



**South Kesteven District Council**

Internal Audit Annual Report  
Year ended 31 March 2013

Presented at the Governance & Audit Committee meeting of: 27<sup>th</sup> June  
2013

Chris Williams  
Head of Internal Audit

# 1 INTERNAL AUDIT OPINION

## 1.1 Context

As the provider of the internal audit service to South Kesteven District Council we are required to provide the Section 151 Officer and the Governance & Audit Committee an opinion on the adequacy and effectiveness of the organisation's governance, risk management and control arrangements. In giving our opinion it should be noted that assurance can never be absolute. The most that the internal audit service can provide is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes.

As your internal audit provider, the audit opinions that RSM Tenon provides the organisation during the year are part of the framework of assurances that assist the Council prepare an informed annual governance statement.

## 1.2 Internal Audit Opinion 2012/2013

We are satisfied that sufficient internal audit work has been undertaken to allow us to draw a reasonable conclusion on the adequacy and effectiveness of South Kesteven District Council's arrangements.

For the 12 months ended 31 March 2013, based on the work we have undertaken, our opinion regarding the adequacy and effectiveness of South Kesteven District Council's arrangements for governance, risk management and control is as follows:

	Red	Amber	Green	Direction of travel
<b>Governance</b> The Council has adequate and effective Governance arrangements.				
<b>Risk Management</b> The Council has adequate and effective Risk Management arrangements.				
<b>Control</b> The Council has adequate control arrangements; however we have identified areas where it is considered that the control environment could be improved and recommendations were raised within our reports to highlight these areas.				

*Note: The direction of travel arrow indicates whether the change in our opinion related to the previous year is upward (improving), downward (adverse) or static.*

## 1.3 The Basis of the Opinion

### 1.3.1 Governance

Our review of the Council's Governance arrangements this year resulted in a positive green opinion being awarded. The implementation and management agreement to the recommendations that are raised during the course of the year are an important contributing factor when assessing the assurance opinion on Governance. It is pleasing to note that management appear receptive to recommendations made and work towards implementing and addressing the issues identified within internal audit reports. Three follow up reviews were undertaken during the year which overall resulted in 'good' progress being made to implement audit recommendations. We reiterated two high level and nine medium level risk recommendations.

### 1.3.2 Risk Management

Risk Management continues to be embedded within the culture of the Council and we have seen marked improvements within the area. Our advisory review of Risk Management did not identify any major weaknesses.

In addition to our advisory review on Risk Management we were able to confirm the Risk Management culture within the Council through our other internal audit work and we are satisfied that management understand the importance of identifying and addressing risk. Therefore, we have been able to award a green traffic light rating within this area again this year.

### 1.3.3 Control

We undertook a total of 32 reviews during the year which included 3 follow up reviews as mentioned above and 5 advisory reviews including, risk management. The remainder of the work undertaken provided assurance on the control framework in place and the application of these controls. Overall, our work resulted in 16 'Substantial' assurance opinions (i.e. "Green"), 5 'Reasonable' assurance opinions (i.e. "Amber"), and 3 'Limited' assurance opinions (i.e. Red) being given over the control environment.

The Control Environment is a key aspect of Risk Management, and as can be seen from the number of recommendations raised there is some room for improvement in strengthening the Control Environment. Last year there were no red ratings awarded and 5 amber assurance ratings awarded. Whilst this year we have seen some improvements within areas we have also identified areas within the Council where the control environment is currently considered weak. Management are working towards improving these areas and it is anticipated that controls will have been strengthened and the next internal audit review will validate the strengthened control framework.

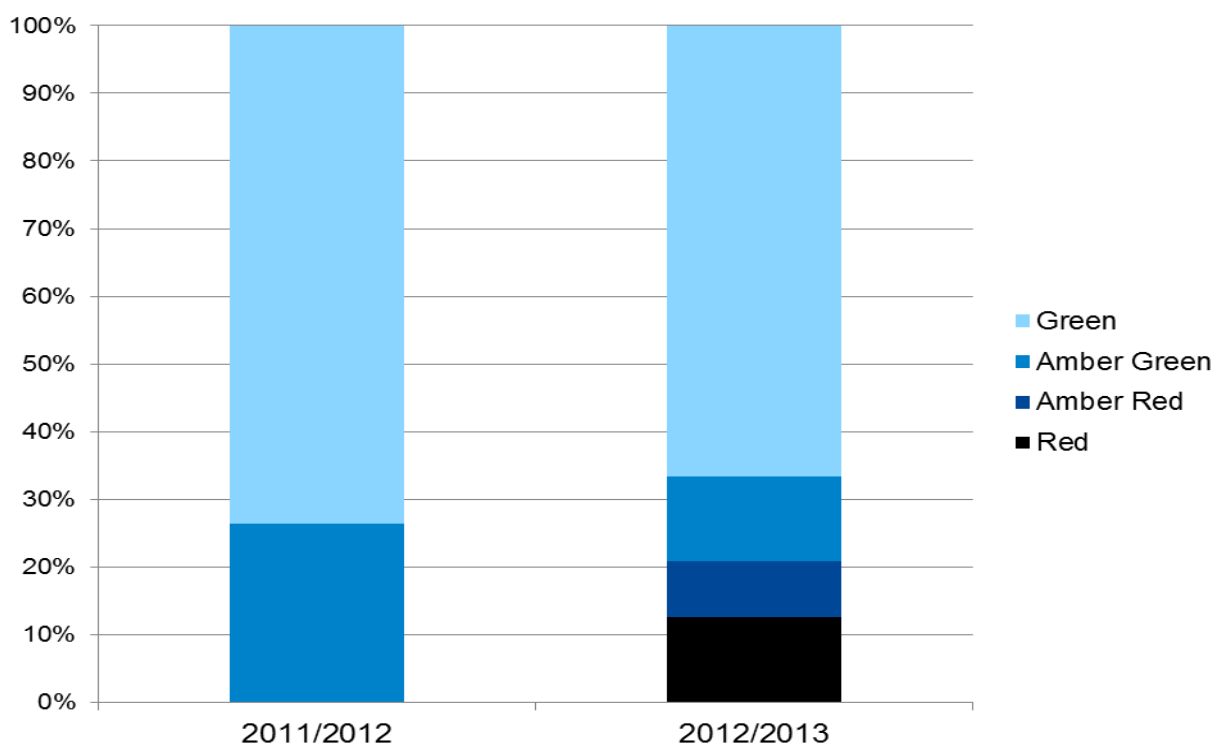
The advisory reviews undertaken during the year do not form part of the assurance opinion; however we are satisfied that, where recommendations have been made on advisory work, management are taking action to implement these recommendations.

Overall we have raised 12 high risk recommendations, 45 medium risk recommendations and 55 low risk recommendations.

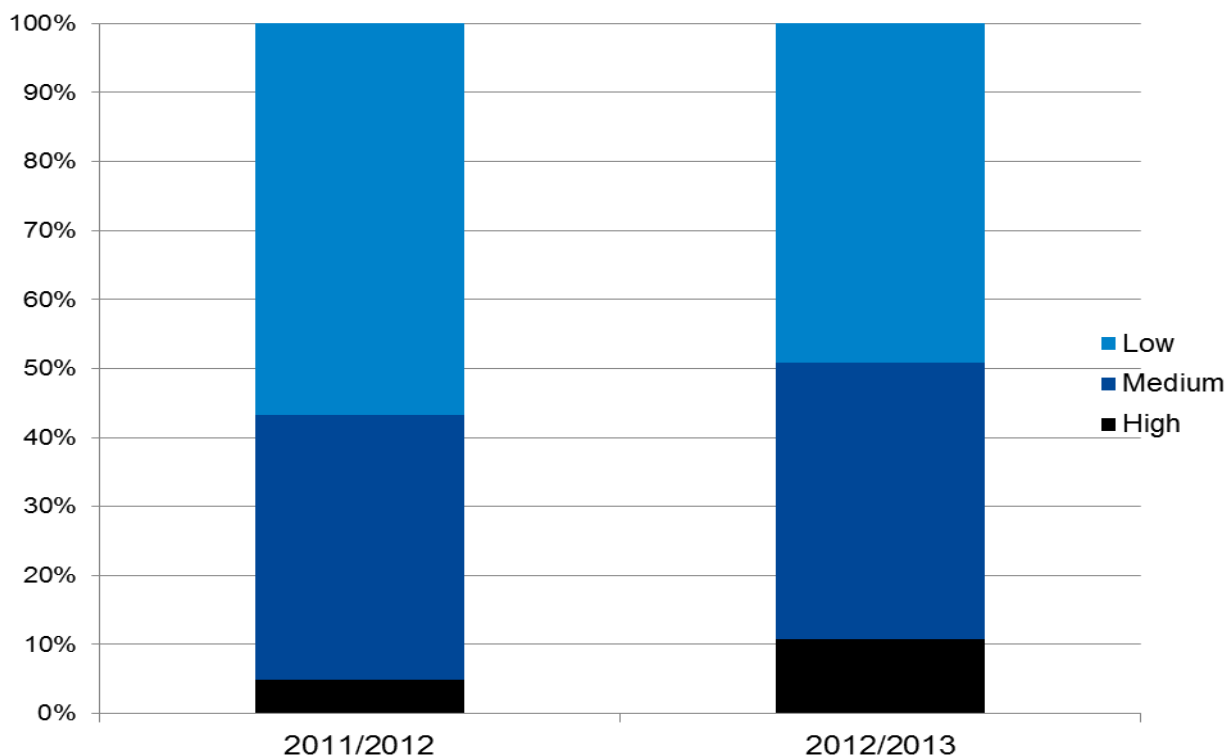
### 1.3.4 Acceptance of Recommendations

All of the recommendations made during the year were accepted by management.

### 1.3.5 Comparison of Internal Audit Opinions (Assurance assignments) in 2012/2013 compared with 2011/2012



### 1.3.6 Comparison of Internal Audit recommendations made 2012/2013 compared with 2011/2012



### 1.3.7 Progress made with previous internal audit recommendations

Our follow up of the recommendations made in 2011/2012 and recommendations from 2012/2013 due for implementation including those that were outstanding from previous years, showed that the organisation had made good progress in implementing the agreed recommendations, as summarised below:

Recommendation Priority	Number made in 2011/2012	Of which:	
		Addressed	Not implemented or still in progress
High	4	2	2
Medium	31	22	9
Low	46	46	0
<b>Totals</b>	<b>81</b>	<b>70</b>	<b>11</b>

### 1.3.8 Reliance Placed Upon Work of Other Assurance Providers

In forming our opinion we have not placed any direct reliance on other assurance providers.

## 2 OUR PERFORMANCE

### 2.1 Wider value-adding delivery

As part of our client service commitment, during 2012 we issued 10 local government client updates and four general briefings.

### 2.2 Conformance with Internal Audit Standards

RSM Tenon affirms that our internal audit services to South Kesteven District Council are designed to comply with the CIPFA Code of Practice for Internal Audit and the International Standards published by the Global Institute of Internal Auditors (IIA).

Under the standards, internal audit services are required to have an external quality and review at least once every five years. During 2011 RSM Tenon commissioned an external independent review of our internal audit services to provide assurance whether our approach meets the requirements set out in the International Professional Practices Framework (IPPF) published by the IIA.

The external review concluded that *“the design and implementation of systems for the delivery of internal audit provides **substantial assurance** that the standards established by the IIA in the IPPF will be delivered in an adequate and effective manner”*.

In this year we have reviewed our processes to ensure we will be conformant with the Public Sector Internal Auditing Standards when they are introduced in 2013/2014.

### 2.3 Conflicts of Interest

We (RSM Tenon) have not undertaken any work or activity during 2012/2013 that would lead us to declare any conflict of interests.

**APPENDIX A: INTERNAL AUDIT OPINIONS AND RECOMMENDATIONS 2012/2013**

Audit	Link to risk or rationale for coverage	Opinion	Actions Agreed (by priority)		
			High	Medium	Low
<b>Audits to address specific risks</b>					
Follow-up of Previous Internal Audit Recommendations (01.12/13)	On-going Assurance	Follow Up	0	3	0
Contract Management - Ground & Tree Maintenance (02.12/13)	Identified through discussions with Internal Audit and Management	Red	2	2	6
Elections (03.12/13)	Identified through discussions with Internal Audit and Management	Green	0	0	4
Licensing (04.12/13)	Identified through discussions with Internal Audit and Management	Green	0	1	0
Leases (05.12/13)	Identified through discussions with Internal Audit and Management	Red	3	3	0
Corporate Governance (07.12/13)	Annual Assurance Provided	Green	0	1	0
Asset Management Plan (08.12/13)	Identified through discussions with Internal Audit and Management	Green	0	0	2
Creditors & Procurement (09.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Amber / Green	0	2	3
Repairs (10.12/13)	Identified through discussions with Internal Audit and Management	Red	3	6	2
Follow-up of Previous Internal Audit Recommendations (11.12/13)	On-going Assurance	Follow Up	0	2	0
Rent Collection and Arrears (including Leaseholders) (12.12/13)	Identified through discussions with Internal Audit and Management	Green	0	0	3

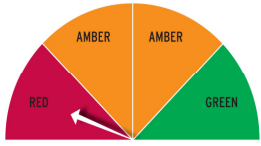
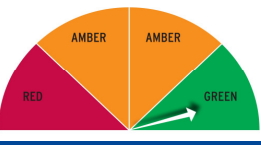
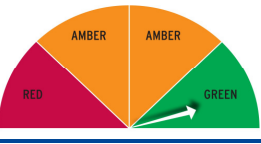
Audit	Link to risk or rationale for coverage	Opinion	Actions Agreed (by priority)		
			High	Medium	Low
Debtors (13.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Amber / Green	0	2	7
Council Tax (14.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	1	0
Housing Benefit (15.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	1	1
NNDR (16.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	2	2
Cash and Banking (17.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	1	3
Payroll and Expenses (19.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	0	5
Land Charges (20.12/13)	Identified through discussions with Internal Audit and Management	Green	0	2	2
Refuse Collection (incl. Bulky Waste) (21.12/13)	Identified through discussions with Internal Audit and Management	Amber / Red	1	2	3
Programme Management (22.12/13)	Identified through discussions with Internal Audit and Management	Green	0	0	4
Green Waste Charges (23.12/13)	Identified through discussions with Internal Audit and Management	Green	0	0	2
Follow Up of Previous Internal Audit Recommendations (25.12/13)	On-going Assurance	Follow Up	2	4	0

Audit	Link to risk or rationale for coverage	Opinion	Actions Agreed (by priority)		
			High	Medium	Low
General Ledger / Main Accounting System (26.12/13)	Identified through discussions with Internal Audit and Management. External Audit Reliance	Green	0	0	0
Risk Management Advisory Review (28.12/13)	Annual Review Undertaken	Advisory	0	2	0
Leaseholder Recharges (29.12/13)	Management Request	Green	0	1	2
Excess Charge Notices (30.12/13)	Management Request	Amber / Green	0	3	1
Flexible Working Arrangements (31.12.13)	Identified through discussions with Internal Audit and Management.	Amber / Red	1	2	3
Data Security – Policy & Training (32.12/13)	Identified through discussions with Internal Audit and Management.	Green	0	2	0
		<b>Total</b>	<b>12</b>	<b>45</b>	<b>55</b>

We use the following levels of opinion classification within our internal audit reports:

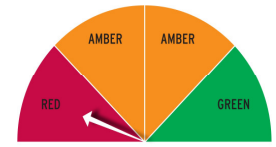
Red	Amber / Red	Amber / Green	Green
Taking account of the issues identified, the Board cannot take assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective. Action needs to be taken to ensure this risk is managed.	Taking account of the issues identified, whilst the Board can take some assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective, action needs to be taken to ensure this risk is managed.	Taking account of the issues identified, the Board can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective. However we have identified issues that, if not addressed, increase the likelihood of the risk materialising.	Taking account of the issues identified, the Board can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

## APPENDIX B: KEY FINDINGS FROM INTERNAL AUDIT REVIEWS 2012/2013

<p>Assignment: Contract Management – Ground &amp; Tree Maintenance (02.12/13)</p>	<p>Opinion: Red</p>	
<p><b>Headline Findings:</b> An audit of Contract Management – Ground &amp; Tree Maintenance was undertaken as part of the approved internal audit plan and resulted in two ‘High’, two ‘Medium’ and six ‘Low’ risk recommendations being raised; all were accepted by management.</p> <p>The High recommendations were in relation to:</p> <ul style="list-style-type: none"> <li>➤ When a service is retendered, the Council should ensure that resulting contract(s) is/are signed by all parties involved.</li> <li>➤ A program of scheduled inspections of work undertaken by the Contractor should be in place and followed, to ensure that there is an audit trail to evidence the monitoring that the work is being carried to an acceptable standard throughout the District.</li> </ul> <p>The Medium recommendations were in relation to:</p> <ul style="list-style-type: none"> <li>➤ The Order Requests from Tenancy Services for Grounds Maintenance work required in excess of that covered by the contract should be formally signed by the requesting Officer and subject to approval at an appropriate level.</li> </ul> <p>The process for raising and payment of orders for work on graves should be reviewed to ensure that a control is put in place to ensure that Order Requests are checked with Dignity before being entered on the Cedar system.</p> <ul style="list-style-type: none"> <li>➤ While it may not be possible to change procedures for the remainder of the current contract, procedures should be changed so that the Contractor has to undertake the invoice preparation on a monthly basis and Grounds Maintenance staff should be responsible for checking the value each month as part of the payment authorisation process.</li> </ul>		
<p>Assignment: Elections (03.12/13)</p>	<p>Opinion: Green</p>	
<p><b>Headline Findings:</b> An audit of Elections was undertaken as part of the approved internal audit plan and resulted in four ‘Low’ risk recommendations. All of which were accepted by management.</p>		
<p>Assignment: Licensing (04.12/13)</p>	<p>Opinion: Green</p>	
<p><b>Headline Findings:</b> An audit of Licensing was undertaken as part of the approved internal audit plan and resulted in one ‘Medium’ risk recommendation.</p> <p>This recommendation was in relation to:</p> <ul style="list-style-type: none"> <li>➤ Each year, when the new fees and charges have been approved, a member of the Licencing staff should independently check that the correct figures have been entered into the Customer Services system for calculating charges for the transfer of vehicle licenses.</li> </ul>		

Assignment: Leases (05.12/13)

Opinion: Red



**Headline Findings:**

An audit of Leases was undertaken as part of the approved internal audit plan and resulted in three 'High' and three 'Medium' risk recommendations.

This High risk recommendations were in relation to:

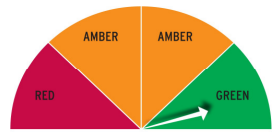
- Reviewing all systems within the Council to identify potential leases and licenses with the aim of compiling a list of all current leases and licenses. The Council may also wish to work with and outside agency, such as the Land Registry, in an attempt to confirm records and identify potential discrepancies in Council records; however this would incur additional costs to the Council.
- The tenancy schedule from the Council's appointed contractor should be reviewed at each management meeting to identify any discrepancies or errors between the records maintained by the contractor and those maintained by the Council.
- A record of all leases and licences issued by the Council should be established and maintained; allowing the expiry of leases and licences to be monitored.

The medium risk recommendations made were in relation to:

- Documenting procedures for the management of leases and licences.
- Updating the Scheme of Delegation ensuring consistency with the current structure and a decision is required as to whether the new process for determining market rent is acceptable.
- To undertake a monthly reconciliation of the properties for which lease income is received to the revenues system.

Assignment: Corporate Governance (07.12/13)

Opinion: Green



**Headline Findings:**

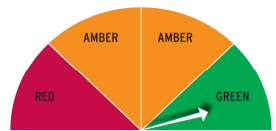
An audit of Corporate Governance was undertaken as part of the approved internal audit plan and resulted in one 'Medium' risk recommendation.

This recommendation was in relation to:

- Making attendance a key part of the scope when undertaking the next Governance & Audit Committee self-assessment review and improving the attendance of appointed members to ensure greater continuity.

Assignment: Asset Management Plan (08.12/13)

Opinion: Green

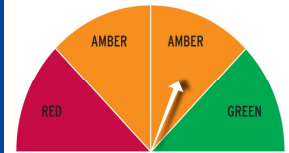


**Headline Findings:**

An audit of the Asset Management Plan was undertaken as part of the approved internal audit plan and resulted in two 'Low' risk recommendations. All of which were accepted by management.

Assignment: Creditors & Procurement (09.12/13)

Opinion: Green / Amber



**Headline Findings:**

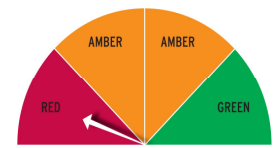
An audit of Creditors & Procurement was undertaken as part of the approved internal audit plan and resulted in two 'Medium' risk recommendations and three 'Low' risk recommendations.

The Medium risk recommendations made were in relation to:

- Ensuring that the authorisation limits within the system reflect the limits and per the Authorised Signatory List and suspending access in a timely manner for those staff leaving Council employment.
- Retaining the new Supplier Form used to support the evidence for all new suppliers set up on the system and obtaining confirmation of supplier bank details. Also to establish if an audit report can be produced to identify all changes made to supplier standing data.

Assignment: Repairs (10.12.13)

Opinion: Red



**Headline Findings:**

The audit of Repairs was designed to focus upon those areas of the Repairs process which could lead to an increased number of insurance claims being made, or where failure to act in an appropriate manner could lead to the Council being held liable for claims. Our work resulted in three 'High' risk recommendations and six 'Medium' risk recommendations.

The High risk recommendations were in relation to:

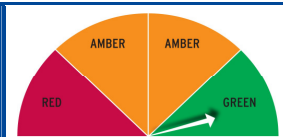
- Ensuring that repairs are prioritised/categorised with the evidence to support prioritisation being documented.
- Recording and monitoring completion of work identified as a result of risk assessments.
- Correctly coding repairs that fall within the 'Right to Repair scheme' on the system and ensuring there is documented evidence should a repair fall under this scheme but not be classed as urgent.

The Medium risk recommendations were in relation to:

- Ensuring there is adequate resource to complete the appointments within the assigned target completion date and producing a list of repairs which may have a high likelihood of resulting in an insurance claim to assist in scheduling jobs.
- Coding of identified follow on work and scheduling this work based on urgency of repair.
- Undertaking the target number of inspections and quality checks required to assess the quality of works.
- Undertaking an analysis comparing full time equivalent resource available within the repairs department.
- Monitoring of daily work schedules to identify possible opportunities to allocate further work.
- Effective communication and response to tenants, wardens or staff who report repairs as to the status off the repair.

Assignment: Rent Collection & Arrears (12.12/13)

Opinion: Green

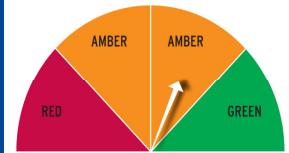


**Headline Findings:**

An audit of Rent Collection and Arrears was undertaken as part of the approved internal audit plan and resulted in three 'Low' risk recommendations being made; both of which were accepted by management.

Assignment: Debtors (13.12/13)

Opinion: Green / Amber



Headline Findings:

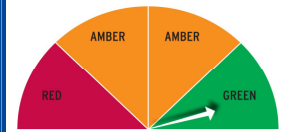
An audit of Debtors was undertaken as part of the approved internal audit plan and resulted in two 'Medium' risk and seven 'Low' risk recommendations being raised.

The Medium risk recommendations were in relation to:

- Putting a procedure in place for the authorisation of credit notes and ensuring that they have been authorised by an appropriate member of staff with sufficient supporting documentation, and
- Introducing an independent review of the write offs processed within the sundry debtors system.

Assignment: Council Tax (14.12/13)

Opinion: Green



Headline Findings:

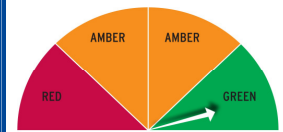
An audit of Council Tax was undertaken as part of the approved internal audit plan and resulted in one 'Medium' risk recommendation.

This recommendation was in relation to:

- Ensuring that all staff with access to the Northgate System have completed an annual declaration of interest form and that there is a robust process for ensuring that staff leaving the employment of the Council have their access rights disabled.

Assignment: Housing Benefits (15.12/13)

Opinion: Green



Headline Findings:

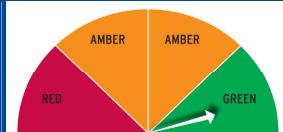
An audit of the Housing Benefits system was undertaken as part of the approved internal audit plan and resulted in one 'Medium' risk recommendation and one 'Low' risk recommendations.

The Medium risk recommendation made was in relation to:

- Ensuring that the BACS payment report listings are appropriately signed and authorised.

Assignment: NNDR (16.12/13)

Opinion: Green

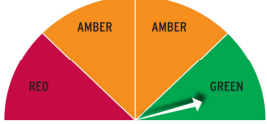
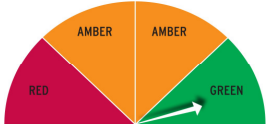
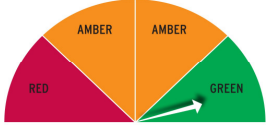
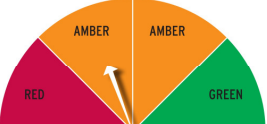
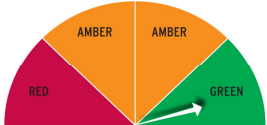


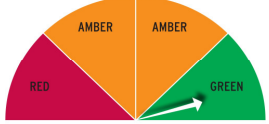
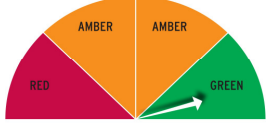
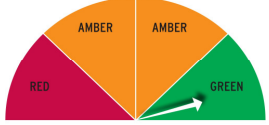
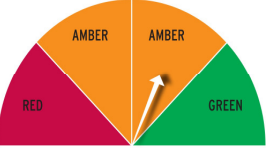
Headline Findings:

An audit of NNDR was undertaken as part of the approved internal audit plan and resulted in two 'Medium' risk recommendations and two 'Low' risk recommendations.

The Medium risk recommendations made were in relation to:

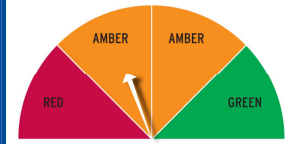
- Reconciling the NNDR database to the information held by the Valuation Office Agency and documenting reasons if there is a known variance; and
- Ensuring that void inspections are undertaken on a four month rolling basis.

Assignment: Cash & Banking (17.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of Cash &amp; banking was undertaken as part of the approved internal audit plan and resulted in one 'Medium' risk recommendation and three 'Low' risk recommendations.</p> <p>The Medium risk recommendation made was in relation to:</p> <ul style="list-style-type: none"> <li>➤ Improving the controls in place following the move to Bourne Community Access Point to ensure that the cash handling activities undertaken are in line with those expected by South Kesteven District Council.</li> </ul>		
Assignment: Payroll & Expenses (19.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of Payroll &amp; Expenses was undertaken as part of the approved internal audit plan and resulted in 5 'Low' risk recommendations being raised and accepted by management.</p>		
Assignment: Land Charges (20.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of Land Charges was undertaken as part of the approved internal audit plan and resulted in 2 'Medium' risk and 2 'Low' risk recommendations being made; all of which were accepted by management.</p> <p>The Medium risk recommendations made were in relation to:</p> <ul style="list-style-type: none"> <li>➤ Ensuring that the Local Land Charges Register is updated in a timely manner, once the notification has been received.</li> <li>➤ Approval should be obtained and retained on file to support the decision not to chase an outstanding fee, if this is of a low value. An analysis of the income lost should be undertaken and be reported to management.</li> </ul>		
Assignment: Refuse Collection & Bulky Waste (21.12/13)	Opinion: Amber / Red	
<p>Headline Findings:</p> <p>An audit of Refuse Collection &amp; Bulky Waste was undertaken as part of the approved internal audit plan and resulted in one 'high' risk, two 'medium' risk and three 'low' risk recommendations being made. All of which were accepted by management.</p>		
Assignment: Programme Management (22.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of the Programme Management was undertaken as part of the approved internal audit plan and resulted in 4 'Low' risk recommendations, all of which were accepted by management.</p>		

Assignment: Green Waste (23.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of Green Waste was undertaken as part of the approved internal audit plan and resulted in 2 'Low' risk recommendations being raised and accepted by management.</p>		
Assignment: General Ledger (26.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of General Ledger was undertaken as part of the approved internal audit plan and resulted in no recommendations being raised.</p>		
Assignment: Leaseholder Recharges (29.12/13)	Opinion: Green	
<p>Headline Findings:</p> <p>An audit of Leaseholder Recharges was undertaken at the request of the Director (Corporate Focus) and resulted in 1 'Medium' and 2 'Low' risk recommendations being raised and accepted by management.</p> <p>The medium risk recommendation related to:</p> <ul style="list-style-type: none"> <li>➤ A check should also be undertaken to ensure each price up-lift has been calculated and applied correctly at the start of each new billing year.</li> </ul>		
Assignment: Excess Charge Notices (30.12/13)	Opinion: Green / Amber	
<p>Headline Findings:</p> <p>An audit of Excess Charge Notices was undertaken at the request of the Director (Corporate Focus) and resulted in three 'Medium' risk recommendations and one 'Low' risk recommendation.</p> <p>The Medium risk recommendations made were in relation to:</p> <ul style="list-style-type: none"> <li>➤ Cancelled tickets were not always supported by evidence to justify the cancellation.</li> <li>➤ Excess Charge Notices were cancelled multiple times for the same vehicle.</li> <li>➤ It cannot be confirmed that ECNs were written off after formal approval had been granted as the date of approval was not noted.</li> </ul> <p>Staff administering the 360 system on a day to day basis were not allocated unique user names and instead were all using the user account of 'BS'.</p>		

Assignment: Flexible Working Arrangements (31.12/13)

Opinion: Amber / Red



Headline Findings:

An audit of Flexible Working Arrangements was undertaken as part of the approved internal audit plan and resulted in one 'high', two 'medium' and three 'low' recommendations being raised.

The high risk recommendation related to:

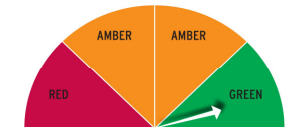
- Ensuring that management checks are completed to ensure that the flexi time data submitted by employees is accurate and spot checks being completed by a member of the central HR function.

The medium risk recommendations related to:

- Password protecting the flexi time recording spreadsheet to ensure no unauthorised changes are made; and
- Amending the formulae within the spreadsheet specifically for part time employees.

Assignment: Data Security – Policy & Training (32.12/13)

Opinion: Green



Headline Findings:

An audit of Data Security – Policy & Training was undertaken as part of the approved internal audit plan and resulted in two 'medium' risk recommendations being raised.

The medium risk recommendations related to:

- Providing information/data security training to all staff; and
- Implementing stronger logical security controls within the APAS system.

Follow-up of Previous Internal Audit Recommendations (01.12/13)

**GOOD PROGRESS**

Headline Findings:

To meet the IIA Standards and to provide management with ongoing assurance regarding implementation of internal audit recommendations.

We reviewed the Council's progress to implement previous internal audit recommendations made in eight reports. The 17 recommendations considered in this report comprised of two 'high' and 15 'medium'.

Three medium risk recommendations were reiterated, where these had not been fully implemented.

Follow-up of Previous Internal Audit Recommendations (11.12/13)

**GOOD PROGRESS**

Headline Findings:

To meet the IIA Standards and to provide management with ongoing assurance regarding implementation of internal audit recommendations.

We reviewed the Council's progress to implement previous internal audit recommendations made in three reports. The nine recommendations considered in this report comprised of two 'high' and seven 'medium'.

Two medium risk recommendations were reiterated, where these had not been fully implemented.

Follow-up of Previous Internal Audit Recommendations (25.12/13)

**ADEQUATE PROGRESS**

Headline Findings:

To meet the IIA Standards and to provide management with ongoing assurance regarding implementation of internal audit recommendations.

We reviewed the Council's progress to implement previous internal audit recommendations made in eight reports. The 14 recommendations considered in this report comprised of two 'high' and 12 'medium'.

Two high and four medium risk recommendations were reiterated, where these had not been fully implemented.

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. Whilst every care has been taken to ensure that the information provided in this report is as accurate as possible, based on the information provided and documentation reviewed, no complete guarantee or warranty can be given with regard to the advice and information contained herein. Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

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