BUCKINGHAMSHIRE COUNCIL

Business Assurance Update

Progress against the Internal Audit Plan 2022/23

Maggie Gibb

Head of Business Assurance (& Chief Internal Auditor)

September 2022

Contents

1. Introduction

1.1 The Business Assurance Team is responsible for delivering the Council's Risk Management, Assurance, Internal Audit and Counter Fraud services. The team operates under the Service Director for Legal and Democratic Services within the Deputy Chief Executive Directorate. The team continues to work towards implementing the Council's Assurance and Risk Strategy through delivery of work programmes which include; assurance reviews of the Council's financial and operational systems, computer audit reviews, corporate and social housing fraud investigations, fraud awareness, corporate governance and risk management reviews, and compliance reviews to check adherence to policies, procedures and systems. The legislative framework and professional standards / guidelines we are required to adhere to include:

> ➢ Accounts and Audit Regulations 2015;
> ➢ Fraud Act 2006;
> ➢ Social Housing Fraud (Power to Require Information) Regulations 2014;
> ➢ Council Tax Reduction Schemes (Detection of Fraud and Enforcement) Regulations 2013; and
> ➢ Public Sector Internal Audit Standards (PSIAS).

1.2 This report outlines the work carried out by the Business Assurance Team for quarters one and two of 2022/23. The Internal Audit, Risk Management, Counter Fraud and Assurance work plans were produced with reference to the Strategic and Directorate Risk Registers and is prepared using a risk-based methodology that enables the provision of an independent opinion on the adequacy and effectiveness of the systems of internal control (comprising of risk management, corporate governance, financial and operational controls). The plans were also informed through discussions with the Senior Leadership Teams for each Directorate, Heads of Finance, Section 151 Officer and the Deputy Chief Executive (Monitoring Officer). Plans are also be reviewed quarterly in conjunction with Strategic and Directorate Risk Registers and presented to the Audit Board for consideration and comment prior to being reported to this committee.

1.3 The Business Assurance work plans continue to be dynamic in nature as they remain flexible and evolve throughout the year to reflect; the changing risks faced by the Council, the maturity of the assurance framework and to meet the needs of unplanned demands, especially in the
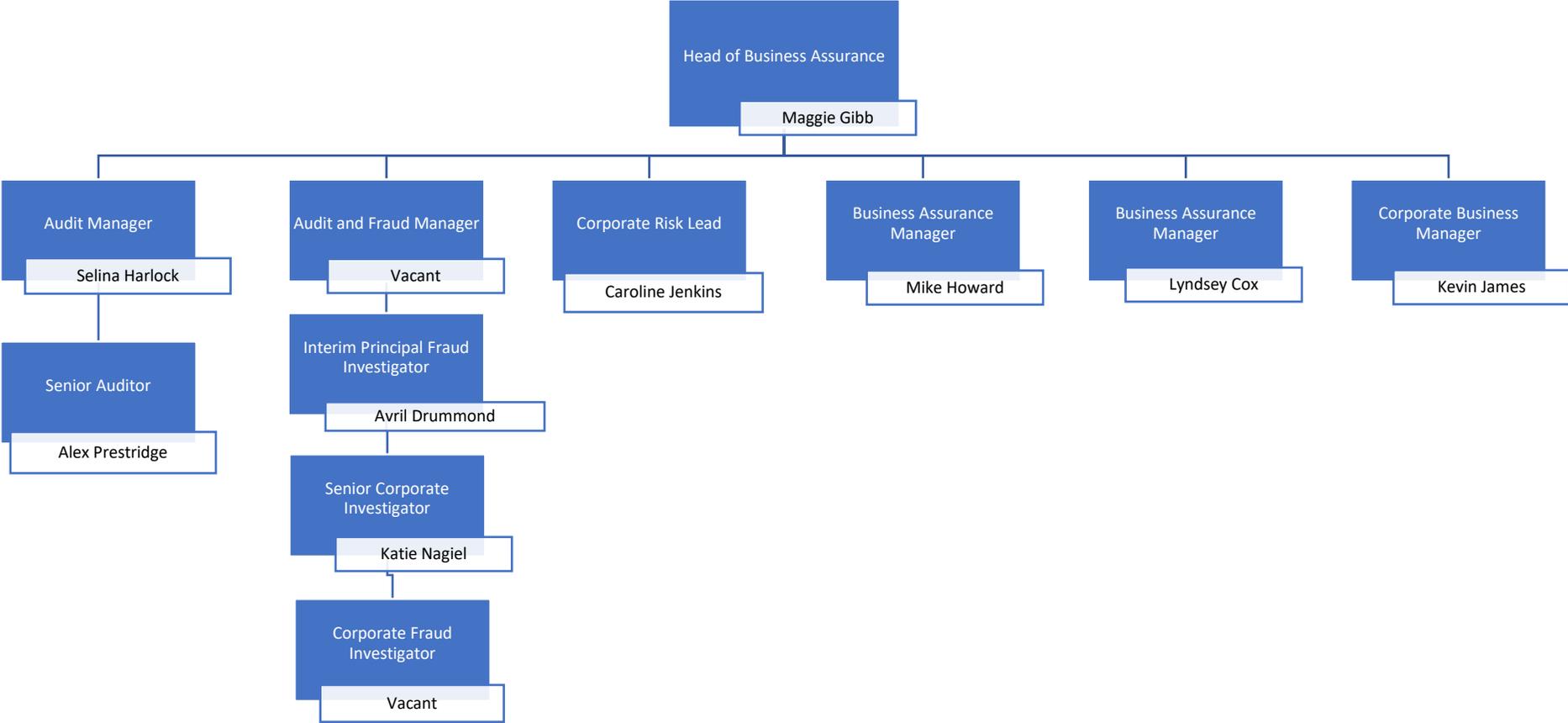
context of the response to and recovery from the Covid-19 pandemic; and other emerging priorities. Quarterly updates on Business Assurance activities have been presented to each directorate leadership team providing them with an overview of the Internal Audit activities including progress on implementation of audit actions; and a risk management update on escalated risks with status of risk reviews.

1.4   The Business Assurance Team is entering into the final phase of their Service Transformation Review, which is part of the Better Buckinghamshire Programme. The review has consisted of an ongoing evaluation of our current service delivery and is working towards designing a human-centred and future-focusses service that delivers on the needs of customers and the team (officers). The consultation phase concluded on 1st September where the new structures were confirmed and will go live on 1st November. The next phase involves appointing officers to posts and where applicable the recruitment process will commence.

2.   Resources

2.1   There have been some recent resourcing changes to the Business Assurance team with the departure of the Audit and Fraud Manager and the return of the Corporate Risk Lead from maternity leave. We continue to resource work plans with a mix of in-house staff and a partnership arrangement with the APEX London Audit Framework. The framework is hosted by the London Borough of Croydon and the audit service is currently provided by Mazars. This arrangement allows for a flexible approach and enables us to respond swiftly to urgent requests for resource such as for investigations. The framework also enables us to request specialist resource such as IT auditors and contract auditors where the in-house team do not have the appropriate technical skills.

Current Business Assurance Team Structure (new structure to be published on 1 November 2022)

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                                    Head of Business Assurance
                                           Maggie Gibb
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Audit Manager	Audit and Fraud Manager	Corporate Risk Lead	Business Assurance Manager	Business Assurance Manager	Corporate Business Manager
Selina Harlock	Vacant	Caroline Jenkins	Mike Howard	Lyndsey Cox	Kevin James

Audit Manager → Selina Harlock → **Senior Auditor** → Alex Prestridge

Audit and Fraud Manager → Vacant → **Interim Principal Fraud Investigator** → Avril Drummond → **Senior Corporate Investigator** → Katie Nagiel → **Corporate Fraud Investigator** → Vacant

3   Risk Management

3.1   The Business Assurance Team has continued to embed risk management across Buckinghamshire Council with all Directorates ensuring that risks are identified and uploaded onto Pentana, the corporate risk management system. We have also continued the review of risks ensuring that the magnitude of risks is understood and that there are appropriate internal controls and/or actions undertaken to mitigate risks and address some of the risk gaps identified.

3.2   The Business Assurance team has established an emerging risk register which is reported to Risk Management Group and the team are sharing knowledge to directorates' Risk Champions. The last meeting of the Risk Management Group was held on 5 September 2022, an update on this meeting will be provided in a separate report.

3.3   The team are currently drafting the Risk Management strategy which informs the Risk Management Framework consisting of a tailored Risk Reporting and Escalation Frameworks for each directorate to suit their business needs. The strategy will be presented to this committee at the next meeting scheduled for November.

3.4   The Business Continuity Management (BCM) function is now being delivered alongside the Risk Management function, and regular assurance reporting on BCM will be included in the Business Assurance Strategy update from November 2022.

4.   Internal Audit

4.1   In order to make certain the audit efforts are focussed on those areas that are key, an audit planning model was used on the list of audits identified from the discussion with senior management, the review of risk registers and those identified through horizon scanning. The model is predicated on the basis that all risks are relative but that they can be compared by combining three key factors: -

- The size, importance or inherent risk in the area under review;

- The assessment of the effectiveness of the internal controls; and

- The likelihood of the consequences being detected if the risk does materialise.

Following this formulaic assessment, each audit engagement identified for inclusion in the 2022/23 Internal Audit Plan was 'RAG' rated and those that scored RED were deemed to be priority for delivery this year. The audit planning methodology is in line with the approach being taken by other authorities with the sector widely working towards more flexible audit plans to enable internal audit to be more responsive to changing risks, in turn maximising resource focus to meet the needs of the organisation as and when needed – Agile Auditing.

4.2   The 2022/23 Internal Audit Plan was approved by the committee at the July meeting and during quarter one and two the Internal Audit function has progressed with the audit and assurance activity that was carried over from the previous financial year and commenced the delivery of engagements from the current year's plan. Since the last update Internal Audit delivery has progressed as follows;

- for 2021/22 the carried forward activity has been completed and four final reports have been issued and two are at draft;

- from the 2022/23 the team have issued final reports for two engagements, one engagement is at draft reporting stage, two grant certifications have been completed and 11 audits are at the scoping stage; and

- from the assurance activity, four final reports have been issued and one is at draft reporting stage.
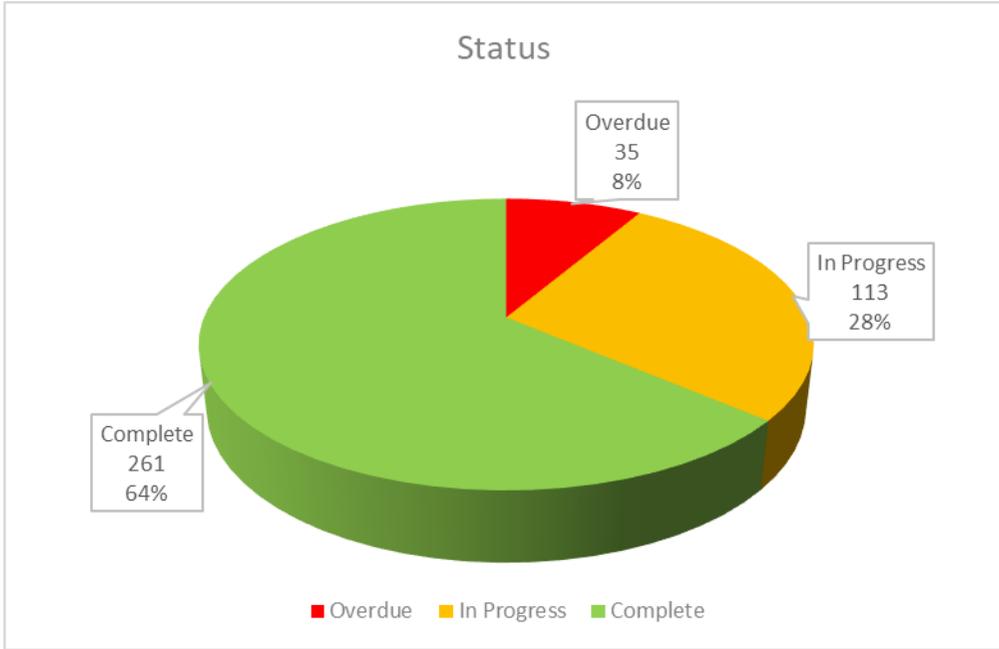
4.3   In quarter two the team has been developing the Schools' Audit Programme which identifies a schedule of schools to visit and audit during the current year. Through review of financial reports, complaints, Ofsted results and quarterly consultation with the Schools Improvement Team and Schools Finance; each maintained school is risk assessed based on this information and those with a high 'RAG' rating are selected for an audit. The schools identified for review along with the rationale for selection are detailed in the confidential part of the meeting.

The scope for the audit visit is standard across all the schools and will be looking and the following key risks areas; Governance and Leadership, Financial Management, Procurement, Income, Human Resources and Payroll, Business Continuity and Health and Safety.

An audit of William Harding School was conducted during quarter one, this audit was scheduled last year due to large number of audit actions that remained incomplete for a long period of time. The report is currently at the draft reporting stage and will be shared with the committee once it has been finalised.

4.4   Using the audit tool, 'Pentana', Internal Audit have been monitoring implementation of audit actions. Follow-up of management actions is a continuous task that is undertaken by the auditors alongside their assigned audit engagements. The chart below provides a summary on the implementation status of the audit actions:

Summary Status of Management Actions

Status pie chart: Overdue 35 (8%), In Progress 113 (28%), Complete 261 (64%). Legend: Overdue, In Progress, Complete.

4.5   Progress against implementing audit actions is reported to each of the Directorate leadership team meetings on a regular basis, and outstanding audit actions are reported to the Corporate Management Team (CMT). Of the 34 actions overdue, 30 are owned by schools and fell due at the start of the academic year, Internal Audit are giving schools a grace period as they settle into the new year and the auditors will begin liaising

with the schools at the end of September. An update on progress of implementing school audit actions will be presented to the committee in November.

4.6 The Audit Board, chaired by the Service Director of Finance (S151), reviewed progress against the Business Assurance Strategy, in particular delivery of the Internal Audit Plan at a meeting held on 21 September 2022. Appendix 1 shows the current progress updated against the Internal Audit Plan.

5. Business Assurance

5.1 **Covid Grants**: The Business Assurance Team continue to progress with the COVID grant assurance as the requirements from central government for returns, reconciliations and pre/post assurance checks continue. The team liaise with the services and support in the collation of the required returns, reconciliations and certification where required. Since the last update to this committee three returns have been completed in line with guidelines and agreed deadlines. One grant reconciliation return is currently in progress and one post- payment assurance return is being completed.

There are currently two COVID grants that remain open and both grants are within the Deputy Chief Executive directorate. Internal Audit will continue to liaise with the services to ensure returns and required reconciliations are complete in line with guidelines and agreed deadlines.

5.2 **Children's SEND Payments Process Assurance:** In quarter one, the team have been progressing with an assurance review within Children's Services SEND team, which was commissioned due to a number of problems having been identified, including a significant backlog of queries received from schools and parents, inaccuracies of data within the ONE system, and inconsistent roles and responsibilities. The scope of work included:

- Detailed review of processes involved within Children's Services SEND provisions.

- Completion of process maps to show current roles and responsibilities, systems and documentation involved in each step.

- Observations outlining the pain points involved within key stages of the processes.

- Improvements to address pain points.

- An outline of the impact, difficulty and priority of the improvements provided.

The review found a number of issues which were classified under six key headers: Unclear Roles and Responsibilities, Query Backlog, Unreliable Data, Lack of Management Information, Lack of Key Performance Indicators and Excess of Spreadsheets. Recommendations on improvement initiatives have been made to the service and Business Assurance continue to support the team in the development of some of the improvement opportunities highlighted in the report.

5.3 **Southern Waste- Round Reorganisation Review:** During quarter two a review was commissioned of the issues and challenges faced as a result of the waste round reorganisation involving the delivery of waste bin collection services in the south of the county. Veolia are responsible for all of the waste collections in the south of the county and since May 2022 they commenced the new collection arrangements which were introduced following a round reorganisation of routes and collections. The reorganisation is aimed at delivering more efficient rounds, more robust collections, and a better waste collection service. Although disruptions were expected, this had proven to be a very challenging change (with 90% of residents impacted by a day or week change to their collection date), with issues far exceeding planned mitigations. The review considered:

- The operational planning arrangements in place prior to the commencement of the round reorganization.
- The key issues that led to the significant increase in the number of missed bins and complaints including when the influx of complaints started to increase.
- The governance structure in place to manage escalation as a result of the large influx of complaints, who was involved between both Veolia as well as Buckinghamshire Council, what escalation routes were in place and how key performance indicators were measured.
- The overall team structure that was in place as per the Veolia contract to service the south of the county. The team structure internal to the council that support Veolia in ensuring services are delivered, including the call centre team structure.
- The communication plans that were put in place to both internally and externally.
- The record and types of complaints received from the resident, the process to capture the complaints; the complaints resolution process and the types of response provided.

From the work undertaken a number of findings were raised with regard to the following key areas:

- Data and Round Design

- People and Resourcing

- Governance and Responsibilities

- Tools and Assets

- Stakeholders and Communications; and

- Processes and Controls.

The outcomes of the review have been reported to management and highlighted core areas which hampered the reorganisation, many of which had been the result of resource challenges. This impacted knowledge transfer, consistency of staff, staffing numbers and supervisory management. Through the interviews conducted during the review Business Assurance noted that there is a good working relationship between the Council and Veolia, further evidenced by the recovery attempts put in a place and commitment to achieving a long term, sustainable waste management operation. The overall success of this project will be derived over a much longer period of time and the coming weeks are crucial to restore trust across households and in the council. The service has developed a recovery plan and through regular review and reporting there is greater visibility of progress. The review of this major change project will be reported in detail to the Risk Management Group on 7 November 2022.

5.4 **SEND Eligibility Review:** Business Assurance are currently undertaking a review of Home to School Transport for SEND students. The objective of this review is to provide an evaluation of the adequacy and effectiveness of the process currently in place to assess the eligibility of students for travel assistance. The evaluation will include sample or population testing of students currently deemed eligible to confirm any instances of incorrect assessment. The review will culminate in the provision of improvement opportunities to facilitate effective and efficient adherence to the policies and relevant legislation going forward, as well as a high-level implementation plan. The review is evaluating the following key areas:

- Policies, Procedures and Training

- Claims Assessment and Approval

- Monitoring/Reviewing Changes in Circumstances

- Budget Monitoring

- Performance Monitoring and Reporting

5.5   **Project Assurance:** Following the findings raised from the South East Aylesbury Link Road (SEALR) review undertaken in quarter four, Business Assurance performed a project assurance review across all the teams within the Strategic Transport and Infrastructure Service. The objective of the review was to provide assurance on the arrangements in place that allow senior management to have complete, accurate and timely information on the progress of projects that are being delivered within the Strategic Transport and Infrastructure Service. A sample of projects was evaluated for each team and specific weaknesses or project gaps identified from the review were reported to the respective Head of Service to ensure that the weaknesses were addressed in a timely manner. The work undertaken focussed on six fundamental aspects of project and programme management; project planning, governance structure and control, project delivery, risk management and contract management, reporting/ management information and lessons learnt/continuous improvement. From the sample of projects evaluated, 44 findings were reported all identified from a thorough review of records held for the respective projects and interviews with key project officers.

The Strategic Transport and Infrastructure Service are currently going through their service review and the findings from this assurance activity will form part of the improvement programme for the service.

6   Counter Fraud

6.1   The Business Assurance Team has been working closely with the Revenues and Benefits Teams to investigate any potentially fraudulent Business Rate Grant Claims.

Business Rate Grant applications referred to Business Assurance	49 (0 this month)
Additional Restrictive/Restart Grant applications referred to Business assurance	56 (0 this month)
Number failed risk assessment (deemed to be low risk and so not investigated, or closed after initial investigation)	33
Number investigated (BRG and ARG) to date	49
Number of potential prosecution claims	10
Number of prosecution files being prepared for legal services as of 1 September 2022.	5 One case is currently awaiting a trial (which will be held w/c 26 September 2022), one case was sentenced and received a £21k fine in January 2022. A further case was heard in Court on 8 August 2022, the defendant pleaded not guilty and so the case will go to trial in January 2023. Two other cases have prosecution files currently being prepared.

Other cases currently under investigation are as follows:

- ➢ Council Tax Reduction cases received this month – three; and currently investigating nine in total.

- ➢ Single Person Discount cases received this month – one; and currently investigating nine in total.

- ➢ Blue Badge cases received this month one; currently investigating one in total.

- ➢ Disabled Facilities Grant received this month – zero; referrals closed this month – two, currently investigating zero in total

- ➢ Housing Fraud cases received this month - two, currently investigating eight in total.

- ➢ Planning application fraud cases received this month - zero, currently investigating zero.

- ➢ Insurance case received this month – zero, currently investigating one.

- ➢ School admissions cases received this month - zero, currently investigating one.

- ➢ Adult Social Care cases received this month - zero, currently investigating one.

- ➢ Council Tax liability cases received this month – zero, investigating one.

- ➢ Identity fraud cases received this month – zero, investigating zero.

- ➢ Omicron Grant cases received this month – zero, investigating three in total.

- ➢ Phishing scams or attempts this month: zero

- ➢ Direct payment cases received this month – zero, investigating one.

- ➢ Credit card misuse case received this month – zero, investigating zero.

- ➢ Building Control case received this month – zero, investigating zero.

- ➢ Requests for information: one.

- Several early morning visits have been completed with different Registered Housing Providers recently – namely Paradigm, Fairhive (previously Vale of Aylesbury), and Thrive Homes, to assist with reports of housing fraud, forging stronger links with the housing providers in the area. Furthermore, a newly formed Tenancy Fraud Forum has been organised for 14 September, to be held in Wycombe Council offices. Housing providers and Local Authorities have been invited to attend - this has been arranged in partnership with Hertfordshire and Oxfordshire Councils.

Appendix 1 - Summary of Internal Audit Activity

Corporate			
Corporate Priority Link	• **Increasing prosperity**		
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic*.		
Service	**Audit Title/ Activity**	**Objectives/Risk/Concerns**	**RAG Per Model**
Cross-cutting	Assurance Framework	Develop a means of identify and mapping the main source of assurance across the Council and coordinating them to best effect.	N/A
	Covid-19 Pre and Post Payment Assurance Plan	Undertake require assurance reviews and returns in line with government requirements.	N/A
	Grants	Undertake grant certification in line with grant conditions	N/A

Deputy Chief Executive			
Corporate Priority Link	• **Increasing prosperity** • **Strengthening our communities**		
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.* **CMT -05: Changes in national & local policy landscape:** *Government policy - If the Government introduces new policies that affect Buckinghamshire residents such as Domestic Abuse, Education Reforms, Planning Reforms, Business Rate Retention & Health & Social Care Integration then these may place additional pressures on Council services.* **CMT- 07: Increased external financial pressures:** ***Central*** *Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.* **CMT - 06: Technology breaches/ failures**: *Lack of resilience of systems, insufficient security to support agile working, insufficient network security to prevent a cyber-attack, loss of data or breach of data protection If systems fail, data is lost, or data protection breached Then the Council will suffer severe reputational and financial damage and data could be used inappropriately.* **CMT - 08: Failure to deliver financial plans:** *Challenging MTFP process and poor budget forecasting leading to an inability to know where the authority is financially; putting considerable pressure on reserves leading to inappropriate management action.*		
Service	**Audit Title/ Activity**	**Objectives/Risk/Concerns**	**RAG Per Model** **Status Update**
Policy & Communications	GDPR	Deferred from 21/22 plan. To ensure that the Council is compliant with GDPR requirements. To ensure that there is adequate process for the identification, review and reporting of a personal data breach.	**HIGH** Not started

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update
Policy & Communications	Complaints	Deferred from 21/22 plan. To ensure that there are robust and effective systems are in place for the complete, accurate and timely recording, processing, and acknowledging of complaints. Including effective monitoring framework, which delivers accurate, timely and relevant information for management review.	HIGH	Final Report - Reasonable
Legal & Dem Services	Legal Processes	Deferred from 21/22 plan. To ensure that there are adequate arrangements in place for the services to engage with the legal team, cases are recorded, monitored and costs tracked appropriately.	LOW	Not started
Policy & Communications	Community Boards	Deferred from 21/22 plan. To evaluate the governance arrangements, risk management and financial management is adequate, transparent and board objectives are monitored and reported on.	HIGH	Audit scoping in-progress
Policy & Communications	Devolution	Deferred from 21/22 plan. To evaluate the processes and procedures in place to ensure an effective transfer of services and assets to town and parish councils in line with the approved policy.	LOW	Not started
Service Improvement	Corporate Performance Framework	To assess the adequacy of the Council's performance and reporting arrangements.	LOW	Not started
Service Improvement	Helping Hand Programme Assurance	Evaluate the delivery of the programme and ensure that objectives are met, risks are adequately managed and value for money is evident.	MEDIUM	Not started
Service Improvement	Better Buckinghamshire Programme Assurance	Ensure that the programme is effectively managed to deliver set objective in a timely manner and within budget.	MEDIUM	Not started

Adults & Health

Corporate Priority Link	• **Protecting the vulnerable** • **Strengthening our communities** • **Increasing prosperity**
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.* **CMT- 04: Major contract commissioning and/or market failure:** *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.* **CMT – 05: Changes in the national & local policy landscape: Government policy -** *If the Government introduces new policies that affect Buckinghamshire residents such as Domestic Abuse, Education Reforms, Planning Reforms, Business Rate Retention & Health & Social Care Integration then these may place additional pressures on Council services.* **CMT- 07: Increased external financial pressures:** *Central Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.* **CMT - 10: Fraud and Corruption:** *Lack of controls, awareness, policies, procedures, and inability/lack of capacity to respond. If the authority is targeted either internally or externally and are unaware or unable to respond then this could result in adverse publicity, a financial loss and an inability to deliver statutory services.* **CMT – 14: Adult Social Care Statutory Services:** *Budget reductions, increased demand/insufficient capacity - If budgets and capacity are not sufficient to deliver statutory responsibilities Then there may be unintentional adverse consequences to vulnerable adults.*

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update

Integrated Commissioning	**Direct Payments**	Audit deferred from 20/21 & 21/22 audit plan End to end process reviewing adequacy and effectiveness of controls in place.		**HIGH**	**Audit scoping in-progress**
Adult Social Care	**Continuing Health Care:**	End to end process review evaluating arrangements in place with the CCG (includes client assessment/ eligibility and financial management). This will be scheduled following the peer review by LGA.		**HIGH**	Not started
Adult Social Care	**Seeleys Establishment Audit**	Review of compliance with practice and set process and manuals. Work to be undertaken ahead of next CQC inspection to demonstrate progress against the improvement plan		**MEDIUM**	Not started
Integrated Commissioning	**Disability Facilities Grant**	Grant verification in line with the terms and conditions.		**N/A**	Not started
Integrated Commissioning	**Commissioning and Financial Management of Spot Contracts**	End to end process reviewing adequacy and effectiveness of controls in place.		**HIGH**	Not started
Integrated Commissioning	**E-brokerage**	End to end process reviewing adequacy and effectiveness of controls in place.		**MEDIUM**	Not started
Public Health	**Joint Strategic Assessment.**	focus of review to be agreed with the service		**TBC**	Not started
Finance	**A&H Debt Recovery (Unsecured Debt)**	As debt recovery was paused during the pandemic and the debt recovery process has been moved to Finance Operations team, the audit will be reviewing adequacy and effectiveness of controls		**MEDIUM**	Not started

Children's Services

Corporate Priority Link	• **Protecting the vulnerable** • **Strengthening our communities** • **Increasing prosperity**
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.*
	CMT – 02: Ofsted/ Improvement Plan: *IF we fail to successfully implement our improvement plan THEN we are at risk of receiving a third Inadequate judgement from Ofsted causing reputational damage to the council. More importantly, children and families will not receive the support they require in order to improve their outcomes.*
	CMT- 04: Major contract commissioning and/or market failure: *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.*
	CMT- 07: Increased external financial pressures: *Central Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.*
	CMT - 06: Technology breaches/ failures: *Lack of resilience of systems, insufficient security to support agile working, insufficient network security to prevent a cyber attack, loss of data or breach of data protection If systems fail, data is lost or data protection breached Then the Council will suffer severe reputational and financial damage and data could be used inappropriately.*
	CMT - 10: Fraud and Corruption: *Lack of controls, awareness, policies, procedures and inability/lack of capacity to respond. If the authority is targeted either internally or externally and are unaware or unable to respond then this could result in adverse publicity, a financial loss and an inability to deliver statutory services.*
	CMT – 13: SEND: *IF we do not ensure our SEND service is compliant with the objectives of the SEND reforms introduced in 2014 THEN we will not improve outcomes for children. In turn, this will impact on the outcome of our SEND inspection creating a reputational risk for the Council.*

CMT- 01: Governance failure: *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.*				
CMT – 02: Ofsted/ Improvement Plan: *IF we fail to successfully implement our improvement plan THEN we are at risk of receiving a third Inadequate judgement from Ofsted causing reputational damage to the council. More importantly, children and families will not receive the support they require in order to improve their outcomes.*				
CMT- 04: Major contract commissioning and/or market failure: *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.*				

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update
Education	Schools Thematic Review	Review of key controls for sample of schools selected per the risk assessment.	HIGH	Audit scoping in-progress
Social Care	Direct Payments (including clawbacks)	End to end process reviewing adequacy and effectiveness of controls in place	HIGH	Audit scoping in-progress
Education	SEND Ofsted Improvement Plan Assurance	Evaluate the completeness adequacy of the improvement plan against the findings raised in the Ofsted report.	MEDIUM	Not started
Social Care	Social Care Ofsted Improvement Plan Assurance	Evaluate the completeness adequacy of the improvement plan against the findings raised in the Ofsted report.	MEDIUM	Draft Report
Education	SEND Process review – Focused on ECCOH	End to end review of processes and evaluation of controls to identify inefficiencies in process and improvements to data quality.	HIGH	Not started
Social Care	Section 17 Payments	End to end process reviewing adequacy and effectiveness of controls in place.	MEDIUM	Not started
Social Care	Supported Families Programme	Grant Verification	N/A	Not started
Education	Related Party Transaction Assurance (SFVS)	verification work in line with DfE guidance	N/A	Not started

Communities				
Corporate Priority Link	• **Protecting the vulnerable** • **Improving our environment**			
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.* **CMT- 04: Major contract commissioning and/or market failure:** *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.*			

	CMT- 07: Increased external financial pressures: *Central Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.*			
	CMT - 06: Technology breaches/ failures: *Lack of resilience of systems, insufficient security to support agile working, insufficient network security to prevent a cyber-attack, loss of data or breach of data protection If systems fail, data is lost, or data protection breached Then the Council will suffer severe reputational and financial damage and data could be used inappropriately.*			
	CMT - 10: Fraud and Corruption: *Lack of controls, awareness, policies, procedures and inability/lack of capacity to respond. If the authority is targeted either internally or externally and are unaware or unable to respond then this could result in adverse publicity, a financial loss and an inability to deliver statutory services.*			

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update
Highways & Technical Services	Parking On/Off Street	End to end review of processes and evaluation of controls on the new system.	HIGH	Audit scoping in-progress
Transport Services	Home to School Transport	End to end review of processes and evaluation of controls on the new system.	HIGH	Audit scoping in-progress
Neighbourhood Services	Household Recycling Centres	New contract in place, review of processes at the HRC; and contract management with new contractor.	MEDIUM	Not started
Neighbourhood Services	Business Licenses and Permits – Process review	End to end review of processes and evaluation of controls on the new system.	LOW	Not started
Neighbourhood Services	Waste Management	End to end review of processes and evaluation of controls on the new system.	HIGH	Not started
Culture, Sports & Leisure	Higginson Park	Financial Controls Audit	LOW	Not started
Culture, Sports & Leisure	Farnham Park	Financial Controls Audit	LOW	Not started
Highways & Technical Services	New Highways Contract Assurance	Provide assurance on the processes being proposed for the new contract arrangement	HIGH	Not started

Planning, Growth & Sustainability	
Corporate Priority Link	- Strengthening our communities - Increasing prosperity - Improving our environment - Protecting the vulnerable
Strategic Risks Link	CMT- 01: Governance failure: *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.*

| | CMT- 04: Major contract commissioning and/or market failure: *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.*

CMT – 05: Changes in the national & local policy landscape: *Government policy - If the Government introduces new policies that affect Buckinghamshire residents such as Domestic Abuse, Education Reforms, Planning Reforms, Business Rate Retention & Health & Social Care Integration then these may place additional pressures on Council services.*

CMT- 07: Increased external financial pressures: *Central Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.*

CMT – 08: Failure to Deliver Financial Plans: *Challenging MTFP process and poor budget forecasting leading to an inability to know where the authority is financially; putting considerable pressure on reserves leading to inappropriate management action.*

CMT – 09: Insufficient Capacity: *Reduced capacity and increased levels of stress If there continues to be an increase in volume of activity at the same time as resource in the organisation decreases Then there may be an impact on the wellbeing of the workforce and increased levels of stress, and a failure to deliver services.*

CMT - 10: Fraud and Corruption: *Lack of controls, awareness, policies, procedures and inability/lack of capacity to respond. If the authority is targeted either internally or externally and are unaware or unable to respond then this could result in adverse publicity, a financial loss and an inability to deliver statutory services.* |

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update
Housing & Regulatory Services	Enforcement (Housing)	Audit deferred from 21/22 audit plan. End to end process reviewing adequacy and effectiveness of controls in place.	MEDIUM	Not started
Housing & Regulatory Services	Homelessness and Temporary Accommodation	Audit deferred from 20/21 & 21/22 audit plan, merged with Temporary Accommodation audit. This area has not been looked at before and it's a high-profile area in terms of the significant financial spend and reputational risk resulting from housing people in temporary and emergency accommodation for lengthy periods	HIGH	Audit scoping in-progress
Planning & Environment	Building Control	Audit deferred from 20/21 & 21/22 audit plan End to end process reviewing including finance, regulatory compliance and performance.	MEDIUM	Not started
Property & Assets	Property Maintenance	Audit deferred from 20/21 & 21/22 audit plan End to end process reviewing adequacy and effectiveness of controls in place.	HIGH	Not started
Property & Assets	Property – Reactive Works	Audit deferred from 20/21 & 21/22 audit plan End to end process reviewing adequacy and effectiveness of controls in place.	HIGH	Not started
Housing & Regulatory Services	Disability Facilities Grant (Use of the funding)	Audit deferred from 20/21 & 21/22 audit plan. Review the process for commissioning housing adaptions and the use of the DFG fund. To include review of contractors used, VfM.	MEDIUM	Not started
LEP	LEP & BBF Assurance	Evaluation of key financial controls	MEDIUM	Not started
Strategic Transport & Infrastructure	Project Assurance	Strategic Transport & Infrastructure review of project management controls include reporting and escalation arrangements in place within the service.	HIGH	Final Report

Finance	K2 Systems Audit	Large volume and value of transactions processed, therefore an evaluation of key controls will be undertaken.	HIGH	Not started

Resources				

Corporate Priority Link	• **Strengthening our communities** • **Increasing prosperity**			
Strategic Risks Link	**CMT- 01: Governance failure:** *Lack of clarity around governance arrangements. If proper governance arrangements are not clear and effective, then outcomes and objectives may not be achieved and there could be a reputational and/or financial impact on the Council with the potential for major service disruption and failure to meet statutory requirements. There can be a number of causes of governance failure such as increased pressures through number of elected members, boundary review, service pressures and the response to/recovery from the Covid-19 pandemic.*			
	CMT- 04: Major contract commissioning and/or market failure: *Supply chain issues/financial viability of suppliers/poor contract management/market failure/quality assurance of providers. If there is failure in the market/supply chain/contract management, Then Service failure may result, and the Council will fail to act effectively as a Commissioning Authority.*			
	CMT- 07: Increased external financial pressures: *Central Government funding - local government finance reform, levelling up agenda implications, business rates reset and uncertainty over financial devolution. Level of government grants known until 2022. Beyond 2022 Council budgets likely to face increasing financial pressures.*			
	CMT - 06: Technology breaches/ failures: *Lack of resilience of systems, insufficient security to support agile working, insufficient network security to prevent a cyber-attack, loss of data or breach of data protection If systems fail, data is lost, or data protection breached Then the Council will suffer severe reputational and financial damage and data could be used inappropriately.*			
	CMT - 10: Fraud and Corruption: *Lack of controls, awareness, policies, procedures and inability/lack of capacity to respond. If the authority is targeted either internally or externally and are unaware or unable to respond then this could result in adverse publicity, a financial loss and an inability to deliver statutory services.*			

Service	Audit Title/ Activity	Objectives/Risk/Concerns	RAG Per Model	Status Update
Business Operations	**Blue Badges, Administration and Enforcement**	To ensure that badges are only issued to residents who satisfy one or more of the eligibility criteria (as updated by the Disabled Persons (Badges for Motor Vehicles) (England) (Amendment) Regulations 2019 (S.I. 2019 No. 891) on 30 August 2019 to include 'hidden' disabilities) set out in the legislation that governs the scheme.	LOW	Not started
Business Operations	**Business Support – Accounts Payable and Accounts Receivables**	Review of financial controls and compliance to corporate procedures.	HIGH	Not started
Business Operations	**Shop4Support**	End to end sales process review	MEDIUM	Not started
HR & OD	**Teachers Pensions – new system in place**	New system in place, review process and controls in place	MEDIUM	Not started
HR & OD	**Payroll Follow-up**	Ensure that the actions from the 2021/22 audit have been fully implemented.	MEDIUM	Not started
HR & OD	**Learning and Development**	To review organisational spend on learning and development to ensure consistency and quality of training.	HIGH	Not started
Finance	**Capital Programme**	To ensure business cases are adequate, approved and projects on the programme are sufficiently monitored.	HIGH	**Audit scoping in-progress**
Finance	**Procurement Compliance**	Ensure that procurement rules are clearly documented and followed in all procurement exercises.	MEDIUM	Not started

Finance	Year End Assurance - Journals and Accruals	Compliance with financial controls		**LOW**	Not started
Finance	Pensions	Evaluation of key controls		**LOW**	Not started
Finance	Completeness and Effectiveness of the Finance Assurance Pack	Evaluation of the adequacy of controls monitoring and assessment on the effectiveness of the assurance pack.		**MEDIUM**	Not started
Finance	Scheme of Delegation – Financial and Non-Financial delegations	Evaluation of the Scheme of Delegation to ensure that these are understood by all and complied with when making decisions.		**MEDIUM**	Not started
Finance	Council Tax	Evaluation of key financial controls		**HIGH**	Not started
Finance	National Non-domestic Rates	Evaluation of key financial controls		**HIGH**	Not started
Finance	Council Tax Reduction Scheme/ Housing Benefits	Evaluation of key financial controls		**HIGH**	Not started
Finance	Key Financial Systems	Evaluation of key financial controls		**MEDIUM**	Not started
IT	IT/Infrastructure Resilience – Per Audit Needs Assessment	A number of IT/Infrastructure resilience-related risks feature in the Council's IT Risk Register. The audit will address; consideration of the impact of the pandemic on IT/infrastructure resilience, People, process and technology perspective, including a high-level review of the IT architecture and technology in place.		**HIGH**	**Audit scoping in-progress**
IT	Disaster Recovery and Backups – Per Audit Needs Assessment	Disaster recovery was noted as having a residual risk score of 10 in the Council's IT risk register with a fully tested strategy and plan required to provide the Council assurance that full business continuity can be provided. This audit would test controls in regard to backup scope, frequency, offsite location, testing and recovery.		**HIGH**	**Audit scoping in-progress**
IT	Change/Patch Management	This audit will consider the following: - Change to infrastructure and applications are governed through a consistent policy/process; - The change process addresses the request, impact, authorisation, testing, deployment of changes; - Comparison with LG peers concerning good change control practice commonly identified; - Patch management is undertaken across the estate in a complete, accurate and timely manner.		**HIGH**	**Audit scoping in-progress**
Counter Fraud Plan					
Proactive/ Probity Activity	NFI data matches	Support services with collating the NFI data and determining an approach for prioritising the instances that require investigation.			
	Blue badge abuse	Investigate blue badges that have been in place for long periods and ensure that these are valid.			
	Covid grant recovery	Undertaking post payment assurance and identify and investigate instances of possible false claims			
	Schools	Lessons learnt from 21/22 investigations to be shared with all schools and presented via schools forum.			
	Fraud awareness training	Hold formal sessions to groups across the Council to raise awareness of what the Business Assurance Team's responsibilities are in relation to fraud and counter-fraud, different types of fraud, fraud risks, whistleblowing procedures etc.			
	Internal Communication on Fraud	Send messages across the Council to promote 'good practice' and raise awareness of potential indicators of fraud and staff responsibilities.			
	Policy Reviews	Review and refresh the key fraud policies, including; Anti-Fraud and Corruption Policy.			
Reactive Activity	Assess cases referred via whistleblowing channels and investigate where necessary.				
	Embed the case management system				

Continuous Improvement	Fraud networking and chairing of key networks	
External Clients		**No. of Days**
BMKFA	Audit plan approved and date for audit delivery agreed with the clients. Plan to be delivered by February 2022 ahead of their external audit.	110
Academies	Audit plans approved and key days for audit delivery agreed with the Academies	30