

Audit Services Unit

Progress Against Audit Plan 2021-22

31st October 2021



Background to the Progress Report

At the meeting of this Committee held on 23 March 2021, Members approved the Audit Services Plan for 2021-22, which had been formulated from our risk assessment drawn from a wide range of sources including:

- the Council Plan;
- the Council's Strategic Risk Register;
- Departmental Risk Registers;
- Service Plans; and
- meetings with Executive Directors and Directors.
(including Executive Director of Commissioning, Communities and Policy (Head of Paid Service), Director of Finance & ICT (Section 151 Officer) and Director of Legal and Democratic Services (Monitoring Officer).

In accordance with the Audit Committee's Terms of Reference this report updates Members on progress against the Plan for the five months to 31 October 2021 and represents work undertaken during that period which is detailed in **Appendix 1**. An analysis of the priority criteria for Audit recommendations and assurance levels is also included in **Appendix 1**.

In common with previous years, elements of work forming part of last year's approved Audit Services Plan were completed and reported in the current year. Where appropriate, Audit staff routinely follow up progress against agreed recommendations as part of subsequent work, in the area under review.

All work undertaken by Audit Services' is conducted in accordance with the standards required by the PSIAS and in conformance with the International Standards for the Professional Practice of Internal Auditing. The work of the Unit complies with the Council's Audit Charter, Internal Audit Strategy and Quality Assurance and Improvement Programme which are subject to regular review.

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Current Progress

Whilst the ongoing Covid-19 pandemic is affecting resources and staff availability throughout the Council, Audit have been working closely with Departments and service managers to schedule reviews to minimise the impact on front line services and back office functions. Although we are approaching the challenging winter months that are likely to bring further pressures, it is positive to report at this point in the year, that good progress has been made to enable reasonable coverage across the Council's services and within the 2021-22 approved Audit Plan. A number of reviews are currently in progress and it is envisaged that sufficient coverage will have been completed to enable an opinion to be provided at year end.

As previously reported to the Audit Committee, it will be a challenge to deliver the 2021-22 approved days for schools (174 days) and establishments (64 days) due to practicalities and restrictions in place at the local settings. To allow a base level assurance to be obtained across the Council's schools that may not be subject of a visit in this period, Audit staff are working on a desktop exercise across a number of core areas including finance and governance arrangements.

Whilst the Unit still has a shortfall in the number of productive days delivered against the plan, this is being constantly managed to maintain coverage over key risk areas. The continual improvement in staff absence levels has made a positive impact on the productive days available within the Unit.

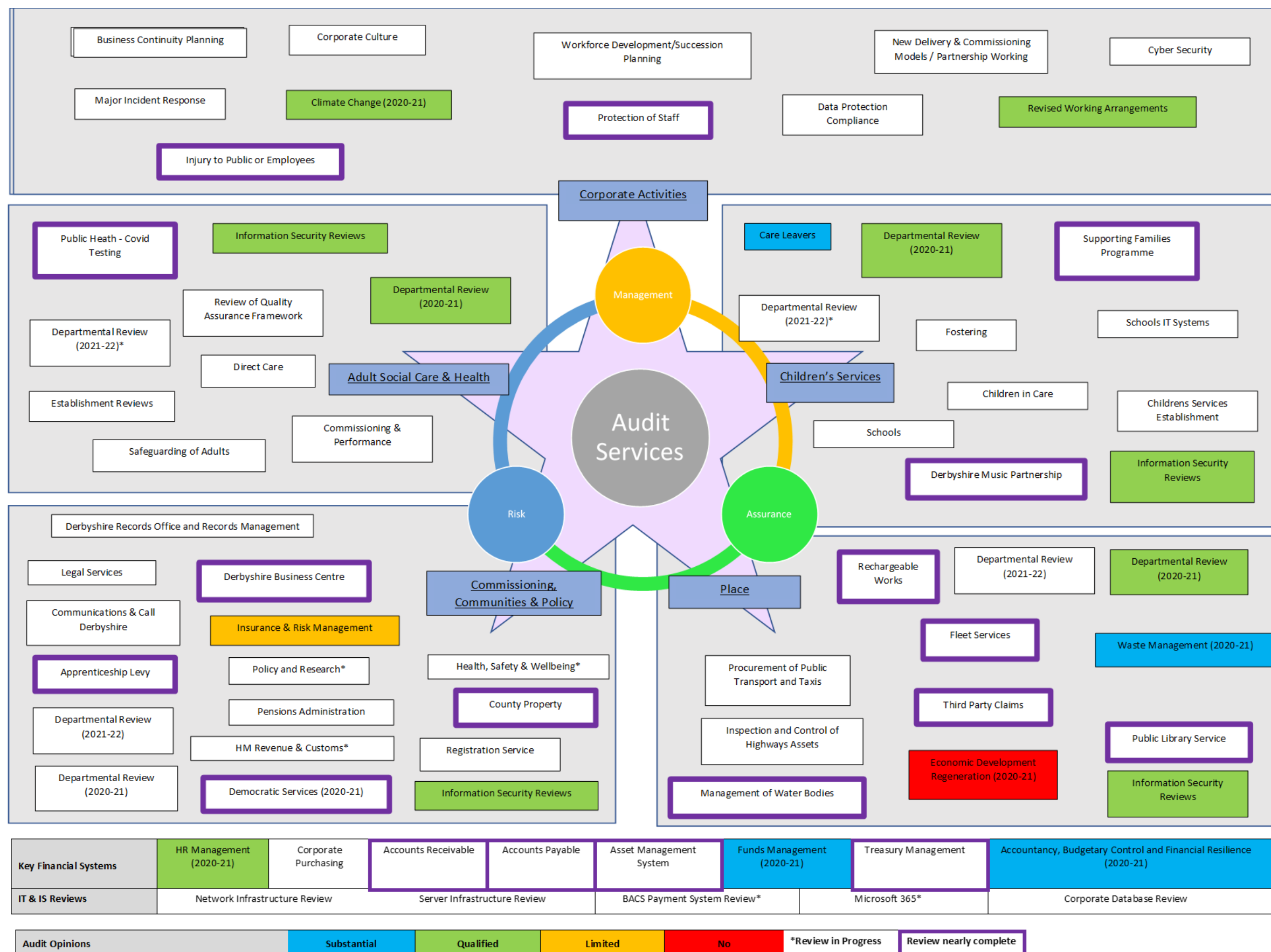


The current Audit performance against the 2021-22 approved Plan is shown below:

2021-22 Progress	At 31 October 2021
Approved Audit Plan (2,723)	1,588
Actual Productive Days	1,434
Shortfall in Productive Days Delivered	152

Analysis of Audit work including a summary of Reports and Memoranda issued up to 31 October 2021, is provided at **Appendix 1**, with more detailed comments on individual reviews within the main body of this Report.

Summary of Audit Opinions (Reports Issued up to 31 October 2021)



Audit Resources and Activities

Staffing

Since the last meeting of the Audit Committee a Principal Auditor has left the Unit having completed their notice period. Whilst this has further reduced resources available within the Unit, an advert is currently on the Council's website and with other professional agencies, for two Principal Auditor positions and a six-month temporary post to cover maternity leave. Although the market is very challenging at the moment, it is hoped that the recruitment process is successful, and an update will be provided at the next Audit Committee in February 2022.

Key Performance Indicators (KPIs)

Details of the Unit's KPIs are summarised in **Appendix 2**. Although the percentage of draft audit memoranda issued within 15 working days of fieldwork completion remains below target, there has been a slight improvement in the figures. It is envisaged that this should continue to improve as Audit management capacity has increased since September. The return of Audit client satisfaction questionnaires also remains low and whilst only a small number of reviews have been finalised and issued since the last progress report, a review of the questionnaires and process will be undertaken to increase the return rate.

Counter Fraud Arrangements

Work has commenced to review the Council's Counter Fraud Arrangements against the CIPFA Code of Practice on Managing the Risk of Fraud and Corruption and the Fighting Fraud and Corruption Locally Strategy. Progress will be reported to the Audit Committee alongside the National Fraud Initiative (NFI) update in February.



Detailed Analysis - Corporate Activities

Departmental Performance	2020-21	2021-22	Departmental Opinions	2020-21	2021-22
Days within the Approved Audit Plan	1,060	980	Substantial	-	1
Actual days delivered	546	417	Qualified	6	2
Percentage of Departmental Audits achieved	51.5%	43%	Limited	2	-
Number of Reports/ Memoranda Issued	11	5	No	-	-
			Other (including letters)	3	2

Outcome reported to the Audit Committee held on 21 September 2021

- ✓ Climate Change.

Revised Working Arrangements

The Council has been working on the modern ways of working (MWoW) project for a number of months with the aim of reviewing working arrangements as things start to return to more normalised operations following the Covid-19 pandemic. The ongoing project involves many factors including suitability of buildings, digital capabilities and resilience to any future implications of Covid-19. Audit staff have been actively involved in supporting the various project workstreams and providing guidance to management on key risks and the control framework relating to the project. Throughout the initial phase of the project, Audit staff have undertaken site visits to County Hall to view arrangements for security of information including the disposal of confidential information. Within the two Audit Memoranda issued, recommendations were made to strengthen the guidance available to line managers, security and labelling of information, arrangements to monitor ICT equipment and resources available to the project.

Meetings and Support

Ongoing as reported to the Audit Committee held on 21 September 2021.

Detailed Analysis - Commissioning, Communities and Policy

Departmental Performance	2020-21	2021-22	Departmental Opinions	2020-21	2021-22
Days within the Approved Audit Plan	705	785	Substantial	5	2
Actual days delivered	679	540	Qualified	12	8
Percentage of Departmental Audits achieved	96%	69%	Limited	2	2
Number of Reports/ Memoranda Issued	21	12	No	-	-
			Other (including letters)	2	-

Outcome reported to the Audit Committee held on 21 September 2021

- ✓ Human Resources Management (2020-21).
- ✓ Accountancy, Budgetary Control and Financial Resilience (2020-21).
- ✓ Funds Management (2020-21).

Insurance & Risk Management

The review of Risk and Insurance Management was undertaken prior to the transfer of the management responsibility to the Assistant Director of Finance (Audit). The review considered the rollout of the Risk Strategy 2020-21, identification, evaluation and escalation of risks and administration of insurance claims. In addition, several elements of risk and insurance for which responsibility rests with Property Services was examined. This included the revaluation of Council assets (to inform the valuations provided to the Council's insurers on the 'List of Insurable Assets') and the maintenance of the Pollution Liability Register.

Despite recommendations being raised within the previous Audit review of the need to ensure that both these records are maintained, this had not been undertaken. This has resulted in the Council being liable for additional rebuild costs at Harrington Junior School due to the difference between the actual rebuild cost and the value of the School as per the List of Insurable Assets at the time of the School fire in May 2020. The failure to maintain this List and the Pollution Liability Register, places the Council at risk of incurring significant additional future liabilities as the value of assets held and associated risks may not be quantified and/or accurately recorded.

At the exit meeting, it was confirmed that funding has been secured to start the revaluation process and improve training of existing valuation staff. A review of the procedures has also been agreed to ensure a program is in place to record pollution liability on any Corporate properties.

Commissioning, Communities and Policy IT Systems and Information Security

Ongoing as reported to the Audit Committee held on 21 September 2021.

Meetings and Support

Ongoing as reported to the Audit Committee held on 21 September 2021.

Audits in Progress

Work on the Audit of the Policy and Research Section is at an early stage, with the review of Health, Safety & Wellbeing still requiring further work to complete this piece of work. The Audits of the Derbyshire Business Centre, Third Party Claims, County Property and HM Revenue & Customs Compliance, should be in a position to arrange an exit meeting with management to discuss the findings shortly. Whilst exit meetings for the review of the Apprenticeship Levy and Democratic Services have been held, a completed action plan is still awaited.

Detailed Analysis – Children’s Services

Departmental Performance	2020-21	2021-22	Departmental Opinions	2020-21	2021-22
Days within the Approved Audit Plan	650	475	Substantial	1	1
Actual days delivered	390	114	Qualified	19*	2
Percentage of Departmental Audits achieved	60%	24%	Limited	1*	-
Number of Reports/ Memoranda Issued	22*	3	No	-	-
			Other (including letters)	1	-

(*2020-21 - Includes 11 primary school ‘virtual’ audits).

Outcome reported to the Audit Committee held on 21 September 2021

- ✓ Children’s Services Departmental Review (2020-21).
- ✓ Care Leavers.

Children’s Services IT Systems and Information Security

Ongoing as reported to the Audit Committee held on 21 September 2021.

Audits in Progress

Currently work has recently commenced on the Departmental review for 2021-22, with the Audit of the Derbyshire Music Partnership nearing a conclusion. Audit staff continue to undertake assurance work on the Supporting Families Programme as and when a claim requires review.

Detailed Analysis – Adult Social Care and Health

Departmental Performance	2020-21	2021-22	Departmental Opinions	2020-21	2021-22
Days within the Approved Audit Plan	299	303	Substantial	0	-
Actual days delivered	245	145	Qualified	5	4
Percentage of Departmental Audits achieved	82%	48%	Limited	3	-
Number of Reports/ Memoranda Issued	9	4	No	-	-
			Other (including letters)	1	-

Outcome reported to the Audit Committee held on 21 September 2021

- ✓ Adult Social Care and Health Departmental Review.

Adult Social Care and Health IT Systems and Information Security

Ongoing as reported to the Audit Committee held on 21 September 2021.

Audits in Progress

Currently work has recently commenced on the Departmental review for 2021-22, with the Audit fieldwork of the Covid-19 Community Testing arrangements due to be concluded shortly. In the next few weeks work will begin on the Review of Quality Assurance Framework and Derbyshire Shared Care Record.

Detailed Analysis – Place

Departmental Performance	2020-21	2021-22	Departmental Opinions	2020-21	2021-22
Days within the Approved Audit Plan	170	180	Substantial	-	1
Actual days delivered	132	218	Qualified	3	3
Percentage of Departmental Audits achieved	77%	121%	Limited	-	-
Number of Reports/ Memoranda Issued	4	5	No	-	1
			Other (including letters)	1	-

Outcome reported to the Audit Committee held on 21 September 2021

- ✓ Waste Management.
- ✓ Economic Development Regeneration.

Departmental Review (2020-21)

The Departmental review evaluated compliance with statutory and regulatory requirements, strategic planning and governance arrangements, budgetary control, risk management, supply chain, human resources and the ISO27001 information security framework. Whilst the review confirmed that the majority of key administration procedures were operating satisfactorily, areas for further development were reported to senior management including staff overtime, time off in lieu and working hours.

Place IT Systems and Information Security

Ongoing as reported to the Audit Committee held on 21 September 2021.

Audits in Progress

Currently work is nearly complete on the Fleet Services review. Exit meetings to discuss the outcomes of Rechargeable Works, Management of Water Bodies and the Public Library Service have been arranged.

Appendix 1 - Progress Against the 2021-22 Audit Plan

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Corporate Activities – The 2021-22 Audit Plan included an allocation of 980 days over the following areas												
Corporate Projects												
➤ VP018 East Midlands Broadband (emPSN)	-	-	2	-	-	-	-	-	-	-	-	
VP037 Workforce Development/ Succession Planning	30	-	1	-	-	-	-	-	-	-	-	
VP044 D2N2 LEP	45	-	37	Qualified	Substantial	↑	0	0	3	0	(1H)	
➤ VP050 Review of Grants Admin	-	-	6	-	-	-	-	-	-	-	-	
VP053 Cyber Security Review	20	-	-	-	-	-	-	-	-	-	-	
VP055 Corporate Culture	30	-	-	-	-	-	-	-	-	-	-	
VP058 Serious & Organised Crime	10	-	1	-	-	-	-	-	-	-	-	
➤ VP060 Protection of Staff	-	-	11	-	-	-	-	-	-	-	-	
➤ VP061 Injury to Public or Employees re. Use of Land, Buildings & Assets	-	-	6	-	-	-	-	-	-	-	-	
VP062 Data Protection Compliance	20	-	-	-	-	-	-	-	-	-	-	
VP064 New Delivery & Commissioning Models/Partnership Working	30	-	2	-	-	-	-	-	-	-	-	
VP067 Climate Change	30	20	5	N/A	Qualified	↔	0	1	3	2	-	Memo relates to 2020-21
VP068 Major Incident Response	30	-	-	-	-	-	-	-	-	-	-	
VP070 Revised Working Arrangements	30	-	31	N/A	Qualified	↔	0	4	5	1	-	
Total	275	20	102	-	1 x Substantial 2 x Qualified	-	0	5	11	3	1	
Corporate Governance												
CO002 Business Continuity Planning	20	-	7	-	-	-	-	-	-	-	-	
CR001 Embedding Corporate Governance	70	-	40	-	-	-	-	-	-	-	-	
CR006 Corporate Health Check	20	-	-	-	-	-	-	-	-	-	-	
CR007 Information Governance Group & Support	20	-	27	-	-	-	-	-	-	-	-	
CR009 Data Protection Compliance	20	-	32	-	-	-	-	-	-	-	-	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Total	130	-	106	-	-	-	-	-	-	-	-	
Corporate Fraud Prevention												
CZ100 External Audit Liaison	5	-	1	-	-	-	-	-	-	-	-	
CZ200 National Fraud Initiative	20	-	54	-	-	-	-	-	-	-	-	
CZ300 National Anti-Fraud Network	10	1	4	-	-	-	-	-	-	-	-	
CZ400 RIPA Management & Admin	10	1	-	-	-	-	-	-	-	-	-	
ZZ000 Internal Audit-Special Investigations General*	280	26	63	N/A	1 x Report 1 x Letter	N/A	0	1	2	0	0	
Total	325	28	122	-	1 x Report 1 x Letter	-	0	1	2	0	0	
Strategic Management												
VW001 Strategic Management	50	-	39	-	-	-	-	-	-	-	-	
Total	50	-	39	-	-	-	-	-	-	-	-	
Audit Planning Contingency												
XX000 Audit Planning Contingency	200	-	-	-	-	-	-	-	-	-	-	
Total	200	-	-	-	-	-	-	-	-	-	-	
Corporate Activities Total	980	48	369	-	1 x Report 1 x Substantial 2 x Qualified 1 x Letter	-	0	6	13	3	1	

*Update - Time charged to VP069 Fraud Awareness (10 days) within the 31 August 2021 Progress Report reallocated to ZZ000 Internal Audit-Special Investigations General.

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Commissioning, Communities and Policy Department - The 2021-22 Audit Plan included an allocation of 785 days over the following areas												
Departmental Review - Management & Administration (CCP)												
CA100 Commissioning, Communities and Policy Departmental Review	60	7	6	Qualified	Qualified	↔	0	4	12	2	(6H, 4M, 2L)	Memo relates to 2020-21 audit
CA102 External Grants and Certifications	10	-	26	-	-	-	-	-	-	-	-	
Total	70	7	32	-	1 x Qualified	-	0	4	12	2	12	
CCP Operational Reviews												
CO003 Derbyshire Business Centre	20	-	14	-	-	-	-	-	-	-	-	
CO006 Public Library Service (Transferred to Place wef 1 July 2021)	20	-	24	-	-	-	-	-	-	-	-	
➤ CO007 Democratic Services	-	28	-	-	-	-	-	-	-	-	-	
CO008 Communications and Call Derbyshire	25	-	-	-	-	-	-	-	-	-	-	
CO010 Policy and Research	25	-	4	-	-	-	-	-	-	-	-	
CO011 Legal Services	25	-	-	-	-	-	-	-	-	-	-	
➤ CO012 Derbyshire Records Office & Records Management	-	-	16	-	-	-	-	-	-	-	-	
CO013 Apprenticeship Levy	10	-	14	-	-	-	-	-	-	-	-	
Total	125	28	72	-	-	-	-	-	-	-	-	
Divisional Activity – Major Systems												
MA100 Core Financial Systems – General Queries	5	-	11	-	-	-	-	-	-	-	-	
MB100 Human Resources Management	40	19	-	Substantial	Qualified	↓	0	1	6	6	(1M,3L)	Memo relates to 2020-21 audit
MC100 Accounts Payable	40	-	41	-	-	-	-	-	-	-	-	
MD100 Corporate Purchasing	40	22	-	Qualified	Qualified	↔	0	2	6	5	(3M)	
ME100 Accounts Receivable	35	-	33	-	-	-	-	-	-	-	-	
MG100 Accountancy, Budgetary Control and Financial Resilience	45	-	-	Qualified	Substantial	↑	0	0	9	6	(5M,1L)	Memo relates to 2020-21 audit
MK100 Asset Management System	30	-	31	-	-	-	-	-	-	-	-	
ML100 Funds Management	50	2	-	Substantial	Substantial	↔	0	0	2	3	(1M,1L)	Memo relates to 2020-21 audit
➤ MM100 Treasury Management	-	-	30	-	-	-	-	-	-	-	-	
Total	285	43	146	-	2 x Substantial	-	0	3	23	20	15	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
					2 x Qualified							
Divisional Activity – Probity and Compliance												
DC200 HM Revenue & Customs Compliance	20	-	22	-	-	-	-	-	-	-	-	
DC300 Health, Safety & Wellbeing	20	-	7	-	-	-	-	-	-	-	-	
DC400 Financial Regulations & Standing Orders	5	-	-	-	-	-	-	-	-	-	-	
DE101 Cash Audit & ISO 27001 Visits	20	-	16	N/A	Qualified	↔	0	0	0	0	-	
DE400 Pensions Administration	25	-	-	-	-	-	-	-	-	-	-	
DE500 Insurance & Risk Management	30	-	30	Qualified	Limited	↓	1	1	3	2	(1H,5M,1L)	
Total	120	-	75	-	1 x Qualified 1 x Limited	-	1	1	3	2	7	
Divisional Activity – Corporate/ Departmental IT Systems												
CK003 Network Infrastructure Review	20	-	-	-	-	-	-	-	-	-	-	
CK004 Server Infrastructure Review	20	-	-	-	-	-	-	-	-	-	-	
CK006 Bacs Payment System Review	20	-	2	-	-	-	-	-	-	-	-	
CK002 Corporate Database Review	15	-	-	-	-	-	-	-	-	-	-	
Information Security and Follow Up Reviews	60	1	79	N/A	4 x Qualified 1 x Limited	↔	0	17	23	5	0	Including existing corporate IT solutions and new IT systems or information security reviews, which require approval by the Director of Finance & ICT. Audit worked on a number of different projects throughout in this period: <ul style="list-style-type: none"> • AVC Wise IT solution • Member Self Service IT solution • Mobile Device Management IT solution • Externally hosted Mental Health Assessment solution • Derbyshire Health Trainers
Total	135	1	81	-	4 x Qualified 1 x Limited	-	0	17	23	5	0	
Divisional Activity – County Property Division												
DV100 Property Services Review	30	-	55	-	-	-	-	-	-	-	-	
Total	30	-	55	-	-	-	-	-	-	-	-	
Regulatory												

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
QE100 Registration Service Audit Review	20	-	-	-	-	-	-	-	-	-	-	
Total	20	-	-	-	-	-	-	-	-	-	-	
Departmental Total	785	79	461	-	2 x Substantial 8 x Qualified 2 x Limited	-	0	25	61	29	34	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Children’s Services Department – The 2021-22 Audit Plan included an allocation of 475 days over the following areas												
Departmental Review – Management & Administration (CS)												
AA001 Children’s Services – Departmental Review	45	1	4	Qualified	Qualified	↔	0	3	9	3	(2H,4M,3L)	Memo relates to 2020-21 audit
AA004 Information Security and Follow Up Reviews	35	-	7	N/A	Qualified	↔	0	1	5	0	0	Including new and enhanced IT systems or information security reviews, which require approval by the Director of Finance & ICT. Audit worked on a number of different projects throughout in this period: <ul style="list-style-type: none">S4S Traded Services IT solution
External Grants and Certifications	15	-	17	-	-	-	-	-	-	-	-	
Total	95	1	28	-	2 x Qualified	-	0	4	14	3	9	
Primary, Nursery & Special Schools												
Primary, Nursery & Special Budget	160	-	-	-	-	-	-	-	-	-	-	
Total	160	-	-	-	-	-	-	-	-	-	-	
Secondary Schools												
Secondary Schools	14	-	-	-	-	-	-	-	-	-	-	
Total	14	-	-	-	-	-	-	-	-	-	-	
Schools General Support												
Schools General Support	30	-	13	-	-	-	-	-	-	-	-	
Total	30	-	13	-	-	-	-	-	-	-	-	
School - Information Security Reviews												
Information Security Reviews	35	-	-	-	-	-	-	-	-	-	-	
Total	35	-	-	-	-	-	-	-	-	-	-	
Children's Homes												
Children's Homes	16	-	-	-	-	-	-	-	-	-	-	
Total	16	-	-	-	-	-	-	-	-	-	-	
Themed and Operational												
AO009 Care Leavers	-	-	32	Qualified	Substantial	↑	0	0	3	3	(2M,1L)	
AO013 Supporting Families	30	-	14	-	-	-	-	-	-	-	-	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
AO005 Fostering	25	-	-	-	-	-	-	-	-	-	-	
AO020 Derbyshire Music Partnership	20	-	26	-	-	-	-	-	-	-	-	
AO022 Impact of Children in Care	25	-	-	-	-	-	-	-	-	-	-	
AO016 Starting Point	25	-	-	-	-	-	-	-	-	-	-	
Total	125	-	72	-	1 x Substantial	-	0	0	3	3	3	
Departmental Total	475	1	113	-	1 x Substantial 2 x Qualified	-	0	4	17	6	12	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Adult Social Care and Health Department – The 2021-22 Audit Plan included an allocation of 303 days over the following areas												
Departmental Management and Administration Review												
BA001 Departmental Review Management and Administration	45	1	9	Qualified	Qualified	↔	0	4	12	10	(5H,3M,5L)	Memo relates to 2020-21 audit
Total	45	1	9	-	1 x Qualified	-	0	4	12	10	13	
Public Health												
BD001 Public Health	25	-	47	-	-	-	-	-	-	-	-	
Total	25	-	47	-	-	-	-	-	-	-	-	
Information Security and Follow Up Reviews												
Information Security and Follow Up Reviews	70	9	44		3 x Qualified	↔	0	2	10	0	0	Including new and enhanced IT systems or information security reviews, which require approval by the Director of Finance & ICT. Audit worked on a number of different projects throughout in this period: <ul style="list-style-type: none">• Welfare Rights• Mosaic Client Management IT solution• S12 Solutions App• Stakeholder Engagement Family Weight Management Project• Derbyshire Health Trainers Project• Relationship & Sexual Education Project
Total	70	9	44	-	3 x Qualified	-	0	2	10	0	0	
External Grants and Certifications												
External Grants and Certifications	15	-	25	-	-	-	-	-	-	-	-	
Total	15	-	25	-	-	-	-	-	-	-	-	
Social Care – Elderly Residential												
Elderly Residential	16	-	-	-	-	-	-	-	-	-	-	
Total	16	-	-	-	-	-	-	-	-	-	-	
Social Care - Day Care - Physical/Mental Disability												
Day Care - Physical/Mental Disability	12	-	-	-	-	-	-	-	-	-	-	
Total	12	-	-	-	-	-	-	-	-	-	-	
Social Care - Day Care & Hostels												

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Day Care & Hostels	12	-	-	-	-	-	-	-	-	-	-	
Total	12	-	-	-	-	-	-	-	-	-	-	
Social Care - Community Care Centres												
Community Care Centres	8	-	-	-	-	-	-	-	-	-	-	
Total	8	-	-	-	-	-	-	-	-	-	-	
Themed and Operational												
➤ BO017 Disabled Facilities Grants Administration	-	4	-	-	-	-	-	-	-	-	-	Preliminary enquiries undertaken. A more detailed review of the service will be considered as part of the planning for the 2022/23 Audit Plan.
BO026 Review of Quality Assurance Framework	25	-	-	-	-	-	-	-	-	-	-	
BO010 Commissioning and Performance	25	-	-	-	-	-	-	-	-	-	-	
BO028 Safeguarding of Adults	25	-	3	-	-	-	-	-	-	-	-	
BO029 Direct Care	25	-	3	-	-	-	-	-	-	-	-	
Total	100	4	6	-	-	-	-	-	-	-	-	
Departmental Total	303	14	131	-	4 x Qualified	-	0	6	22	10	13	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
Place Department – The 2021-22 Audit Plan included an allocation of 180 days over the following areas												
Departmental Management & Administration Review												
HA100 Place – Departmental Review	45	14	4	Qualified	Qualified	↔	0	1	10	4	(2M,4L)	Memo relates to 2020-21 audit
Total	45	14	4	-	1 x Qualified	-	0	1	10	4	6	
Information Security and Follow Up Reviews												
HA103 Information Security and Follow Up Reviews	15	-	44	N/A	2 x Qualified	↔	0	2	8	0	0	Including new and enhanced IT systems or information security reviews, which require approval by the Director of Finance & ICT. Audit worked on a number of different projects throughout in this period: <ul style="list-style-type: none">Fuel Card ProcurementChipside Parking EnforcementHighways Materials LaboratoryDHART ProjectAsset Management Solution
Total	15	-	44	-	2 x Qualified	-	0	2	8	0	0	
External Grants and Certifications												
External Grants and Certifications*	20	-	40	-	-	-	-	-	-	-	-	
Total	20	-	40	-	-	-	-	-	-	-	-	
Themed and Operational												
HO001 Waste Management	10	23	-	Substantial	Substantial	↔	0	0	1	3	(1L)	Memo relates to 2020-21 audit
➤ HO013 Third Party Claims Review	-	-	24	-	-	-	-	-	-	-	-	
HO020 Procurement of Public Transport and Taxis (including Home to School Transport and Vetting Contractors	25	-	-	-	-	-	-	-	-	-	-	
➤ HO024 Economic Development Regeneration	-	4	-	Qualified	No Assurance	↓	0	4	10	3	(4H,10M,3L)	Memo relates to 2020-21 audit
HO025 Fleet Services	25	-	21	-	-	-	-	-	-	-	-	
HO030 Inspection and Control of Highway Assets	20	-	-	-	-	-	-	-	-	-	-	
HO032 Management of Water Bodies	20	-	27	-	-	-	-	-	-	-	-	

Name	Planned Days	Actual Days		Previous Assurance	Current Assurance	Direction of Travel	Analysis of Recommendations				Previous Recs Not Implemented	Comments
		20-21	21-22				Critical	High	Medium	Low		
➤ HO034 Rechargeable Works	-	-	17	-	-	-	-	-	-	-	-	
Total	100	27	89	-	1x Substantial 1 x No Assurance	-	0	4	11	6	18	
Departmental Total	180	41	177	-	1x Substantial 3 x Qualified 1 x No Assurance	-	0	7	29	10	24	

*Update - Time charged to HO033 Community Renewal Fund within the 31 August 2021 Progress Report has been reallocated to External Grants and Certifications.

Audit Opinions are categorized based upon the assurance that Management may draw on the adequacy and effectiveness of the overall control framework in operation as follows:

Level of Assurance	Explanation and significance
Substantial Assurance	Whilst there is a sound system of governance, risk management and control minor weaknesses have been identified which include non-compliance with some control processes. No significant risks to the achievement of system/audit area objectives have been detected.
Qualified Assurance	Whilst there is basically a sound system of governance, risk management and control some high priority recommendations have been made to address potentially significant or serious weaknesses and/or evidence of a level of non-compliance with some controls or scope for improvement identified, which may put achievement of system/audit area objectives at risk. Should these weaknesses remain unaddressed they may expose the Council to reputational risk or significant control failure.
Limited Assurance	Significant weaknesses and/or non-compliance have been identified in key areas of the governance, risk management and control system which expose the system/audit area objectives to a high risk of failure, the Council to significant reputational risk and require improvement.
No Assurance	Control has been judged to be inadequate as systems weaknesses, gaps and non-compliance have been identified in numerous key areas. This renders the overall system of governance, risk management and control inadequate to effectively achieve the system/audit area objectives which are open to a significant risk of error, loss, misappropriation or abuse. Immediate remedial action is required.

Audit Recommendations are prioritized depending upon the level of associated risk and impact upon the management control framework as follows:

Level	Category	Explanation and significance
1	Critical	Significant strategic, financial or reputational risks where immediate remedial action is considered essential.
2	High	The absence of, significant weakness in, or inadequate internal controls over the operation of key systems or processes which compromise the integrity/probity of the client's operations. These would result in a potential significant increase in the level of risk exposure which may be financial, reputational or take the form of an increased risk of litigation.
3	Medium	Findings which identify poor working practices or non-compliance with established systems or procedures which result in increased risk of loss/inefficient operation and which expose the client to an increased level of risk.
4	Low	General housekeeping issues which require consideration and a planned implementation date within the medium term.

Appendix 2 - Key Performance Indicators 2021-22

Indicator	Target	2019-20	2020-21	2021-22	Comments
Audit Plan – Achievement of planned Audit days	95%	84.4%	86.7%	-	
Staff Productivity – Achievement of target Audit days	95%	95%	104%	-	
Completion of Audit staff MyPlan reviews and training identified	100%	100%	100%	100%	
Undertake a risk based Annual Audit Plan formulation exercise	N/A	✓	✓	✓	
Undertake quality assurance reviews of Audits (1 for each Principal Auditor per year)	100%		100%	-	
Limited Audit Opinions reviewed by Assistant Director of Finance (Audit) within 10 days of completion of Draft Memorandum	100%		57%	100%	
Percentage of Draft Audit Memoranda issued within 15 working days of fieldwork completion	95%		48.68%	34.48%	(Increase from 31 August 2021 – 31.58%)
Percentage of Final Audit Memoranda issued within 28 working days of issue of Draft Audit Memorandum	95%		47.37%	75.86%	(As at 31 August 2021 – 75%)
Percentage of Recommendations made which are implemented at the time of follow up Audit	90%		71%	65.29%	(As at 31 August 2021 – 66.85%)
Audit Assurance – To provide an assurance to the Authority on the adequacy and effectiveness of risk management, control and governance processes	N/A	✓	✓	-	
Client Satisfaction – Percentage of questionnaire responses rating the Audit Product as good or very good	90%	92.31%	87.50%	0%	2 Responses relating to schools with limited assurance in 2020-21
Annual Survey of Key Stakeholders	N/A	✓	✓	-	
Delivery of Audit Opinion to Management and Audit Committee in time to inform AGS	N/A	✓	✓	-	