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## **AGENDA FOR THE AUDIT COMMITTEE AND AUDIT COMMITTEE (ADVISORY)**

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Members of the Audit Committee and Audit Committee (Advisory) are summoned to a meeting which will be held in Committee Room 1, Islington Town Hall, London N1 2UD on **22 March 2022 at 7.00 pm.**

Enquiries to : Mary Green  
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Despatched : 14 March 2022

### Membership

Councillor Nick Wayne (Chair)  
Councillor Sara Hyde (Vice-Chair)  
Councillor Janet Burgess MBE  
Councillor Flora Williamson

Alan Begg (Independent member)  
Alan Finch (Independent member)

### Substitute Members

Councillor Phil Graham  
Councillor Roulin Khondoker  
Councillor Angelo Weekes  
Councillor Anjna Khurana

**Quorum: is 3 Councillors**



**A. Formal Matters** **Page**

1. Apologies for Absence
2. Declaration of substitute members
3. Declarations of interest

If you have a **Disclosable Pecuniary Interest\*** in an item of business:

- if it is not yet on the council's register, you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent;
- you may **choose** to declare a Disclosable Pecuniary Interest that is already in the register in the interests of openness and transparency.

In both the above cases, you **must** leave the room without participating in discussion of the item.

If you have a **personal** interest in an item of business **and** you intend to speak or vote on the item you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent but you **may** participate in the discussion and vote on the item.

**\*(a) Employment, etc** - Any employment, office, trade, profession or vocation carried on for profit or gain.

**(b) Sponsorship** - Any payment or other financial benefit in respect of your expenses in carrying out duties as a member, or of your election; including from a trade union.

**(c) Contracts** - Any current contract for goods, services or works, between you or your partner (or a body in which one of you has a beneficial interest) and the council.

**(d) Land** - Any beneficial interest in land which is within the council's area.

**(e) Licences** - Any licence to occupy land in the council's area for a month or longer.

**(f) Corporate tenancies** - Any tenancy between the council and a body in which you or your partner have a beneficial interest.

**(g) Securities** - Any beneficial interest in securities of a body which has a place of business or land in the council's area, if the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body or of any one class of its issued share capital.

This applies to **all** members present at the meeting.

4. Minutes of previous meeting 1 - 6

**B. Items for Decision**

1. Draft 2022-23 Internal Audit Plan 7 - 38

2. Bi-annual Whistleblowing monitoring report – 1 September 2021 to 31 January 2022 39 - 42

**C. Urgent non-exempt items**

Any non-exempt items which the Chair agrees should be considered urgently by reason of special circumstances. The reasons for urgency will be agreed by the Chair and recorded in the minutes.

**D. Exclusion of press and public**

To consider whether, in view of the nature of the remaining item on the agenda, it is likely to involve the disclosure of exempt or confidential information within the terms of the Access to Information procedure rules in the Constitution and, if so, whether to exclude the press and public during discussion thereof.

**E. Confidential/exempt items**

1. Bi-annual Whistleblowing monitoring report – 1 September 2021 to 31 January 2022 - exempt appendix 43 - 48

**F. Urgent exempt items (if any)**

Any exempt items which the Chair agrees should be considered urgently by reason of special circumstances. The reasons for urgency will be agreed by the Chair and recorded in the minutes.

The next meeting of the Audit Committee and Audit Committee (Advisory) will be on  
13 June 2022

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London Borough of Islington

## **Audit Committee and Audit Committee (Advisory) - 31 January 2022**

Minutes of the meeting of the Audit Committee and Audit Committee (Advisory) held in the Council Chamber, Islington Town Hall, Upper Street, N1 2UD on 31 January 2022 at 7.00 pm.

**Present:**      **Councillors:**      Nick Wayne (Chair), Sara Hyde (Vice-Chair) and Janet Burgess MBE

**Independent member:**      Alan Begg

### **Councillor Nick Wayne in the Chair**

**259**      **APOLOGIES FOR ABSENCE (Item A1)**

Received from Alan Finch, independent member, and Councillor Flora Williamson.

**260**      **DECLARATION OF SUBSTITUTE MEMBERS (Item A2)**

None.

**261**      **DECLARATIONS OF INTEREST (Item A3)**

None.

**262**      **MINUTES OF PREVIOUS MEETINGS (Item A4)**

**RESOLVED:**

That the minutes of the meetings held on 5 October and 11 November 2021 be confirmed as a correct record of proceedings and the Chair be authorised to sign them.

**263**      **LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN ANNUAL REVIEW PERFORMANCE 2021 (Item B1)**

In his introduction to the report, the Director of Law and Governance and Monitoring Officer drew members' attention to an amendment required to recommendation 2.3 of the report as follows:

Replace the figures "5" and "17" with "3" and "12" respectively, so recommendation 2.3 now reads "To note that 3 out of the 12 upheld cases received a satisfactory remedy before the Ombudsman involvement."

A member of the Committee noted that the contents of the sub-paragraphs to paragraph 3.3 on "Training" and "Complaints/Improvement" had not changed since last year. For the future, he suggested that those sub-paragraphs should instead be

updated as necessary to include any improvements and development achieved, following training.

Members expressed some concern at a particular Housing and Communities complaint case no 19019179, where compensation of £7,607, a significantly larger award than others, had been awarded to a complainant. The Committee queried what had gone wrong in this case and what actions the Council had taken to ensure that it would not be repeated. In response, the Assistant Director for Resident Experience undertook to provide details of the case to members of the Committee, including a breakdown of the award to indicate how much comprised compensation and penalty and also to detail steps taken to ensure that there would be no recurrence.

Members also recommended that, where there had been adverse findings by an external body, particularly where there were broader implications for the Council, the relevant Executive Member and Chair of Scrutiny Committee be notified as a matter of course by the Assistant Director for Resident Experience.

More generally, Members of the Committee suggested that written communications to residents/complainants needed more attention to ensure that they were clear to ensure that the recipients understood the meaning of those written communications.

**RESOLVED:**

(a) That the following be noted:

- The Local Government and Social Care Ombudsman (LGSCO) Annual Review letter 2021, dated 29 July 2021, as detailed in Appendix 1 to the report of the Director of Law and Governance and Monitoring Officer
- That, of the 17 cases investigated, 12 upheld decisions were upheld, with the remaining 5 cases not upheld.
- That 3 out of the 12 upheld cases received a satisfactory remedy before involvement by the Ombudsman.
- That 9 out of the 9 cases recommended during 1 April 2020 to 31 March 2021 (100%) complied with the Ombudsman recommendations.
- That, separate to the complaints investigated by the LGSCO reported in the Annual Review Letter, 4 upheld decisions during the period in question (finding of maladministration) were decided by the Housing Ombudsman, as detailed in Appendix 2 to the report
- That, in line with the statutory duty under section 5A (2) of the Local Government and Housing Act 1989, the Monitoring Officer provided this annual report to Audit Committee.

(b) That the Assistant Director for Resident Experience provide further information to the members of the Committee on the particular Housing and Communities complaint case no 19019179, where compensation of £7,607 had been awarded to a complainant, including a breakdown of the award to indicate how much comprised

compensation and how much penalty and also to detail steps taken to ensure that there would be no recurrence.

(c) That, for the future, where there had been adverse findings by an external body, particularly where there were broader implications for the Council, the Assistant Director for Resident Experience notify the relevant Executive Member and Chair of Scrutiny Committee as a matter of course.

**264 COUNCIL TAX BASE (Item B2)**

**RESOLVED:**

(a) That the council taxbase for the whole area for 2022/23 of 80,177.9, Band D equivalent properties, be approved after adjusting for non-collection.

(b) That it be noted that the 2022/23 taxbase maintained the balanced budget position for 2022/23 and would be fully incorporated in the final version of the 2022/23 budget report and council tax calculations to be considered by the Executive on 10 February 2022 and Council on 3 March 2022.

(c) That the council taxbase for meeting the special expenses issued by the Lloyd Square Garden Committee for 2022/23 be approved at 44.3, Band D equivalent properties, after adjusting for non-collection.

(d) That the council tax forecast for 2021/22 and distribution of this in 2022/23 between the council and Greater London Authority, as detailed in paragraph 5.3 of the report of the Corporate Director of Resources, be noted.

**265 RISK MANAGEMENT UPDATE - JANUARY 2022 (Item B3)**

The following points were made during discussion:

- "Cyber and Data Protection" (paragraph 6 of the report of the Corporate Director of Resources) and the reference to "The Council is planning changes to cyber event monitoring processes in the coming months, which will mitigate this risk further", Members suggested that it would be helpful if future reports contained information on how cyber threats were being mitigated. It would also be helpful for Members to know how the risk of cyber threats to Islington compared to other local authorities and how this was being managed.
- On reserves, it was reported that the Council was in a challenging position at the moment, like most other local authorities, and unable to plan in the long-term, whilst also facing savings. The Council's financial resilience had been challenged by the pandemic and other issues. The Council's strategy was to increase reserves and this was working to increase resilience but would need to continue for at least a couple of years. The Council's Policy and Performance Scrutiny Committee had been monitoring the financial situation and were expected to concur with the view that the Council's financial resilience was increasing.
- On the question of whether the expected risk to Islington Council and its residents of severe financial pressure by, for example, fuel prices and inflation, and the possible demands from staff for a greater financial settlement than previously, were being monitored as potential risks, it was

reported that the wider financial risk was monitored but possibly not to the level expressed by Members. However, monitoring of those risks was carried out at management team meetings. On the matter of pay awards and possible industrial action, the Council's Human Resources Team were liaising with the unions.

- The fact that risks could have increased due to the anticipated inflationary pressures needed to be discussed with Corporate Directors in order that they were built into risk management strategies.

**RESOLVED:**

(a) That the report of the Corporate Director of Resources, providing an update on key risk management activity that has taken place since the last comprehensive Principal Risk Report to the Committee, be noted.

(b) That the Director of Digital Services report to the Committee on the risk associated with cyber threats and how these were being managed.

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**INTERNAL AUDIT INTERIM ANNUAL REPORT 2021-2022 (Item B4)**

The following points were raised during discussion:

- Officers to consider whether it would be useful for managers of areas subject to deep dive reviews to attend the Committee before the audit was completed
- Pensions to be considered for inclusion in next year's audit, in view of the risk posed by vacancies in the Pensions Team which had led to pensioners not receiving pension statements in a timely manner
- There were a number of outstanding items in the "Principal risk" category which were still marked as "limited assurance" and was it possible to get beyond this?
- How were the two "Critical and High Priority" recommendations in Appendix 2 relating to supplier bank amendments and asbestos health and safety being monitored by the Control Board, as these should be considered as basic items?
- It was noted that Control Board had been operating for approximately one year to support the clearance of the follow up of audit recommendations and driving through actions. However, the expectation was that the Board would develop into a forward-looking and proactive body.
- The asbestos report had reached final report stage and there had been a robust management response with the involvement of the Corporate Director and a follow-up planned for quarter 1. The recommendations from the asbestos report would be considered and tracked by the Control Board
- Blue badges and People Friendly Streets had both been followed up by Internal Audit in the past few months and good progress had been made. There was one finding outstanding, upon which some progress had been made. On blue badges, the outstanding issue related to performance reporting and consideration was being given to the inclusion of blue badge enforcement figures into the Annual Fraud Report.



**RESOLVED:**

That the report of the Corporate Director of Resources, detailing progress on the delivery of the Internal Audit Plan, be noted.

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**UPDATE ON THE LOCAL AUTHORITY EXTERNAL AUDIT MARKET AND APPOINTMENT OF EXTERNAL AUDITORS FROM 2023 (Item B5)**

The Director of Finance informed the Committee that the Council had recently heard from its auditors that all outstanding issues on the Statement of Accounts had been resolved and none had resulted in any amendments. This meant that the process had formally concluded.

**RESOLVED:**

(a) That the wider context within which the new appointment of External Auditors would be conducted, detailed in section 3 of the report of the Corporate Director of Resources, be noted.

(b) That it be noted that the considerations relevant to making a decision in relation to the appointment of External Auditors from the financial year 2023/24 were detailed in section 4 of the report.

(c) That the Council be recommended to approve the submission of the form of acceptance notice to Public Sector Audit Appointments Limited to opt in to the national auditor appointment arrangements for the audit years 2023/2024 to 2027/2028.

(d) That congratulations be extended to all staff in Resources involved in the production of the Statement of Accounts for the achievement of an unqualified report.

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**ANNUAL REPORT OF THE PENSIONS SUB-COMMITTEE (Item B6)**

**RESOLVED:**

That the report of the Chair of the Pensions Sub-Committee, detailing the work of the Sub-Committee, be noted.

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**ANNUAL REPORT OF THE PERSONNEL SUB-COMMITTEE (Item B7)**

A member of the Committee noted that the report would have more credibility if it had been signed by the Chair of the Sub-Committee.

**RESOLVED:**

That the report of the Chair of the Personnel Sub-Committee, detailing the work of the Sub-Committee over the past year, be noted.

The meeting ended at 8.45 pm

**CHAIR**

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### Report of: Corporate Director - Resources

Meeting of:	Date	Agenda item	Ward(s)
Audit Committee	22 <sup>nd</sup> March 2022		All

## SUBJECT: Draft 2022-23 Internal Audit Plan

### 1. Synopsis

- 1.1. The provision of a continuous Internal Audit service provides independent and objective assurance on the control environment that supports the delivery of the Council's objectives.
- 1.2. The report outlines the proposed 2022-23 Internal Audit plan for the Council. It also includes the Internal Audit Strategy and an assurance map which maps audit activity to each of the Council's principal risks.

### 2. Recommendations

- 2.1 Committee is asked to approve the 2022-23 Audit Plan.

### 3. Background

- 3.1 The Council has a statutory duty to maintain an adequate and effective Internal Audit function. The Internal Audit, Investigations and Risk Management service provides this function.
- 3.2 Our primary objective is to provide the Council, via the Audit Committee, with independent assurance that risk management, governance and internal control processes are operating effectively. Internal Audit also seek to provide advice on risk and control issues within individual processes. We aim to achieve this through a planned programme of work based on an annual assessment of the principal risks facing the Council.
- 3.3 The Internal Audit Strategy, attached at Appendix 1, details the role and objective of Internal Audit within the organisation and the overall strategic approach to meeting this objective.

- 3.4 The draft plan attached at Appendix 2 details the work to be undertaken by the Internal Audit in 2022-23 to deliver this objective.
- 3.5 Appendix 3 includes an assurance map which maps recent and planned audit activity to each of the Council's principal risks.
- 3.6 Internal Audit aims to retain flexibility in its approach in order to provide coverage of emerging risks, and to meet the changing needs of the organisation. To this end, while Internal Audit will deliver a risk based annual plan, we will also remain responsive to the needs of auditees and wider stakeholders and will continue to provide ad hoc control advice and support where required.

#### **4. Internal Audit plan – preparation and consultation**

- 4.1 The 2022-23 plan was drafted from a number of sources including the Council's principal risk report, an Internal Audit risk assessment, audit plans of other local authorities, intelligence from previous audits/fraud investigations, and CIPFA good governance guidelines. The Internal Audit risk assessment to arrive at the plan is as follows:
- The Council's principal risks were evaluated to assess the extent of assurance activity against them in the last three years and any planned follow up activity (see Appendix 3);
  - Any gaps in assurance were identified and audit or advisory activity was proposed to ensure Internal Audit coverage;
  - Plans for each directorate have been discussed and approved at Directorate Management Teams (DMTs) in January and February 2022;
  - The wider plan and assurance map have been noted at DMTs in January and February 2022; and
  - The consolidated plan was agreed by Corporate Management Board in February 2022.
- 4.2 Based on the evaluation of risks and the body of work carried out over the three years between 2019-20 and 2021-22 and in line with good practice, the 2022-23 plan includes a proportion of extended follow up reviews to provide continued assurance on principal risks.

#### **5. Internal Audit plan – delivery**

- 5.1 The annual plan has been drawn up to address the statutory requirements and key risks for the Council, taking into account the available resources within the Internal Audit service. Changes to the annual plan may be necessary during the year to reflect changing risks.
- 5.2 Based on the risk assessment exercise outlined in section 2.1 above, the proposed 2022-23 audit plan includes:
- New audits relating to principal risks (155 days);
  - New audits relating to key financial systems (33 days);
  - Extended follow ups to provide additional assurance relating to key 2021-22 audits (43 days);
  - Follow up activity to provide continued assurance relating to principal risks and key financial systems (146 days);
  - New establishment reviews (schools, tenant management organisations and voluntary sector organisations) (117 days);
  - Grant claim certification (28 days); and
  - Risk management, investigations, audit planning and follow up coordination activity through Controls Board (90 days).
- 5.3 The 2022-23 Internal Audit plan will deliver c.750 audit days, including a contingency of c.135 days to cover urgent and unplanned reviews arising during the year. A portion of the plan (up to 175 days) will be delivered by our co-sourced partner.

#### **6. Follow up audits**

- 6.1 A Controls Board is in place to facilitate an ongoing dialogue between Internal Audit and Directorate Management Teams around the progress of the Internal Audit plan, emerging assurance themes, monitoring of audit actions arising from internal and external audit work, proactive advisory work and escalation of areas of concern. The Director of Finance chairs the Controls Board and its members include Internal Audit and representatives from all directorates.
- 6.2 Internal Audit follow up those recommendations which present the highest risk to the Council. We will follow up all critical and high priority recommendations, and medium priority recommendations in areas where the inherent risk of fraud or reputational damage is high. All other recommendations will be tracked at a directorate level and implementation status will be reported to Controls Board. Responsibility for following up all recommendations from establishment reviews (schools, Tenant Management Organisations and voluntary sector organisations) will sit within the relevant directorates except where critical priority findings are identified.
- 6.3 Only extended follow up audits will be reported on using memoranda. All other recommendations will be followed up in the quarter after they fall due. Outcomes of follow up activity and rationales to support outcome assessments will be held within a tracker. A summary of implementation rates for critical and high priority recommendations will be reported to Audit Committee twice a year within the Internal Audit Annual Report and the Interim Internal Audit Annual Report.

## **7 Implications**

### **7.1 Financial implications**

A sound system of internal controls forms a significant part of the governance framework and is essential to underpin the effective use of resources.

### **7.2 Legal Implications**

The Local Audit and Accountability Act 2014 sets out the regulatory framework for the audit of local authorities. The Council must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance (Accounts and Audit Regulations 2015 (SI 2015/234), regulation 5). The Public Sector Internal Audit Standards 2017 provide a set of public sector internal audit standards, which are supplemented for local government by CIPFA standard setting guidance.

### **7.3 Environmental Implications and contribution to achieving a net zero carbon Islington by 2030**

There are no environmental implications arising from the recommendations in this report.

### **7.4 Equality Impact Assessment**

The Council has a public sector equality duty (PSED) to make sure that our policies, practices, and services do not discriminate against anyone and ensure that Islington's commitment to equality is translated into practice.

An Equality Impact Assessment has not been completed because the decision currently being sought does not have direct impacts on residents.

## **Appendices:**

**Appendix 1 – 2022-23 Internal Audit Strategy**

**Appendix 2 – 2022-23 Internal Audit Plan**

### **Appendix 3 – Assurance Map**

Final report clearance:

**Signed by:** David Hodgkinson – Corporate Director of Resources

**Date:** **7 March 2022**

Report Author: Nasreen Khan, Head of Internal Audit, Investigations and Risk Management

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**REPORT ENDS**

## **APPENDIX 1 – 2022-23 INTERNAL AUDIT STRATEGY**

### **1. Introduction**

- 1.1 This document sets out the overall strategic approach of the Council's Internal Audit function in providing assurance over the key risks faced by the Council. The Council operates a Shared Internal Audit Service with Camden, with a shared Head of Internal Audit supported by dedicated Audit Managers and principal auditors at each borough.

### **2. Purpose of Internal Audit**

- 2.1 As noted in the Internal Audit Charter, it is the responsibility of management to maintain appropriate risk management processes, control systems, accounting records and governance arrangements. Internal Audit is not responsible for designing and implementing control systems and managing risks.
- 2.2 The purpose of the Internal Audit Service is to provide independent, objective assurance and consulting services (via the Audit Committee) in order to add value and improve operations.
- 2.3 The mission of the Shared Internal Audit Service is to enhance and protect organisational value by providing risk based and objective assurance, advice and insight.
- 2.4 The Chief Finance Officer has a statutory duty under the Local Government Act 1972 to ensure an effective Internal Audit function is maintained.

### **3. Ethical Standards**

- 3.1 Internal Audit maintains independence and objectivity within the organisation and follows the Public Sector Internal Audit Standards in the course of its work.

### **4. Roles and Responsibilities**

- 4.1 The Service is led by the Head of Internal Audit, whose roles and responsibilities are detailed in the Camden and Islington Shared Internal Audit Service Charter.
- 4.2 The Head of Internal Audit is supported in achieving these responsibilities by the Audit Manager and a team of Principal Auditors.
- 4.3 Some reviews (determined on an annual basis) are delivered by a co-sourced partner. These reviews are normally those where Internal Audit identify that the reviews would benefit from particular technical expertise outside the service, or where this would support the independence of the service.
- 4.4 The service works with multiple stakeholders outside of the service to provide assurance. This includes:
  - The Audit Committee;

- Officers within the Council;
- The Council's Risk Manager;
- A co-sourced partner;
- External partners, including other Councils and CIPFA.

## **5. Risk Assessment and Audit Plan Development**

- 5.1 An annual Internal Audit risk assessment is conducted based on the Council's Principal Risk Report, directorate risk assessments and other sources of information as appropriate.
- 5.2 An Internal Audit plan is produced based on this risk assessment. As part of this process, Internal Audit also considers risk areas which, whilst not requiring immediate attention, could be supported by our review and includes these reviews on a reserve list for consideration on future plans.
- 5.3 Internal Audit consults on the Audit Plan as appropriate, including with each of the Council's DMTs and the Corporate Management Board.
- 5.4 The plan is presented to the Audit Committee for approval.
- 5.5 Changes in the plan can be made in year if required in response to emerging risks.

## **6. Risk-based reviews**

- 6.1 To deliver the annual Internal Audit plan, risk-based reviews are undertaken in accordance with the Shared Service Internal Audit Methodology.
- 6.2 All reviews are subject to a Terms of Reference, agreed with the auditee, which sets out the key risks and objectives of the audit.
- 6.3 Fieldwork is completed in line with the agreed Terms of Reference, and may include the following procedures to provide assurance:
  - Interviews with control owners, and obtaining an understanding of controls to assess the extent to which they mitigate the risks as per the Terms of Reference;
  - Walkthroughs where performance of controls is observed.
  - Inspection of relevant documentation and detailed testing to confirm performance of controls.
- 6.4 At the conclusion of an audit, a closing meeting is held and an audit report is written, that sets out the audit findings, rated as critical, high, medium or low. Where applicable, the report is given an overall assurance rating to indicate the overall effectiveness of controls identified.
- 6.5 The report also includes recommendations as to how findings may be addressed. Actions are agreed with management in respect of these recommendations, accompanied with target dates and recommendation owners.

## **7. Follow-ups**

- 7.1 Completion of agreed actions made in Internal Audit reviews is tracked through follow up work, whereby management provides documentation



confirming the completion of these actions. Internal Audit reviews documentation to confirm these actions have indeed been completed.

- 7.2 In some cases, Internal Audit conducts an extended follow-up review. This is typically for high risk areas and will involve repeat of some of the procedures in 6.3 above to assess the new control environment following the completion of agreed audit actions.
- 7.3 The level of implementation of recommendations is reported to the Audit Committee.

## **8. Monitoring Plan delivery**

- 8.1 Internal Audit tracks the delivery of the Audit Plan on an ongoing basis to confirm plan delivery against target.
- 8.2 The Audit Committee has overall responsibility for oversight of the plan, and receives bi-annual reports on delivery. The annual report includes an overall annual assurance opinion for the Council.

**Appendix ends**

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## APPENDIX 2 – 2022-23 DRAFT INTERNAL AUDIT PLAN

An \* next to the audit title indicates that the proposed activity relates to a principal risk (see assurance mapping at **Appendix 3**).

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>A. CORPORATE / CROSS-CUTTING</b>				
CC22-1	Risk management – assurance mapping	Internal Audit input into assurance mapping for principal risks.	Q3	10
CC22-2	Serious fraudulent activity *	Internal Audit input into reactive investigations to be undertaken in-year.	All	20
CC22-3	Audit plan production	Preparation of the Council's annual audit plan.	Q3/4	10
CC22-4	Controls Board	Internal Audit input into Controls Board workplan and support for directorate representatives.	All	30
CC22-5	Good Governance Group	Internal Audit input into Good Governance Group workplan	All	20
CC22-6-1	Review of grant claim - grant 1	Review of grant claims for government funding which require Internal Audit review and approval. Based on actual requests in prior years, an assumption has been made that four such reviews will be required in year.	TBC	7
CC22-6-2	Review of grant claim - grant 2		TBC	7
CC22-6-3	Review of grant claim - grant 3		TBC	7
CC22-6-4	Review of grant claim - grant 4		TBC	7
FWU22-4	Cross-cutting follow up activity	Follow up activity relating to the following 2021-22 audit: <ul style="list-style-type: none"> <li>Capital programmes</li> </ul> Follow up activity relating to the following audits from previous years: <ul style="list-style-type: none"> <li>Cyber Security</li> </ul>	All	9

		<ul style="list-style-type: none"> <li>• Gifts, Hospitality and Declarations of Interest</li> <li>• PMO</li> <li>• Technology debt management</li> </ul>		
FWU22-13	2022-23 in-year follow up activity	Audit recommendations for some 2022-23 planned audits will need to be followed up in year, and this time has been allocated based on actual time spent on in-year follow ups in 2021-22.	Q3/4	13
<b>Total Cross-Cutting days</b>				<b>140</b>

Ref	Audit title	Indicative scope	Planned Quarter	Planned days
<b>B. RESOURCES</b>				
R22-1-1	Review of key financial system - general ledger	Review of key financial systems in line with a three year rolling plan.	Q3/4	11
R22-1-2	Review of key financial system - bank and system reconciliations		Q3/4	11
R22-1-3	Review of key financial system - capital accounting (asset management)		Q3/4	11
R22-2	Key IT application review *	A review of a key IT application in use within the Council. System to be identified during scoping.	Q2/3	16
R22-3	Use of sundry suppliers *	Sundry supplier codes are used within the finance system for suppliers who will not be regular suppliers. Use of these codes allows	Q2/3	16

		suppliers to be paid without going through independent verification processes to confirm identity or bank details. In light of issues raised in the course of a 21/22 audit of Supplier bank amendments (AD21-2), an in-depth review of use of sundry supplier codes has been added to the plan. This audit will rely on data analytics to understand patterns of use and identify anomalies and weaknesses.		
R22-4	Access to Council emails *	This audit will review and assess mechanisms to prevent and identify unauthorised access to Council emails. The review will focus on communications with suppliers.	Q3/4	16
FWU22-3	Use of contingent staff (extended follow up)	Extended follow up of Use of contingent staff (FR20-5). The audit will include full retesting of controls within the new supplier system.	Q2/3	16
FWU22-12	Resources follow up activity	<p>Follow up activity relating to the following 2021-22 audits:</p> <ul style="list-style-type: none"> <li>• Access controls and rights</li> <li>• Key financial systems (KFS) – accounts payable</li> <li>• Key financial systems (KFS) – income</li> <li>• Key financial systems (KFS) – treasury</li> <li>• Key financial systems (KFS) – payroll</li> <li>• Key financial systems (KFS) – pensions</li> </ul> <p>Follow up activity relating to the following audits from previous years:</p> <ul style="list-style-type: none"> <li>• Capital expenditure</li> <li>• Continuous Audit Monitoring (CAM)</li> <li>• Information governance (records management)</li> <li>• Payroll</li> <li>• Right to work vetting arrangements</li> </ul>	All	40
<b>Total Resources days</b>				<b>137</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>C. ADULT SOCIAL CARE</b>				
FWU22-5	Adult Social Care follow up activity	Follow up activity relating to the following 2021-22 audit: <ul style="list-style-type: none"> <li>• Safeguarding adults</li> </ul> Follow up activity relating to the following audits from previous years: <ul style="list-style-type: none"> <li>• Domestic violence</li> <li>• Mental health safeguarding processes</li> </ul>	All	7
<b>Total Adult Social Care days</b>				<b>7</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>D. CHILDREN'S SERVICES</b>				
CS22-1	Safeguarding children - vetting of staff *	This review will assess the design and operation of controls in place around safeguarding of children, focusing on vetting of staff.	Q2	16
CS22-2-1	Schools establishment review – Duncombe Primary School	This review has been carried forward from the 21/22 audit plan. Risk based review. The programme assesses the effectiveness of school governance mechanisms and financial practices.	Q1	13
CS22-2-2	Schools establishment review - Pooles Park Primary School	This review has been carried forward from the 21/22 audit plan. Risk based review. The programme assesses the effectiveness of school governance mechanisms and financial practices.	Q1	13
CS22-2-3	Schools establishment review - Samuel Rhodes Primary School	This review has been carried forward from the 21/22 audit plan. Risk based review. The programme assesses the effectiveness of school governance mechanisms and financial practices.	Q1	13

CS22-2-4	Schools establishment review - school TBC	Risk based review of school or children's centre. The programme assesses the effectiveness of governance mechanisms and financial practices.	Q2	13
CS22-2-5	Children's Centre establishment review – children's centre TBC		Q3	13
FWU22-6	Children's Services follow up activity	<p>Follow up activity relating to the following 2021-22 audits:</p> <ul style="list-style-type: none"> <li>• Business transformation</li> <li>• High needs/SEN children's placements</li> <li>• Troubled Families 21/22</li> </ul> <p>Follow up activity relating to the following audits from previous years:</p> <ul style="list-style-type: none"> <li>• Conewood Children's Centre</li> <li>• Placement commissioning 16-17 year olds</li> <li>• SEN transport</li> </ul>	All	15
<b>Total Children's Services days</b>				<b>96</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>E. COMMUNITY WEALTH BUILDING</b>				
CWB22-1	Financial resilience of residents *	This review has been carried forward from the 21/22 audit plan. A risk based review to provide assurance against this area of principal risk. The audit will look at the effectiveness of mechanisms in place to ensure that residents at financial risk are able to access financial support, particularly Covid-related support.	Q1	22

FWU22-1	Health and safety - asbestos (extended follow up) *	Extended follow up of Health and safety - asbestos (HOU20-5). Ongoing assurance in this area of principal risk, the review will assess the implementation of recommendations across a number of areas including governance, management and monitoring.	All	12
FWU22-2	Supplier bank amendments (extended follow up)	Extended follow up of Supplier bank amendments (AD21-2). This audit will include testing a new sample of amendments to verify the operation of key controls.	Q1/2	15
FWU22-7	Community Wealth Building follow up activity	In-year follow up activity relating to the following 2022-23 audit: <ul style="list-style-type: none"> <li>Financial resilience of residents</li> </ul> Follow up activity relating to the following 2021-22 audit: <ul style="list-style-type: none"> <li>Decline in local business resilience</li> </ul> Follow up activity relating to the following audit from previous years: <ul style="list-style-type: none"> <li>Contract management 20/21</li> </ul>	All	16
<b>Total Community Wealth Building days</b>				<b>65</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>F. ENVIRONMENT</b>				
E22-1	Climate emergency *	The objective of this audit is to review the robustness of the Council's governance and control framework to mitigate key risks related to the Council's climate change programme. The scope will also include a review of controls for the gathering, monitoring and reporting of data.	Q4	21
FWU22-8	Environment follow up activity	Follow up activity relating to the following audits from previous years: <ul style="list-style-type: none"> <li>Commercial waste recovery plan</li> <li>Greenspace income</li> <li>Parking services</li> </ul>	All	20



		<ul style="list-style-type: none"> <li>• People friendly streets (PFS)</li> </ul>		
<b>Total Environment days</b>				<b>41</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>G. FAIRER TOGETHER</b>				
FT22-1	Voluntary Sector Organisation (VSO) establishment review	Risk based review of one VSO to assess the effectiveness of governance mechanisms and financial practices.	Q3/4	13
FWU22-9	Fairer Together follow up activity	Follow up activity relating to the following 2021-22 audit: <ul style="list-style-type: none"> <li>• Challenging Inequality Programme</li> </ul>	All	5
<b>Total Fairer Together days</b>				<b>18</b>

Ref	Audit title	Indicative scope	Planned quarter	Planned days
<b>H. HOMES AND NEIGHBOURHOODS</b>				
HN22-1-1	Tenant Management Organisation (TMO) establishment review - TMO 1	Risk based review of TMOs. These reviews are part a rolling programme of assurance for TMOs which operates on a cyclical basis. The programme assesses the effectiveness of governance mechanisms and financial practices.	Q2	13
HN22-1-2	TMO establishment review - TMO 2		Q3	13
HN22-1-5	TMO establishment review – TMO 3		Q4	13

HN22-2	Landlord duty of care: housing safety programme assurance *	A new project has been agreed to provide central oversight over housing safety. This audit will look at programme arrangements in place and will assess the effectiveness of overarching governance arrangements around housing safety.	Q2/3	16
HN22-3	Tenant Management Organisation (TMO) monitoring arrangements *	This review has been carried forward from the 21/22 audit plan at the request of the service area due to significant changes that are planned in the Council's approach to monitoring TMO activity The audit is planned for Q3/Q4 of 2022-23 to allow time for revised practice to be implemented. The audit will review Council processes for monitoring TMO activity and governance arrangements. This will take into account whether monitoring activity is sufficient in light of the increased responsibilities for councils introduced in the 2021 Housing White Paper.	Q3/Q4	16
HN22-4	Housing allocation and medical need	A risk-based review of the Council's key controls in place around prioritisation of housing allocation based on medical need.	Q2/3	16
FWU22-10	Homes and Neighbourhoods follow up activity	<p>Follow up activity relating to the following 2021-22 audits:</p> <ul style="list-style-type: none"> <li>• Landlord duty of care – lifts</li> <li>• Tenant Management Organisation (TMO) monitoring arrangements</li> </ul> <p>Follow up activity relating to the following audit from previous years:</p> <ul style="list-style-type: none"> <li>• Rent income and recovery</li> <li>• HomeBuild</li> <li>• HRA</li> <li>• Landlord duty of care - fire risk assessments</li> </ul>	All	13
<b>Total Homes and Neighbourhoods days</b>				<b>100</b>

Ref	Audit title	Indicative scope	Planned Quarter	Planned days
<b>I. PUBLIC HEALTH</b>				
FWU22-11	Public Health follow up activity	Follow up activity relating to the following 2021-22 audit: <ul style="list-style-type: none"> <li>• Health and social care integration</li> </ul> Follow up activity relating to the following audit from previous years: <ul style="list-style-type: none"> <li>• Public health partnership working arrangements</li> </ul>	All	8
<b>Total Public Health days</b>				<b>8</b>

**Appendix ends**

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### APPENDIX 3 – 2022-23 ASSURANCE MAP

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Covid-19 outbreak control	None - new risk.	Given the nature of this risk and the overarching controls in place, no Internal Audit activity is planned for 22/23. Risk management support will continue to be provided. Any audit activity will be confined to reactive audits if concerns are raised in year.
External funding uncertainty	<b>2020-21</b> <ul style="list-style-type: none"> <li>• Financial strategy (CC20-3)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>• Financial strategy follow up activity (FWU21-9)</li> </ul>	Based on moderate assurance rating in 2020-21, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.
Increasing outstanding debt	<b>2020-21</b> <ul style="list-style-type: none"> <li>• Rent income and recovery follow up (FWU20-14)</li> <li>• Financial controls mapping – income (FR20-1)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>• Key financial systems (FR21-1)</li> <li>• Rent income and recovery follow up activity (FWU21-29)</li> </ul>	Resource has been included in the Resources element of the 22/23 audit plan for assurance in this area: <ul style="list-style-type: none"> <li>• Key financial systems (R22-1): <ul style="list-style-type: none"> <li>○ General ledger;</li> <li>○ Bank and system reconciliations; and</li> <li>○ Capital accounting.</li> </ul> </li> </ul>
Covid-19 impact (public realm)	<b>2019-20</b> <ul style="list-style-type: none"> <li>• Parking services (ER19-2)</li> </ul> <b>2020-21</b>	Resource has been included in the Environment element of the 22/23 audit plan for follow up work

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
	<ul style="list-style-type: none"> <li>Investigations work relating to whistleblowing/PCNs</li> <li>People Friendly Streets (AD20-2)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>Parking services extended follow up (FWU21-6)</li> <li>Blue badges follow up activity (FWU21-15)</li> <li>People Friendly Streets follow up activity (FWU21-37)</li> </ul>	in this area (FWU22-8) relating to the following audits: <ul style="list-style-type: none"> <li>Parking services (ER19-2); and</li> <li>People friendly streets (AD20-3).</li> </ul>
Decline in local business resilience	<b>2020-21</b> <ul style="list-style-type: none"> <li>Rent income and recovery follow up (FWU20-14)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>Decline in local business resilience (CWB21-1)</li> <li>Rent income and recovery follow up activity (FWU21-29)</li> </ul>	Resource has been included in the Community Wealth Building element of the 22/23 audit plan for follow up work in this area (FWU22-7) relating to the following audit: <ul style="list-style-type: none"> <li>Decline in local business resilience (CWB21-1).</li> </ul>
Youth crime and serious youth violence	<b>2020-21</b> <ul style="list-style-type: none"> <li>Youth crime (PS20-1)</li> </ul>	Based on moderate assurance rating in 2020-21, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.
Financial resilience of residents	<b>2021-22</b> <ul style="list-style-type: none"> <li>Financial resilience of residents (CWB21-2)</li> </ul>	Resource has been included in the Community Wealth Building element of the 22/23 audit plan for follow up work in this area (FWU22-7) relating to the following audit: <ul style="list-style-type: none"> <li>Financial resilience of residents (CWB21-2).</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Housing delivery test	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>• S106 (ER19-4)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>• HomeBuild (HOU20-1)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>• S106 extended follow up (FWU21-33)</li> <li>• HomeBuild extended follow up (FWU21-24)</li> </ul>	<p>Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for follow up work in this area (FWU22-10) relating to the following audit:</p> <ul style="list-style-type: none"> <li>• HomeBuild (HOU20-1).</li> </ul>
Leisure provision closure	<p>Based on discussion with management, there is significant independent external scrutiny in this area across London. As such, no assurance work took place in 2021-22.</p>	<p>Based on discussion with management, there is significant independent external scrutiny in this area across London. As such, no assurance work is currently planned for 2022-23. This will be kept under review.</p>
Safeguarding children	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>• Placement commissioning 16-17 year olds (CS19-1)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>• SEN transport follow up (FWU20-4)</li> <li>• Placement commissioning 16-17 year olds follow up (FWU20-10)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>• High needs/SEN children's placements – PS21-1)</li> <li>• Placement commissioning 16-17 year olds follow up activity (FWU21-10)</li> <li>• SEN transport follow up activity (FWU21-30)</li> </ul>	<p>Resource has been included in the Children's Services element of the 22/23 audit plan for assurance in this area:</p> <ul style="list-style-type: none"> <li>• Safeguarding children – staff vetting (CS22-1).</li> </ul> <p>External assurance is also in place in this area through Ofsted inspections.</p>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Covid-19 financial impact	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>Housing Revenue Account (FR19-7)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Financial strategy (CC20-3)</li> <li>Commercial waste recovery plan (AD20-2)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Covid-19 grant certification - FR21-4</li> <li>Housing Revenue Account follow up activity (FWU21-1)</li> <li>Financial strategy follow up activity (FWU21-9)</li> <li>Commercial waste recovery plan follow up activity (FWU21-36)</li> </ul>	<p>Resource has been included in the Environment element of the 22/23 audit plan for follow up work in this area (FWU22-8) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Commercial Waste Recovery Plan (AD20-2).</li> </ul> <p>Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for follow up work in this area (FWU22-10) relating to the following audits:</p> <ul style="list-style-type: none"> <li>Housing Revenue Account (FR19-7).</li> </ul>
Cyber and data security	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>Cyber security (CC19-4) –</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Cyber security follow up (FWU20-33)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Access controls and rights (FR21-2)</li> <li>Cyber security follow up activity (FWU21-18)</li> </ul>	<p>Resource has been included in the Resources element of the 22/23 audit plan for follow up work in this area (FWU22-12) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Access controls and rights (FR21-2).</li> </ul>
Diversity and inclusion	<p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Challenging Inequality Programme (FR21-5)</li> </ul>	<p>Resource has been included in the Fairer Together element of the 22/23 audit plan for follow up work in this area (FWU22-9) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Challenging Inequality Programme (FR21-5).</li> </ul>



Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Social inequalities	<b>2021-22</b> <ul style="list-style-type: none"> <li>Challenging Inequality Programme (FR21-5)</li> </ul>	Resource has been included in the Fairer Together element of the 22/23 audit plan for follow up work in this area (FWU22-9) relating to the following audit: <ul style="list-style-type: none"> <li>Challenging Inequality Programme (FR21-5).</li> </ul>
Serious information breach or non-compliance with legislation	<b>2020-21</b> <ul style="list-style-type: none"> <li>Information governance - records management follow up (CC20-5)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>Information governance - records management follow up activity (FWU21-20)</li> </ul>	Resource has been included in the Resources element of the 22/23 audit plan for assurance in this area: <ul style="list-style-type: none"> <li>Unauthorised access to Council email systems (R22-4).</li> </ul>
Response and resilience	<b>2019-20</b> <ul style="list-style-type: none"> <li>Emergency planning (ER19-3)</li> </ul> <b>2020-21</b> <ul style="list-style-type: none"> <li>Business continuity planning lessons learned exercise (ER20-4)</li> </ul>	Based on moderate assurance rating in 2019-20, no high risk findings in 2020-21 and ongoing testing of business continuity arrangements due to Covid-19, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.
Safeguarding adults	<b>2019-20</b> <ul style="list-style-type: none"> <li>Direct payments (PS19-5)</li> </ul> <b>2020-21</b> <ul style="list-style-type: none"> <li>Safeguarding adults (PS20-2)</li> </ul> <b>2021-22</b>	Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for assurance in this area: <ul style="list-style-type: none"> <li>Housing allocation and medical need (ASC22-1)</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
	<ul style="list-style-type: none"> <li>Safeguarding adults extended follow up (FWU21-14)</li> <li>Direct payments extended follow up (FWU21-31)</li> <li>Mental health safeguarding follow up (FWU21-39)</li> </ul>	<p>Resource has been included in the Adult Social Care element of the 22/23 audit plan for follow up work in this area (FWU22-5) relating to the following audits:</p> <ul style="list-style-type: none"> <li>Mental health safeguarding processes (HASS18-2); and</li> <li>Safeguarding adults (PS20-2).</li> </ul>
New homes programme	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>HomeBuild (HOU20-1)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>HomeBuild extended follow up (FWU21-24)</li> </ul>	<p>Based on moderate assurance rating in 2020-21, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.</p>
Social care market instability	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Adult social care provider failure follow up (PS20-3)</li> <li>Contract management (CC20-6)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Contract management follow up activity (FWU21-11)</li> </ul>	<p>Resource has been included in the Community Wealth Building element of the 22/23 audit plan for follow up work in this area (FWU22-7) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Contract management (CC20-6).</li> </ul>
Delivering Net Zero Carbon	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>People Friendly Streets (AD20-2)</li> <li>Capital programmes (CC20-4)</li> </ul> <p><b>2021-22</b></p>	<p>Resource has been included in the Environment element of the 22/23 audit plan for assurance in this area:</p> <ul style="list-style-type: none"> <li>Climate emergency (E21-5).</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
	<ul style="list-style-type: none"> <li>• People Friendly Streets follow up activity (FWU21-37)</li> <li>• Capital programmes follow up activity (FWU21-10)</li> </ul>	<p>Resource has been included in the Cross-cutting element of the 22/23 audit plan for follow up work in this area (FWU22-4) relating to the following audit:</p> <ul style="list-style-type: none"> <li>• Capital programmes (CC20-4).</li> </ul> <p>Resource has been included in the Environment element of the 22/23 audit plan for follow up work in this area (FWU22-8) relating to the following audit:</p> <ul style="list-style-type: none"> <li>• People friendly streets (AD20-3).</li> </ul>
Contract management	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>• Procurement follow up (FWU20-16)</li> <li>• Contract management follow up (FWU20-6)</li> <li>• Contract management (CC20-6)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>• Contract management follow up activity (FWU21-11)</li> </ul>	<p>Resource has been included in the Community Wealth Building element of the 22/23 audit plan for follow up work in this area (FWU22-7) relating to the following audit:</p> <ul style="list-style-type: none"> <li>• Contract management (CC20-6).</li> </ul>
Health and social care integration	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>• Public health partnership working arrangements (PH18-1)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>• Public health partnership working arrangements follow up (FWU20-41)</li> </ul>	<p>Resource has been included in the Public Health element of the 22/23 audit plan for follow up work in this area (FWU22-11) relating to the following audits:</p> <ul style="list-style-type: none"> <li>• Public health (PH18-1)</li> <li>• Health and Social Care Integration (PH21-1)</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
	<b>2021-22</b> <ul style="list-style-type: none"> <li>• Health and Social Care Integration (PH21-1)</li> <li>• Public health partnership working arrangements follow up activity (FWU21-8).</li> </ul>	
School viability and place planning	No assurance activity took place between 2019 and 2022. School viability and place planning is monitored by the Council.	No assurance activity is planned for 2022-23. Risk management advice is being provided in this area.
Compounded pupil attainment gap	No assurance activity took place in 2021-22. The effectiveness of school governance mechanisms was verified as part of schools establishment reviews (PS21-2) in this area.	No assurance activity is planned for 2022-23. The effectiveness of school governance mechanisms is verified as part of schools establishment reviews (CS22-2).
IT delivery and transformation	<b>2020-21</b> <ul style="list-style-type: none"> <li>• Technology debt management follow up (FR20-4)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>• Business transformation (FR21-3)</li> <li>• Technology debt management follow up activity (FWU21-35)</li> </ul>	Resource has been included in the Children's Services element of the 22/23 audit plan for follow up work in this area (FWU22-12) relating to the following audit: <ul style="list-style-type: none"> <li>• Business transformation (FR21-3).</li> </ul>
Service response to further Covid-19 outbreak	<b>2019-20</b> <ul style="list-style-type: none"> <li>• Emergency planning (ER19-3)</li> </ul> <b>2020-21</b> <ul style="list-style-type: none"> <li>• Business continuity planning lessons learned exercise (ER20-4)</li> </ul>	No work is planned for 2022-23 based on the moderate assurance rating in 2019-20, no high risk findings in 2020-21 and ongoing testing of business continuity arrangements due to Covid-19. Any audit activity will be confined to reactive audits if concerns are raised in year.

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Non recent child abuse	Based on discussion with management, there is significant scrutiny in this area. As such, no assurance work took place in 2021-22.	Based on discussion with management, there is significant scrutiny in this area. As such, no assurance work is currently planned for 2022-23. This will be kept under review.
Serious H&S incident in housing	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>• Landlord duty of care - fire risk assessments (CC19-1)</li> <li>• TMO audits – Newbery House and Arch Elm (HASS19-2)</li> <li>• TMO follow ups - Quaker Court (FWU19-25), Redbrick (FWU19-26), Brooke Park (FWU19-27)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>• Landlord duty of care - fire risk assessments follow up (FWU19-2)</li> <li>• Landlord duty of care - lifts (CC20-1)</li> <li>• TMO audit – Elthorne 1<sup>st</sup> TMC (HOU20-2)</li> <li>• TMO follow ups – Gambier House (FWU20-24), Newbery House (FWU20-26), Arch Elm (FWU20-27)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>• Landlord duty of care – Fire Risk Assessments follow up activity (FWU21-2).</li> <li>• Tenant Management Organisation establishment reviews</li> </ul>	<p>Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for assurance in this area:</p> <ul style="list-style-type: none"> <li>• Landlord duty of care - housing safety project assurance (HN22-2);</li> <li>• Tenant Management Organisation monitoring arrangements (HOU21-1) – deferred from 2021-22 at the request of the TMO management team to ensure that the audit responds to planned changes in arrangements; and</li> <li>• Tenant Management Organisation establishment reviews (HN22-1).</li> </ul> <p>Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for follow up work in this area (FWU22-10) relating to the following audits:</p> <ul style="list-style-type: none"> <li>• Landlord duty of care – Fire Risk Assessments (CC19-1); and</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
		<ul style="list-style-type: none"> <li>Landlord duty of care – lifts follow up activity (CC20-1).</li> </ul>
Health and safety	<p><b>2019-20</b></p> <ul style="list-style-type: none"> <li>Legionella follow up (FWU19-1)</li> </ul> <p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Health and safety – asbestos (HOU20-5)</li> <li>Landlord duty of care - lifts (CC20-1)</li> </ul>	<p>Resource has been included in the Homes and Neighbourhoods element of the 22/23 audit plan for an extended follow up of the following audit:</p> <ul style="list-style-type: none"> <li>Health and safety – asbestos (FWU22-1)</li> </ul> <p>Resource has been included in the Homes and Neighbourhoods plan for follow up work in this area (FWU22-10) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Landlord duty of care – lifts follow up activity (CC20-1)</li> </ul>
Capital programme delivery	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Capital programmes (CC20-4)</li> <li>Capital expenditure follow up (FWU20-17)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Capital programmes follow up activity (FWU21-10).</li> <li>Capital expenditure follow up activity (FWU21-16).</li> </ul>	<p>Resource has been included in the Cross-cutting element of the 22/23 audit plan for follow up work in this area (FWU22-4) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Capital programmes (CC20-4).</li> </ul> <p>Resource has been included in the Resources element of the 22/23 audit plan for follow up work in this area (FWU22-12) relating to the following audit:</p> <ul style="list-style-type: none"> <li>Capital expenditure (FR18-5)</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Domestic violence abuse	<b>2020-21</b> <ul style="list-style-type: none"> <li>Domestic violence (PS20-7) – moderate assurance</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>Domestic violence follow up activity (FWU21-21).</li> </ul>	Based on moderate assurance rating in 2020-21, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.
Change programme delivery	<b>2020-21</b> <ul style="list-style-type: none"> <li>PMO (CC20-2)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>PMO extended follow-up (FWU21-5)</li> </ul>	Resource has been included in the Cross-cutting element of the 22/23 audit plan for follow up work in this area (FWU22-4) relating to the following audit: <ul style="list-style-type: none"> <li>PMO (CC20-2)</li> </ul>
IT resilience	<b>2019-20</b> <ul style="list-style-type: none"> <li>Symology (FR19-5)</li> </ul> <b>2020-21</b> <ul style="list-style-type: none"> <li>CivicaPay (FR20-2)</li> <li>Symology follow up (FR20-4)</li> </ul> <b>2021-22</b> <ul style="list-style-type: none"> <li>CivicaPay follow up activity (FWU21-12)</li> </ul>	Resource has been included in the Resources element of the 22/23 audit plan for assurance in this area: <ul style="list-style-type: none"> <li>Key software system resilience review (R22-2)</li> </ul>
Well managed workforce	<b>2019-20</b> <ul style="list-style-type: none"> <li>Right to work vetting arrangements (FR19-2) considered Brexit preparedness related to staffing.</li> </ul> <b>2020-21</b> <ul style="list-style-type: none"> <li>Use of contingent workers (FR20-5)</li> </ul> <b>2021-22</b>	Resource has been included in the Resources element of the 22/23 audit plan for an extended follow up of the following audit: <ul style="list-style-type: none"> <li>Use of contingent workers (FWU22-3)</li> </ul>

Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
	<ul style="list-style-type: none"> <li>• Gifts and hospitality and declarations of interest extended follow up (FWU21-27)</li> <li>• Right to work vetting arrangements extended follow up (FWU21-34)</li> </ul>	
Serious fraudulent activity	<p>Fraud risks identified through Internal Audits are addressed through audit recommendations. Additionally, Internal Audit offered input into reactive fraud investigations undertaken in 2020-21 and 2021-22, and carried out an additional audit into supplier bank amendments (AD21-2) in response to a bank mandate fraud.</p>	<p>Resource has been included in the Resources element of the 22/23 audit plan for assurance in this area:</p> <ul style="list-style-type: none"> <li>• Use of sundry suppliers (R22-3)</li> <li>• Unauthorised access to Council email systems (R22-4)</li> </ul> <p>Resource has been included in the Resources element of the 22/23 audit plan for an extended follow up of the following audit:</p> <ul style="list-style-type: none"> <li>• Supplier bank amendments (AD21-2)</li> </ul> <p>Additionally, the audit plan is designed to address and identify fraud risks. Delivery of the audit plan will ensure that where risks are identified in the course of audits, recommendations are made to mitigate them.</p> <p>Internal Audit will offer input into reactive investigations to be undertaken in-year (CC22-2).</p>



Risk title	Internal Audit Coverage (from 2019-20 to 2021-22)	2022-23 Planned Internal Audit Coverage
Savings delivery	<p><b>2020-21</b></p> <ul style="list-style-type: none"> <li>Financial strategy (CC20-3)</li> </ul> <p><b>2021-22</b></p> <ul style="list-style-type: none"> <li>Financial strategy follow up activity (FWU21-9)</li> </ul>	Based on moderate assurance rating in 2020-21, no further Internal Audit work is planned in this area before 2023-24. Any audit activity will be confined to reactive audits if concerns are raised in year.

**Appendix ends**

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**Report of: Corporate Director – Resources**

Meeting of:	Date	Agenda item	Ward(s)
Audit Committee	22 <sup>nd</sup> March 2022		All

<b>Delete as appropriate</b>	Exempt (Appendix)	
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Part of the report is not for publication because it contains exempt information under Schedule 12A of the Local Government Act 1972) Paragraphs 1, 2, 7 Schedule 12A of the Local Government Act 1972, namely: Information relating to an individual. Information which is likely to reveal the identity of an individual and Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

## THE APPENDIX TO THIS REPORT IS NOT FOR PUBLICATION

**SUBJECT: Bi- Annual Whistleblowing Monitoring Report – 1st September 2021 to 31<sup>st</sup> January 2022**

### 1. Synopsis

- 1.1 The report seeks to provide assurance that whistleblowing arrangements are in place and operating effectively, and that investigating fraud is an integral part of the Council’s Anti-Fraud Strategy. The Council’s Whistleblowing Officer is the Head of Internal Audit, Investigations and Risk Management. Whistleblowing arrangements are a key element of the Council’s overall governance arrangements. It is the mechanism to “empower the honest majority” in the fight against fraud and corruption and is an integral part of the Council’s Anti-Fraud Strategy.
- 1.2 Whistleblowing allows employees, contractors and others, to raise concerns surrounding potential fraud and corruption. There are separate reporting mechanisms for adult and child protection allegations, in line with the Council’s whistleblowing policy. Whistleblowing information is located within the Human Resources policies and procedures section of the

Council's intranet. Audit Committee receive bi-annual whistleblowing monitoring reports. The last update, covering the period to 31st August 2021, was presented to Audit Committee in October 2021. This report provides details of referrals that were assessed as whistleblowing referrals between 1st September 2021 and 31<sup>st</sup> January 2022. The report ordinarily provides an update on cases that were open at the time of the last report to Committee. In this iteration, there were no open cases reported at 31st August 2021.

## **2. Recommendations**

2.1 Committee is asked to note the report.

## **3. Background**

3.1 Effective whistleblowing arrangements are a key element of effective governance arrangements within the Council.

## **4. Implications**

### **4.1 Financial implications**

The programme of work has been met from within the existing Internal Audit (Investigations) budget. The financial implications of individual investigations are met by local budgets.

### **4.2 Legal Implications**

There are no legal implications arising from this report. Legal advice and support will be provided, where necessary, in relation to individual investigations.

### **4.3 Environmental implications**

There are no environmental implications arising from the recommendations in this report.

### **4.4 Equality Impact Assessment**

The Council has a public sector equality duty (PSED) to make sure that our policies, practices, and services do not discriminate against anyone and ensure that Islington's commitment to equality is translated into practice.

An Equality Impact Assessment has not been completed because the decision currently being sought does not have direct impacts on residents.

## **Appendices:**

### **Appendix A – Whistleblowing Monitoring Report (Exempt)**

Final report clearance:

**Signed by:**

David Hodgkinson – Corporate Director of Resources

**Date:** **7 March 2022**

Report Author: Nasreen Khan, Head of Internal Audit, Investigations and Risk Management

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**REPORT ENDS**

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By virtue of paragraph(s) 2 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

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