

INTERNAL AUDIT PROGRESS REPORT GOVERNANCE AND AUDIT COMMITTEE 1 February 2024

1. Introduction

The role of the Internal Audit function is to provide Members and Management with independent assurance that the control, risk and governance framework in place within the Council is effective and supports the Council in the achievement of its objectives. The work of the Internal Audit team should be targeted towards those areas within the Council that are most at risk of impacting on the Council's ability to achieve its objectives.

Upon completion of an audit, an assurance opinion is given on the effectiveness of the controls in place. The results of the entire programme of work are then summarised in an opinion in the Annual Internal Audit Report on the effectiveness of internal control within the organisation.

This activity report provides Members of the Governance and Audit Committee and Management with 8 summaries of completed work between September and December 2023.

2. Key Messages

- 8 audits have been finalised in the period reported. Appendix A
- 18 of 56 audits from the 2023/24 6-month rolling Audit Plan are either in fieldwork or reporting stage. Appendix B
- 33 of 56 audits either in planning, on hold or have not commenced. Appendix B
- Implementation of management actions has significantly decreased from 50% to 40% further details can be found within section 6 of the report and **Appendix D.**

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3. Resources

In accordance with the Public Sector Internal Audit Standards, Members need to be appraised of relevant matters relating to the resourcing of the Internal Audit function. The key updates are as follows:

- Permanent recruitment for the Deputy Audit Manager posts have been recruited to successfully.
- Permanent recruitment for vacant Auditor post has been completed.
- Permanent recruitment for vacant Trainee Auditor post has been completed.
- Permanent recruitment to Senior Auditor Posts are currently in progress.

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4. 2023/24 Internal Audit Plan

This report also provides an update on the work completed between September and December 2023. The audit summaries are provided at <u>Appendix A</u>. A summary is provided on current progress against the 2023/24 Audit Plan.

The number of audits shown in table are inclusive of the 7 revisions made at November 2023 Governance and Audit Committee and no new revisions have been required at present.

Table 1- Audit Plan Status

Status	Number of Audits	%
Not yet started	11	20
Planning	12	21
Fieldwork	8	14
Ongoing	3	5
Draft Report	2	4
Final Report	8	14
On Hold	2	4
Removed/ Deferred	10	18
Total	56	

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Table 2 – Summary of Audits by Committee Meeting

	Governance & Audit Committee – 25 January 2024							
No	Audit	Opinion	Prospects for Improvement					
1	Artificial Intelligence EXEMPT	Advisory	N/A					
2	Single Data Platform EXEMPT	Advisory	N/A					
3	Property Infrastructure – Functions and Processes Transferred to KCC From Gen2 Follow-up	Follow-up	N/A					
4	Disaster Recovery EXEMPT	Adequate	Good					
5	Highways and Transportation Communications	Adequate	Good					
6	Safeguarding (ASCH) – Risk Management Principles & Practices, Unregistered Staff and Designated Senior Officers	Substantial	Very Good					
7	Task and Finish Group – New Provider Setup and Change of Provider Details	Advisory	N/A					
8	Budget Savings Follow-up	Follow-up	N/A					

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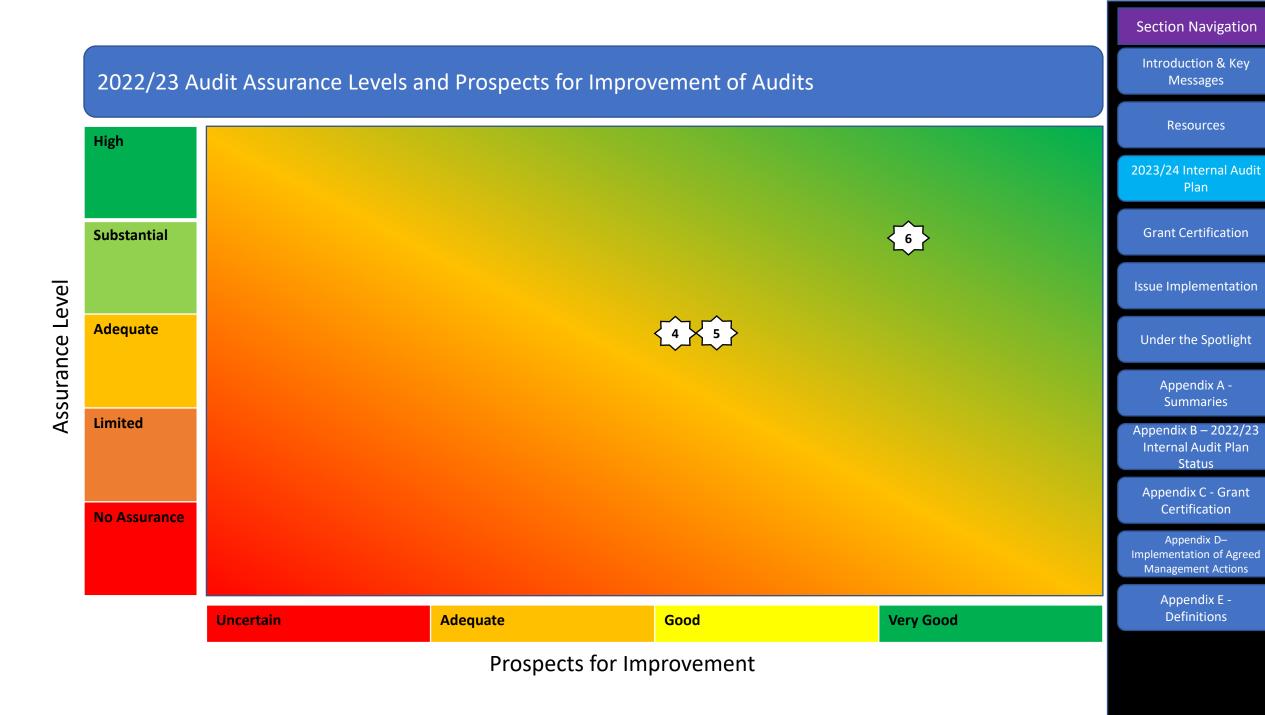
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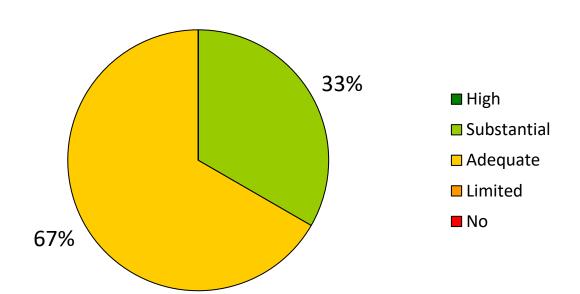
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2023/24 Audit Assurance Levels and Prospects for Improvement of Audits

Assurance Levels 2023/24



Assurance Level	No	%
High	0	0%
Substantial	1	33%
Adequate	2	67%
Limited	0	0%
No	0	0%

Prospects for Improvement	No	%
Very Good	1	25%
Good	2	75%
Adequate	0	0%
Uncertain	0	0%

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5. Grant Certification Work

Internal Audit's work on grant certification provides an essential service for the Council. Although it is not audit opinion work, the Audit team's schedule of grant certifications is an ongoing commitment of Internal Audit resources which requires adherence to strict timescales for the certification of claims submitted.

In 2023-24, the Team has audited and certified 16 Interreg grant claims with a value of €3,377,480. Additional On the Spot (enhanced re-audit) for 1 grant project has been completed. This now concludes the work by Internal Audit on providing First Level Control Audits of Interreg Grant claims. Internal Audit will continue to provide support in resolving queries from the Joint Secretariat for project claims which have not yet been reviewed and paid by Interreg.

The Audit team also provide a service to certify Interreg grant claims for external clients with 2 claims certified in 2023-24.

Grant work is also completed by the Internal Audit team in respect of validating expenditure of various UK Government Grants awarded for activities such as Public Health, Highways, Environment, Travel Demand Management and Bus Service Operators Grant. In 2023-24, the Team has to date, audited and certified 21 government grants with a value of £97,271,164.

Details of all certifications for 2023-24 can be seen at Appendix C.

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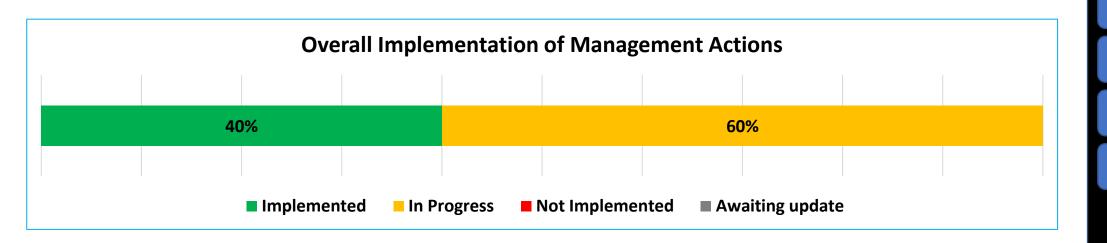
6. Issue Implementation

Details of the current position on the 'Implementation of Agreed Management Actions' is set out at **Appendix D**. This details the implementation status of 55 actions categorised by the assurance level assigned to the original report.

The status of implementation agreed actions is summarised below:

Summary of Issue Implementation

	Total Number		Implemented	d	In Progress		Not Impleme	ented	Superseded	
	High	Medium	High	Medium	High	Medium	High	Medium	High	Medium
Total	19	36	8	14	11	22	0	0	0	0
		Total %	42%	39%	58%	61%	0%	0%	0%	0%



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	Total Numbe		Implemented	d	In Progress		Not Impleme	ented	Superseded	
	High	Medium	High	Medium	High	Medium	High	Medium	High	Medium
ASCH	4	9	2	8	2	1	0	0	0	0
СҮРЕ	0	0	0	0	0	0	0	0	0	0
GET	3	3	0	0	3	3	0	0	0	0
CED	7	13	3	2	4	11				
DCED	5	11	3	4	2	7	0	0	0	0
Total	19	36	8	14	11	22	0	0	0	0
		Total %	42%	39%	58%	61%	0%	0%	0%	0%

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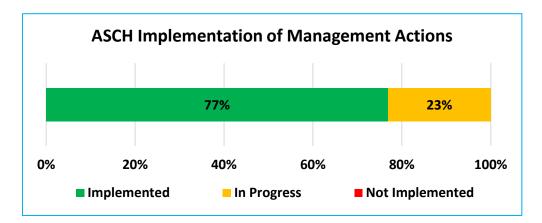
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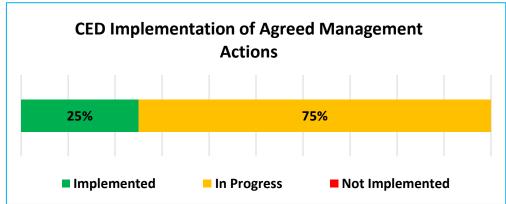
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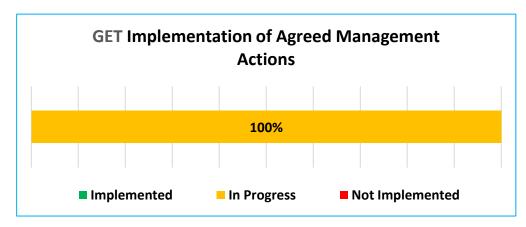
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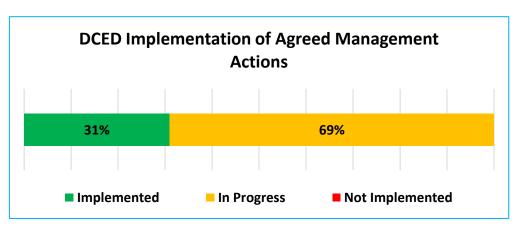
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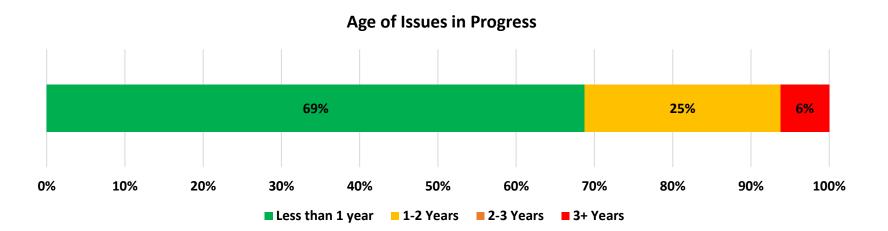
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Progress on longstanding issues for the period found that 33 issues remain "in progress". Of which 1 High and 1 medium priority are longstanding issues which have remained open past their original implementation date for over 3 years and updates and revised implementation dates are detailed below.



Ref	Audit	Priority	Original Date	Revised Date				
CS04-2020	Imprest Accounts Issue 3 - Security	High	30/09/2020	Ongoing				
Update - Secu contract.	Update - Secure cash collections have been completed to move existing cash to bank. Commissioning are in process of setting up a secure cash collection contract.							
CS04-2020	Imprest Accounts Issue 6 – Cash Counts and Reconciliations	Medium	30/09/2020	Ongoing				

Update - Central log for imprest accounts has been reviewed and updated. Majority of historic accounts have been closed and evidence is being supplied to Internal Audit. There are still a small number outstanding awaiting confirmation of zero balances before they can be shut down. Will be completed shortly.

Cash Counts and reconciliations have been completed.

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7. Under the Spotlight!



With each Progress report, Internal Audit turns the spotlight on the audit reviews, providing the Governance and Audit Committee with a summary of the objectives of the review, the key findings, conclusions and recommendations; thereby giving the Committee the opportunity to explore the areas further, should it wish to do so.

In this period, the following report summaries are provided at **Appendix A** for the Committee's information and discussion.

Audit Definitions are provided at **Appendix E**

(A) Adult Social Care and Health	(B) Children, Young People and Education
A1. RB32-2024 – Task & Finish Group – New Provider Set-up & Change of Provider Details A2. RB04-2024 – Safeguarding (ASCH) – – Risk Management Principles & Practices, Unregistered Staff and Designated Senior Officers	
(C) Growth, Environment and Transport Cross Directorate	(D) Chief Executive
C1. RB29-2024 - Highways & Transport Communication	D1. CS01-2024 - Budget Savings Follow-up

(E) Deputy Chief Executive	e
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(F) Cross Directorate

E1. RB24-2024 - Property Infrastructure - Functions and Processes Transferred to KCC from Gen2 - Follow-up

E2. ICT01-2024 – Single Data Platform Review **EXEMPT**

E3. ICT02-2024 – Artificial Intelligence EXEMPT

E4. ICT04-2023 – Disaster Recovery **EXEMPT**

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A1. RB32-2024 – Task & Finish Group – New Provider Set-up & Change of Provider Details

Audit Opinion	ADVISORY
Prospects for Improvement	N/A

Background

On 7th July 2023, the Innovation Delivery Team within Adult Social Care approached Internal Audit to sit on the New Provider Set up & Change in Provider Details Task & Finish Group to review the roles and responsibilities, due diligence and agree any amendment to process.

Scope

- The focus of this audit management letter was to review and risk assess the New Provider Set up & Change of Provider Details process map and recommend any required control improvements to strengthen the current process. The aim was that any improvements can be rectified, and best practice shared across KCC.
- The Innovation Delivery Team have identified that the current process is complex and covers a number of teams. As part of the "One Council ethos, these teams have come together to make improvements.

Findings & Observations

The following identified fraud risks were reviewed:

- KCC employee may set-up a fictitious provider/supplier on the system. Fraudulent information may be provided in order for a fictitious provider/supplier to be set up on the system, either directly or via an email hack of a legitimate provider.
- Fraudulent information may be provided within the provider/supplier set process so incorrect bank details are set up either directly or via an email hack of a legitimate provider/supplier.
- Fraudulent information may be provided once the provider/supplier is set up so incorrect bank details are used either directly or via an email hack of a legitimate provider/supplier.

- A provider/supplier may be set up and payments made but no contract is in place.
- Data inputting may not be accurate and is not consistent across systems.
- KCC may make inaccurate payments or overpayments.

Strengths

- As part of the "One Council ethos, a number of teams have come together to make improvements.
- Process maps have been prepared to document the current processes; new provider set-up, change of bank details and new site address.
- Provider due diligence checks and bank account verification checks are undertaken.
- A standardised form on KNet is completed 'New Commercial Supplier Request Form'.

Weaknesses

- The process is overly complicated, covering a number of teams.
- There was a lack of understanding of the entire process with roles and responsibilities unclear and had yet to be defined.
- Teams were working in silos. A collaborative process was not in place.
- Lack of guidance, procedures and staff training outlining the process to be followed.
- Due diligence checks are performed by two separate teams: provider name & address verification and bank account verification.
- KCC are not utilising Spotlight which is free to access and is currently open to all Local Authorities through an agreement between the Cabinet Office and the Department for Levelling Up, Housing and Communities (DLUHC). Spotlight allows Local Authorities to validate information on businesses (both Limited Companies and Sole Traders) this will check company house data to confirm the information provided matches. This allows for due diligence checks to be completed to confirm it is a legitimate business (free) as well as a bank verification checks to confirm the account number, sort code and account name are associated with the business.
- The Commercial & Procurement Team are not consistently notified by the Purchasing Team that a new provider is required to be set-up on Oracle.

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A2. RB04-2024 – Safeguarding (ASCH) – Risk Management Principles & Practices, Unregistered Staff and Designated Senior Officers

Audit Opinion	SUBSTANIAL
Prospects for Improvement	VERY GOOD

Scope

The aim of the audit was to review the risk management principles and practices, the use of unregistered staff to perform safeguarding enquiries, and the Designated Senior Officers (DSO) signing off their own work without sign off by a manager.

Key Strengths

ASCH demonstrates robust risk management practices with well-documented policies tailored to adult safeguarding. ASCH demonstrates compliance with laws and regulations, conducts comprehensive risk assessments, and provides effective risk mitigation strategies. Structured monitoring, communication channels to senior officers, and escalation protocols are in place. Thorough documentation, training programs, stakeholder involvement, and a dynamic risk assessment process contribute to KCC's risk management strength.

Unregistered Staff Performing Safeguarding Enquiries

Thorough and organised training records are maintained, efficient tracking systems are in place, online modules for flexibility, and a focus on making safeguarding personal highlight the KCC's commitment to individualised and respectful care. Detailed Section 42 enquiries, training and emphasis on transparency in safeguarding practices contribute to a comprehensive training programme.

Designated Safeguarding Officer (DSO) Signing Off Their Own Work Without Review
The existence of Safeguarding Practice Guidance, including the Safeguarding flowchart
and Closure Aide Memoire, provides valuable resources for DSOs. The Adult Social Care
Safeguarding Operational Practice Guide serves as a comprehensive resource covering
statutory frameworks and various safeguarding aspects, ensuring consistency in
safeguarding practices.

Oversight, Monitoring & Reporting

ASCH's reporting structure is multifaceted, covering daily, community team, area level, and strategic reporting. Monthly updates to the Performance Assurance Power BI offer a strategic overview of safeguarding activities. Transparency and accountability are demonstrated through presentations to the Cabinet Committee and Cabinet via the Quarterly Performance Report. External benchmarking and accountability through the national safeguarding data return further enhance KCCs commitment to continuous improvement.

Review of Training

ASCH maintains comprehensive and well-organised training records, offering flexibility through online modules and proactive monitoring with reminders. Training aligns with regulations and guidelines, with regular updates to ensure content relevance. KCC evaluates training effectiveness, fostering ongoing improvement and inclusivity.

Safeguarding Assurance Map

The Safeguarding Assurance Map is well-designed and effectively implemented. The evidence presented showcases a commitment to continuous improvement, learning, and collaboration across all lines of defence.

Areas for Development

<u>Unregistered staff performing safeguarding enquiries - Incomplete Safeguarding</u> Concern Forms

The completion of Safeguarding Concern Forms was found to be inconsistent; gaps were identified in several areas including initial details, incident details and Case Officer and Senior Practitioner signatures. **Issue 1. MEDIUM**

<u>Designated Senior Officers (DSO) signing off their own work without review – Incomplete Enquiry & Safeguarding Concern Forms</u>

The completion of Enquiry & Safeguarding Concern Forms was found to be inconsistent; gaps were identified in several areas including Person Details, Risk Assessment, and Signature and Section Completion. **Issue 2. MEDIUM**

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A2. RB04-2024 – Safeguarding (ASCH) – Risk Management Principles & Practices, Unregistered Staff and Designated Senior Officers

Prospects for Improvement

Our overall opinion of **'Very Good'** for Prospects for Improvement is based on the following factors:

ASCH demonstrates a strong commitment to safeguarding, with well-established processes, effective risk management, and comprehensive training programs. The areas for development highlight specific issues that, once addressed, will further enhance KCC's overall safeguarding effectiveness. The key strengths showcase commendable practices that contribute to a robust safeguarding framework.

Summary of Management Responses

	No. of Issues Raised	Mgt Action Plan Developed	Risk Accepted & No Action Proposed
High Risk	0	0	0
Medium Risk	2	2	0
Low Risk	0	NA	NA

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C1. RB29-2024 - Highways and Transport Communication

Audit Opinion	ADEQUATE
Prospects for Improvement	GOOD

Introduction

- Customers in Kent can submit complaints, comments, and enquiries (hereinafter referred to as 'contacts') via an online self-service form about the service received from the Kent County Council (KCC) Highways and Transportation (H&T) team. These contacts have been historically handled by the H&T team.
- Since 3rd April 2023, these contacts are now handled by the Corporate Customer Feedback team within the Marketing and Resident Experience team at KCC. H&T managers and staff engage with the Customer Feedback team, helping to respond to contacts received and gather evidence before a response is sent to the customer.
- This review has focussed on four areas as follows: (i) service level agreement; (ii) handling of contacts received; (iii) resourcing; and (iv) policies and procedures.

Key Strengths

- Ways of working are continuously reviewed to improve efficiency. Response templates have been created and a response library has been developed to reduce the time taken when drafting responses to customers.
- The Customer Feedback team was not fully resourced during the period under review which impacted performance initially. There were only two members of staff in the Customer Feedback team during April and May 2023. The Customer Feedback Manager actively recruited staff and as at 30th September 2023, all vacancies in the team have been filled.
- Training on handling Highways & Transport (H&T) contacts is provided to new joiners in the Customer Feedback team. The number of cases closed by the team has been on an upward trend since April 2023.
- There is a good working relationship between the Customer Feedback team and H&T. The Customer Feedback team acknowledges that without H&T, they could not do their work and that they would not have been able to clear the backlog.
- The Customer Feedback team has consistently provided management information/performance reporting to H&T monthly since April 2023 and can also create reports on demand which were not available historically.

Areas for Development

- There are delays in processing H&T member and non-member contacts at all stages of the process. Issue 1 Medium
- Management information and/or performance reporting generated from iCasework and provided to Services may be inaccurate and/or incomplete. Issue 2 Medium
- The resources required to handle H&T contacts were considered in March 2023 before the Customer Feedback team took over handling H&T contacts on 3 April 2023. Given that autumn and winter are H&T's busiest months historically, it is likely that the number of contacts received will continue to increase in the coming months and the resources required to handle these contacts should be considered. Issue 3 Low
- There is a Service Level Agreement (SLA) in place between H&T and the Customer Feedback team however, improvements to the SLA are required in line with best practice. Issue 4 Low

Prospects for Improvement

Our overall opinion of Good for Prospects for Improvement is based on the following factors:

- In addition to established practices and processes, there is a good working relationship between the Customer Feedback team and H&T. This has facilitated the discussion and resolution of issues identified and the clearance of the backlog.
- Management have engaged positively with the audit and developed appropriate actions to address the issues identified.

Summary of Management Responses

	No. of Issues Raised	Mgt Action Plan Developed	Risk Accepted & No Action Proposed
High Risk	0	0	0
Medium Risk	2	2	0
Low Risk	2	2	0

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D1. CS01-2024 – Budget Savings Follow-up

Audit Opinion	N/A
Prospects for Improvement	N/A

As part of the 2022/23 Audit Plan, Internal Audit undertook a review of Budget Savings. This audit, which was reported in April 2023, identified two HIGH risk issues, and was allocated 'Limited assurance'. The two issues for action were:

- Issue 1 Non-Delivery of Savings Plan
- Issue 2 Veracity of Savings and Income Proposals

The aim of this follow-up review is to provide assurance that adequate progress has been made against issues raised in the original audit review.

	No. of Issues Raised from Original Report	Implemented	Issue Outstanding	Risk Accepted
High	2	0	2	0
Medium	0	0	0	0
Low	0	NA	NA	NA

Key Findings From Follow-up

The follow-up work has identified that of the two issues being reviewed, none have been implemented in full and therefore remain open. Though issues remain open, good progress has been made to address and a few resulting actions are required to be in a position to mark these as implemented. Further follow up on these issues will be conducted in 3 months' time.

Issue Status

Issue	Risk Rating	Status
1 - Non-Delivery of the Savings Plan	High	Partially Implemented
2 – Veracity of Savings and Income Proposals	High	Partially Implemented

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E1. RB24-2024 - Property Infrastructure - Processes and Functions Transferred to KCC from Gen2 Follow-up

Audit Opinion	N/A
Prospects for Improvement	N/A

As part of the 2023/24 Audit Plan, Internal Audit undertook a review of Property Infrastructure – Functions and Processes Transferred Form Gen2.

The aim of the audit was to provide assurance that adequate progress has been made against issues raised from the previous audit undertaken in April 2022 where it received "Limited Assurance".

	No. of Issues Raised from Original Report	Implemented	Issue Open and Agreed Actions	Risk Accepted
High	2	2	0	0
Medium	1	1	0	0
Low	0	0	0	0

Key Findings From Follow-up

The follow-up work has identified the three management actions previously raised have all now been agreed as implemented. The issues which have been implemented are detailed to the right of the page.

Issue Status

Issue	Risk Rating	Status
1 - Managing Performance Across Property Services	High	Implemented
2 – Using Performance Indicators to Access Risks to Delivery	Medium	Implemented
3 – Suitability of the Corporate Indicators for Property Services	High	Implemented

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Ref	Audit	Status	Assurance	Prospects for Improvement	Committee
CA01-2024	Annual Governance Statement	On Hold	On Hold		
CA02-2024	Risk Management	Not Started			
CA03-2024	Ad-Hoc Reviews of Monitoring of Securing Kent Future Action Plan	Ongoing			
CR02-2024	National Children's Care Review	Not Started			
CR03-2024	Enterprise Business Capabilities (Oracle)	Ongoing			
CS01-2024	Budget Savings Follow-up	Complete	Advisory	N/A	January GAC
RB01-2024	Gifts and Hospitality	Planning			
RB02-2024	Performance Management	Not Started			
RB03-2024	Joint Funding & Governance (NHS) NHS Joint Working & Pooled Budgets	Planning			
RB04-2024	Safeguarding (ASCH)	Complete	Substantial	Very Good	January GAC
RB05-2024	Hospital Discharge	Fieldwork			
RB06-2024	Direct Payments / Abuse of Kent Card	Not Started			
RB07-2024	Public Health Assurance Mapping	Fieldwork			
RB08-2024	Individual Contracts on Care Providers Follow-up	Fieldwork			
RB09-2024	Highways & Transport – Sevington Inland Border Post	Fieldwork			
RB10-2024	Supported Living	Planning			
RB11-2024	Project Management	Planning			
RB12-2024	Business Planning Process	On Hold			
RB13-2024	Home to School Transport Follow-up	Complete	Advisory	N/A	January GAC
RB14-2024	Domestic Abuse	Not Started			

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Ref	Audit	Status	Assurance	Prospects for Improvement	Committee
RB15-2024	Data Quality – Lifespan Pathway – Risk of Overpayments Follow-up	Fieldwork			
RB16-2024	Freedom of Information	Not Started			
RB17-2024	Strategic Reset Programme (Governance)	Deferred			
RB18-2024	Loan Approval to Schools	Not Started			
RB19-2024	Schools Financial Services	Not Started			
RB20-2024	No Recourse to Public Funds – Specific Case Review	Fieldwork			
RB21-2024	Assurance Mapping Financial Sustainability	Deferred			
RB22-2024	School Themed Review – Safeguarding	Deferred			
RB23-2024	Complaints	Planning			
RB24-2024	Property Infrastructure – Functions and Processes Transferred to KCC from Gen2 – Follow-up	Complete	Advisory	N/A	January GAC
RB25-2024	Income & Sales	Planning			
RB26-2024	Asset Management Approach & Risk Prioritisation	Fieldwork			
RB27-2024	Climate Adaptation (+Net Zero Follow-up)	Not Started			
RB28-2024	Highways Term Maintenance Contracts	Ongoing			
RB29-2024	Highways and Transport Communication	Complete	Adequate	Good	January GAC
RB30-2024	Sundry Debt Recovery	Fieldwork			
RB31-2024	Helping Hand Support Scheme	Planning			
RB32-2024	Task & Finish Group – New Provider Set-Up & Change of Provider Details	Complete	Advisory	N/A	January GAC
RB33-2024	Equalities Act Follow-up	Planning			
RB34-2024	S117 Aftercare Payments	Planning			
RB35-2024	Gypsy Traveller Service Follow-up	Not Started			
RB36-2024	Data Security and Protection Toolkit (DSPT)	Planning			

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Ref	Audit	Status	Assurance	Prospects for Improvement	Committee
RB37-2024	Contract Management	Deferred			
RB38-2024	Compliance With Financial Regulations Follow-up	Not Started			
RB39-2024	Usage of Factoring Companies	Deferred			
RB40-2024	Homes for Ukraine	Deferred			
RB41-2024	UK Resettlement Scheme	Deferred			
RB42-2024	Local Transport Bus Market (BSIP) & Sustainability of Public Transport	Deferred			
RB43-2024	Agency	Deferred			
RB44-2024	Re-Letting of Key Contracts	Not Started			
ICT01-2024	Single Data Platform	Complete	Advisory	N/A	January GAC
ICT02-2024	Artificial Intelligence	Complete	Advisory	N/A	January GAC
ICT03-2024	Cyber Security	Draft Report			
ICT04-2024	Joiners, Mover and leavers	Planning			
ICT04-2023	Disaster Recovery	Complete	Adequate	Good	January GAC
RB29-2023	Unregulated Care Placements	Draft Report			

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Grants	Description	Current Status
EU Interreg - Aspire	A holistic approach to lowering obesity and unemployment rates in identified communities where the two issues are linked.	2 claims completed
EU Interreg – Blueprint	Upskill 18 social enterprises to training 2000 disadvantaged individuals with the skills they require to secure new jobs linked to circular economy growth (increased recycling, reverse logistics and secondary markets).	2 claims completed
EU Interreg – C-CARE	To deliver a range of activities linked to Covid-19 response including a technology resilience voucher scheme for businesses (ED), a green recovery voucher scheme for businesses (Environment Team) and a Covid-secure trading standards training module (Public Protection)	2 claims completed and 1 on- the-spot
EU Interreg – Connected Communities	To develop co-ordinated and integrated services for older people that help make communities more resilient and take early action to prevent or delay the need for long term care.	1 claim completed
EU Interreg - Experience	To provide the tools and infrastructure to capitalise on the emerging trend for personalised and local tourism experiences which provide reasons to visit at any time of the year.	2 claims completed
EU Interreg - H20	Overcoming barriers to integrated water and ecosystem management in lowland areas adapting to climate change.	1 claim completed
EU Interreg – IMPULSE2	Support innovation in order to address the economic and societal issues facing the France (Channel) England (FCE). This project aims to support 100 Life Sciences & nutrition SMEs & production sites from the FCE area to help them to become more innovative, to connect to companies and business opportunities in other countries and to overcome the barriers that they face with innovation and internationalisation. The long-term benefits for SMEs will be increased knowledge, innovation capacity, international contacts, and export sales potential (MP)	1 claim completed
EU Interreg - Inn2Power	Supporting Kent based companies in the offshore wind sector with internationalisation & market entry in mainland Europe.	1 claim completed
EU Interreg - Prowater	Contributing to climate adaptation by restoring the water storage of the landscape via ecosystem-based adaptation measures.	1 claim completed
EU Interreg - Upcycle your Waste	The programme will run over three years and aims to support SMEs in reducing their running costs by handling and transforming their waste into new resources for the community.	1 claim completed

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Grant	Description	Current Status
EU Interreg - USAC	This exciting new project aims to develop, research, and understand the benefits of United Nations Environmental, Scientific, and Cultural Organisation (UNESCO) status for the Kent Downs Area of Outstanding Natural Beauty (AONB), including Kent's Heritage Coast from Dover to Folkestone. It will develop new sustainable tourism initiatives that celebrate and protect our natural and cultural assets while benefitting the local economy. The project will include a Landscape Festival in 2022.	2 claims completed and 1 On the Spot
Department for Health	Public Health Universal Drug Treatment Grant 21/22 (£701k).	Complete
Department for Health	Contain Outbreak Management Fund (COMF) (£54.4m).	Complete
Department for Education	Local Transport Authority COVID-19 Bus Services Support Grant (CBSSG) and Local Transport Authority COVID-19 Bus Services Support Restart Grant (CBSSG Restart) (£6.2m total).	Complete
Department for Transport	Ashford Sevington IBF (Formerly MOJO) site funding - Tranche 8 (£8.6m).	Complete
Department for Transport	Dover Inland Border Facility (£9.1 m)	Complete
Department for Transport	LEVI Fund – Local Electric Vehicle Infrastructure Funding 2022/23 (Capital Fund - £12.1m; Capability Fund - £940,400).	Complete
Sport England	Sport England 21/22 (£3.5m)	Complete
Department for Levelling Up, Housing & Communities	Community Renewal Fund (CRF) (£6.7m).	Complete
Office for Health Improvement & Disparities	SSMTRG - Supplementary Substance Misuse Treatment and Recovery 2022-23 (£1.1 m)	Complete
Office for Health Improvement & Disparities	IPD Grant - Local Government Act 2003: Section 31 Local Authority Grant for Inpatient Detoxification treatment 2022-23 (£167K).	Complete
Office for Health Improvement & Disparities	SSMTR - Housing Support Fund 2022/23 (£1.8m).	Complete
Office for Health Improvement & Disparities	OHID- Healthy Weight Grant - Supporting underserved groups or building capacity within Tier 2 Healthy Weight Services (£757K).	Complete

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Grant	Description	Current Status
Office for Health Improvement & Disparities	RSDATG - Rough Sleeper Drug and Alcohol Treatment Grant 22-23 (£416K).	Complete
Department for Environment, Food & Rural Affairs (DEFRA)	Biodiversity Net Gain. (£16k)	Complete
Department for Digital Culture, Media & Sport	Create Growth Programme (£1.275m) (3 Year Programme) – 2022/23.	Complete
Department of Culture, Media & Creative Industries	Turner ACE – Contemporary Capital Grant (£495k)	Complete
Department for Transport	Bus Services Operators Grant (BSOG) – Annual grant to support local bus services (£1.1m)	Complete
Department for Transport	Integrated Transport & Maintenance Block (£40.9m)	Complete
Arts Council England	ACE Turner – Jasmin Vardimon Dance Company (£3.1m)	Complete
Arts Council England	KCC Libraries – Playground (£85k)	Complete
Department for Transport	Bus Services Operators Grant - Walmer (£6m)	Complete

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Appendix C – Implementation of Agreed Management Actions

3+ Years

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status
CS04-2020	Imprest Accounts	No Assurance	Issue 1 - Central log and Imprest Holder Oversight	Medium	CED	Implemented
CS04-2020	Imprest Accounts	No Assurance	Issue 3 - Security	Medium	CED	In Progress
CS04-2020	Imprest Accounts	No Assurance	Issue 6 - Cash Counts and Reconciliations	Medium	CED	In Progress

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1-2 Years

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status	
CA01-2022	Annual Governance Statement	Adequate	Issue 2 - Confirmation of Compliance with CIPFA Code of Financial Management	Medium	CED	In Progress	
CR04-2022	Provider Invoicing	Limited	Issue 1 - Provider Invoice and reconciliation process	High	ASCH	Implemented	2
CR04-2022	Provider Invoicing	Limited	Issue 2 - Performance Reporting	High	ASCH	Implemented	
CR04-2022	Provider Invoicing	Limited	Issue 3 - Contract management of Service Provider	Medium	ASCH	Implemented	
CR04-2022	Provider Invoicing	Limited	Issue 4 - Provider Contracts	Medium	ASCH	Implemented	
CR04-2022	Provider Invoicing	Limited	Issue 5 - Financial Health Checks	High	ASCH	In Progress	
CR04-2022	Provider Invoicing	Limited	Issue 6 - Clarity of roles and responsibilities in KCC/Cantium	Medium	ASCH	Implemented	
ICT03-2022	IT Cloud Strategy, Security and Data migration	Adequate	Issue 2 - Resources	High	DCED	In Progress	
ICT03-2022	IT Cloud Strategy, Security and Data migration	Adequate	Issue 3 - Programme / Project Management Systems	Medium	DCED	Implemented	F
ICT03-2022	IT Cloud Strategy, Security and Data migration	Adequate	Issue 4 - Programme and Project Status Reporting	Medium	DCED	Implemented	
ICT04-2022	IT Data Security Audit for DSP Toolkit	Adequate	Issue 1 - Software Asset Register	Medium	DCED	In Progress	
ICT04-2022	IT Data Security Audit for DSP Toolkit	Adequate	Issue 2 - Movers and Leavers	Medium	DCED	In Progress	l,
RB06-2022	New Grant Funding	Substantial	Issue 1 - Fraud Risk Assessments	Medium	CED	In Progress	
RB13-2022	Data Protection (ASCH)	Adequate	Issue 1 - Improving Uptake of Mandatory Data Protection Training	Medium	ASCH	Implemented	
RB16-2021	Workforce – Recruitment & Retention of AMHPs	Substantial	Issue 2 - Gathering, monitoring, analysing and reporting of AMHP recruitment and retention data	Medium	ASCH	In Progress	

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1-2 Years

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status
RB18-2022	Supervision of Social Workers	Limited	Issue 1 - Storage of Confidential Files	High	ASCH	In Progress
RB18-2022	Supervision of Social Workers	Limited	Issue 2 - Supervision Agreements	Medium	ASCH	Implemented
RB18-2022	Supervision of Social Workers	Limited	Issue 3 - Information Governance	Medium	ASCH	Implemented
RB18-2022	Supervision of Social Workers	Limited	Issue 4 - Quality Assurance	Medium	ASCH	Implemented
RB18-2022	Supervision of Social Workers	Limited	Issue 5 - Supervision Training	Medium	ASCH	Implemented

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Less Than a Year

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status
CA01-2023	Annual Governance Statement	Limited	Issue 1 - Consulting Relevant Staff	Medium	CED	Implemented
CA01-2023	Annual Governance Statement	Limited	Issue 3 - Accuracy and Completeness of AGS Returns	High	CED	In Progress
CA03-2022	Equalities Act 2010 Duties	Limited	Issue 1 - Content of EqIA	High	CED	In Progress
CA03-2022	Equalities Act 2010 Duties	Limited	Issue 2 - Publication of EqIAs	High	CED	In Progress
CA05-2023	Health & Safety	Adequate	Issue 3 - Uptake of Health and Safety Training	Medium	CED	In Progress
CA05-2023	Health & Safety	Adequate	Issue 4 - Review of Supplementary Safety Policies and Guidelines	Medium	DCED	In Progress
CA05-2023	Health & Safety	Adequate	Issue 6 - Monitoring and Reporting Health and Safety Performance	Medium	DCED	In Progress
CA08-2023	Risk Management	Substantial	Issue 2 - Maintaining Risk Registers for High Priority Programmes	Medium	CED	In Progress
CS01-2022	CIPFA Financial Management Code	Limited	Issue 1 - Completeness of Self-Assessment	Medium	CED	In Progress
CS03-2023	Purchase Cards	Adequate	Issue 1 - Card Holder signed compliance	Medium	CED	Implemented
CS03-2023	Purchase Cards	Adequate	Issue 2 - Intellilink Evidence & VAT	Medium	CED	In Progress
CS03-2023	Purchase Cards	Adequate	Issue 3 - Unapproved Transactions	Medium	CED	In Progress
CS04-2023	Pension Scheme Administration	Adequate	Issue 1 - Annual benefit and annual allowance statements	High	CED	Implemented
CS04-2023	Pension Scheme Administration	Adequate	Issue 2 - Member data	High	CED	Implemented
CS04-2023	Pension Scheme Administration	Adequate	Issue 4 - Key Performance Indicators	Medium	CED	In Progress

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Less Than a Year

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status
ICT03-2023	Information Technology Risk Management	Adequate	Issue 1 - Implementing Mitigating Controls/Actions (Cyber Training)	High	DCED	In Progress
RB01-2023	Data Mapping	Adequate	Issue 1 - Guidance for Data Mapping including Process For Updating Data Maps	Medium	CED	In Progress
RB01-2023	Data Mapping	Adequate	Issue 2 - Responsibility for Data Mapping	Medium	CED	In Progress
RB01-2023	Data Mapping	Adequate	Issue 3 - Data Mapping incomplete across the Council	Medium	CED	In Progress
RB02-2023	Talent Management	Substantial	Issue 2 -Talent Management Performance and Potential Assessment Tool	Medium	DCED	Implemented
RB24-2023	Property Disposals	Adequate	Issue 1 - Disposal Process	Medium	DCED	Implemented
RB24-2023	Property Disposals	Adequate	Issue 2 - PIP12 - Evidence of Decision	High	DCED	In Progress
RB30-2022	Kent & Medway Business Fund	Adequate	Issue 2 - Under-utilisation of KMBF	Medium	GET	In Progress
RB30-2022	Kent & Medway Business Fund	Adequate	Issue 3 - Assessing Environmental Impact of KMBF Schemes	Medium	GET	In Progress
RB30-2022	Kent & Medway Business Fund	Adequate	Issue 4 - Repayment Holiday Contract Variation	Medium	GET	In Progress
	East Kent Opportunities - Kings Hill Consultant	Fraud Investigation	Issue 1 - Contractual Arrangements	High	GET	In Progress
	East Kent Opportunities - Kings Hill Consultant	Fraud Investigation	Issue 2 - Past and Current Tendering Process	High	GET	In Progress
	East Kent Opportunities - Kings Hill Consultant	Fraud Investigation	Issue 3 - Governance and Audit Committee Reporting	Hgih	GET	In Progress

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Less Than a Year

Engagement Reference	Engagement Name	Audit Opinion	Title	Risk Rating	Directorate	Status
RRUX-11111	Property Infrastructure – Functions and Processes Transferred from GEN2	Limited	Issue 1 - Managing Performance across Property Services	High	DCED	Implemented
י נווע_ אוועט	Property Infrastructure – Functions and Processes Transferred from GEN2	IIMITAA	Issue 2 - Using Performance Indicators to Assess Risks to Delivery	Medium	DCED	Implemented
RB08-2022	Property Infrastructure – Functions and Processes Transferred from GEN2	IIMITAA	Issue 3 - Suitability of the Corporate Indicators for Property Services	High	DCED	Implemented

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Audit Opinion

High

Internal control, Governance and the management of risk are at a high standard. The arrangements to secure governance, risk management and internal controls are extremely well designed and applied effectively.

Processes are robust and well-established. There is a sound system of control operating effectively and consistently applied to achieve service/system objectives.

There are examples of best practice. No significant weaknesses have been identified.

Limited

Internal Control, Governance and the management of risk are inadequate and result in an unacceptable level of residual risk. Effective controls are not in place to meet all the system/service objectives and/or controls are not being consistently applied.

Certain weaknesses require immediate management attention as there is a high risk that objectives are not achieved.

Substantial

Internal Control, Governance and management of risk are sound overall. The arrangements to secure governance, risk management and internal controls are largely suitably designed and applied effectively.

Whilst there is a largely sound system of controls there are few matters requiring attention. These do not have a significant impact on residual risk exposure but need to be addressed within a reasonable timescale.

No Assurance Internal Control, Governance and management of risk is poor. For many risk areas there are significant gaps in the procedures and controls. Due to the absence of effective controls and procedures no reliance can be placed on their operation.

Immediate action is required to address the whole control framework before serious issues are realised in this area with high impact on residual risk exposure until resolved

Adequate

Internal control, Governance and management of risk is adequate overall however, there were areas of concern identified where elements of residual risk or weakness with some of the controls may put some of the system objectives at risk.

There are some significant matters that require management attention with moderate impact on residual risk exposure until resolved.

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Prospec	Prospects for Improvement		sk Ratings
Very Good	There are strong building blocks in place for future improvement with clear leadership, direction of travel and capacity. External factors, where relevant, support achievement of objectives.	High	There is a gap in the control framework or a failure of existing internal controls that results in a significant risk that service or system objectives will not be achieved.
Good	There are satisfactory building blocks in place for future improvement with reasonable leadership, direction of travel and capacity in place. External factors, where relevant, do not impede achievement of objectives.	Medium	There are weaknesses in internal control arrangements which lead to a moderate risk of non-achievement of service or system objectives.
Adequate	Building blocks for future improvement could be enhanced, with areas for improvement identified in leadership, direction of travel and/or capacity. External factors, where relevant, may not support achievement of objectives	Low	There is scope to improve the quality and/or efficiency of the control framework, although the risk to overall service or system objectives is low.
Uncertain	Building blocks for future improvement are unclear, with concerns identified during the audit around leadership, direction of travel and/or capacity. External factors, where relevant, impede achievement of		

objectives.

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