

APPENDIX 1 – 2021-22 INTERNAL AUDIT INTERIM ANNUAL REPORT

Internal Audit Interim Annual Report

Audit Committee 31st January 2022

Introduction: This Appendix gives summary details of the 2021-22 audit plan that was agreed by Audit Committee on 25th May 2021. It shows the indicative scope as well as the completion status of each individual project. It is included to provide Audit Committee with assurance that the audit plan – which is the key vehicle for providing the Council with independent assurance – is being effectively delivered.

* Denotes a principal risk

1. Summary of assurance ratings for completed reviews

Number	Ref	Audit Title	Assurance Rating
Assurance ratings for planned audit reviews			
1	FR20-5	Use of Contingent Workers	The assurance rating will be confirmed based on management's response. Management have provided further information subsequent to the issue of the draft report, which is currently being reviewed by Internal Audit.
2	HOU20-5	Health and Safety – Asbestos	No assurance
3	PS20-6-3	School – Establishment Review – Moreland Primary School	Moderate assurance
4	PS20-6-6	School – Establishment Review – St Luke's Church of England Primary School	Substantial assurance

Extended follow up outcomes (see rating key in Appendix 3)			
5	FWU21-27	Gifts and hospitality and declarations of interest *	A good rate of implementation was noted
6	FWU21-34	Right to work vetting arrangements *	A good rate of implementation was noted
7	FWU21-31	Direct payments *	Agreed actions have been fully implemented
8	FWU21-24	HomeBuild *	A reasonable rate of implementation was noted
9	FWU21-33	S106 *	A good rate of implementation was noted
Reviews completed where an assurance opinion was not provided (a management letter or grant compliance opinion was issued)			
10	HOU21-3	Voluntary Sector Organisation (VSO) – Highbury Roundhouse	Eight areas of concern were raised (advisory review)
11	AD21-2	Supplier Bank Amendments	Six high priority findings
12	FR21-4-1	Covid-19 grant certification * - Arts Council Culture Recovery Fund	Compliance opinion issued
13	FR21-4-2	Covid-19 grant certification * - Sales, Fees and Charges – Lost Income.	Compliance opinion issued
14	AD21-1	HIV Pre-Exposure Prophylaxis (PrEP) grant 2020-21	Compliance opinion issued
15	AD21-3	Green Homes grant – project closure	Compliance opinion issued

2. Detailed 2021-22 audit plan update

2.1 Audits brought forward from 2020-21

Ref	Audit title	Indicative scope	Planned days	Status
CC20-1	Landlord Duty of Care – Lifts	On-going programme of assurance against this area of Principal Risk. Cross-cutting review of the Council's arrangements for ensuring compliance with health and safety requirements across its property portfolio. Scope to focus on lift maintenance and replacement within the Council's housing stock.	20	Following review, a need for additional audit work to cover off areas of key risk was identified. Subsequently, key individuals were not available to allow finalisation of findings. A revised completion date of January 2022 is anticipated.
HOU20-5	Health and Safety – Asbestos	Risk based review of key Health and Safety risk area.	15	The report is at 'draft' final stage pending final agreement of management responses. An exit meeting was held and additional evidence provided by management was reviewed by Internal Audit in Q3 21-22. 5 high priority findings were raised, details of which can be seen at Appendix 2.
FR20-5	Use of Contingent Workers	Risk based review of key controls regarding the use of agency and consultancy staff. Scope to include controls surrounding approval, extension, vetting and financial monitoring.	20	A draft report has been shared with management and an exit meeting was held. Management have provided further information which is currently being reviewed by Internal Audit. A report finalisation date of January 2022 is anticipated.

PS20-6-3	School – Establishment Review – Moreland Primary School	Risk based review of Moreland Primary School.	10	Completed. No high priority findings were identified.
PS20-6-6	School – Establishment Review – St Luke’s Church of England Primary School	Risk based review of St Luke’s Church of England Primary School.	10	Completed. No high priority findings were identified.

2.2 Corporate/Cross-Cutting

Ref	Audit title	Indicative scope	Planned days	Status
CC21-1	Risk management – assurance mapping	Internal Audit input into assurance mapping for principal risks. This will support the activity of the Council’s risk management function.	20	This exercise will take place in late Q3 and early Q4 to inform the 2022-23 audit plan which will be approved by Audit Committee in March 2022.
CC21-2	Serious fraudulent activity *	Internal Audit input into reactive investigations to be undertaken in-year. This will support the activity of the Council’s corporate investigations team as needed.	20	Members of the Internal Audit team have provided ongoing input into reactive investigations throughout the year to date to support the Corporate Investigations team.
CC21-3	Annual Governance Statement and audit plan production	Preparation of the Council’s Annual Governance Statement and audit plan.	10	Responsibility for the Annual Governance Statement will no longer sit with the Internal Audit team in order to conform with CIPFA guidance, however the Internal Audit team will provide support to the new

				<p>owners of this work in this transition year during Q4 of 2021-22 and Q1 of 2022-23.</p> <p>The annual audit planning exercise will take place in late Q3 and early Q4 alongside the assurance mapping exercise (see CC21-1 above). The audit plan will be approved by Audit Committee in March 2022.</p>
CC21-4	Controls Board	Internal Audit input into Controls Board workplan and support for directorate representatives.	25	The Internal Audit team has been servicing Controls Board, as well as providing support for directorate representatives around follow up activity.
FWU21-5	Programme Management Office (PMO) *	Extended follow up of audit recommendations arising from the 2020-21 review of PMO (CC20-2 – management letter with 17 high priority findings across four audit areas). The audit scope looked at the redesign of the Council's Programme Management Office (PMO) and conducted project health checks across a sample of three programmes (one each in Housing, Environment and Regeneration and People).	20	Follow up fieldwork is underway. A follow up memorandum will be issued in Q4 of 2021-22.
FWU 21-2 21-3 21-9 21-10	Follow ups of outstanding high priority actions from prior year audits *	<p>Follow up of high priority audit recommendations arising from the following reviews:</p> <ul style="list-style-type: none"> FWU19-2: Landlord duty of care – Fire Risk Assessments (second follow up) 	31	<p>Activity has been undertaken as follows:</p> <ul style="list-style-type: none"> FWU19-2: Landlord duty of care – Fire Risk Assessments (management letter with two high priority findings) – follow up complete. See Appendix 3 for details of follow up outcomes.

21-11		<ul style="list-style-type: none"> • CC20-1: Landlord duty of care – lifts • CC20-3: Financial strategy/Covid financial impact • CC20-4: Capital programmes • CC20-6: Contract management 20/21 		<ul style="list-style-type: none"> • CC20-1: Landlord duty of care – lifts (assurance rating tbc) - follow up not yet due. To commence in Q4 2021-22. • CC20-3: Financial strategy (Adult Social Care) (Moderate assurance) - follow up not yet due. To commence in Q4 2021-22. • CC20-4: Capital programmes (Moderate assurance) - follow up not yet due. To commence in Q4 2021-22. • CC20-6: Contract management 20/21 (Limited assurance) - all actions whose due date has passed have been followed up. See Appendix 3 for details of follow up outcomes.
FWU21-TBC	Follow ups of 2021-22 audits in year *	As follow ups tend to take place one full quarter from finalisation of the review (e.g. follow ups of Q2 audits will not usually take place earlier than Q4), and minimal Q1 audit activity is planned due to the timing of approval of the audit plan, an assumption has been made that 1/3 of planned 2021-22 audits will be followed up in year, with the remainder followed up in 2022-23.	68	The majority of audit recommendations raised in the course of 2021-22 have not yet reached their due dates. Follow up work is ongoing on all open audit recommendations, and where actions have been found to be implemented, recommendations have been closed. See Appendix 3 for details of follow up outcomes.

2.3 Resources

Ref	Audit title	Indicative scope	Planned days	Status
FR21-1-1	Key Financial Systems (KFS) – Accounts Payable	<p>Review of key financial systems. We created an in-depth map of key financial controls in four areas (Accounts Payable, Income, Treasury and Payroll) during 2020-21 (FR20-1).</p> <p>We then assessed whether the design of controls is theoretically sufficient to mitigate risks. Work in 2021-22 will include an update of this control design assessment to ensure that the KFS controls map for these areas remains current. The map will inform the choice of controls we target in 2021-22 to test whether they are operating effectively.</p> <p>The KFS review areas for 2021-22 will also include Pensions.</p>	14	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FR21-1-2	Key Financial Systems (KFS) – Income		14	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FR21-1-3	Key Financial Systems (KFS) – Treasury		14	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FR21-1-4	Key Financial Systems (KFS) – Payroll		14	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FR21-1-5	Key Financial Systems (KFS) – Pensions		14	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FR21-2	Access controls and rights *	An extended audit into access controls and rights for key business applications and processes, based on data security risks identified around the appropriateness of the approvals process.	30	Fieldwork is underway and outcomes will be reported in Q4 2021-22.
FR21-3	Business transformation *	A risk based review to provide assurance against this area of principal risk. The scope will be refined/agreed in year.	20	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.

FR21-4-1	Covid-19 grant certification * - Arts Council Culture Recovery Fund	Ad hoc reviews of Covid-related grants to verify that they are being administered in accordance with grant conditions.	20	A Head of Internal Audit's compliance opinion was provided on the return provided for the Arts Council Culture Recovery Fund grant.
FR21-4-2	Covid-19 grant certification * - Sales, Fees and Charges – Lost Income.			A Head of Internal Audit's compliance opinion was provided on the return provided for the Sales, Fees and Charges – Lost Income grant.
FR21-5	Challenging Inequality Programme *	A risk based review of the Challenging Inequality Programme to verify that the framework's design supports the Council's ambition to meet the Equalities Gold Standard. The audit will provide assurance against the Diversity and Inclusion and the Social Inequalities principal risks.	20	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FWU21-27	Gifts and hospitality and declarations of interest *	<p>Extended follow up of audit recommendations arising from the 2017-18 review of Gifts and hospitality and declarations of interest (CC17-10 – Limited assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Policy and guidance; • Register of declarations of interest; • Gifts and hospitality register; • Contract standing orders and documentation (consultants); and 	6	<p>Extended follow up completed. We looked at the rate of implementation of 12 recommendations related to two high and three medium priority findings. We found that:</p> <ul style="list-style-type: none"> • 11 recommendations relating to two high priority and three medium priority findings have been implemented; and • One recommendation relating to a medium priority finding has been partially implemented.

		<ul style="list-style-type: none"> Contract standing orders and documentation (agency staff). 		<p>The partially implemented recommendation related to:</p> <ul style="list-style-type: none"> The automated generation of a register of gifts and hospitality. <p>A revised target implementation date of 31 December 2021 has been agreed for the outstanding recommendation.</p>
FWU21-34	Right to work vetting arrangements *	<p>Extended follow up of audit recommendations arising from the 2019-20 review of Right to work vetting arrangements (FR19-2 – Limited assurance). Audit findings related to:</p> <ul style="list-style-type: none"> Visa end dates; Right to work status of agency staff; Policies and protocols; HR risk register; and EU exit preparation – agency and Council. 	8	<p>Extended follow up completed. We looked at the rate of implementation of 14 recommendations related to two high and four medium priority findings. We found that:</p> <ul style="list-style-type: none"> 13 recommendations relating to two high priority and three medium priority findings have been implemented; and One recommendation relating to a medium priority finding has been partially implemented. <p>The partially implemented recommendation related to:</p> <ul style="list-style-type: none"> The creation of a Human Resources risk register. <p>A revised target implementation date of 31 December 2021 has been agreed for the outstanding recommendation.</p>
FWU 21-12	Follow ups of outstanding high	Follow up of audit recommendations arising from the following reviews:	44	Activity has been undertaken as follows:

<p>21-13 21-16 21-17 21-18 21-22</p>	<p>priority actions from prior year audits *</p>	<ul style="list-style-type: none"> • FR20-2: IT application review – CivicaPay • FR20-5: Use of contingent workers • FWU20-17: Capital expenditure (second follow up) • FWU20-40: Continuous audit monitoring (second follow up) • FWU20-33: Cyber security (second follow up) • FWU20-5: Payroll (second follow up) 	<ul style="list-style-type: none"> • FR20-2: IT application review – CivicaPay (Moderate assurance) – follow up complete. See Appendix 3 for details of follow up outcomes. • FR20-5: Use of contingent workers - follow up not yet due. To commence in Q1 2022-23. • FWU20-17: Capital expenditure (Moderate assurance) – follow up complete. See Appendix 3 for details of follow up outcomes. • FWU20-40: Continuous audit monitoring (Limited assurance) – follow up complete. See Appendix 3 for details of follow up outcomes. • FWU20-33: Cyber security (Limited assurance) – follow up complete. See Appendix 3 for details of follow up outcomes. • FWU20-5: Payroll (Limited assurance) - follow up in progress. To complete in Q4 2021-22.
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2.4 People

Ref	Audit title	Indicative scope	Planned days	Status
PS21-1	High needs/SEN children's placements *	Brought forward from 2020-21 plan. Risk based review of controls in place around high-needs/SEN children's placements. Scope to include monitoring and reporting of high cost care placements / packages.	20	Fieldwork is underway and outcomes will be reported in Q3 2021-22.
PS21-2-1	Schools establishment review – St John's Highbury Vale Primary School	Risk based review of seven schools/children's centres. These reviews do not directly align to a principal risk, and are part a rolling programme of assurance for schools which operates on a cyclical basis. The programme assesses the effectiveness of school governance mechanisms and financial practices.	12	Fieldwork is underway and outcomes will be reported in Q3 2021-22.
PS21-2-2	Schools establishment review – Vittoria Primary School		12	Fieldwork is underway and outcomes will be reported in Q4 2021-22.
PS21-2-3	Schools establishment review - Newington Green Primary School		12	Fieldwork is underway and outcomes will be reported in Q4 2021-22.
PS21-2-4	Schools establishment review – Duncombe Primary School		12	Deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.
PS21-2-5	Schools establishment review - Pooles Park Primary School		12	Deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.

PS21-2-6	Schools establishment review - Samuel Rhodes Primary School		12	Deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.
PS21-2-7	Schools establishment review – Laycock Primary School		12	Fieldwork is underway and outcomes will be reported in Q3 2021-22.
PS21-3	Troubled families	Audit review and sign off of compliance with requirements within Memorandum of Understanding between the Council and MHCLG covering funding from MHCLG's Troubled Families programme.	10	The audit is currently being scoped. Fieldwork will begin in Q4 2021-22.
FWU 21-14	Safeguarding adults – governance and records management *	<p>Extended follow up of audit recommendations arising from the 2020-21 review of Safeguarding adults (PS20-2 - No assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Evidence of case management and approval (critical priority); • Timeliness of case management activity; • Retention of evidence to support case closure; and • Updating the information sharing agreement. 	8	Follow up fieldwork is underway. A follow up memorandum will be issued in Q4 of 2021-22.
FWU21-31	Direct payments *	Extended follow up of audit recommendations arising from the 2019-20 review of Direct	7	Extended follow up completed. We looked at the rate of implementation of 11 recommendations related to three high

		<p>payments (PS19-5 – Limited assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Transfers from pre-paid cards • Ordering pre-paid cards • Financial monitoring • Governance arrangements – risk-based reviews of spend • Direct payment agreements • Deceased individuals 		<p>priority findings, two medium priority findings and one low priority finding. We found that all recommendations had been implemented.</p>
<p>FWU 21-21 21-26 21-30</p>	<p>Follow ups of outstanding high priority actions from prior year audits *</p>	<p>Follow up of audit recommendations arising from the following reviews:</p> <ul style="list-style-type: none"> • PS20-7: Domestic violence • FWU20-10: Placement commissioning 16-17 year olds (second follow up) • FWU20-4: SEN transport (second follow up) 	<p>30</p>	<p>Activity has been undertaken as follows:</p> <ul style="list-style-type: none"> • PS20-7: Domestic violence (Moderate assurance) - follow up not yet due. To commence in Q4 2021-22. • FWU20-10: Placement commissioning 16-17 year olds (Limited assurance) - follow up complete. See Appendix 3 for details of follow up outcomes. • FWU20-4: SEN transport (No assurance) - follow up in progress. To complete in Q4 2021-22.

2.5 Environment and Regeneration

Ref	Audit title	Indicative scope	Planned days	Status
FWU21-6	Parking services *	<p>Extended follow up of audit recommendations arising from the 2020-21 review of Parking Services (ER20-3 – Limited assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Debt recovery process • Cancelled Penalty Charge Notices (PCNs) • Spot checks on enforcement decisions • Contract management of debt enforcement agents • Governance arrangements – roles and responsibilities • Policies and procedures • Risk management • Oversight of written off PCNs • Appeal response times • Reconciliations 	13	Extended follow up in progress. We have asked management for evidence of implementation of 17 recommendations related to four high priority findings and six medium priority findings. Evidence has been provided and additional follow up work is being undertaken to verify implementation of actions.
FWU 21-7 21-15	Follow ups of outstanding high priority actions from prior year audits *	<p>Follow up of audit recommendations arising from the following reviews:</p> <ul style="list-style-type: none"> • ER18-5: Greenspace income 	21	<p>Activity has been undertaken as follows:</p> <ul style="list-style-type: none"> • ER18-5: Greenspace income (Limited assurance) - follow up in

21-36 21-37		<ul style="list-style-type: none"> • FWU20-20: Blue badges (second follow up) • AD20-2: Commercial waste recovery plan • AD20-3: People-friendly streets 		<p>progress. To complete in Q4 2021-22.</p> <ul style="list-style-type: none"> • FWU20-20: Blue badges (Moderate assurance) - an update and evidence of implementation has been requested from action owners. No response has been received to date, and a reminder has been issued. • AD20-2: Commercial waste recovery plan (management letter with four high priority findings) - follow up in progress. To complete in Q4 2021-22. • AD20-3: People-friendly streets (management letter with one high priority finding) - follow up in progress. To complete in Q4 2021-22.
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2.6 Housing

Ref	Audit title	Indicative scope	Planned days	Status
HOU21-1	Tenant Management Organisation (TMO) monitoring arrangements *	A review of Council processes for monitoring TMO activity and governance arrangements. This will take into account whether monitoring activity is sufficient in light of the increased	16	This audit has been deferred at the request of the service area. Significant changes are planned in the approach to monitoring TMO activity over the coming months,

		responsibilities for councils introduced in the 2021 Housing White Paper.		therefore a review of existing arrangements is likely to identify known issues. Internal Audit has held a risk based discussion with the service area and it was agreed that the audit would be deferred to 2022-23 to allow time for revised practice to be implemented. Internal Audit will also remain available throughout this period to provide advice on risk and control as needed.
HOU21-2-1	Tenant Management Organisation (TMO) establishment review - Braithwaite	Risk based review of five 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.	11	This review is planned for Q4 of 2021-22 but is dependent on the vacancy within the Internal Audit team being filled. If this does not happen, the audit will be deferred to Q1 of 2022-23.
HOU21-2-2	Tenant Management Organisation (TMO) establishment review - Blackstock		11	This review is planned for Q4 of 2021-22 but is dependent on the vacancy within the Internal Audit team being filled. If this does not happen, the audit will be deferred to Q1 of 2022-23.
HOU21-2-3	Tenant Management Organisation (TMO) establishment review - Spa Green		11	This review is planned for Q4 of 2021-22 but is dependent on the vacancy within the Internal Audit team being filled. If this does not happen, the audit will be deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.
HOU21-2-4	Tenant Management Organisation (TMO)		11	This review is planned for Q4 of 2021-22 but is dependent on the vacancy within the

	establishment review - Holbrook			Internal Audit team being filled. If this does not happen, the audit will be deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.
HOU21-2-5	Tenant Management Organisation (TMO) establishment review - Miranda		11	This review is planned for Q4 of 2021-22 but is dependent on the vacancy within the Internal Audit team being filled. If this does not happen, the audit will be deferred to Q1 of 2022-23 due to vacancy within Internal Audit team.
HOU21-3	Voluntary Sector Organisation (VSO) – Highbury Roundhouse	Risk based review of one VSO. These reviews do not directly align to a principal risk, and are part a rolling programme of assurance for VSOs which operates on a cyclical basis.	20	Completed. Advisory review, with no assurance rating assigned.
FWU21-24	HomeBuild *	<p>Extended follow up on audit recommendations arising from the 2020-21 review of HomeBuild (HOU20-1 – Moderate assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Financial governance • Risk management • Change control • Quality management 	7	<p>Extended follow up completed. We looked at the rate of implementation of nine recommendations related to one high and three medium priority findings. We found that:</p> <ul style="list-style-type: none"> • Three recommendations relating to one high priority and one medium priority finding have been implemented; • Three recommendations relating to one high priority and two medium priority findings have been implemented; and

				<ul style="list-style-type: none"> • Three recommendations relating to one medium priority finding have not been implemented. <p>The partially implemented recommendation related to:</p> <ul style="list-style-type: none"> • Oversight of the financial performance of the programme; • The creation of a change control procedure; and • Finalisation of the Quality Management Plan. <p>The not implemented recommendations all related to:</p> <ul style="list-style-type: none"> • Quality reporting and monitoring. <p>A revised target implementation date of 31 January 2022 has been agreed for the outstanding recommendations.</p>
FWU 21-1 21-23 21-25 21-29	Follow ups of outstanding high priority actions from prior year audits *	Follow up of audit recommendations arising from the following reviews: <ul style="list-style-type: none"> • HASS19-6: Housing Revenue Account • HOU20-5: Health and safety – asbestos • HASS17-2: Annual service charges • FWU20-14: Rent income and recovery (second follow up) 	20	Activity has been undertaken as follows: <ul style="list-style-type: none"> • HASS19-6: Housing Revenue Account (Moderate assurance) - an update and evidence of implementation has been requested from action owners. No response has been received to date, and a reminder has been issued. • HOU20-5: Health and safety – asbestos (No assurance) - follow up

				<p>not yet due. To commence in Q1 2022-23.</p> <ul style="list-style-type: none"> • HASS17-2: Annual service charges (Limited assurance) -follow up complete. See Appendix 3 for details of follow up outcomes. • FWU20-14: Rent income and recovery (Moderate assurance) - an update and evidence of implementation has been requested from action owners. To date, a response has been provided for only one of the five outstanding recommendations, and a reminder has been issued.
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2.7 Community Wealth Building

Ref	Audit title	Indicative scope	Planned days	Status
CWB21-1	Local business resilience *	A risk based review to provide assurance against this area of principal risk. The scope will be refined/agreed in year.	20	This audit will be scoped and carried out in Q4 2021-22.
CWB21-2	Financial resilience of residents *	A risk based review to provide assurance against this area of principal risk. The scope will be refined/agreed in year.	20	This audit will be scoped and carried out in Q4 2021-22. If we are unable to fill the vacancy within the Internal Audit team by early Q4, this audit may complete in Q1 2022-23.

FWU21-33	S106 *	<p>Extended follow up of audit recommendations arising from the 2019-20 review of S106 (ER19-4 – Moderate assurance). Audit findings related to:</p> <ul style="list-style-type: none"> • Evidence of approval • Policies and procedures • Borough Investment Panel terms of reference <p>Expenditure of funding allocation</p>	7	<p>Extended follow up completed. We looked at the rate of implementation of four recommendations related to one high and three medium priority findings. We found that:</p> <ul style="list-style-type: none"> • Three recommendations relating to one high priority and two medium priority findings have been implemented; and • One recommendation relating to a medium priority finding has been partially implemented. <p>The partially implemented recommendation related to:</p> <ul style="list-style-type: none"> • Oversight of data. <p>A revised target implementation date of 31 December 2021 has been agreed for the outstanding recommendation.</p>
FWU21-20	Follow ups of outstanding high priority actions from prior year audits *	<p>Follow up of audit recommendations arising from the following reviews:</p> <ul style="list-style-type: none"> • CC20-5: Information governance – records management (second follow up) 	3	<p>Activity has been undertaken as follows:</p> <ul style="list-style-type: none"> • CC20-5: Information governance – records management (Moderate assurance) - follow up complete. See Appendix 3 for details of follow up outcomes.

2.8 Public Health

Ref	Audit title	Indicative scope	Planned days	Status
PH21-1	Health and social care integration and Covid-19 outbreak control *	A Public Health audit is carried out annually to provide assurance against this area of principal risk. Responsibility for carrying out these audits alternates between the Internal Audit teams at Islington and Camden. The audit will provide assurance against the Health and Social Care Integration and the Covid-19 Outbreak Control principal risks by assessing public health performance relating to Covid-19.	20	Scoping for this audit is underway and fieldwork will begin in Q4 2021-22.
FWU21-28	Follow ups of outstanding high priority actions from prior year audits *	Follow up of audit recommendations arising from the following reviews: PH18-1: Public health (second follow up)	3	Activity has been undertaken as follows: <ul style="list-style-type: none"> PH18-1: Public health (Moderate assurance) - follow up complete. See Appendix 3 for details of follow up outcomes.

2.9 Additional Reviews

Three additional reviews have been requested in the 2021/22 year to date, with a combined audit budget of 35 days.

Ref	Audit title	Indicative scope	Planned days	Status
AD21-1	HIV Pre-Exposure Prophylaxis (PrEP) grant 2020-21	Review of compliance with grant conditions for this grant from the Department of Health and Social Care.	5	Complete. A grant compliance opinion was provided by the Head of Internal Audit.

AD21-2	Supplier Bank Amendments	100% review of supplier bank amendments across a three month period to verify whether processes have been followed and assess whether controls in place in this area are sufficient to mitigate fraud risks.	25	Completed. Six high priority findings were raised, details of which can be seen at Appendix 2.
AD21-3	Green Homes grant – project closure	Review of compliance with grant conditions for this grant from the Department for Business, Energy and Industrial Strategy	5	Complete. A grant compliance opinion was provided by the Head of Internal Audit.

3. Audit plan delivery (as at December 2021)

Audit status	Number of reviews
Total number of reviews included on the audit plan <i>Total (see 2.1 to 2.9 above for breakdown)</i>	45
Audits deferred or likely to be deferred to Q1 2022-23 <i>Deferred to respond to business need:</i> <ol style="list-style-type: none"> 1. Tenant Management Organisation (TMO) monitoring arrangements <i>Deferred due to vacancy within Internal Audit team:</i> <ol style="list-style-type: none"> 2. Schools establishment review – Duncombe Primary School 3. Schools establishment review - Pooles Park Primary School 4. Schools establishment review - Samuel Rhodes Primary School 5. Financial resilience of residents 	10

Audit status	Number of reviews
<p><i>Likely to be deferred due to vacancy unless an alternative delivery resource can be identified for Q4 2021-22 (the co-sourced partner has been approached as an alternative delivery resource):</i></p> <p>6. Tenant Management Organisation (TMO) establishment review - Braithwaite</p> <p>7. Tenant Management Organisation (TMO) establishment review - Blackstock</p> <p>8. Tenant Management Organisation (TMO) establishment review - Spa Green</p> <p>9. Tenant Management Organisation (TMO) establishment review - Holbrook</p> <p>10. Tenant Management Organisation (TMO) establishment review – Miranda</p>	
Remaining audits due for completion as part of the 2021-22 plan	35
<p>Audits completed to reporting stage</p> <p><i>Audits completed and report issued in final</i> 13 (37%)</p> <p><i>Audits completed and awaiting management response</i> 2 (6%)</p>	15 (43%)
<p>Audits in progress</p> <p><i>Fieldwork</i> 10 (28%)</p> <p><i>Scoping</i> 9 (26%)</p>	20 (54%)
Audits not yet started	1 (3%)

Note: Expected delivery as at 31st March 2022- based on current progress and projected outcomes, we anticipate that we will deliver in the range of 86%-92% of the plan by 31st March 2022, with the remainder delivered in early Q1 22-23. The exact figure in this range will depend on whether an alternative delivery resource can be identified for the Tenant Management Organisation (TMO) establishment reviews, as noted above.

Basis of our opinion and assurance statements

Level of assurance	
Substantial ●	There is a sound control environment with risks to key service objectives being reasonably managed. Any deficiencies identified are not cause for major concern. Recommendations will normally only be Advice and Best Practice.
Moderate ●	An adequate control framework is in place but there are weaknesses which may put some service objectives at risk. There are Medium priority recommendations indicating weaknesses but these do not undermine the system's overall integrity. Any Critical recommendation will prevent this assessment, and any High recommendations would need to be mitigated by significant strengths elsewhere.
Limited ●	There are a number of significant control weaknesses which could put the achievement of key service objectives at risk and result in error, fraud, loss or reputational damage. There are High recommendations indicating significant failings. Any Critical recommendations would need to be mitigated by significant strengths elsewhere.
No ●	There are fundamental weaknesses in the control environment which jeopardise the achievement of key service objectives and could lead to significant risk of error, fraud, loss or reputational damage being suffered.

APPENDIX ENDS