#### **Bolsover District Council**

#### **Audit Committee**

#### 27th April 2021

# Internal Audit Consortium Summary of Progress on the 2020/21 Internal Audit Plan

#### Report of the Internal Audit Consortium Manager

Classification:	This report is public		
Report By:	Internal Audit Consol	rtium Maı	nager
Contact Officer:	Jenny.Williams@ne-	Derbyshi	re.gov.uk
PURPOSE / SUMN	IARY		
•	for members' information in respect of the 2020/2		ogress made by the Internal Audit Il Audit Plan.
RECOMMENDATION	ONS		
1. That the rep	ort be noted.		
	Approved by	the Portfo	olio Holder – Councillor Clive Moesby
IMPLICATIONS			
Finance and Risk: Details:	_ Yes⊠ N	lo 🗆	
	•		s and controls are operating ie for money is obtained.
			On Behalf of the Section 151 Officer

# <u>Legal (including Data Protection):</u> Yes□ No ⊠

Details:

The core work of internal audit is derived from the statutory responsibility under the Accounts and Audit Regulations 2015 which requires the Council to "undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking in to account the Public Sector Internal Audit Standards or guidance".

On Behalf of the Solicitor to the Council

Staffing: Details:	Yes□	No ⊠	
Click here to e	enter text.		
			On behalf of the Head of Paid Service

#### **DECISION INFORMATION**

Decision Information	
Is the decision a Key Decision?  A Key Decision is an executive decision which has a significant impact on two or more District wards or which results in income or expenditure to the Council above the following thresholds:	No
BDC:	
Revenue - £75,000 ☐ Capital - £150,000 ☒ NEDDC:	
Revenue - £100,000 □ Capital - £250,000 □	
☑ Please indicate which threshold applies	
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	No
District Wards Significantly Affected	None
Consultation:	Yes
Leader / Deputy Leader □ Cabinet / Executive □ SAMT □ Relevant Service Manager ⊠ Members □ Public □ Other □	Details: Ward Members

Links to Council Ambition (BDC)/Council Plan (NED) priorities or Policy Framework including Climate Change, Equalities, and Economics and Health implications.

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#### **REPORT DETAILS**

#### 1 Background

1.1 The Public Sector Internal Audit Standards require that the Internal Audit Consortium Manager reports periodically to the Audit Committee in respect of

performance against the audit plan. Significant risk and control issues should also be reported.

#### 2. <u>Details of Proposal or Information</u>

2.1 Appendix 1 is a summary of reports issued between the 1st January 2021 and the 9th April 2021. The Appendix shows for each report the level of assurance given and the number of recommendations made / agreed where a full response has been received. This provides an overall assessment of the system's ability to meet its objectives and manage risk. The definitions of the assurance levels used can be seen in the table below:-

Assurance Level	Definition
Substantial	There is a sound system of controls in place, designed to
Assurance	achieve the system objectives. Controls are being consistently applied and risks well managed.
Reasonable	The majority of controls are in place and operating effectively,
Assurance	although some control improvements are required. The
	system should achieve its objectives. Risks are generally well managed.
<b>Limited Assurance</b>	Certain important controls are either not in place or not
	operating effectively. There is a risk that the system may not
	achieve its objectives. Some key risks were not well managed.
Inadequate	There are fundamental control weaknesses, leaving the
Assurance	system/service open to material errors or abuse and exposes
	the Council to significant risk. There is little assurance of
	achieving the desired objectives.

- 2.2 In this period 5 reports have been issued 4 with substantial assurance and 1 with reasonable assurance.
- 2.3 Reports are issued as Drafts with five working days being allowed for the submission of any factual changes, after which time the report is designated as a Final Report. Fifteen working days are allowed for the return of the Implementation Plan.
- 2.4 In respect of the audits being reported, it is confirmed that no issues arising relating to fraud were identified.
- 2.5 Appendix 2 shows the 2020/21 internal audit plan and details the audits that have been completed and those in progress. Where audits will not be completed this financial year they have been considered for inclusion in the 2021/22 internal audit plan following a risk assessment exercise and consultation with the Strategic Alliance Management Team.

### 3 Reasons for Recommendation

- 3.1 To inform Members of progress on the 2020/21 Internal Audit Plan and to provide details of the Audit Reports issued to date.
- 3.2 To comply with the requirements of the Public Sector Internal Audit Standards.

## 4 Alternative Options and Reasons for Rejection

4.1 None

#### **DOCUMENT INFORMATION**

Appendix No	Title	
Appendix 1	Summary of Internal Audit reports issued in respect of the 2020/21 Internal Audit Plan between the 1st January 2021 and the 9th April 2021	
Appendix 2	Progress on the 2020/21 Internal Audit Plan	
Background Papers (These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Cabinet (NEDDC) or Executive (BDC) you must provide copies of the background papers)		
Click here to enter	text.	