | are made for each audit                           |
| and sufficient resources to achieve engagement     |   |
| objectives based on an evaluation of the nature    |   |
| and complexity of each engagement, time            |   |
| constraints and available resources.               |   |
| 2240 Engagement Work Programme : Internal          | Covered in our Operations                         |
| auditors must develop and document work            | Manual, and audit                                 |
| programmes that achieve the engagement             | programmes developed for                          |
| objectives.  | each audit  |
| 2300 Performing the Engagement : Internal          | Covered in our Operations                         |
| auditors must identify, analyse, evaluate and      | Manual  |
| document sufficient information to achieve the     |   |
| engagement's objectives.                           |   |
|  |   |
|  |   |
| 2310 Identifying Information : Internal auditors   | Covered in our Operations                         |
| must identify sufficient, reliable, relevant and   | Manual  |
| useful information to achieve the engagement's     |   |
| objectives.  |   |
| 2320 Analysis and Evaluation : Internal            | Covered in our Operations                         |
| auditors must base conclusions and                 | Manual  |
| engagement results on appropriate analyses         |   |
| and evaluations.                                   |   |
| 2330 Documenting Information : Internal            | Covered in our Operations                         |
| auditors must document relevant information to     | Manual  |
| support the conclusions and engagement             |   |
| results.   |   |
|  |   |
|  |   |
|  |   |

| 2340 Engagement Supervision : Engagements            | All audit work is subject to  |
|--|-------------------------------|
| must be properly supervised to ensure                | supervision                   |
| objectives are achieved, quality is assured and      |                               |
| staff is developed.                                  |                               |
| 2400 Communicating Results : Internal                | We use standard report        |
| auditors must communicate the results of             | formats                       |
| engagements.   |                               |
| 2410 Criteria for Communicating :                    | Audit brief and audit reports |
| Communications must include the engagement's         | are shared with customers     |
| objectives and scope as well as applicable           |                               |
| conclusions, recommendations and action plans.       |                               |
|  |                               |
|  |                               |
| 2420 Quality of Communications :                     | Noted, and will be            |
| Communications must be accurate, objective,          | reinforced in Operations      |
| clear, concise, constructive, complete and           | Manual                        |
| timely.  |                               |
| 2421 Errors and Omissions : If a final               | The HoA would comply          |
| communication contains a significant error or        |                               |
| omission, the HoA must communicate corrected         |                               |
| information to all parties who received the          |                               |
| original communication.                              |                               |
| 2430 Use of "Conducted in Conformance                | This would not routinely be   |
| with the International Standards for the             | included in Audit Reports     |
|  | included in Addit Reports     |
| Professional Practice of Internal Auditing":         |                               |
| Internal auditors may report that their              |                               |
| engagements are "conducted in conformance            |                               |
| with the International Standards for the             |                               |
| Professional Practice of Internal Auditing", only if |                               |
| the results of the quality assurance and             |                               |
| improvement programme support the statement.         |                               |
| 2431 Engagement Disclosure of Non                    | HoA would report matters      |
| conformance : When nonconformance with the           |                               |
| Definition of Internal Auditing, the Code of Ethics  |                               |
| or the Standards impacts a specific                  |                               |
| engagement, communication of the results must        |                               |
| disclose the :-                                      |                               |
| a. Principle or rule of conduct of the Code of       |                               |
| Ethics or Standard(s) with which full                |                               |
| conformance was not achieved;                        |                               |
| b. Reason(s) for nonconformance;                     |                               |
| c. Impact of nonconformance on the                   |                               |
| engagement and the communicated                      |                               |
| engagement results.                                  |                               |
| 2440 Disseminating Results : The HoA must            | Results are communicated      |
| communicate results to the appropriate parties.      | in Audit Reports to           |
|  | appropriate Director,         |
|  | Assistant Director and Head   |
|  | of Service                    |
|  |                               |
|  |                               |
|  |                               |
| L  |                               |

| <b>2450 Overall Opinions :</b> When an overall opinion is issued, it must take into account the expectations of senior management, the ASC and other stakeholders and must be supported by sufficient, reliable, relevant and useful information.  | Overall opinions are the result of appropriate information and discussions   |
|--|--|
| <b>2500 Monitoring Progress :</b> The HoA must<br>establish and maintain a system to monitor the<br>disposition of results communicated to<br>management.  | Formalised follow up<br>arrangements exist for<br>certain reports and type of<br>recommendation                                |
| <b>2600 Communicating the Acceptance of</b><br><b>Risks :</b> When the HoA concludes that<br>management has accepted a level of risk that<br>may be unacceptable to the organisation, the<br>HoA must discuss the matter with senior<br>management. If the HoA determines that the<br>matter has not been resolved, the HoA must<br>communicate the matter to the ASC. | Noted and such matters<br>would be raised with<br>Treasurer and, within scope<br>of Annual Directorate Audit<br>reports to ASC |

#### APPENDIX D

# CIPFA "A Toolkit for Local Authority Audit Committees"

# Self Assessment Checklist 2013

| ESTABLIS | SHMENT, OPERATION AND I  | DUTIE | S  |     |   |
|----------|--|-------|----|-----|---|
| Role and | Remit  |       |    |     |   |
| Priority | Issue  | Yes   | No | N/A | Comment/Action  |
| 1        | Does the Committee<br>have written terms of<br>Reference?  | Y     |    |     |   |
| 1        | Do the terms of<br>reference cover the core<br>functions of a Committee<br>as identified in the<br>CIPFA guidance?                                       | Y     |    |     |   |
| 1        | Are the terms of<br>reference approved by<br>the Council and<br>reviewed periodically?   | Y     |    |     | Constitution approved<br>by Council and Terms<br>of Reference amended<br>as appropriate |
| 1        | Has the Committee been<br>provided with sufficient<br>membership, authority<br>and resources to<br>perform its role<br>effectively and<br>independently? | Y     |    |     |   |
| 1        | Can the Committee<br>access other<br>Committees and full<br>Council as necessary?  | Y     |    |     |   |
| 1        | Does the authority's<br>AGS include a<br>description of the<br>Committee's<br>establishment and<br>activities?   | Y     |    |     |   |
| 2        | Does the Committee<br>periodically assess its<br>own effectiveness?  | Y     |    |     |   |
| 2        | Does the Committee<br>make a formal annual<br>report on its work and<br>performance during the<br>year to full Council?                                  |       | N  |     |   |

| Members  | ship, Induction and Training   |   |   |   |
|----------|--|---|---|---|
| 1        | Has the membership of<br>the Committee been<br>formally agreed and a<br>quorum set?  | Y |   |   |
| 1        | Is the Chair independent<br>of the Executive<br>function?  | Y |   |   |
| 1        | Has the Committee Chair<br>either previous<br>knowledge of, or<br>received<br>appropriate training on,<br>financial and risk<br>management,<br>accounting concepts<br>and standards, and the<br>regulatory regime? | Y |   |   |
| 1        | Are new Committee<br>Members provided with<br>an appropriate<br>induction?   | Y |   | There is no formal<br>induction. New<br>Members have a<br>briefing with Head of<br>Audit. |
| 1        | Have all Members' skills<br>and experiences been<br>assessed and training<br>given for identified<br>gaps?   |   | N |   |
| 1        | Has each Member<br>declared his or her<br>business interests?  | Y |   |   |
| 2        | Are Members sufficiently<br>independent of the other<br>key Committees of the<br>Council?  | Y |   |   |
| Meetings | 3  |   |   |   |
| 1        | Does the Committee meet regularly?   | Y |   | Additional meeting scheduled for 2013/14  |
| 1        | Do the terms of<br>reference set out the<br>frequency of meetings?   |   | N | This is covered by<br>annual report to<br>Council   |
| 1        | Does the Committee<br>calendar meet the<br>authority's business<br>needs, governance<br>needs and the financial<br>calendar?   | Y |   |   |

|             |  |   | 1  |   |  |
|-------------|--|---|--|---|--|
| 1           | Are Members attending                      |   |  |   |  |
|             | meetings on a regular                      | Υ |  |   |  |
|             | basis and if not, is                       |   |  |   |  |
|             | appropriate action                         |   |  |   |  |
|             | taken?                                     |   |  |   |  |
| 1           | Are meetings free and                      |   |  |   |  |
|             | open without political                     | Υ |  |   |  |
|             | influences being                           |   |  |   |  |
|             | displayed?                                 |   |  |   |  |
| 1           | Does the authority's                       |   |  |   |  |
|             | S151 officer or deputy                     | Υ |  |   |  |
|             | attend all meetings?                       |   |  |   |  |
| 1           | Does the Committee                         |   |  |   |  |
| -           | have the benefit of                        | Y |  |   |  |
|             | attendance of                              | - |  |   |  |
|             | appropriate officers at its                |   |  |   |  |
|             | meetings?                                  |   |  |   |  |
| Internal Co |  |   | <u>                                     </u> |   |  |
|             |  | [ | <u>г</u>                                     | 1 |  |
| 1           | Does the Committee                         |   |  |   |  |
|             | consider the findings of                   |   |  |   |  |
|             | the annual review of the                   |   |  |   |  |
|             | effectiveness of the                       | Υ |  |   |  |
|             | system of internal                         |   |  |   |  |
|             | control (as required by                    |   |  |   |  |
|             | the Accounts & Audit                       |   |  |   |  |
|             | Regulations) including                     |   |  |   |  |
|             | the review of the                          |   |  |   |  |
|             | effectiveness of the                       |   |  |   |  |
|             | system of internal audit?                  |   |  |   |  |
| 1           | Does the Committee                         |   |  |   |  |
|             | have responsibility for                    |   |  |   |  |
|             | review and approval of                     | Y |  |   |  |
|             | the AGS and does it                        |   |  |   |  |
|             | consider it separately                     |   |  |   |  |
|             | from the accounts?                         |   |  |   |  |
| 1           | Does the Committee                         |   |  |   |  |
| •           | consider how                               | Y |  |   |  |
|             | meaningful the AGS is?                     | • |  |   |  |
| 1           | Does the Committee                         | 1 |  |   |  |
| •           | satisfy itself that the                    |   |  |   |  |
|             | system of internal                         | Y |  |   |  |
|             | control has operated                       | I |  |   |  |
|             |  |   |  |   |  |
|             | effectively throughout                     |   |  |   |  |
| 4           | the reporting period?<br>Has the Committee |   |  |   |  |
| 1           |  |   |  |   |  |
|             | considered how it                          | v |  |   |  |
|             | integrates with other                      | Y |  |   |  |
|             | committees that may                        |   |  |   |  |
|             | have responsibility for                    |   |  |   |  |
|             | risk management?                           |   |  |   |  |
|             |  |   |  |   |  |
|             |  |   |  |   |  |

| 1        | Has the Committee (with<br>delegated responsibility)<br>or the full Council<br>adopted "Managing the<br>Risk of Fraud – Actions<br>to Counter Fraud and<br>Corruption?"  | Y      |       | Audit & Standards<br>Committee receive<br>bench marking<br>information against<br>CIPFA/Audit<br>Commission/NFA<br>guidelines |
|----------|--|--------|-------|---|
| 1        | Does the Committee<br>ensure that the "Actions<br>to Counter Fraud and<br>Corruption" are being<br>Implemented ?   | Y      |       | Audit & Standards<br>Committee receive<br>Annual Fraud Report<br>and approve the Anti<br>Fraud & Corruption<br>Strategy       |
| 2        | Is Committee made<br>aware of the role of risk<br>management in the<br>internal audit plan?  | Y      |       |   |
| 2        | Does the Committee<br>review the authority's<br>strategic risk register at<br>least annually?  | Y      |       | Y   |
| 2        | Does the Committee<br>monitor how the<br>authority<br>assesses its risk?   | Y      |       | Approval of the Risk<br>Management Strategy<br>and consideration of<br>Corporate Risks in<br>three separate reports           |
| 2        | Do the Committee's<br>terms of reference<br>include oversight of the<br>risk management<br>process?  | Y      |       |   |
| Financia | al Reporting and Regulatory M  | atters | · · · |   |
| 1        | Is the Committee's role<br>in the consideration<br>and/or approval of the<br>annual accounts clearly<br>defined?   | Y      |       |   |
| 1        | Does the Committee<br>consider specifically:<br>a.The suitability of<br>accounting policies and<br>treatments<br>b.Major judgments made<br>c.Large write-offs<br>d.Changes in accounting<br>treatment<br>e.The reasonableness of<br>accounting estimates<br>f.The narrative aspects<br>of reporting? | Y      |       | Majority of these<br>covered in reports of<br>the Treasurer   |

| 1          | Is an Committee meeting<br>scheduled to receive the<br>external auditor's report<br>to those charged with<br>governance including a<br>discussion of proposed<br>adjustments to the<br>accounts and other<br>issues arising from the<br>audit?   | Y   |   |
|------------|--|-----|---|
| 1          | Does the Committee<br>review management's<br>letter of representation?   | Y   |   |
| 2          | Does the Committee<br>annually review the<br>accounting policies of<br>the authority?  | Y   |   |
| 2          | Does the Committee gain<br>an understanding of<br>management's<br>procedures for preparing<br>the authority's annual<br>accounts?  | Y   | Training offered to<br>Members  |
| 2          | Does the Committee<br>have a mechanism to<br>keep it aware of topical<br>legal and regulatory<br>issues, for example by<br>receiving circulars and<br>through training?  | Y   | "Audit Committee<br>Updates" published by<br>CIPFA forwarded to<br>Members and External<br>Auditors also submit a<br>similar type of report |
| Internal A |  | I I |   |
| 1          | Does the Committee<br>approve, annually and in<br>detail, the internal audit<br>strategic and annual<br>plans including<br>consideration of<br>whether the scope of<br>internal audit work<br>addresses the<br>authority's significant<br>risks? | Y   |   |
| 1          | Does internal audit have<br>an appropriate reporting<br>line to the Committee?   | Y   |   |
| 1          | Does the Committee<br>receive periodic reports<br>from the internal audit<br>service including an<br>annual report from the<br>Head of Internal<br>Audit?  | Y   |   |

| 1       | Are follow-up audits by<br>internal audit monitored<br>by the Committee and<br>does the Committee<br>consider the adequacy<br>of implementation of<br>recommendations?                   | Y |    |  |
|---------|--|---|----|--|
| 1       | Does the Committee<br>hold periodic private<br>discussions with the<br>Head of Internal Audit?   |   | N  |  |
| 1       | Is there appropriate<br>cooperation between the<br>internal and external<br>auditors?  | Y |    |  |
| 1       | Does the Committee<br>review the adequacy of<br>internal audit staffing<br>and other resources?  | Y |    |  |
| 1       | Has the Committee<br>evaluated whether its<br>internal audit service<br>complies with CIPFA's<br>Code of Practice for<br>Internal audit in Local<br>Government in the<br>United Kingdom? | Y |    | Compliance with new<br>IA Standards being<br>assessed as part of<br>the 2013 Review of<br>Internal Audit   |
| 2       | Are internal audit<br>performance measures<br>monitored by the<br>Committee?   | Y |    |  |
| 2       | Has the Committee<br>considered the<br>information it wishes to<br>receive from internal<br>audit?   | Y |    | Benchmarking<br>exercises undertaken<br>in 2009 and 2012 and<br>reported to Committee<br>to advise Members of<br>practices at other<br>Authorities.<br>Improvements to<br>information required<br>by Committee on each<br>occasion |
| Externa | I Audit  | I | II |  |
| 1       | Do the external auditors<br>present and discuss<br>their audit plans and<br>strategy with the<br>Committee   | Y |    |  |
| 1       | Does the Committee<br>hold periodic private<br>discussions with the<br>external auditor?   |   | N  |  |

| 4         |  |          | <u>г</u> |  |
|-----------|--|----------|----------|--|
| 1         | Does the Committee                               |          |          |  |
|           | review the external                              | Y        |          |  |
|           | auditor's annual report                          | T        |          |  |
|           | to those charged with<br>governance?             |          |          |  |
| 1         | Does the Committee                               |          |          |  |
| 1         | ensure that officers are                         |          |          |  |
|           |  | Y        |          |  |
|           | monitoring action taken                          | T        |          |  |
|           | to implement external<br>audit recommendations?  |          |          |  |
| 1         |  |          |          | In respect of External                 |
| I         | Are reports on the work<br>of external audit and |          |          | In respect of External<br>Audit. Other |
|           |  |          |          | Committee's deal with                  |
|           | other inspection                                 | Y        |          |  |
|           | agencies presented to                            | T        |          | reports from OFSTED,                   |
|           | the Committee, including                         |          |          | etc.                                   |
|           | the external auditors                            |          |          |  |
|           | annual audit and                                 |          |          |  |
| 4         | inspection letter?<br>Does the Committee         |          |          | Oninian based on                       |
| 1         |  | Y        |          | Opinion based on                       |
|           | assess the performance<br>of external audit?     | T        |          | reports from Treasurer                 |
| 1         | Does the Committee                               |          |          |  |
|           |  | Y        |          |  |
|           | consider and approve the external audit fee?     | T        |          |  |
| Agondo Ma |  |          |          |  |
| Agenda Ma | anagement  | -        |          |  |
| 1         | Does the Committee                               |          |          |  |
|           | have a designated                                | Y        |          |  |
|           | secretary from                                   |          |          |  |
|           | Committee / Member                               |          |          |  |
|           | Services?  |          |          |  |
| 1         | Are agenda papers                                |          |          |  |
|           | circulated in advance of                         |          |          |  |
|           | meetings to allow                                | Y        |          |  |
|           | adequate preparation                             |          |          |  |
|           | by Committee members?                            |          |          |  |
| 2         | Are outline agendas                              |          |          |  |
|           | planned one year ahead                           |          |          |  |
|           | to cover issues on a                             | Y        |          |  |
|           | cyclical basis?                                  |          |          |  |
| 2         | Are inputs for Any Other                         |          |          |  |
|           | Business formally                                |          |          |  |
|           | requested in advance                             |          |          |  |
|           | from Committee                                   |          | Ν        |  |
|           | members, relevant                                |          |          |  |
|           | officers, internal and                           |          |          |  |
|           | external audit?                                  |          |          |  |
|           |  |          |          |  |
|           |  |          |          |  |
|           |  |          |          |  |
|           |  |          |          |  |
|           |  |          |          |  |
|           |  | <u> </u> |          |  |

| Papers  |  |   |     |                |
|---------|--|---|-----|----------------|
| 1       | Do reports to the<br>Committee communicate<br>relevant information at<br>the right frequency, time,<br>and in a format that is<br>effective? | Y |     |                |
| 2       | Does the Committee<br>issue guidelines and/or a<br>pro forma concerning<br>the format and content<br>of the papers to be<br>presented?       |   | N/A | Council Policy |
| Actions | Arising  |   |     |                |
| 1       | Are minutes prepared<br>and circulated promptly<br>to the appropriate<br>people?   | Y |     |                |
| 1       | Is a report on matters<br>arising made and<br>minuted at the<br>Committee's next<br>meeting?   | Y |     |                |
| 1       | Do action points indicate<br>who is to perform what<br>and by when?  | Y |     |                |

Priority Rating set by CIPFA Better Governance Forum

#### Audit and Standards Committee 9th July 2013

#### Report of the Treasurer

#### Agenda Item. No 7

#### **Review of current Corporate Risks**

#### Purpose of report

1. To update members of current Corporate Risks (as most recently reviewed by Corporate Board) and to advise of future scrutiny arrangements of these risks.

#### **Background**

2. At its meeting of the 25<sup>th</sup> April 2013, this Committee requested it should receive details of Corporate Risks three times per annum. Accordingly, this report constitutes one such report and as the timetable currently stands, further reports will submitted in December and February.

#### Risks currently deemed as 'Corporate'

- **3.** Appendix one shows details of Corporate Risks (as reviewed by Corporate Board on the 4<sup>th</sup> June 2013) and therefore those appearing at the highest level on the Council's risk register. In simple terms, these risks are generally acknowledged as being the most significant facing the Council, impacting upon at least one or several of Council's key objectives
- 4. Corporate Board also receives reports on Corporate Risks at least 3 times per annum and in addition, all Directors continue to review Directorate risks on a quarterly basis which form part of the Quarterly Corporate Performance Report.
- 5. In addition to these reports, it is envisaged that this Committee will, in future, identify and scrutinise a specific risk. This will entail the risk owner or pertinent officer/s attending the Committee to provide more details about the risk e.g. its substance, severity (rating) and how it is being controlled i.e. mitigating actions. It is envisaged that this process should be on a rolling basis and that a particular risk from the Appendix should be identified. The risk owner or pertinent officer/s will be then invited to attend the next appropriate meeting.
- 6. In addition to risks tabled in Appendix one, it is acknowledged that this Committee may identify any additional risks that it considers should form part of the Corporate Risks list.

#### **Finance**

7. There are no explicit financial implications arising from this report.

#### <u>Law</u>

8. The Council has a statutory responsibility for managing risks as laid out in Section 4 of the Accounts and Audit Regulations 2003 (amended 2006)

#### **Equality Impact**

**9.** There are no equality issues arising from this report.

#### **Recommendations**

- 10. That this committee:
  - Notes and comments on the Corporate Risks as set out in Appendix 1.
  - Identifies any additional risks that it considers should form part of the Corporate Risks list.
  - Identifies a particular risk for closer scrutiny the next time a risk report is scheduled (Provisionally 10<sup>th</sup> December 2013).

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#### lain Newman, Treasurer

Contact Officer: Sara McNally, 01384 815346. sara.mcnally@dudley.gov.uk

# Corporate Risks following review by Corporate Board 4<sup>th</sup> June 2013

| Risk Ref | The Risk   | Risk<br>Rating | Owner       | Mitigating controls   | Status since<br>last report<br>14 Feb 2013 |
|----------|--|----------------|-------------|---|--|
| ORG0001  | Single Status. Failure to complete appeals by end of<br>September 2013 and potential cost implications of<br>successful appeals and/or equal pay settlements   | Significant    | John Millar | Corporate Board to receive reports as each<br>division Stage 3 is completed to review if<br>additional resources needed<br>John Millar<br>Communications with employees to confirm need<br>to prepare for Stage 3 hearing when appeal<br>submitted, not wait for allocated date<br>Teresa Reilly<br>Corporate Board release managers and union<br>representatives as required for Panels<br>John Millar<br>Specialist legal advice and support in relation to<br>equal pay litigation<br>Philip Tart<br>Prudent provision has been made and this<br>provision is regularly reviewed.<br>Iain Newman |  |
| ORG0002  | Assumptions made in the Medium Term Financial Strategy<br>change e.g. inflation, grant awards and investment income<br>returns may not be achieved and funding may be<br>inadequate for the Council to meet all of its statutory<br>obligations. | Major          | lain Newman | Business Rates Localisation - financial planning in conjunction with accountants lan Wollaston         FMMR meetings with budget holders and directorate management teams Jan Szczechowski         Finance representation on working groups Jan Szczechowski         General and working capital reserves Jan Szczechowski         Budget review pro-formas for completion by directorates Jan Szczechowski         Financial reporting to members Jan Szczechowski         Longer term budget prioritisation lain Newman   |  |

| ORG0003 | Carbon reduction targets not achieved<br>There is an absolute risk to the environment and the<br>Council risks incurring fines for non compliance.   | Major       | Phil Tart             | CRC Operational Group (to ensure compliance in future years)<br>Steve Cooper  | • |
|---------|--|-------------|-----------------------|---|---|
|         |  |             |                       | Low Carbon Management Plan (to deliver actions<br>within plan) CRC Performance Management<br>Steve Cooper               |   |
|         |  |             |                       | Framework (to monitor and manage performance)<br>Steve Cooper   |   |
| ORG0006 | Collaborative working opportunities are not realised.  | Moderate    | John<br>Polychronakis | Lead the Black Country Collaboration programme for<br>Dudley MBC<br>Geoff Thomas  | • |
|         |  |             |                       | Work with partners around the progression of the City<br>Region proposal<br>Geoff Thomas                                |   |
| ORG0007 | Corporate Property Review<br>There is a risk that the Council fails to vacate sites in a<br>timely manner and is unable to release sites to the LLP for<br>disposal in accordance with the development agreement,<br>resulting in financial consequences detrimental to the<br>Council | Moderate    | Phil Tart             | Detail project/partnership underway incorporating<br>Corporate Property and the LLP<br>Steve Cooper                     | * |
| ORG0011 | Community Cohesion<br>There is a risk that high profile local issues may adversely<br>affect community cohesion  | Moderate    | Andrea Pope-<br>Smith | To understand and engage with local community<br>dynamics and identify potential for actual tensions<br>Rosina Ottewell | • |
|         |  |             |                       | Minimise potential negative effects of tension,<br>prevent escalation and reduce conflict<br>Rosina Ottewell            |   |
|         |  |             |                       | Implementation of Hate Crime Strategy<br>Rosina Ottewell  |   |
|         |  |             |                       | Regular monitoring via Community Cohesion<br>Tension Executive<br>Geoff Thomas  |   |
|         |  |             |                       | Support and promote community cohesion<br>Rosina Ottewell   |   |
|         |  |             |                       | Consider and plan interventions short, medium<br>and long term<br>Rosina Ottewell                                       |   |
|         |  |             |                       | Initiatives to prevent gang activity within the<br>borough via Gang Prevention Working group<br>Rosina Ottewell         |   |
| ORG0013 | Information Governance:<br>The Council may fail to; assess the importance of<br>information to the business and may be unaware of the  | Significant | lain Newman           | Information asset owners identified /named for<br>each information asset<br>Lewis Bourne                                | • |
|         | potential impact on the organisation should the confidentiality, integrity or availability of information be   |             |                       | Key information assets across the organisation  |   |

|         | compromised.  |             |           | identified and classified with Protective Marking<br>System<br>Lewis Bourne<br>A structure consisting of a Board level Senior<br>Information Risk Owner (SIRO) in place.<br>Lewis Bourne<br>Information asset owners responsible for<br>completion of a self assessment Data Protection<br>Compliance checklist<br>Lewis Bourne   |  |
|---------|---|-------------|-----------|---|--|
| ORG0017 | Welfare reform/s - There is a risk that various changes to<br>welfare and benefits due in 2013 could place people at risk<br>and increase demand for statutory services | Significant | Phil Tart | Welfare Reform Project Board in place to monitor<br>actions and outcome<br>Owner TBC         Increased provision for bad debt (Housing related<br>in this instance)<br>Owner TBC         Reviewing use of Discretional Housing Payments<br>in line with new guidance<br>Owner TBC         Health & Well being Board established to manage<br>its work programme including Strategy delivery<br>Brendan Clifford         Local Welfare Assistance/Members Steering<br>Group in place a replacement scheme for DWP<br>Social Fund<br>Owner TBC         Joint working in place to involve Social Housing<br>Providers, CAB and Housing Benefits to identify<br>people affected by changes<br>Owner TBC         Joint working in place to involve Social Housing<br>Providers, CAB and Housing Benefits to identify<br>people affected by changes<br>Owner TBC         Ensure the council fulfils its legal obligations<br>resulting from the Localism Act<br>Philip Tart         Housing Stock options both locally and regionally<br>being considered<br>Owner TBC         Provide advice & guidance on the implications of<br>Localism Act 2011, the major measures to come<br>into effect in April 2012<br>Andy Wright         Ensure the council oversees/guides the changes<br>the council will undergo as a result of responding<br>to community activity<br>Philip Tart |  |

| ORG0019 | The Council acknowledges that there is a risk of fraud<br>across all areas of its operations and is working both<br>internally and with external partners to prevent and reduce<br>this risk.   | Significant | lain Newman         | Detailed fraud risk register is held within Audit<br>Services which is reviewed on a quarterly basis.         Les Bradshaw         Audit staff are aware of the risk register and utilise<br>the information before completing audits in any<br>specific areas mentioned         Les Bradshaw         Data matching exercises undertaken         Les Bradshaw         Audit Services have a programme of work as<br>detailed below         Les Bradshaw         Networking within the West Midlands Anti Fraud<br>Group and exchanges of intelligence.         Les Bradshaw         Audit Services have a fraud strategy action plan -<br>the progress of this is monitored on a quarterly<br>basis at Divisional Management |     |
|---------|---|-------------|---------------------|--|-----|
| ORG0020 | Transfer of Public Health responsibilities to the Council is<br>new to local government and as such presents challenges<br>and potential risks.   | Significant | Brendan<br>Clifford | Public Health Transition Group established<br>Valerie Little   | •   |
| ORG0021 | Factors are combining to create a situation in which the<br>Directorate of Children's Services may not be able to<br>ensure the safety of children and young people. In<br>particular whilst our budget is being reduced the level of<br>need for services to protect children and young people<br>from harm and neglect is rising. | Major       | Jane Porter         | Development of early intervention services<br>lan McGuff<br>DSLT prioritises spend and manages budgets to<br>ensure children are safe from harm and neglect<br>lan McGuff<br>Optimise management structures to ensure<br>service improvements are maintained lan McGuff  | New |

**Risk rating** is a combination of impact and likelihood

Status should reflect risk history.





#### Audit and Standards Committee – 9th July 2013

#### Report of the Treasurer and the Director of Corporate Resources

#### Committee Work Plan 2013/14

#### Purpose of the Report

1. To introduce a work plan setting out a schedule of agenda items to consider at Committee meetings in the new Municipal year.

#### **Background**

- 2. A Benchmarking Report, presented to the April Committee meeting, compared working practices with Birmingham City Council and the other Black Country Councils.
- 3. A number of recommendations were made and accepted by the Committee including the following :
  - a. Introduce a work plan report setting out scheduled agenda items for the Committee at the first meeting in the 2013/14 Municipal year.
  - b. That the Committee receives regular reports on the Corporate Risk Register at three meetings per year and identifies a specific risk in each report to focus on
  - c. That in view of the other recommendations set out above, the Committee agrees to increase the frequency of meetings from four per year to five per year.
- 4. Attached as Appendix 1 is a draft schedule of agenda items for the five meetings in the new Municipal year, including a meeting scheduled for December.

#### **Finance**

5. There are no direct financial implications in this report.

#### <u>Law</u>

6. The Accounts and Audit Regulations 2011 require the Council to have an adequate and effective system of internal audit which includes all elements of the audit framework including the Audit & Standards Committee.

#### Equality Impact

7. This report does not raise any equal opportunities issues.

#### **Recommendations**

8. The Committee notes the contents of this report and approves the agenda schedule at Appendix 1.

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lain Newman Treasurer Philip Tart Director of Corporate Resources

Contact Officer: Les Bradshaw (ext. 4853)

# Appendix 1

| Date of      |  |
|--------------|--|
| Meeting      | Report   |
| 2013         |  |
| 9 July       | Grant Thornton Annual Plan [Opinion Plan]                  |
|              | Audit Services Performance/Review Report 12/13             |
|              | Annual Audit Report - Chief Executive                      |
|              | Annual Audit Report – Corporate Resources                  |
|              | Risk Report  |
|              | Committee Work Plan 13/14                                  |
|              |  |
| 19 September | Statement of Accounts 12/13                                |
| I            | Annual Governance Statement 12/13 [Incorporating           |
|              | Assurance Mapping]   |
|              | Treasury Management  |
|              | Annual Audit Report – DUE                                  |
|              | Exceptions to Standing Orders 01/13 – 06/13                |
|              | Grant Thornton Annual Governance Report                    |
|              | Grant Thornton Audit Committee Update Report               |
|              | Audit Services Interim Performance Report                  |
|              | Employee Code of Conduct Update                            |
|              |  |
| 10 December  | Annual Audit Report – DACHS                                |
|              | Risk Report  |
|              | Grant Thornton Audit Committee Update Report               |
|              | Annual Report of the Committee on Standards in Public Life |
|              | Disciplinary suspensions                                   |
| 2014         |  |
| 13 February  | Audit Services Interim Performance Report                  |
|              | Annual Audit Report – DCS                                  |
|              | Audit Commission Annual Audit/Inspection Letter 2013       |
|              | Grant Thornton Fee Letter 13/14                            |
|              | Grant Thornton Audit of Grants 12/13                       |
|              | Grant Thornton Audit Committee Update Report               |
|              | Risk Management Strategy                                   |
|              | Treasury Management  |
|              |  |
| 17 April     | Exceptions to Standing Orders 07/13 – 12/13                |
|              | Annual Fraud Report including Anti Fraud & Corruption      |
|              | Strategy   |
|              | Audit Services Plan 14/15 [Incorporating Assurance         |
|              | Mapping]   |
|              | Code of Corporate Governance                               |
|              | Confidential Reporting Policy                              |
|              | Grant Thornton Audit Committee Update                      |
|              |  |

Agenda Item No. 9



# Audit and Standards Committee – 9<sup>th</sup> July,2013

#### **Report of the Director of Corporate Resources**

#### **Re-appointment of the Standards Sub-Committee**

#### Purpose of Report

1. To re-appoint the Standards Sub-Committee

#### **Background**

- 2. This Committee at its meeting held on 3rd July, 2012, following consideration of a report on the Localism Act, 2011 The New Standards Arrangements, agreed amongst other things, to appoint a Standards Sub-Committee.
- 3. The purpose of the sub-committee is to hear and determine complaints against Members and Co-opted Members under the provisions of the Members' Code of Conduct and in accordance with the local procedures that have been put in place.
- 4. The membership of the Sub-Committee in 2012/13 comprised four elected members, Councillors Cowell, Taylor, Mrs Westwood and Zada, being two from each political group represented on the Committee, with proportionality waived as to Membership. The Council at its annual meeting on 16<sup>th</sup> May, 2013 agreed that the proportionality requirement again be waived.

#### **Finance**

5. The cost of holding meetings of the sub-committee would be met from within existing resources

#### <u>Law</u>

6. The relevant provisions are contained in the Localism Act, 2011 together with regulations, orders and statutory guidance issued by the Secretary of State.

#### Equality Impact

7. The Sub-Committee will meet to hear and determine complaints about alleged breaches of the Local Code of Conduct requiring Members and Co-opted Members to behave in a manner that is consistent with seven overriding principles so as to achieve best value for their residents and maintain public confidence in the Authority. The principles will have a bearing on issues such as equality.

#### **Recommendation**

8. That the Standards Sub-Committee be re-appointed for 2013/14 with its existing terms of reference and that the Membership of the sub-committee comprise four members of this Committee, two from each of the political groups on the committee, with proportionality waived as to membership.

Philip Tart Director of Corporate Resources

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#### List of Background Papers

None