

## GOVERNANCE AND AUDIT COMMITTEE

<b>Date of Meeting</b>	Wednesday, 22 <sup>nd</sup> January 2025
<b>Report Subject</b>	Internal Audit Progress Report
<b>Report Author</b>	Internal Audit, Performance and Risk Manager
<b>Type of Report</b>	Assurance

### EXECUTIVE SUMMARY

Internal Audit produces a progress report for the Governance and Audit Committee every quarter. This shows the position of the team against the plan, changes to the plan, final reports issued, action tracking, performance indicators and current investigations. This meets the requirements of the Public Sector Internal Audit Standards and, also enables the Committee to fulfil the Terms of Reference with regards to Internal Audit. The current progress report is attached.

### RECOMMENDATIONS

1	To consider and accept the report.
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### REPORT DETAILS

<b>1.00</b>	<b>EXPLAINING THE INTERNAL AUDIT PROGRESS REPORT</b>
1.01	Internal Audit gives a progress report to the Governance and Audit Committee every quarter as part of the usual reporting process. The report is divided into several parts.
1.02	The level of audit assurance for standard audit reviews is detailed within Appendix A. All reports finalised since the last committee meeting are shown in Appendix B.
1.03	Appendix C provides an oversight to Governance & Audit Committee on the cumulative assurance for 2024/25; however, it should be noted this will be fluid. A footnote has been included to list those reports issued with a Red / Amber Red assurance opinion.

1.04	Since the last progress report to committee there has been two Amber Red / Some Assurance reports (Tenancy Enforcement / Deprivation of Liberty Safeguards Adults (DOLs)). These are detailed within Appendix D.																																																
1.05	There has been one Red / Limited Assurance report (Management of Community and Recreational Assets) which is detailed within Appendix E. Copies of all final reports are available for members if they wish to see them.																																																
1.06	<p>The automated tracking of actions is completed using the integrated audit software. All actions are tracked automatically, and the system allows Managers and Chief Officers to monitor their own teams' outstanding actions and confirm they are being implemented.</p> <p>Below is a summary of audit actions tracked since April 2023.</p> <div data-bbox="395 719 1286 1211" data-label="Figure"> <p>The chart 'Management Actions - Performance' displays five data series over time from June 2023 to December 2024. The left Y-axis (0-200) measures Live Actions (blue bars) and Actions older than 12 months (dark blue line). The right Y-axis (0-150) measures High - Overdue Actions (grey line), Medium - Overdue Actions (yellow line), and Overdue Actions (orange line). Live actions show a slight upward trend. High and medium overdue actions show a downward trend, while overall overdue actions show an upward trend.</p> <table border="1"> <thead> <tr> <th>Month</th> <th>Live Actions</th> <th>High - Overdue Actions</th> <th>Medium - Overdue Actions</th> <th>Overdue Actions</th> <th>Actions older than 12 months</th> </tr> </thead> <tbody> <tr> <td>Jun-23</td> <td>120</td> <td>10</td> <td>20</td> <td>60</td> <td>40</td> </tr> <tr> <td>Sep-23</td> <td>110</td> <td>10</td> <td>25</td> <td>65</td> <td>35</td> </tr> <tr> <td>Dec-23</td> <td>115</td> <td>10</td> <td>30</td> <td>75</td> <td>40</td> </tr> <tr> <td>Mar-24</td> <td>120</td> <td>10</td> <td>35</td> <td>85</td> <td>45</td> </tr> <tr> <td>Jun-24</td> <td>130</td> <td>10</td> <td>40</td> <td>95</td> <td>45</td> </tr> <tr> <td>Sep-24</td> <td>140</td> <td>10</td> <td>45</td> <td>105</td> <td>50</td> </tr> <tr> <td>Dec-24</td> <td>130</td> <td>10</td> <td>45</td> <td>110</td> <td>50</td> </tr> </tbody> </table> </div> <p>The number of live actions has increased slightly, however the number of high and medium overdue actions has decreased during this reporting period. Further analysis of overdue actions is detailed in Appendix F.</p> <p>Appendix G only shows High priority overdue actions and Appendix H lists those High priority actions that are older than six months from the original due date and not overdue.</p>	Month	Live Actions	High - Overdue Actions	Medium - Overdue Actions	Overdue Actions	Actions older than 12 months	Jun-23	120	10	20	60	40	Sep-23	110	10	25	65	35	Dec-23	115	10	30	75	40	Mar-24	120	10	35	85	45	Jun-24	130	10	40	95	45	Sep-24	140	10	45	105	50	Dec-24	130	10	45	110	50
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1.07	Appendix I shows the status of current investigations into alleged fraud, irregularities or concerns raised. There is one investigation ongoing into the loss of Petty Cash over two Children's homes.																																																
1.08	<p>Appendix J shows the range of performance indicators for the department.</p> <p>There has been a decrease in the performance since the last meeting. This is largely due to services taking longer to meet and close audits down.</p>																																																
1.09	Appendix K shows the current position for the 2023/24 and 2024/25 Audit Plans. The annual plan is a flexible plan and continues to be reviewed on a regular basis and reprioritised to accommodate any new requests for work and/or to respond to emerging issues and available resources.																																																

<b>2.00</b>	<b>RESOURCE IMPLICATIONS</b>
2.01	None.

<b>3.00</b>	<b>CONSULTATIONS REQUIRED / CARRIED OUT</b>
3.01	None required.

<b>4.00</b>	<b>RISK MANAGEMENT</b>
4.01	The work of Internal Audit provides assurance to the Council that adequate and effective controls are in place to mitigate risks.

<b>5.00</b>	<b>APPENDICES</b>
5.01	<p>Appendix A Levels of Audit Assurance</p> <p>Appendix B Final Reports Issued</p> <p>Appendix C Audit Assurance Summary 2024/25</p> <p>Appendix D Amber Red Reports Issued</p> <p>Appendix E Red Reports Issued</p> <p>Appendix F Action Tracking – Portfolio Statistics</p> <p>Appendix G High Overdue Actions (including actions older than 6 months if overdue)</p> <p>Appendix H Actions older than six months from original due date and not overdue</p> <p>Appendix I Investigation Update</p> <p>Appendix J Performance Indicators</p> <p>Appendix K Operational Plan 2023/24 and 2024/25</p>

<b>6.00</b>	<b>LIST OF ACCESSIBLE BACKGROUND DOCUMENTS</b>
6.01	<p><b>Contact Officer:</b> Lisa Brownbill, Internal Audit, Performance and Risk Manager</p> <p><b>Telephone:</b> 01352 702231</p> <p><b>E-mail:</b> <a href="mailto:Lisa.brownbill@flintshire.gov.uk">Lisa.brownbill@flintshire.gov.uk</a></p>

<b>7.00</b>	<b>GLOSSARY OF TERMS</b>
7.01	<b>Audit Wales:</b> works to support the Auditor General as the public sector watchdog for Wales. They aim to ensure that the people of Wales know whether public money is being managed wisely and that public bodies in Wales understand how to improve outcomes.

**Corporate Governance:** the system by which local authorities direct and control their functions and relate to their communities. It is founded on the basic principles of openness and inclusivity, integrity, and accountability together with the overarching concept of leadership. It is an inter-related system that brings together the underlying set of legislative requirements, governance principles and management processes.

**Operational Plan:** the annual plan of work for the Internal Audit team.