

Watford Borough Council Audit Committee - 23 November 2023

Shared Internal Audit Service – 2023/24 Internal Audit Plan Progress Report

Recommendation

Members are recommended to:

- Note the Internal Audit Progress Report for the period to 10 November 2023
- Approve amendments to the Audit Plan as at 10 November 2023
- Agree the change to the implementation date for four recommendations (paragraph 2.5) for the reasons set out in Appendix C
- Agree removal of implemented audit recommendations set out in Appendix C
- Note the implementation status of high priority recommendations.

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1. Introduction and Background

Purpose of Report

- 1.1 This report details:
 - a) Progress made by the Shared Internal Audit Service (SIAS) in delivering the Council's Annual Internal Audit Plan for 2023/24 as at 10 November 2023.
 - b) Proposed amendments to the approved 2023/24 Internal Annual Audit Plan.
 - c) Implementation status of all outstanding previously agreed internal audit recommendations from 2020/21 onwards.
 - d) An update on performance management information as at 10 November 2023.

Background

- 1.2 The work of internal audit is required to be reported to a Member Body so that the Council has an opportunity to review and monitor an essential component of corporate governance and gain assurance that its internal audit provision is fulfilling its statutory obligations. It is considered good practice that progress reports also include proposed amendments to the agreed annual audit plan.
- 1.3 The 2023/24 Annual Audit Plan was approved by Audit Committee on 9 March 2023.
- 1.4 The Audit Committee receives periodic updates on progress against the Annual Audit Plan from SIAS, the most recent of which was brought to this Committee on 14 September 2023.

2. Audit Plan Update

Delivery of Audit Plan and Key Audit Findings

- 2.1 As at 10 November 2023, 45% of the 2023/24 Audit Plan days had been delivered for the combined Watford Borough Council and Shared Services audit plans (excludes 'To Be Allocated' days). Appendix A provides a status update on each individual deliverable within the audit plan.
- 2.2 The following 2023/24 reports have been finalised since September 2023 Audit Committee:

Audit Title	Date of Issue	Assurance Level	Number and Priority of Recommendations
Operational Buildings Compliance Follow Up	Nov '23	Reasonable	3 Medium, 1 Low
Project Management – Town Hall Quarter	Nov '23	Reasonable	1 Medium, 2 Low

Status of Audit Recommendations

- 2.3 Audit Committee Members will be aware that a Final Audit Report is issued when it has been agreed by management and includes an agreement to implement the recommendations made. It is SIAS's responsibility to bring to Members' attention the implementation status of all audit recommendations. It is the responsibility of officers to implement recommendations by the agreed date.
- 2.4 The table below summarises progress in implementation of all outstanding internal audit recommendations as at 10 November 2023, with full details in Appendix C:

Year	Recommendations made No.	Implemented	Not yet due	Outstanding & a request made for extended time, or no update received	Percentage implemented %
2020/21	28	27	1	0	96%
2021/22	37	35	2	0	95%
2022/23	34	23	7	4	68%

- 2.5 Since 14 September 2023 Audit Committee, extension to implementation dates have been requested by action owners for four recommendations as follows:
 - a) One from the 2022/23 Watford Museum audit, with a revised target date of 31 January 2024 (was 1 September 2023),
 - b) One from the 2022/23 Financial Reconciliation audit, with a revised target date of 31 December 2023 (was 30 November 2023),
 - c) One from the 2022/23 Treasury Audit, with a revised target date of 31 January 2024 (was 30 November 2023), and
 - d) One from the 2022/23 Fixed Asset Register Audit, with a revised target date of 31 December 2023 (was 31 October 2023).
- 2.8 No new high priority recommendations have been made since 14 September 2023 Audit Committee.

Proposed Audit Plan Amendments

2.9 There have been no amendments to the Audit Plan since the 14 September Audit Committee.

Performance Management

2.10 To help the Committee assess the current situation in terms of progress against the projects in the 2023/24 Audit Plan, we have provided an analysis of agreed start dates at Appendix B. These dates have been agreed with management and resources allocated.

2.11 Annual performance indicators and associated targets were approved by the SIAS Board in March 2023. Actual performance for Watford Borough Council against the targets that can be monitored for 2023/24 is shown in the table below.

Performance Indicator	Annual Target	Profiled Target to 10 November 2023	Actual to 10 November 2023
Planned Days – percentage of actual billable days against planned chargeable days completed (excludes unused contingency)	95%	51% (115 / 227 days)	45% (103 / 227 days)
2. Planned Projects – percentage of actual completed projects to draft report stage against planned completed projects by 31st March 2024	90%	41% (7 out of 17 projects to draft)	35% (6 out of 17 projects to draft)
3. Planned Projects – percentage of actual completed projects to Final report stage against planned completed projects by the production of the HoA Annual Report	100%	n/a	n/a New Indicator – first measurement will be May 2024 (Currently 2/17 delivered to final report)
4. Client Satisfaction – percentage of client satisfaction questionnaires returned at 'satisfactory overall' level (minimum of 39/65 overall)	95%	100%	80% (Based on 5 received in 23/24)
5. Number of High Priority Audit Recommendations Agreed	95%	95%	N/A (No high priority recommendations made)

2.12 The performance targets listed below are annual in nature. Performance against these targets will be reported on in the 2023/24 Head of Assurance's Annual Report:

•	6. Annual Plan – prepared in time to present to the March meeting of each
	Audit Committee. If there is no March meeting, then the plan should be
	prepared for the first meeting of the financial year.

•	7. Head of Assurance's Annual Report – presented at the Audit Committee's
	first meeting of the civic year.

APPENDIX A - PROGRESS AGAINST THE 2023/24 AUDIT PLAN AT 10 NOVEMBER 2023

2023/24 SIAS Audit Plan

AUDITADI E ADEA	LEVEL OF		RE	ECS		AUDIT	LEAD	BILLABLE DAYS	OTATUO/OOMMENIT
AUDITABLE AREA	ASSURANCE	С	Н	М	L	PLAN DAYS	AUDITOR ASSIGNED	COMPLETED	STATUS/COMMENT
Key Financial Systems									
Benefits (Shared Services Plan)						10	SIAS	2	Terms of Reference Issued
Debt Recovery (Shared Services Plan)						12	SIAS	1	In Planning
Key Financial Controls Testing (Shared Services Plan)						12	BDO	4	In Fieldwork
Main Accounting / Creditors – Control Risk Assessment (Shared Services Plan)						9	SIAS	2	In Planning
Payroll (Shared Services Plan)						10	SIAS	0	Allocated
Parameters Testing (Shared Services Plan)						3	SIAS	3	Draft Report Issued
Operational Audits									
Agency Staffing (Shared Services Plan)						12	SIAS	6	In Fieldwork
Asset Management System Data						10	BDO	0.5	In Planning
Croxley Business Park						15	BDO	0.5	In Planning
Operational Buildings Compliance Follow Up	Reasonable	0	0	3	1	6	BDO	6	Final Report Issued
Performance Management & Data Quality						12	SIAS	6	In Fieldwork
Play Safety Inspections Follow Up			_			5	SIAS	4.5	Draft Report Issued

APPENDIX A - PROGRESS AGAINST THE 2023/24 AUDIT PLAN AT 10 NOVEMBER 2023

	LEVEL OF		RE	CS		AUDIT	LEAD	BILLABLE DAYS		
AUDITABLE AREA	ASSURANCE	С	Н	М	L	PLAN DAYS	AUDITOR ASSIGNED	COMPLETED	STATUS/COMMENT	
Risk Management						8	SIAS	7.5	Draft Report Issued	
Shared Services						15	BDO	0.5	In Planning	
Grant Certifications						2	No	0	Not Yet Allocated	
Contract Management, Project Management & Procurement										
Project Management – Town Hall Quarter	Reasonable	0	0	1	2	12	BDO	12	Final Report Issued	
IT Audits										
IT Operations (Shared Services Plan)						15	BDO	14.5	Draft Report Issued	
Cyber Security (Shared Services Plan)						15	BDO	0	Allocated	
Follow Ups										
Follow up of Audit Recommendations						8	Yes	6	Through Year	
To Be Allocated										
Unused Contingency (Shared Services Plan)						0	N/A	0	N/A	
Strategic Support										
Audit Committee						8	Yes	6	Through Year	
2024/25 Audit Planning						5	Yes	0	Due quarter 4	

APPENDIX A - PROGRESS AGAINST THE 2023/24 AUDIT PLAN AT 10 NOVEMBER 2023

AUDITABLE AREA	LEVEL OF	RECS				AUDIT PLAN	LEAD AUDITOR	BILLABLE DAYS	STATUS/COMMENT	
AUDITABLE AREA	ASSURANCE	С	н	M	L	DAYS	ASSIGNED	COMPLETED	STATUS/COMMENT	
Head of Internal Audit Opinion 2022/23						3	Yes	3	Complete	
Monitoring & Client Meetings						8	Yes	6	Through Year	
SIAS Development						3	Yes	3	Complete	
Completion of 2022/23 audits										
Time required to complete work commenced in 2022/23 (4 days Shared Services Plan; 5 days WBC)						9	Yes	9	Complete	
WBC PLAN TOTAL						125		66.5		
SHARED SERVICES PLAN TOTAL						102		36.5		
COMBINED TOTAL PLAN DAYS						227		103		

Key to recommendation priority levels: C = Critical; H = High; M = Medium; L = Low / Advisory.

Apr	Мау	June	July	August	September
Project Management – Town Hall Quarter Final Report Issued	Parameters Testing (Shared Services Plan) Draft Report Issued	IT Operations (Shared Services Plan) Draft Report Issued	Agency Staffing (Shared Services Plan) In Fieldwork		Debt Recovery (Shared Services Plan) In Planning
Operational Buildings Compliance Follow Up Final Report Issued		Risk Management Draft Report Issued	Play Safety Inspections Follow Up Draft Report Issued		Performance Management / Data Quality In Fieldwork
					Shared Services In Planning

October	November	December	January	February	March
Key Financial Controls Testing (Shared Services Plan) In Fieldwork	Benefits (Shared Services Plan) Terms of Reference Issued	Payroll (Shared Services Plan)	Cyber Security (Shared Services Plan)		

APPENDIX B - AUDIT START DATES 2023/24

Main Accounting / Creditors – Control Risk Assessment (Shared Services Plan) In Planning		Croxley Business Park In Planning	
Asset Management System In Planning			

Audit Plan 2020/21

Debtors Final repor	2020/21 t issued June 2021						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
03	Consideration should be given to an annual review of debtor accounts to identify duplicate or dormant for deletion or deactivation.	Low	Position – July 2021 We will speak to Finance about the best way of doing this. Position – September 2021 A complete review of the entire Sundry Debtor service has recently been commenced and this will be included as part of the review. Position – November 2021 No update received. Position – February 2022 No update received. Position – July 2022 To date we have not been able to resource this review as we have had to prioritise Grant work and more recently the Council Tax Energy Rebates. We will pick up this project towards the end of the calendar year once the Energy rebate work is completed. Position – August 2022 No update received – target date not yet reached. Update received September 2022 but after reporting deadline for September 2022 Audit Committee: Finance are going to run and extract this data from the Finance System which Revs & Bens will then check. It may be completed before 30 October 2022; it really depends on how many are on the list. Position – November 2022 The lists were provided by Finance mid-September, but work has not yet commenced	Recovery Team Leader, Revenues Manager and Finance.	31 August 2021	×	31 October 2021 31 October 2022 31 December 2023 30 June 2023 31 December 2023

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			as the entire Revs and Bens Service was delivering the Energy Fuel Rebate payments. Work will commence on the lists, week commencing 14.11.22.			5.	Boadiiii
			Position – February 2023 Revs and Bens have not had the capacity to carry out this work yet as resource has diverted to Energy Fuel Rebate schemes and resource has been very low due to long term staff sickness. Revs and Bens will take ownership of checking duplicate customer account and deleting those where we are certain there is no current billing rule. Finance and the individual services will need to take responsibility for deleting or de-activating old accounts. We will remind them of this requirement.				
			Position – July 2023 The list has been generated and there are 2252 accounts to check. Each one must be checked individually before it can be decided if the duplicate entry can be deleted. Work has commenced on the checking / deletion. We are allocating a little resource to this each week as BAU work is extremely high currently so it will take some time to check all 2,000 accounts.				
			Position – September 2023 Revenues Manager 12.09.23 This recommendation is a low priority, and we continue to be under resourced, which means the focus on housekeeping projects is not as high as we would like. This is progressing slowly because it needs to be managed around BAU. Some further analysis of the				

	Debtors 2020/21 Final report issued June 2021										
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or ✓	Revised Deadline				
			references, where, for example they are being billed for different services, such as Rent, Trade Waste, or for multiple units if they are a larger business. Position – November 2023 We have limited resource in the Recovery Team and BAU work takes precedence, but we continue to review these accounts.								

Audit Plan 2021/22

•	rding 2021/22 t issued April 2022						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved * or ✓	Revised Deadline
01	When temporary staff members are being appointed, the Council should ensure that necessary safeguarding checks have been completed prior to the employee starting work, and that appropriate records are maintained. If there is an expected delay to such checks being performed, a decision should be recorded to delay the start date until completed	High	HR will carry out spot checks of temporary staff and ask Comensura [or any other provider] to provide evidence of the checks undertaken at least annually. Position – July 2022 Comensura have been reminded of the preemployment checks required. Their booking system has the requirement for a DBS check as a pre-requisite. The tender specification for the current tender process for future agency partner has included the requirement for DBS checks to be carried out. HRBPs have reminded managers of the compliance documentation required and this will be raised as new bookings are made. Position – August 2022 All recommendations are complete except the one action in progress (spot checks) This has a due date of 1 April 2023. Position – November 2022 The position regarding spot checks will be taken up with Hays (the new contractor/agency partner who commence their contract with the Council on 05 December 2022). Position – February 2023 Hays took up the contractor/agency partner in December 2022. Spot checks will be carried out after 6 months of the contract running when sufficient appointments for spot checking have been made. Position – July 2023 The issue of spot checks is on the agenda for the contractor meeting to be held on 20 July	HR Operations Lead	1 April 2023		

	Safeguarding 2021/22 Final report issued April 2022										
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline				
			2023. Spot checks to be completed by 30 September 2023.								
			Position – September 2023 Hayes have been asked to provide the information relating to spot checks and it is expected to be received by 15 September 2023.								
			Position – November 2023 Spot check information received by Hayes on 26 September.								

_	Cyber Security 2021/22 Final report issued April 2022										
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline				
01	 1.1 Management should ensure that appropriate monitoring controls are in place for the password monitoring and management activities. These should include but not be limited to the following: brute-forcing of account passwords including password spraying, login attempts from unexpected geographic areas, unexpected account lockouts password database for the deny list hashes, 	Medium	O1 Mar 2022 the Azure AD Password Protection was implemented. Users will not be able to change passwords to weak passwords nor known passwords nor passwords from our Ban List of passwords. 1.1 – requires a third-party tool and associated funding would be required. The implementation of the password protection for Azure AD lowers the risk. 1.2 - this would be dependent on the ability to fund with a third-party tool – 1.1. Position – July 2022 Third party tools currently being reviewed and costed. Item not yet due.	Associate Director of ICT and Shared Services	31 March 2023	×	31 March 2024				

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Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
	other unusual behaviour from users. 1.2 The above proposed controls, once in place, should be actively reported upon, through the periodic cyber security reports, to the senior management.		Position – August 2022 1.1 - Third party tools have been evaluated and Netwrix has been selected as the preferred tool. 1.2 – Netwrix had demonstrated the tool in detail and a 30-day trial to test the system further is available. 1.3 – Quotation for 1- and 3-year option has been provided. • 1-year option - £7,806 • 3-year option - £16,483 1.4 – Implementation of the tool will be dependent on the ability to fund the third-party tool, this will require an approval by ITSG for an additional spend. A paper to review this recommendation and request any growth in budget 2022. Position – November 2022 1.1 – Due to the audit, which was performed by DLUHC, the scope of the security posture has extended. The grant to address the sections of the new recommendations within the scope has been successfully secured. 1.2 – The evaluation of the third-party tool has been extended, due to the new requirements within the scope presented post the DLUHC audit. 1.3 The new proposed completion dates recommended by DLUHC is end of Q4 March 2024. Position – February 2023 In progress. Produce options and costs				Beauline

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			recommendations included within the DLUHC cyber grant budget.				
			 Position – July 2023 1.1 – All available options offered by a number of vendors have been evaluated. The decision has been made to utilise the DLUHC grant and to expand on the existing CSOC provision from Exponential-e to meet the requirements of the recommendation. 1.2 The quotation has been provided from Exponential-e to expand the CSOC offering. This has been approved and the project is now moving to the procurement phase. The procurement should be completed by the end of October 2023. Position – September 2023 1.1 The procurement to expand the CSOC offering is completed, duration of the contract is set for 24 months. 1.2 – The on prem virtual deployment is currently in progress, deadline to implement the solution is set for end of 				
			October 2023. Position – November 2023 1.1 The implementation phase is completed, finetuning and baselining of the alerting with the vendor to reduce the false positives. This phase is expected to run over 8 week period. 1.2 Once the finetuning and baselining is completed, it will be handed over to CSOC for monitoring, triage, and remediation				

	ecurity 2021/22 t issued April 2022						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved * or ✓	Revised Deadline
03	Management should conduct regular monthly vulnerability scans across the entire IT estate including endpoint, to identify and mitigate vulnerabilities including software flaws, missing patches, misconfigurations and malwares.	Low	This would require additional budget and would need a growth item approved, as there are licence implications for the Qualys scanner. Position – July 2022 Extension of current third-party tools currently being reviewed and costed. Item not yet due. Position – August 2022 1.1- Third party Qualys had introduced a new module which will enable the management of remote devices through the cloud. 1.2 – Both options are currently being evaluated and costed. Decision made will be based on cost, functionality, and management. Position – November 2022 1.1 – Due to the allocation of a new Account Manager at Qualys and the changes within the licensing structure, Qualys are currently reviewing the proposed quotation to align the requirements with the new licensing structure. 1.2 – Workshop with Qualys has been scheduled to discuss the new proposed licensing structure and the modules which are required to enable the management of the devices remotely through the cloud and not relaying on the VPN. Position – February 2023 Remains in progress, however Associate Director of ICT and Shared services requests an extension of 3 months. This is due to	Associate Director of ICT and Shared Services	31 March 2023	x	30 June 2023 30 November 2023

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			 a. Qualys licencing for public sector has recently changed. Awaiting updated quotations. b. In terms of funding, a recent grant award from DLUHC will cover this item. Therefore, no requirement for additional growth within the ICT service budget. Position – July 2023 1.1 The quotation from Qualys has been provided to extend the service to include the endpoint vulnerability scanning. This has been handed over to the desktop support team, who are currently reviewing the offering. Position – September 2023 1.1 The revenue budget is currently being reviewed by the Director of Partnerships in absence of the Associate Director of ICT and Shared Services. Position – November 2023 1.1 Meeting took place with LittleFish 15 Oct – they are preparing a quote for us to consider. 1.2 Direct meeting with vendor Qualys has take place to review available options and pricing. Request for a full system demo has been submitted, vendor to provide dates. 			* Or V	Deadlin

Audit Plan 2022/23

Final repor	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved	Revised
				. respensionly		× or ✓	Deadlin
01	We recommend that the statement of purpose for the Watford Museum provides a clear link and reference to the Council's cultural strategy. We also recommend that the existing delegated authority arrangements are reviewed to ensure that they are sufficiently clear, with a local scheme of delegation created where subdelegations are in place (for example responsibilities assigned from the Group Head or Head of Service to the Museum Curator).	Medium	The statement of purpose will be developed as the forward plan is revised and to align with the ambitions for the Town Hall Quarter and to link to the cultural strategy. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work commencing in April 23 to align with Town Hall Quarter Programme and ACE requirements. Position – July 2023 Work is underway on shaping a vision and governance for the museum. As the museum is moving location Arts Council England have informed WBC that it cannot submit for accreditation this year and will likely move to provisional accreditation whilst the museum is closed for redevelopment. Once the museum is located in the Town Hall we will be invited to submit. NOTE this is usual process for a museum capital project. The plans and policies required can still be developed and implemented in readiness for submission. Position – September 2023 Update to be included in a separate report from the Associate Director of Environment. Position – November 2023 A Vision, Mission (statement of purpose) and set of Values for the museum service were approved by Member Steering Group September 2023. These form the foundation for the development of the	Associate Director of Environment	30 April 2023 (Subject to Arts Council Submission date)	x	Mid-late 2024

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved	Revised
Ref No.	Recommendation	Priority	Forward plan and all other policies and plans which underpin the museum service. The Forward Plan includes a section on Governance (a requirement for ACE Accreditation) including delegated authority. Other policies and plans (still in development) set out clear governance and delegated authority. Policies for the management of collections specifically are currently in draft. The Collections Development Policy establishes processes for agreeing new acquisitions and disposals; The Documentation Policy establishes processes for object entry; exit; movement & location; acquisition; inventory etc. Museum Governance will be reviewed as part of the process of developing the Arts Council Accreditation Forward Plan and Associated Policies (Action 2) and Town Hall Quarter redevelopment plans. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work	Responsibility	30 April 2023 (Subject to Arts Council Submission date)	Resolved ★ or ✓	Revised Deadline
			Policies (Action 2) and Town Hall Quarter redevelopment plans. Position – November 2022 Being planned. Position – February 2023		Council Submission		

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved x or √	Revised Deadline
			submit for accreditation this year and will likely remain on provisional accreditation while the whilst the museum is closed for redevelopment. Once the museum is located in the Town Hall we will be invited to submit. NOTE this is usual process for a museum capital project. The plans and policies required can still be developed and implemented in readiness for submission. Position – September 2023 Update to be included in a separate report from the Associate Director of Environment. Position – November 2023 As above Longer term a more substantive governance model will be developed in key areas such as exhibitions, audience development and collections management. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work commencing in April 23 to align with Town Hall Quarter Programme and ACE requirements. Position – July 2023 Work is underway on shaping a vision and governance for the museum. As the museum is moving location Arts Council England have informed WBC that it cannot submit for accreditation this year and will likely remain on provisional accreditation whilst the		30 April 2023 (subject to Arts Council Submission date)	× or v	Mid-late 2024

	Museum 2022/23 t issued October 2022						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			the museum is located in the Town Hall we will be invited to submit. NOTE this is usual process for a museum capital project. The plans and policies required can still be developed and implemented in readiness for submission. Position – September 2023 Update to be included in a separate report from the Associate Director of Environment. Position – November 2023 As above				
02	We recommend that all documents or policies are fully completed or subject to review and update prior to the end of the financial year, with policies passed to the Executive for approval. We also recommend that a log is kept of all policies, including the last and the next review dates, to ensure that they are reviewed in a timely manner in future years.	Medium	Arts Council re accreditation is due for submission in April 2023 at the earliest. (The Arts Council will inform us when they require us to submit). A project will be created using EPMO protocols to oversee delivery and approval of the forward plan and policies, linked to the Museum Project and THQ programme boards and revised governance. Some policies are in development already. Monitoring of policies will be brought into service delivery and as a KPI or service plan output. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work commencing in April 23 to align with Town Hall Quarter Programme and ACE requirements. Position – July 2023 Work is underway on shaping a vision and governance for the museum.	Associate Director of Environment	30 April 2023 (Subject to Arts Council Submission date)	x	Mid-late 2024

	useum 2022/23 sued October 2022						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			As the museum is moving location Arts Council England have informed WBC that it cannot submit for accreditation this year and will likely remain on provisional accreditation whilst the museum is closed for redevelopment. Once the museum is located in the Town Hall we will be invited to submit. NOTE this is usual process for a museum capital project. The plans and policies required can still be developed and implemented in readiness for submission. Position – September 2023 Update to be included in a separate report from the Associate Director of Environment. Written update received 08.09.23. A draft vision, mission, vision and values have been developed by the Museum Team and presented to the THQ Member Steering Group and will now go on for development, this is the first foundational step of the governance. Position – November 2023 Core documents including Forward Plan, Collections policies, Learning and Audience development plans are on track to be complete and approved by end of March 2024. All policies include a table stating policy owner, process for approval and date of review. The Forward Plan will include a list of all policies and their review date. Staff role descriptions are being updated to include accountability for policy documents.			X OI V	Deadillie
03 T	The current investigation of the one	Medium	Complete investigation.		31 December	×	

Final repor	rt issued October 2022	I					I
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
	with further advice on required actions being sought if the item cannot be located.		On hold due to staff absence, deadline will be met. Position – February 2023 Due to staff absence this has been on hold. To be completed by 1st May 2023. Position – July 2023 Draft report received and under review. Position – September 2023 Written update received 08.09.23. Report under review, due to staff absence this is still not completed. Position – November 2023 In the absence of the Heritage Manager, Museum Consultant Jo Wiltcher is working with the Collections Officer to resolve the issue. A solution has been proposed for the individual whose item is missing. The issues raised by the incident are being addressed through the inventory and through development of the Collection and Documentation policies with actions captured in the Documentation Action Plan.				
04	We recommend that all staff are reminded of what paperwork needs to be completed for loans including the log which would summarise what items were currently on loan.	Medium	Staff training on loans process to be implemented. Develop log of loans and regularly monitor. Position – November 2022 On hold due to staff absence, deadline will be met. Position – February 2023 Due to staff absence this has been on hold. To be completed by 1 st May 2023.	Curator	31 December 2023	×	

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
	We also recommend that policies are updated to reflect the approval delegation authorities included within the constitution.		Position – July 2023 Diarised - being undertaken as part of refresh Documentation Procedural manual. Position – September 2023 Written update received 08.09.23. Diarised - being undertaken as part of refresh Documentation Procedural manual. Position – November 2023 Review of Loan procedures, processes and responsibilities is being reviewed through development of the Documentation Manual and Policy. The Documentation Plan will establish requirements for training. See action against recommendation 1. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work commencing in April 23 to align with Town Hall Quarter Programme and ACE requirements. Position – July 2023 See action against recommendation 1. Position – September 2023 Written update received 08.09.23. See action against recommendation 1. Position – November 2023 As above, governance arrangements and lead officer responsibilities are captured in			×	Mid-late 2024

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
	Finally, consideration should be given to clarifying within the constitution the value and time thresholds above which loans of objects are required to be authorised, and below this value the local delegation that has been agreed.		the policy documents and within role descriptions See action against recommendation 1. Position – November 2022 Being planned. Position – February 2023 Being planned, resources allocated and work commencing in April 23 to align with Town Hall Quarter Programme and ACE requirements. Constitution has had an interim update to reflect this. Position – July 2023 See action against recommendation 1. Position – September 2023 Written update received 08.09.23. See action against recommendation 1. Position – November 2023 The length of an object loan as well as the time frame for processing object entry (loans and new acquisitions) is a requirement of the Documentation Policy and Manual. This is a minimum industry standard as required by ACE Accreditation. The Documentation Policy is currently being reviewed to ensure its compliance with industry best practice. The process for agreeing loans (and new acquisitions) is a requirement of the Collections Development Policy which will set out the governance and delegated authority.			x	Mid-late 2024

Final repor	t issued October 2022			<u> </u>			T
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
06	We recommend that advice is sought from the Council's insurers as to the frequency of review of valuations. Upon completion of any future revaluations, this should also support a review of the existing levels of insurance. Upon the above clarity being obtained, the required frequencies (or process for determining review periods) should be incorporated into the relevant policies and procedures.	Low	Follow recommendation and link to action against recommendation 2. Response from Zurich Commercial Insurance: Our Fine Arts team in Zurich Commercial usually work to a valuation every 3 years, however we would be comfortable with valuations every 5 years. That said I would always apply a flexible common-sense approach to the 5-year average guide. If for instance you know some items are subject to rapid increases in value then obviously, I would look to revalue every 3 years, whereas you may have some other items that don't move much at all in value and these items you could push out to say 7 years and everything else falls in between. Naturally the onus is on the council to prove the value of an item in the event of a loss, and this is always made harder after the event if the item is stolen of destroyed with no recent valuations to hand. Position – November 2022 Existing valuations being reviewed by staff and considering commissioning new valuations. Position – February 2023 Due to staff absence this has been on hold. Quotes for valuation to be obtained by 1st May 2023. Position – July 2023 Quotes received from Bonhams, clarification from insurance team confirmed and orders placed for valuation. Position – September 2023	Curator	1 May 2023	*	31 January 2024

	useum 2022/23 sued October 2022						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
			Written update received 08.09.23. Valuation received and now with our Insurers to review. Specialist valuation of Cassiobury Coronets, Robes and other specialist items being planned. Position – November 2023				
			The length of an object loan as well as the time frame for processing object entry (loans and new acquisitions) is a requirement of the Documentation Policy and Manual. This is a minimum industry standard as required by ACE Accreditation. The Documentation Policy is currently being reviewed to ensure its compliance with industry best practice. The process for agreeing loans (and new				
			acquisitions) is a requirement of the Collections Development Policy which will set out the governance and delegated authority.				

	Reconciliations 2022/23 issued April 2023						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
01	We recommend that the reconciliation procedure notes detail the responsible owner as well as the next review date to ensure they remain upto-date and relevant.	Low	The process notes do name the author of the note; however, we will add a next review date and responsible person. We will introduce a front sheet on each reconciliation to provide all details recommended. Position – July 2023 Process notes are in the process of being updated – on target for completion by deadline. Position – September 2023 Process note updates are continuing but progress is slower than anticipated due to work pressures. Completion is expected by 30th November 2023. Position – November 2023 Work pressures from external audit continue to delay completion of the review and update work. Completion is now expected by 31st December 2023	Chief Accountant	31 August 2023	×	30 November 2023 31 December 2023

_	Cyber Security 2022/23 Final report issued April 2023										
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline				
01	Management should review and assess the current cyber security training platform and put arrangements in place so that training completion can be recorded, reported and monitored on an going basis.	Medium	We will review the current cyber security training platform. The current platform is used for all mandatory training for staff. We will review the viability of users not receiving their device until they have completed their cyber-related mandatory training.	Associate Director of ICT and Shared Services	31 December 2023	\					

Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved x or √	Revised Deadlin
	Arrangements should be put in place for ensuring that the cyber security training is completed by all members of staff, as required, which could include: • Identifying specific staff members who are required to complete the training and working with their line managers to ensure completion. • Ensuring regular, top-down communication to increase awareness of the training. Requiring completion of the e-learning before issuing new devices to individuals or as part of performance and progression reviews.		Position – July 2023 1.1 – A review of alternative training platforms has been conducted and a demo of the products has been provided by the vendors. 1.2 - Each product comes at a cost and budget implications are being considered. 1.3 - The management of training completion by staff is currently being carried out by HR and members of staff are being notified by email when they are due to complete each training module. 1.4 - Starters, Movers, Leaver's process is currently being updated to ensure that joiners complete the Cyber Security Modules as part of the probation period as per HR Probationary Policy. Position – September 2023 1.4 - The Starters, Movers, Leaver's process has been updated to reflect the completion of the cyber security module as per the requirement of the HR Probation Policy. Position – November 2023 Implemented				

Final repor	t issued April 2023	_					
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or ✓	Revised Deadline
01	1) The Councils should develop an ESG policy, which ensures that investments are made in consideration with the Councils climate change, environmental and governance policies. The policy should emphasise that the Council seeks to be a responsible investor and consider ESG risks as an important overlay to the investment process, thereby improving future sustainability of investments. Once incorporated, ESG risks should also be included in under the Risk Management section of the Treasury Management Practices document for consistency. 2) The policy should also explain that the Councils will not knowingly invest directly in businesses whose activities and practices pose a risk of serious harm to individuals or groups, or whose activities are inconsistent with the Council's mission and values. 3) The policy should outline the conditions where investments should not be made with certain organisations, which have material links to: Human rights abuse (e.g., child labour, political oppression) Environmentally harmful activities (e.g., pollutants, destruction of habitat, fossil fuels) Socially harmful activities (e.g., tobacco, gambling).	Medium	An ESG Policy will be developed for both Councils during 2023/24 for approval alongside the 2024/25 Treasury Management Strategy Statements. Position – July 2023 Guidance has been provided by our Treasury Management providers and we are on target to include an ESG policy within the 2024/25 Treasury Management Strategy Statements. Position – September 2023 We remain on track to include an ESG Policy in the Draft Treasury Management Strategy Statements for 2024/25 which will be presented to Audit Committees in November and December. Position – November 2023 The draft ESG policies have been published for Audit Committees and will form part of the budget papers to Council in January (WBC) and February (TRDC).	Head of Finance	30 November 2023	x x	31 January 2024

	Tax 2022/23 t issued May 2023						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved * or ✓	Revised Deadline
01	TRDC should ensure that a review of debt outstanding is conducted, and decisions taken regarding whether or not to proceed for write-offs.	Medium	A review of all outstanding debt will be completed during 2023/24.	Revenues Manager/Data Performance Manager	31 March 2024	×	
	Subsequently, write-offs should be conducted at regular intervals going forward.		All outstanding write-offs have been cleared since this report was written and on-going write-offs will be reviewed once a quarter.				
	The 'How and Why to put a write off code on a Council Tax Account'		Agreed. Our quality team will get a version control sheet added. Position – July 2023				
	procedure should include version control to ensure that it is reviewed periodically.		The review of all debt is underway, and this will include looking at debts suitable for write-off.				
			The write-offs for Q1 are being prepared. Version control has been added to all procedures.				
			Position – September 2023 Revenues Manager 12.09.23 The team continue to identify and put forward cases for write off where appropriate.				
			Position – November 2023 Q1 write-offs have been prepared and await sign-off. Q2 write-offs are being prepared				
04	The Council should document the processes relating to backdated discounts and exemptions to ensure that consistent actions are undertaken by staff and these refunds are appropriately reviewed and approved prior to payment.	Low	Agreed. Position – July 2023 The document for backdating an SPD has been documented. We will incorporate the approach for all the other types of discount and exemptions so that it the guidance is held in once process.	Revenues Manager/Data Performance Manager	30 June 2023	~	30 Sept 2023

	Council Tax 2022/23 Final report issued May 2023								
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline		
			Position – September 2023 Revenues Manager 12.09.23 The processes are documented, they just need to be collated, which has been delayed due to the summer period. Management controls are in place to ensure appropriate review takes place prior to approval. Position – November 2023 The process notes for issuing refunds have						
			been updated and refunds are authorised at Team Leader level prior to payment.						

_	NDR 2022/23 Final report issued May 2023								
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or ✓	Revised Deadline		
01	Actions are taken to address the issue preventing the production of the monthly 'default arrangement list' and (subject to the issue being successfully resolved), arrangements are put in place for Senior Officers to check that these are being actioned appropriately. As an interim measure, Revenues Officers should be reminded to diarise arrangements to enable checks to be conducted to confirm arrangements are being complied with.	Medium	The default arrangements list is working and being run. During 2022/23 much of the BAU recovery work slipped due to the service having to process energy and business grants (CARF). During 2023/24 all recovery work will be reviewed, and this will include a review of arrangements that have defaulted. Position – July 2023 Review is currently underway. Position – September 2023 Revenues Manager 12.09.23 A review of the Recovery processes is ongoing and as part of this we are looking at the ways in which this can be managed more efficiently. Position – November 2023	Revenues Manager	31 March 2024	×			

NDR 2022/23 Final report issued May 2023								
Ref No.	Recommendation	Priority	Action to Date No change to the position in September.	Responsibility	Deadline	Resolved × or √	Revised Deadline	
			The review of recovery processes continues.					
02	Seven-day lists are produced and actioned at regular interval (e.g. monthly). Arrangements are put in place for Senior Officers to check that these are being actioned appropriately.	Medium	The 7-day list is working and being run. During 2022/23 much of the BAU recovery work slipped due to the service having to process energy and business grants (CARF). During 2023/24 all recovery work will be reviewed, and this will include a review of arrangements that have defaulted. Position – July 2023 Review is currently underway. Position – September 2023 Revenues Manager 12.09.23 A review of the Recovery processes is ongoing and as part of this we are looking at the ways in which this can be managed more efficiently. Position – November 2023 No change to the position in September. The review of recovery processes continues.	Revenues Manager	31 March 2024	×		

Tree Management 2022/23 Final report issued June 2023							
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline
03	We recommend for resilience purposes; back-up resource is trained in tree management activities to provide cover in the event of capacity gaps.	Low	Veolia are currently recruiting for a new apprentice which will hopefully be in post later this year. Existing Veolia staff are able to provide cover during short absences of a Tree Manager including John Priestley, Horticultural	Tree Manager, Veolia	Apprentice September 2023	√	

Tree Management 2022/23 Final report issued June 2023							
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved * or ✓	Revised Deadline
			Development Manager and Nick Graham, Contract Manager Parks, Open Spaces and Street Cleansing, who both have good arboricultural knowledge. External resources will be utilised if required, such as through Maydencroft who have recently provided cover during recruitment of a Tree Manager and are still assisting with Planning matters and handover to the new Tree Manager. Position – July 2023 Apprentice position is currently being advertised and applications are being received. Maydencroft are due to continue providing support with Planning matters until the end of August 2023 to ensure a smooth handover. Position – September 2023 Apprentices are being interviewed w/c 4 September 2023. Position – November 2023 The apprentice post is proving difficult to recruit, however this role if filled would be additional support for the Tree Manager, rather than cover. Cover for the Tree		External resources as required		Beaume
			Manager would be provided by other existing Veolia staff or externally as mentioned above.				
05	We conducted sample testing of six trees to ascertain when they were last inspected, what the inspection results were, whether the tree required remedial works and if required, what actions were taken. We found remedial work for one tree was not	Low	Tree Manager to run a report for all outstanding works in order to review progress and programme in if required. This will include a report for each ward to review the 3 yearly survey recommended works that are required to be carried out within	Tree Manager, Veolia	31 July 2023	√	

	Tree Management 2022/23 Final report issued June 2023							
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline	
	the ward that was part of the survey, and the Tree Manager had also not been in post.		produced and reviewed for any ad hoc works that fall outside of these surveys. Position – July 2023 In progress with Tree Manager. Position – September 2023 A cycle of 3 yearly surveys are underway and recommended works are being programmed in and carried out according to level of priority. Ad hoc reactive works appear up to date but Tree Manager will request a report from Ezytreev to ensure recommendations logged by previous Tree Managers have all been captured. Position – November 2023 Veolia's Tree Manager has confirmed that all reactive ad hoc works are up to date, and these will continue to be dealt with as they arise. Proactive 3 yearly surveys and resulting works are ongoing.					

	Fixed Asset Register 2022/23 Final report issued July 2023							
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or √	Revised Deadline	
01	We recommend that procedures are put in place by the finance service, which make clear the information to be provided regarding the acquisition and disposal of assets in order to	Low	We will issue updated guidance about the information to be recorded on Purchase Orders to coincide with he roll-out of upgraded Finance System.	Chief Accountant	31 October 2023	×	31 December 2023	
	ensure that accurate finance records can be created and maintained.		Pro-forma returns to be issued to capital budget holders, to be completed with support from Finance Business Partners, specifying		31 December 2023			

	sset Register 2022/23 t issued July 2023						
Ref No.	Recommendation	Priority	Action to Date	Responsibility	Deadline	Resolved × or ✓	Revised Deadline
			information to be provided regarding additions and disposals. Position – November 2023 Initial review of capital additions and disposals will be conducted in January 2024, ahead of interim audit. Pro-forma returns to be created in December 2023.				
02	We recommend that the Fixed Asset Register includes as a minimum the following information related to valuations: Indication of whether asset is in scope for revaluation Date of Last Valuation Date of Next Valuation Valuation Methodology	Low	We note the recommendation and will ensure that the recommended fields are included in the final Fixed Asset Registers for 2020/21 and subsequent years. Position – November 2023 The fixed asset register spreadsheet redesign is complete and the required fields have been captured.	Chief Accountant	30 November 2023	\	

APPENDIX D - ASSURANCE AND PRIORITY LEVEL DEFINITIONS

Audit Op	oinions							
Assuran	ce Level	Definition						
Assuranc	e Reviews							
Substant	tial	A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.						
Reasona	ble	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put a risk the achievement of objectives in the area audited.						
Limited		Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks the achievement of objectives in the area audited.						
No		Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.						
Not Assessed		This opinion is used in relation to consultancy or embedded assurance activities, where the nature of the work is to provide support and advice to management and is not of a sufficient depth to provide an opinion on the adequacy of governance or internal control arrangements. Recommendations will however be made where required to support system or process improvements.						
Grant / F	unding Certific	ation Reviews						
Unqualified		No material matters have been identified in relation the eligibility, accounting and expenditure associated with the funding received that would cause SIAS to believe that the related funding conditions have not been met.						
Qualified	I	Except for the matters identified within the audit report, the eligibility, accounting and expenditure associated with the funding received meets the requirements of the funding conditions.						
Disclaim	er Opinion	Based on the limitations indicated within the report, SIAS are unable to provide an opinion in relation to the Council's compliance with the eligibility, accounting and expendit requirements contained within the funding conditions.						
Adverse	Opinion	Based on the significance of the matters included within the report, the Council have not complied with the funding conditions associated with the funding received.						
Recomm	endation Prior	ty Levels						
Priority L	_evel	Definition						
Corporate	Critical	Audit findings which, in the present state, represent a serious risk to the organisation as a whole, i.e. reputation, financial resources and / or compliance with regulations. Management action to implement the appropriate controls is required immediately.						
	High	Audit findings indicate a serious weakness or breakdown in control environment, which, if untreated by management intervention, is highly likely to put achievement of core service objectives at risk. Remedial action is required urgently.						
Service	Medium	Audit findings which, if not treated by appropriate management action, are likely to put achievement of some of the core service objectives at risk. Remedial action is required in a timely manner.						
Low		Audit findings indicate opportunities to implement good or best practice, which, if adopted, will enhance the control environment. The appropriate solution should be implemented as soon as is practically possible.						