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NOTICE

OF

MEETING

AUDIT AND GOVERNANCE COMMITTEE

will meet on

Thursday 16 February 2023

At 7.00 pm

In the

Council Chamber - Town Hall, Maidenhead and on RBWM YouTube

To: Members of the Audit and Governance Committee

Councillors Lynne Jones (Chairman), Julian Sharpe (Vice-Chairman), John Story, Simon Bond and one additional Conservative Councillor (TBC)

Substitute Members

Councillors Simon Werner, John Bowden, Greg Jones, Shamsul Shelim and Neil Knowles

Kirsty Hunt, Service Lead – Electoral & Democratic Services - Issued: 8th February 2023

Members of the Press and Public are welcome to attend Part I of this meeting. The agenda is available on the Council's web site at www.rbwm.gov.uk or contact the Democratic Services Officer **Mark Beeley** 01628 796345 / mark.beeley@rbwm.gov.uk

Recording of Meetings – In line with the council's commitment to transparency the Part I (public) section of the meeting will be streamed live and recorded via Zoom. By participating in the meeting by audio and/or video, you are giving consent to being recorded and acknowledge that the recording will be in the public domain. If you have any questions regarding the council's policy, please speak to Democratic Services or a Legal representative prior to the meeting.

AGENDA

<u>Item</u>	Subject	<u>Page</u>
1.	Apologies for Absence	-
	To receive any apologies for absence.	
2.	Declarations of Interest	3 - 4
	To receive any declarations of interest.	
3.	<u>Minutes</u>	5 - 12
	To consider the minutes of the meeting held on 20 th October 2022.	
4.	Statement of Accounts 2019/20	To Follow
	The Committee is asked to consider and sign off the accounts from the 2019/20 financial year.	1 Ollow
5.	Appointment of Independent Persons to the Committee	13 - 34
	The report recommends the appointment of up to two independent members of the Committee, in line with CIPFA guidance and forthcoming Government legislation.	
	The Committee is asked to make a recommendation to Full Council.	
6.	Internal Audit Progress Report Q3 2022/23	35 - 66
	The report is the third progress report on the internal audit plan for 2022/23, as agreed at the May 2022 meeting.	
	The Committee is asked to note the report.	
7.	Internal Audit Plan 2023/24	67 - 102
	The report recommends an internal audit plan for 2023/24.	
	The Committee is asked to approve the plan.	
8.	Work Programme	103 - 104
	To consider the Committee's work programme.	

Agenda Item 2

MEMBERS' GUIDE TO DECLARING INTERESTS AT MEETINGS

Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a Disclosable Pecuniary Interest (DPI) or Other Registerable Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

Any Member with concerns about the nature of their interest should consult the Monitoring Officer in advance of the meeting.

Non-participation in case of Disclosable Pecuniary Interest (DPI)

Where a matter arises at a meeting which directly relates to one of your DPIs (summary below, further details set out in Table 1 of the Members' Code of Conduct) you must disclose the interest, **not participate in any discussion or vote on the matter and must not remain in the room** unless you have been granted a dispensation. If it is a 'sensitive interest' (as agreed in advance by the Monitoring Officer), you do not have to disclose the nature of the interest, just that you have an interest. Dispensation may be granted by the Monitoring Officer in limited circumstances, to enable you to participate and vote on a matter in which you have a DPI.

Where you have a DPI on a matter to be considered or is being considered by you as a Cabinet Member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

DPIs (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the council.
- Any licence to occupy land in the area of the council for a month or longer.
- Any tenancy where the landlord is the council, and the tenant is a body in which the relevant person has a beneficial interest in the securities of.
- Any beneficial interest in securities of a body where:
 - a) that body has a place of business or land in the area of the council, and
 - b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body <u>or</u> (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

Disclosure of Other Registerable Interests

Where a matter arises at a meeting which *directly relates* to one of your Other Registerable Interests (summary below and as set out in Table 2 of the Members Code of Conduct), you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (as agreed in advance by the Monitoring Officer), you do not have to disclose the nature of the interest.

Revised September 2021

Other Registerable Interests (relating to the Member or their partner):

You have an interest in any business of your authority where it relates to or is likely to affect:

- a) any body of which you are in general control or management and to which you are nominated or appointed by your authority
- b) any body
 - (i) exercising functions of a public nature
 - (ii) directed to charitable purposes or

one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union)

Disclosure of Non- Registerable Interests

Where a matter arises at a meeting which *directly relates* to your financial interest or well-being (and is not a DPI) or a financial interest or well-being of a relative or close associate, you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (agreed in advance by the Monitoring Officer) you do not have to disclose the nature of the interest.

Where a matter arises at a meeting which affects -

- a. your own financial interest or well-being;
- b. a financial interest or well-being of a friend, relative, close associate; or
- c. a body included in those you need to disclose under DPIs as set out in Table 1 of the Members' code of Conduct

you must disclose the interest. In order to determine whether you can remain in the meeting after disclosing your interest the following test should be applied.

Where a matter *affects* your financial interest or well-being:

- a. to a greater extent than it affects the financial interests of the majority of inhabitants of the ward affected by the decision and;
- b. a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest

You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (agreed in advance by the Monitoring Officer, you do not have to disclose the nature of the interest.

Other declarations

Members may wish to declare at the beginning of the meeting any other information they feel should be in the public domain in relation to an item on the agenda; such Member statements will be included in the minutes for transparency.

Revised September 2021

Agenda Item 3

AUDIT AND GOVERNANCE COMMITTEE

THURSDAY, 20 OCTOBER 2022

PRESENT: Councillors Lynne Jones (Chairman), Julian Sharpe (Vice-Chairman), Gurpreet Bhangra, John Story and Simon Bond

Also in attendance: Councillor David Hilton, Councillor Ewan Larcombe and Councillor Helen Price

Officers: Mark Beeley, Emma Duncan, Ryan Stone, Steve Mappley, Adele Taylor and Andrew Vallance

APOLOGIES FOR ABSENCE

There were no apologies for absence received.

DECLARATIONS OF INTEREST

There were no declarations of interest received.

MINUTES

RESOLVED UNANIMOUSLY: That the minutes of the meeting held on 22nd September 2022 were approved as a true and accurate record.

The Chairman commented on the action from the minutes, which was that the Executive Director of Resources would explore how audits could be shared with Members of the Committee.

Andrew Vallance, Head of Finance, confirmed that an area in Microsoft Teams had been created where audits would be shared, the invite to this team had been shared with Committee Members.

ANNUAL GOVERNANCE STATEMENT ACTION PLAN UPDATE

Emma Duncan, Director of Law, Governance and Public Health, said that the annual governance statement was usually considered with the annual statement of accounts. The governance framework was a document of policies and procedures which reported on the council's decision-making processes. The annual governance statement was monitored by the statutory officers group and discussion was around where action needed to be taken, based on the experience of officers. On the action plan, there were a number of recommendations which had been made. The report before the Committee showed the progress that had been made on these recommendations. Embedding the performance framework was a key issue which had come out of the peer review, along with areas like risk and procurement where improvements had been identified to ensure robustness. The main aim of the annual governance statement was to improve the governance culture within the council, there had been significant changes in the way decisions were made.

Councillor Story asked if the actions which had a target completion of this month, were all on track to be completed within this timeframe.

Emma Duncan confirmed that actions were on track to be completed, however there were some long term issues. For example, the scrutiny function would take a significant amount of time and was a long term project.

Councillor Bond commented on the launch of a procurement tool kit, he questioned whether the law had been broken by not having the tool kit.

Emma Duncan explained that the law had not been broken, the tool kit was designed to make procurement easier. The council had breached its own procurement rules earlier in the year and this tool kit would help to prevent this from happening in future, it acted as a line of defence to ensure the process was carried out properly.

Councillor Bhangra asked how RBWM was doing compared to other local authorities.

Emma Duncan said that there was a particular focus on governance at RBWM, ensuring that all officers were using the systems that were in place. The council was not fully there but it was closer than it had been previously. Considering other local authorities, Emma Duncan felt that RBWM could be considered mid table.

Councillor Sharpe asked to what extent governance was reliant on a system or on officers doing the right thing.

Emma Duncan said that RBWM was not reliant on officers just doing the right thing, systems were able to be tightened very easily if needed. These could ensure that officers followed the correct route and procedure.

The Chairman noted that many of the actions were listed as being complete by May 2023 and some, for example the proposal for a Scrutiny Officer, were subject to a growth bid for the 2023/24 budget and therefore would not be implemented until next May at the earliest.

Emma Duncan confirmed that this was correct, things like the job evaluation and other preparation work had been done for the Scrutiny Officer position. However, there were other competing growth bids and the council had to prioritise where money was spent.

Adele Taylor, Executive Director of Resources, added that the budget setting process would take place in February 2023, if the growth bid was part of the budget there was the ability for the officer to be in post not long after the budget had been passed by Full Council.

The Chairman said that the Property Company action plan was nearly compete, she asked if the Committee would have sight of the action plan.

Emma Duncan said that there was no reason why the action plan could not be circulated.

Adele Taylor added that the action plan for the Property Company had been taken to the Corporate Overview and Scrutiny Panel and would again be considered by that Panel at an appropriate time.

RESOLVED UNANIMOUSLY: That the Audit and Governance Committee noted the report identifying any specific matters which should be brought to the attention of Council or Cabinet.

COUNCIL TRUSTS REPORT

Emma Duncan said that the report was for the Committee's information on the operation of the councils' trusts. She was happy to take away any specific questions Members had on any of the trusts, if they could not be answered at the meeting.

Councillor Bond commented on the Flood Relief Fund, which held cash so that it could deal with an emergency. He asked if the Fund could pay out as much as was needed in an emergency.

Emma Duncan said that she understood this to be the case as this was the objective of the charity.

Councillor Bond said that he hoped Trustees were asking the right questions of charities, that benchmarking was done correctly and that the financial situation of each trust was secure.

Emma Duncan added that each body had an RBWM appointment, there was guidance shared with Trustees on what the role entailed. This could also be picked up as part of the induction process for new Members of the council in May 2023.

RESOLVED UNANIMOUSLY: That the Audit and Governance Committee noted the report.

RISK MANAGEMENT REPORT

Steve Mappley, Insurance and Risk Manager, said that the report was the usual update which was considered periodically by the Committee. Two risks had been removed, security and community problems arising from the actions of disenfranchised groups and the council's exposure to the Covid-19 pandemic. Following discussion with the Interim Chief Executive, the pandemic risk had been reinstated as a key risk. On the risk management audit, there would be a risk register refresh with senior managers in November, this would support what had been considered as the council's strategic risks. The risk management strategy had been rewritten, which considered the areas which the auditors had flagged. Risk management on Cabinet decision reports had been completed, a complete version of the risk register had been distributed to governance teams so that officers writing reports could refer to the register.

Councillor Sharpe asked if the risk on the financial implications of the adult social care reforms could now be removed as these reforms were no longer happening.

Adele Taylor felt that it was better to keep adult social care on the risk register, particularly as a significant portion of the budget was spent in this area and there was not yet any formal indication about changes to the reform timetable. If the reforms were delayed by a year, for example, there was a significant amount of work that would still need to be done.

Councillor Hilton, Cabinet Member for Asset Management & Commercialisation, Finance, and Ascot, said that the fear on adult social care was that the reforms could mean that the council needed to pick up a significant cost. The service was not static, the number of people coming into adult social care was increasing which created a budgetary risk. On Maidenhead regeneration, the council could shortly be entering into a Compulsory Purchase Order, which was again a significant risk. Once these were completed, the level of the risk could be changed.

Adele Taylor said that all risks were either reviewed on a monthly basis or at a frequency appropriate for the individual risk, as appropriate.

Councillor Sharpe felt that risks were being captured more cohesively than before.

The Chairman agreed, the report was understandable and clear. She understood that risks on the regeneration of Maidenhead were being reviewed, the Chairman asked if the council communicated with developers or the Property Company on these risks.

Adele Taylor said that the Property Company played a significant role in the regeneration project, risks were not a solo decision made by officers at the council.

The Chairman asked if there was input from private developers, particularly when considering the increases in interest rates and inflation.

Adele Taylor explained that the risk was currently more focused on the factors which the council had an influence over.

RESOLVED UNANIMOUSLY: That the Audit and Governance Committee noted the report.

MID-YEAR TREASURY MANAGEMENT REPORT 2022/23

Andrew Vallance, Head of Finance, said that the report outlined the mid-year treasury management performance, as required by the CIPFS treasury management code. On borrowing, the council had followed a strategy of taking out long term loans to combat the anticipated rise in interest rates. This could mean that there was no impact on the current years revenue account from the increased interest rates.

Councillor Hilton asked if the capital programme would be reviewed, considering the impact that the rise in interest rates would have.

Andrew Vallance said that he would make reference to this in the next agenda item, on next year's strategy.

Councillor Hilton noted that training would be provided by Arlingclose to Committee Members.

Andrew Vallance confirmed that Committee Members had received training from Arlingclose before the meeting, a training programme was scheduled which would allow training sessions to take place before Committee meetings. A training programme was also being arranged for next summer, after the election.

Councillor Story noted that there was a £20 million borrowing increase over the six month period, he asked if this was planned or unplanned.

Andrew Vallance explained that the type of borrowing was always under review, a decision had been made to borrow long term. The council had benefitted from short term rates for local authorities over the past few years, but borrowing had been spread over a number of years to distribute the risk.

Councillor Story followed up by asking what the expectation was from officers for the second half of the financial year. He asked if the £217 million borrowing figure would stay relatively level throughout the rest of the year.

For the second half of the year, Andrew Vallance said that RBWM had all of the borrowing which it needed. The level of borrowing would fluctuate by around £10 million or so, but not much more than that.

Councillor Sharpe asked what confidence officers had that interest rates would remain at a sustainable level.

Andrew Vallance said that officers did not expect the base rate to go significantly above 5%, as it should hit a ceiling.

Adele Taylor said that RBWM used Arlingclose as financial advisors, it was an unprecedented economic climate and therefore it was important that RBWM managed its cash flows effectively.

RESOLVED UNANIMOUSLY: That the Audit and Governance Committee noted the report and approved the mid-year Treasury Management Mid-Year Review Report 2022/23.

DRAFT TREASURY MANAGEMENT STRATEGY 2023/24

Andrew Vallance said that the increase in interest rates would have an effect on future years. If the interest rate stayed at 5%, the borrowing cost would increase from £4 million to £8 million. To provide reassurance, officers had factored half of this cost into the growth of the Medium Term Financial Plan. The capital programme would be reviewed to see which parts of the programme could slip to future years when the interest rate would be less. Members would see a draft capital programme as part of the draft budget which would be considered at Cabinet in November. High inflation and interest rates were likely to last longer than had initially been predicted by the Bank of England.

Adele Taylor said that there was a balance between forward borrowing to protect against rate changes and the cost of forward borrowing ahead of time. The capital programme needed to be reviewed regularly and assumptions tested.

Councillor Bond pointed out that there were three main risks which were all linked: inflation, interest rates and recession in the economy. It was a very uncertain environment, Councillor Bond asked if the capital review board was undertaking the review work. Councillor Bond felt that economic commentators were behind the curve on the rise in inflation, he hoped the same would not be true for interest rates.

Adele Taylor confirmed that the capital review board had responsibility for reviewing these items, which involved officers from across the council. The board was not a decision making body but brought together the officer expertise for decisions to be made at the appropriate level.

Councillor Hilton said that the liability benchmark was new, he asked if this could be explained to the Committee.

Andrew Vallance explained that it had been put in to show the risk if the council needed to borrow in the short term for cash flow purposes.

Councillor Hilton commented on some of the wording in the report which seemed to be contradictory. Adele Taylor confirmed that the wording would be reviewed and simplified.

ACTION – The Executive Director of Resources and the Head of Finance to review the wording on this section of the report.

Councillor Hilton asked if the additional £20 million which had been borrowed was included in the figures which were currently being discussed. He was informed that it had been factored in

The Chairman asked if the review of capital schemes was designed to try and decrease the amount of capital spending. She felt that it was a risk to the council.

Andrew Vallance confirmed that it was. Adele Taylor said that capital cashflows needed to be reviewed so that they accurately reflected projects that were taking place, projects could change over time along with the viability.

The Chairman welcomed the draft strategy, it was useful and clear.

RESOLVED UNANIMOUSLY: That Audit and Governance Committee noted and commented on:

- i) The Council's Treasury Management Strategy for 2023/24.
- ii) The Council's Prudential Indicators set out in Appendix C.

DRAFT CAPITAL STRATEGY 2023/24

Andrew Vallance said that the main piece of work that had been undertaken on the strategy was to link it to the council's Corporate Plan, which had been adopted towards the end of last year. He welcomed any comments that Committee Members had on the strategy.

Councillor Sharpe said that he hoped that economic climate would stabilise in the coming months, which would give the council some assurance as to what the interest rate would be.

The Chairman asked about reviewing and monitoring of capital projects, sometimes there was a change to a project which meant that it became unviable or was not planned to achieve the outcomes expected.

Adele Taylor said that projects went through the gateway processes but this could be strengthened.

Councillor Hilton said that he welcomed the strategy at it started to link the Corporate Plan with the capital strategy, this needed to reflect the priorities and goals in the plan. Investments could then be focused on the areas which had been agreed.

The Chairman said that capital projects were risky, she asked how officers could be sure that projects were self-funded and gave realistic payback.

Andrew Vallance said that this was the main business of the capital review board. Service areas put forward their capital bids and the board discussed whether bids were aligned with the Corporate Plan.

Adele Taylor said that it depended on each business case, some capital schemes could be relatively small. The capital review board managed the process of capital projects.

Councillor Hilton said that in the past few years there had been significant slippage, partly caused due to Covid. There was not always the resource in place to deliver projects, he asked if this was a factor which was considered by the capital review board.

Adele Taylor said that if service areas requested capital, they also needed to consider the resources which were required to deliver it. This was part of the business case which was put to the capital review board for consideration.

RESOLVED UNANIMOUSLY: That Audit and Governance Committee noted and commented on:

i) The Council's Draft Capital Strategy for 2023/24 as set out in Appendix B.

WORK PROGRAMME

The Chairman asked if there was any update on when the statement of accounts for 2020/21 would be considered.

Andrew Vallance said he was hopefully that they would be considered by the Committee at the next meeting in February 2023.

The meeting, which began at 7.00 pm, finishe	d at 8.25 pm
	CHAIRMAN
	DATE



Agenda Item 5

Report Title:	Appointment of Independent Persons to the Audit and Governance Committee
Contains	No - Part I
Confidential or	
Exempt Information	
Cabinet Member:	Councillor Hilton, Cabinet Member for Asset Management & Commercialisation, Finance and Ascot
Meeting and Date:	Audit and Governance Committee – 16 February 2023
Responsible	Adele Taylor, Executive Director, Resources
Officer(s):	Andrew Vallance, Head of Finance
Wards affected:	All



REPORT SUMMARY

The report recommends the appointment of up to two independent members of the Committee, in line with CIPFA guidance and forthcoming Government legislation. This report follows on from the briefing note on the Redmond Review discussed at the September 2022 meeting of this Committee.

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION:

- 1.1 That Audit and Governance Committee recommends to Council:
 - a) The appointment of up to two non-voting independent persons to the Audit and Governance Committee for a period of three years, commencing 1st July 2023 and that the Constitution be amended accordingly;
 - b) Authority is delegated to the Interim Chief Executive to establish a cross party selection panel, to advertise the positions and make the appointments.
- 1.2 That Audit and Governance Committee considers whether an allowance should be paid to the independent persons, and if so, make such a recommendation to Council.
- 1.3 That Audit and Governance Committee approves the role profile at Appendix A.
- 2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED
- 2.1 To comply with the latest CIPFA guidance on audit committees.

Options

Table 1: Options arising from this report

Option	Comments
To agree appointment of independent	This is the preferred option for the
members of the Committee	reasons set out in the report
This is the recommended option	
To not agree the appointment of	This would be counter to current
independent members	CIPFA guidance and likely future
	legislation.

3 BACKGROUND

- 3.1 In June 2022 the Chartered Institute of Public Finance and Accountancy (CIPFA) updated its position statement on audit committees in local authorities.
- 3.2 The position statement recommends that local authorities appoint at least two co-opted independent members to their audit committee, This recommendation addresses concerns raised in Sir Tony Redmond's 2020 Independent Review into the Oversight of Local Audit and the Transparency of Local Authority Financial Reporting which recommended "consideration being given to the appointment of at least one independent member, suitably qualified, to the Audit Committee".
- 3.3 In response to the Redmond review, the Government issued a consultation document. The consultation outcome document included the following statement:
 - "....based on the consultation feedback, we will be making Audit Committees, with at least one independent member, a mandatory requirement, once Parliamentary time allows. We will continue to consult with partners on how this should be implemented. In the intervening period, the Government would encourage local bodies to establish their arrangements in line with CIPFA's guidance, including appointing independent members."

Main Issues

- 3.4 The Audit and Governance Committee should be independent of executive decision-making and be able to provide objective oversight. It should have sufficient importance that its recommendations and opinions carry weight and have influence with the leadership team and those charged with governance.
- 3.5 To bolster its standing further, it is proposed to co-opt up to two suitably qualified and experienced independent persons who have specialist knowledge and insight, which, when partnered with elected members' knowledge of working practices and procedures, will add to the deliberations of, and the overall effectiveness of the Audit and Governance Committee.
- 3.6 The appointment of independent persons is supported by the statutory officers of the Council.

- 3.7 The benefits of appointing an independent person include:
 - Bringing a new approach to committee discussion through the injection of a fresh perspective and challenge
 - Bringing additional knowledge and expertise to the committee
 - The Council accepting that strong and robust independent challenge to its internal control framework and wider governance processes, including financial reporting, risk management and the work of internal audit, will increase its effectiveness
 - Reinforcing the political neutrality of the committee; and
 - Maintaining continuity and corporate memory for the committee where its membership is affected by the electoral cycle.
- 3.8 Independent appointments also send a powerful message to the electorate about both the openness of the Council and the independence of the committee.
- 3.9 There are a number of potential pitfalls in the appointment of an independent person that need to be considered. These include:
 - The potential over-reliance on the independent person by other committee members which can lead to a lack of engagement across the full committee
 - The independent person lacking organisational knowledge or context when considering reports
 - The effort that will be required from both the independent person and officers/staff to establish effective working relationships and establish appropriate protocols for briefings and access to information
 - Finding that despite undertaking a rigorous appointments process, the persons appointed are not suited to the role, requiring the selection process to be repeated; and
 - There being insufficient suitable applicants for the role.
- 3.10 The independent persons would be co-opted members of the Audit and Governance Committee and have no voting rights.

Appointment Process

- 3.11 The constitution does not currently allow for independent persons to be appointed to the committee. It would need to be amended to allow for their inclusion
- 3.12 In order to avoid any delay in the appointments process it is recommended that the Committee requests Council at its meeting 25th April 2023 to delegate arrangements for the appointment of independent co-opted persons to the Audit and Governance Committee, with the selection process delegated to the Interim Chief Executive/Chief Executive, in consultation with a cross party selection panel.

- 3.13 Recruitment would be on a competitive basis, including an open advertisement and interviews. A draft role profile is attached as **Appendix A**.
- 3.14 It is suggested that the Interim Chief Executive/Chief Executive is given delegated powers to undertake the appointment process.
- 3.15 The Committee's next meeting is due to be held on 30th May 2023. It is suggested that the appointment process should aim to be concluded ahead of that meeting.

Allowance

- 3.16 The independent persons would be reimbursed reasonable travelling and subsistence expenses. A decision needs to be made as to whether or not an annual allowance should also be paid. To meet the proposed timetable, any allowance would need to be agreed at the 25th April 2023 full Council meeting.
- 3.17 In order to attract people of the right calibre and with the necessary skills, it is suggested that an allowance is paid.

4 FINANCIAL DETAILS / VALUE FOR MONEY

4.1 The only financial cost would be the allowances paid to independent members.

5 LEGAL IMPLICATIONS

- 5.1 Section 102(3) of the Local Government Act 1972 stipulates that a committee which discharges a function of the Council can include co-opted members
- 5.2 Section 13(1) of the Local Government and Housing Act 1989 provides that a co-opted member of a committee established under section 102 of the Local Government Act 1972 as a committee that is discharging the functions of the Council, must be a non-voting member.
- 5.3 The Audit and Governance Committee discharges some functions of the Council (the review and approval of the annual statements of accounts and the approval of the Annual Governance Statement). Therefore, whilst co-opted members can be appointed to the Committee, they are unable to be given voting rights. Their involvement would be in a consultative manner, with their views being taken into account by voting members of the Committee.
- 5.4 The Constitution will need to be amended to allow for the co-option of independent persons to the Audit and Governance Committee. It is proposed that the Committee's terms of reference be amended to allow for the appointment of up to two co-opted independent, non-voting members.
- 5.5 The Local Authorities (Members' Allowances) (England) Regulations 2003 permit the Council to pay an allowance to a co-opted member of a committee.

6 RISK MANAGEMENT

6.1 The appointment of independent members should improve oversight of the Council's risk management arrangements.

7 POTENTIAL IMPACTS

- 7.1 Equalities. An Equality Impact Assessment is attached as **Appendix B**. A screening assessment has been completed which indicates the proposal does not have any equality impacts.
- 7.2 Climate change/sustainability. There are no impacts as a consequence of the decision.
- 7.3 Data Protection/GDPR. No personal data has been processed.

8 CONSULTATION

8.1 The Interim Chief Executive, Section 151 Officer, the Monitoring Officer and the Deputy Monitoring Officer have been consulted on the report.

9 TIMETABLE FOR IMPLEMENTATION

9.1 By 1 July 2023

10 APPENDICES

- 10.1 Appendix A Draft role profile
- 10.2 Appendix 2 EQIA

11 BACKGROUND DOCUMENTS

CIPFA Audit Committee Position Statement 2022
https://www.cipfa.org/-/media/Files/Services/Support-for-audit-committees/CIPFA-Audit-Committee-Position-Statement-2022.pdf

Government Response to Local Audit Framework technical consultation https://www.gov.uk/government/consultations/local-audit-framework-technical-consultation

The Redmond Review

https://www.gov.uk/government/publications/local-authority-financial-reporting-and-external-audit-independent-review

Audit and Governance Committee, September 2022 Briefing Note

12 CONSULTATION

Name of	Post held	Date	Date
consultee		sent	returned
Mandatory:	Statutory Officers (or deputies)		
Adele Taylor	Executive Director of	6/2/23	8/2/23
	Resources/S151 Officer		
Emma Duncan	Director of Law and Strategy /	6/2/23	8/2/23
	Monitoring Officer		
Deputies:			
Andrew Vallance	Head of Finance (Deputy S151	Report	
	Officer)	Author	
Elaine Browne	Head of Law (Deputy Monitoring	6/2/23	
	Officer)		
Others:			
Tony Reeves	Interim Chief Executive	6/2/23	7/2/23

Confirmation	Cabinet Member for Asset	Yes
relevant Cabinet	Management &	
Member(s)	Commercialisation, Finance and	
consulted	Ascot	

REPORT HISTORY

llow item?
now item:

Report Author:

Andrew Vallance, Head of Finance andrew.vallance@rbwm.gov.uk

Draft Role Profile

Audit and Governance Committee Independent Person

The Audit and Governance Committee is a key component of RBWM's corporate governance framework. The Committee reports to full Council and its purpose is to provide those charged with governance independent assurance of the adequacy of the risk management framework, the internal control environment and the integrity of the financial reporting and governance processes. The Committee also approves the annual statutory statement of accounts and associated documents on behalf of full Council. It plays a key role in overseeing internal and external audit.

We are looking to recruit a person who has both a desire to serve the local community, has knowledge of local government finance and who can demonstrate an ability to establish good working relationships with councillors and managers.

The independent person will support the Council's Audit and Governance Committee in its role of providing assurance to the elected members of RBWM, its citizens and stakeholders.

The Committee assists the Council by:

- Supporting good governance, strong financial management and effective internal and external audit
- Providing independent assurance on the adequacy of the internal control and governance arrangements within the Council
- Recommending the adoption of the Council's annual governance statement
- Reviewing and approving the financial statements

Job Purpose

As part of the Audit and Governance Committee your role will be:

- To be an independent source of support for the committee providing independent challenge and scrutiny of the reports presented to it
- To assist the Committee with scrutinising the annual Statement of Accounts prior to their approval
- To review the Council's corporate governance arrangements
- To receive reports and presentations from the Council's internal auditors, considering the main issues identified and monitoring management actions in response
- To receive and consider the external auditor's annual letter and relevant reports
- To consider the effectiveness and adequacy of the Council's risk management arrangements, the control environment and associated antifraud and anti-corruption arrangements
- To consider the adequacy of the action being taken by management on risk related issues identified by auditors and inspectors

Qualifications and Experience

The independent person should be able to demonstrate their independence from the Council, and should:

- Hold a professional or management qualification, for example in accountancy, internal audit, risk management or law; or
- Have relevant direct and recent experience of managing or working in a similar service area gained working in or with a large or public sector organisation; ideally with experience of serving on a committee or board.

Knowledge

The independent person should have knowledge of two or more of the following areas:

- Local Government including:-
 - Major functions
 - Challenges
 - o Governance structures and processes; and
 - Respective roles of members, officers and external parties
- The role and purpose of audit committees
- · Corporate governance including:
 - o The seven principles of the CIPFA/Solace Framework; and
 - o The requirements of the Annual Governance Statement
- Financial Management including:
 - o Principles of good financial management; and
 - The financial statements the Council must produce
- Internal audit including:-
 - The key principles of Public Sector Internal Audit Standards (PSIAS) and the Local Government Application Note (LGAN)
- External audit including:
 - o The role and functions of the external auditor
 - o The key reports and assurances that the external auditor provides; and
 - o Arrangements for appointment to and quality monitoring of the role
- · Risk Management including:-
 - The principles of risk management
 - o The principles of good fraud risk management practice; and
 - o The main areas of fraud and corruption risk for local authorities
- Ethical standards including:-
 - The Seven Principles of Public Life

Skills and Qualities

We are looking for people who have:

- A high level of integrity and inspire public confidence
- Ability to be objective, independent and impartial
- Knowledge and understanding of local government finances, risk management, corporate governance, and the roles of internal and external audit
- Good analytical skills and the ability to scrutinise financial information and processes and to challenge appropriately
- Good communication skills and the ability to contribute to discussions and ask questions
- The ability to work effectively within a team and build good relations with others in a committee setting
- A respect for confidentiality
- The ability to deal with issues of a sensitive nature in a diplomatic manner
- Knowledge/experience of local government or some other aspects of the public sector and/or of large, complex organisations at a senior level
- An awareness of the issues currently facing local government.

Eligibility for Appointment

In order to apply, you must have a local connection and/or live or carry out the main part of your work within the county of Berkshire.

You shall be required to abide by the Members Code of Conduct during the term of your employment.

Disqualification

Section 104 of the Local Government Act 1972 prohibits the Council appointing any person who is disqualified from being a member of the authority by virtue of section 80 of the same act. In addition, the Council has also added further disqualification criteria.

You will not be appointed as an Independent Person if you:

- Are a member or co-opted member or officer of the Council or a parish/town council in the Council's area
- Are a relative, or close friend of such a person
- Have been a member or co-opted member or officer of the Council or a parish/town council in the Council's area in the previous 5 years
- Have been convicted of any offence that has resulted in a sentence of imprisonment of 3 months or more
- Are an undischarged bankrupt
- Have significant business dealings with the Council

- Are actively engaged in a political party
- Have a proven history of vexatious and/or frivolous complaints against RBWM or be in debt or dispute
- Are a holder of a significant office in an organisation being grant aided or supported by the Council.

Commitment

The Audit and Governance Committee usually meets 5 times a year and you will be expected to attend these evening meetings in person. Meetings are generally held at Maidenhead Town Hall and last around 2 hours, starting at 7pm.

Taking into account reading and preparation time and attendance at the meeting itself, a commitment of an average of 5 hours a meeting is envisaged.

The appointed person will also be required to attend training events that are organised for the Audit and Governance Committee.

Remuneration

To be updated following Committee decision

The Independent Person will not be an employee of RBWM.

An allowance of £xxx per annum is payable. Reasonable travel expenses (where this is within the Berkshire area) would also be reimbursed.

How to apply

tbc

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Appointment of Independent Members to Audit & Governance Committee

Essential information

Items to be assessed: (please mark 'x')

Strategy	Plan	x Proje	ct	Service procedure	
Responsible officer	Andrew Valance	Service area	Finance Di	irectorate Reso	ources

Stage 1: EqIA Screening (mandatory)

Date created: 8/2/23

Stage 2 : Full assessment (if applicable)

Date created : NA

Approved by Head of Service / Overseeing group/body / Project Sponsor:

"I am satisfied that an equality impact has been undertaken adequately."

Signed by (print): Andrew Vallance

Dated: 8/2/2023

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Appointment of Independent Members to Audit & Governance Committee

Guidance notes

What is an EqIA and why do we need to do it?

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advancing equality of opportunity between those with 'protected characteristics' and those without them.
- Fostering good relations between those with 'protected characteristics' and those without them.

EqIAs are a systematic way of taking equal opportunities into consideration when making a decision, and should be conducted when there is a new or reviewed strategy, policy, plan, project, service or procedure in order to determine whether there will likely be a detrimental and/or disproportionate impact on particular groups, including those within the workforce and customer/public groups. All completed EqIA Screenings are required to be publicly available on the council's website once they have been signed off by the relevant Head of Service or Strategic/Policy/Operational Group or Project Sponsor.

What are the "protected characteristics" under the law?

The following are protected characteristics under the Equality Act 2010: age; disability (including physical, learning and mental health conditions); gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

What's the process for conducting an EqIA?

The process for conducting an EqIA is set out at the end of this document. In brief, a Screening Assessment should be conducted for every new or reviewed strategy, policy, plan, project, service or procedure and the outcome of the Screening Assessment will indicate whether a Full Assessment should be undertaken.

Openness and transparency

RBWM has a 'Specific Duty' to publish information about people affected by our policies and practices. Your completed assessment should be sent to the Strategy & Performance Team for publication to the RBWM website once it has been signed off by the relevant manager, and/or Strategic, Policy, or Operational Group. If your proposals are being made to Cabinet or any other Committee, please append a copy of your completed Screening or Full Assessment to your report.

Enforcement

Judicial review of an authority can be taken by any person, including the Equality and Human Rights Commission (EHRC) or a group of people, with an interest, in respect of alleged failure to comply with the general equality duty. Only the EHRC can enforce the specific duties. A failure to comply with the specific duties may however be used as evidence of a failure to comply with the general duty.

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Appointment of Independent Members to Audit & Governance Committee

Stage 1 : Screening (Mandatory)

1.1 What is the overall aim of your proposed strategy/policy/project etc and what are its key objectives?

That Audit and Governance Committee recommends to Council:

- a) The appointment of up to two non-voting independent persons to the Audit and Governance Committee for a period of three years, commencing 1st July 2023 and that the Constitution be amended accordingly;
- b) Authority is delegated to the Interim Chief Executive to establish a cross party selection panel, to advertise the positions and make the appointments.
- 1.2 That Audit and Governance Committee considers whether an allowance should be paid to the independent persons, and if so, make such a recommendation to Council.
- 1.3 That Audit and Governance Committee approves the role profile at Appendix A.

EqIA: Appointment of Independent Members to Audit & Governance Committee

1.2 What evidence is available to suggest that your proposal could have an impact on people (including staff and customers) with protected characteristics? Consider each of the protected characteristics in turn and identify whether your proposal is Relevant or Not Relevant to that characteristic. If Relevant, please assess the level of impact as either High / Medium / Low and whether the impact is Positive (i.e. contributes to promoting equality or improving relations within an equality group) or Negative (i.e. could disadvantage them). Please document your evidence for each assessment you make, including a justification of why you may have identified the proposal as "Not Relevant".

EqIA: Appointment of Independent Members to Audit & Governance Committee

Protected characteristics	Relevance	Level	Positive/negative	Evidence
Age				
	Not			
	Relevant			
Disability	Not			
_	Relevant			
Gender re-	Not			
assignment	Relevant			
Marriage/civil	Not			
partnership	Relevant			
Pregnancy and	Not			
maternity	Relevant			
Race	Not			
	Relevant			
Religion and belief	Not			
	Relevant			
Sex	Not			
	Relevant			
Sexual orientation	Not			
	Relevant			

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Appointment of Independent Members to Audit & Governance Committee

Outcome, action and public reporting

Screening Assessment Outcome	Yes / No / Not at this stage	Further Action Required / Action to be taken	Responsible Officer and / or Lead Strategic Group	Timescale for Resolution of negative impact / Delivery of positive impact
Was a significant level of negative impact identified?	No	Not at this stage		
Does the strategy, policy, plan etc require amendment to have a positive impact?	No	Not at this stage		

If you answered **yes** to either / both of the questions above a Full Assessment is advisable and so please proceed to Stage 2. If you answered "No" or "Not at this Stage" to either / both of the questions above please consider any next steps that may be taken (e.g. monitor future impacts as part of implementation, rescreen the project at its next delivery milestone etc).

EqIA: Appointment of Independent Members to Audit & Governance Committee

.1.1 Who are the main argeting/aimed at.	eneficiaries of the proposed	strategy / policy / plan / pro	ject / service / procedure? L	ist the groups who the work i
1.2 Who has been involver is targeting/aimed at.	lved in the creation of the pro	pposed strategy / policy / pl	an / project / service / proced	lure? List those groups who th

EqIA: Appointment of Independent Members to Audit & Governance Committee

2.2 : Information gathering/evidence

.2.1 What second	lary data have you used	d in this assessment?	Common sources of s	secondary data include:	censuses, organisation	onal records.
	ry data have you used t	o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, foo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
a.2.2 What primai		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo
		o inform this assessm	ent? Common source	es of primary data includ	de: consultation throug	gh interviews, fo

EqIA: Appointment of Independent Members to Audit & Governance Committee

Eliminate discrimination, harassment, victimisation

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Appointment of Independent Members to Audit & Governance Committee

Advance equality of opportunity

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

EqIA: Appointment of Independent Members to Audit & Governance Committee

Foster good relations

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

2.4 Has your delivery plan been updated to incorporate the activities identified in this assessment to mitigate any identified negative impacts? If so please summarise any updates.

These could be service, equality, project or other delivery plans. If you did not have sufficient data to complete a thorough impact assessment, then an action should be incorporated to collect this information in the future.

EqIA: Appointment of Independent Members to Audit & Governance Committee

Agenda Item 6

Report Title:	Internal Audit Progress Report Q3 2022/23
Contains	No - Part I
Confidential or	
Exempt Information	
Cabinet Member:	Councillor Hilton, Cabinet Member for Asset
	Management & Commercialisation, Finance
	and Ascot
Meeting and Date:	Audit and Governance Committee – 16
	February 2023
Responsible	Adele Taylor, Executive Director, Resources
Officer(s):	Andrew Vallance, Head of Finance
Wards affected:	All



REPORT SUMMARY

The report is the third progress report on the internal audit plan for 2022/23 agreed at the May 2022 meeting. It will be presented by the Council's internal auditors, South West Audit Partnership (SWAP).

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Audit and Governance Committee notes the report

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

2.1 To ensure that the internal audit programme for 2022/23 is progressing as planned.

Options

Table 1: Options arising from this report

Option	Comments
To agree the Internal Audit Progress	This is the preferred option for the
report	reasons set out in the report
This is the recommended option	

3 BACKGROUND

- 3.1 The October 2021 meeting of Audit and Governance Committee recommended to Cabinet that the Council should become a member of the South West Audit Partnership (SWAP). Cabinet ratified this decision in November 2021.
- 3.2 SWAP therefore took over the role of the Council's internal auditors from 1 April 2022.

- 3.3 SWAP's audit plan for April to June 2022 was approved at the February 2022 meeting of this committee. A plan for the whole of 2022/23 was agreed at the May 2022 meeting.
- 3.4 A progress report on Quarter 3 is attached as **Appendix 1.**
- 3.5 Key staff from SWAP will attend the meeting to present the report.

4 FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no direct financial consequences arising from this report.

5 LEGAL IMPLICATIONS

5.1 None.

6 RISK MANAGEMENT

6.1 SWAP have undertaken a review of current risk management arrangements as part of this report.

7 POTENTIAL IMPACTS

- 7.1 Equalities. An Equality Impact Assessment is attached as **Appendix 2**. A screening assessment has been completed which indicates the proposal does not have any equality impacts.
- 7.2 Climate change/sustainability. There are no impacts as a consequence of the decision.
- 7.3 Data Protection/GDPR. No personal data has been processed.

8 CONSULTATION

8.1 The Head of Paid Service, the Section 151 Officer, the Monitoring Officer and the Deputy Monitoring Officer have been consulted on the report.

9 TIMETABLE FOR IMPLEMENTATION

9.1 By 31 March 2023

10 APPENDICES

- 10.1 Appendix 1 Internal Audit Progress Report Q3 2022/23
- 10.2 Appendix 2 EQIA

11 BACKGROUND DOCUMENTS

11.1 None

12 CONSULTATION

Name of	Post held	Date	Date
consultee		sent	returned
Mandatory:	Statutory Officers (or deputies)		
Adele Taylor	Executive Director of	3/2/23	3/2/23
	Resources/S151 Officer		
Emma Duncan	Deputy Director of Law and	3/2/23	8/2/23
	Strategy / Monitoring Officer		
Deputies:			
Andrew Vallance	Head of Finance (Deputy S151	Report	
	Officer)	Author	
Elaine Browne	Head of Law (Deputy Monitoring	3/2/23	
	Officer)		

Confirmation	Cabinet Member for Asset	Yes
relevant Cabinet	Management &	
Member(s)	Commercialisation, Finance and	
consulted	Ascot	

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
Audit and	No	No
Governance		
Committee for		
Noting		

Report Author:	
Andrew Vallance, Head of Finance	andrew.vallance@rbwm.gov.uk





Royal Borough of Windsor and Maidenhead

Report of Internal Audit Activity

Progress Report- February 2023

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Reviews completed in the period

- 5 limited assurance audits
- 2 reasonable assurance audits
- 4 grant certifications
- 2 advisory reports



Progress to date

On track to deliver plan:

- 57% reviews at final/report stage
- 19% in progress



Follow-ups in the period

Two follow-up audits completed. One yet to start.



Plan Changes

- 4 grant audits added to plan
- 4 audits deferred



Range of innovations and enhancements made to our internal audit process throughout the year

Data analytics continues to drive/support reviews; comparative benchmarking exercises offer useful insight and suggested practices.

Internal Audit Assurance Opinions 2022/23					
Feb YTD					
Substantial	0	0			
Reasonable	2	3			
Limited	5	7			
No Assurance	0	0			
Total	7	10			

Internal Audit Agreed Actions 2022/23					
	Feb	YTD			
Priority 1	13	18			
Priority 2	13	24			
Priority 3	15	24			
Total	41	66			



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We will also provide details of any significant risks that we have identified in our work, along with the progress of mitigating significant risks previously identified through audit activity.

The contacts at SWAP in connection with this report are:

Lisa Fryer

Assistant Director lisa.fryer@swapaudit.co.uk

David Hill

Chief Executive david.hill@swapaudit.co.uk



Summary

Introduction

This 2022/23 progress report allows monitoring against the plan agreed by this Committee in May 2022. The plan remains necessarily flexible and some new grant and advisory work has been added. The schedule provided at **Appendix D** details progress made to date and new work agreed.

Each completed assignment includes its respective "assurance opinion" rating together with the number and relative ranking of recommendations that have been raised with management. In such cases, the Committee can take assurance that improvement actions have been agreed with management to address these. The assurance opinion ratings have been determined in accordance with the Internal Audit "Audit Framework Definitions" as detailed at **Appendix A** of this document.

To assist the Committee in its important monitoring and scrutiny role, in those cases where weaknesses have been identified in service/function reviews that are considered to represent significant service risks, a summary of the key audit findings that have resulted in them receiving a 'limited Assurance Opinion' is given as part of this report in **Appendix B.**

A follow-up review is performed in respect of all limited assurance opinion audits. This is important to provide evidence that recommendations have been implemented to reduce areas of risk identified. The results of follow-up reviews performed in the period can be found in **Appendix C**. There were no finalised follow-up audits during this period.

In circumstances where findings have been identified which are considered to represent significant corporate risks to the Council, due to their importance, these issues are separately summarised. Due to the number and significance of the findings, the **Contract Management audit** has reported a significant corporate risk. The audit reported ineffective contract management and monitoring arrangements. See **Appendix B** for further details.



Internal Audit Plan Update

Our audit plan coverage assessment is designed to provide an indication of whether we have provided sufficient, independent assurance to monitor the organisation's risk profile effectively.

For those areas where no audit coverage is planned, assurance should be sought from other sources to provide a holistic picture of assurance against key risks.

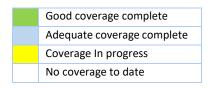


SWAP audit plan coverage across strategic risks

The table below provides a summary of how our completed audits and work in progress to date this year provides assurance over key strategic risks areas in the Internal Audit Plan. As the year builds and more work is completed, coverage across the key risk areas will increase. 'Adequate' coverage reflects delivery of planned assurance levels.

The strategic risk register is undergoing a refresh currently and a number of changes to the strategic risks below are expected.

Strategic Risk	Coverage
Maidenhead Regeneration	
Children's to Adults Services Transition	
Covid and Economic recovery	Economic Development
Failure to protect residents in an emergency situation	
Threat of a terrorist act	
Effectiveness of Financial Strategy	Schools Financial Management,
	corporate debt management
Failure of Council owned companies/major contractors	Contract Management
Information Management	Records Management
Data Protection/Data Security Breach	CyberSecurity Framework Review
IT Infrastructure Failure	ICT Governance Risk Review



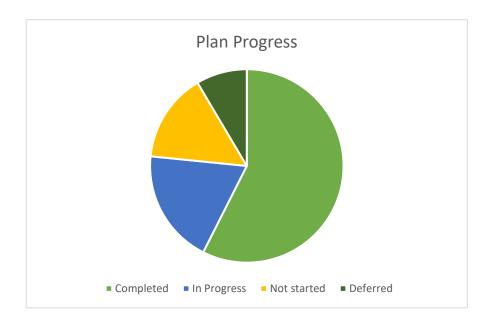


Internal Audit Plan Update

We will build our audit plan as the year progresses to ensure that we are auditing the right things at the right time.



Progress Year to Date



We are currently on track to deliver our programme of work with 57% of audit work now complete. Resources available are assessed to be sufficient to complete work in progress as well as that yet to start.



	Assurance Do	Assurance Definitions				
	No Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.					
	Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited				
There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for important were identified which may put at risk the achievement of objectives in the area audited.		There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.				
		A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to				

Definition of Corporate Risks				
Risks Reporting Implications				
High	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.			
Medium	Issues which should be addressed by management in their areas of responsibility.			
Issues of a minor nature or best practice where s improvement can be made.				

support the achievement of objectives in the area audited.

Categorisation of Recommendations				
	the corporate risk assessment it is important that management know			
•	t the recommendation is to their service. Each recommendation has riority rating at service level with the following definitions:			
Priority 1	Findings that are fundamental to the integrity of the service's business processes and require the immediate attention of management.			
Priority 2	Important findings that need to be resolved by management.			
Priority 3	Finding that requires attention.			



Decisions that do not comply with delegated authority levels will not be valid and therefore open to challenge, resulting in potential legal costs and reputational damage. Risks Reviewed Decisions that do not comply with delegated authority levels will not be valid and therefore open to challenge, resulting in potential legal costs and reputational damage. Limited Priority Actions 1 2 3 Total

The Monitoring Officer requested that SWAP conduct this review as part of the 2022/23 Internal Audit Plan.

Key Findings

- The RBWM Scheme of Delegation criteria is currently very broad, which means that every delegated decision, irrespective of any financial value or impact on any number of individuals, must be recorded. To achieve better compliance, it was agreed that the Authority conduct a cross-service review to determine more specific criteria for decisions that must be recorded.
- The current Scheme of Delegation addendum for the Place directorate is out date and the delegations within other directorates have not been fully documented.
- A staff survey identified that awareness of the current Officer Decision Form process is low, even though half of the respondents make decisions monthly or more often.
- There is currently no available corporate training for staff to complete.



		Risks Reviewed	timited		Priority	Actions	
Records Management	Records are not classified, stored, secured, transmitted or disposed of in accordance with local requirements and legislation, resulting in potential financial losses, breaches,	No Substantial	1	2	3	Total	
		fines, legal action, reputational damage, and inaccessibility to staff.	Limited	4	1	2	7

Key Findings

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- The council does not have an approved Records Management Policy or an up-to-date Data Protection Policy.
- The council does not have a Data Retention Schedule or Policy. The council could be holding personal data for longer than is legally necessary; therefore, not complying with the Data Protection Act 2018.
- The council does not have an overarching Information Asset Register. It is important for the council to know and fully understand what information it holds in order to protect it.



Limited Assurance Audits Appendix B

Contract Management was identified by Senior Management as a known area of weakness, and we were asked that this be included as a priority review in our first internal audit plan. It will be important to implement the findings from this report to enable a framework of contract management to be fully established and embedded. The agreed actions from this review will be the subject of a follow-up audit in the 2023/24 internal audit plan to ensure progress towards this can be assessed.



High Corporate Risk

Due to the number and significance of the findings, the risks reviewed above as part of this Contract Management audit fall into this category.

Corporate Findings

The overriding weakness identified from the audit is the lack of a contract management framework and guidance. This has meant that staff are unclear of their contract management responsibilities and non-compliance with the Council's and wider regulations have been identified as a result. The Council needs to put this detailed guidance in place and reinforce with contract management training for all relevant staff.

Issues were also reported in relation to the completeness and accuracy of the Council's Contract Register that needs to addressed.

Temporary Agency Staff Contract Findings

Almost all temporary agency expenditure is off contract, not via the corporate contract.



Limited Assurance Audits Appendix B

	Risks Reviewed			Priority	Actions	
Adults Direct Payments	1. Direct Payments are not appropriately reviewed, resulting in reputational and financial loss to the Council.	Reasonable No Substantial	1	2	3	Total
	2. The personalisation principles of the Care Act may not be delivered due to missed opportunities for offering Direct Payments.		4	5	1	10

A direct payment is money paid directly to an individual by Adult Social Care Services so they can arrange their own support instead of receiving social care services arranged by the Council. We were requested by the Council to undertake this audit because the Authority has a low number of Direct Payments in terms of national averages. At the time of the review there were 115 direct payments currently in place, which is approximately 10.5% of all clients receiving services.

Key Findings

- Direct Payments may be disincentivised by the rate paid being low in comparison to those typically charged across the local care market. There is a lack of data available for management to identify such cases.
- The due diligence monitoring of Direct Payment expenditure by clients is behind schedule, due to both non-receipt of returns by clients and a shortage of staff to carry out checking. The recording of reconciliations does not identify the reason for delay.
- Direct Payment clients may be under or overpaid due to staff input errors and confusion regarding the correct rates. There are no system controls in place to prevent or identify errors.
- Social Care staff lack of knowledge and confidence in the Direct Payment process may compromise the ability of the Council to promote and maximise them. There is a lack of training, and guidance requires improvement. The teams who manage the initial administration and the ongoing financial processes are not effectively co-ordinated.



	Risks Reviewed	Lamited		Priority	Actions	
Adults Financial Assessments	Financial assessments may be inaccurate and/or delayed, leading to a failure or adverse impacts on clients.	No Substantial Limited	1	2	3	Total
			0	3	3	6

We have given an assurance opinion of limited for this audit, but it is important to note that the findings do not indicate that there are significant issues with accurate or timely assessments. It is however the wider control framework that is not sufficient to prevent against delays and errors. Several of the deficiencies are due to the Adults system, Paris, which has a number of limitations and is due for replacement by October 2023.

Key Findings



- a) Ensure only quality referrals are submitted and
- b) Enable the monitoring of timely referrals.
- The financial assessments team do not currently employ any quality processes to provide assurance on the accuracy of assessments completed.
- Key performance indicators are not in place to monitor the accuracy or timeliness of assessments completed.



Follow-up Audits Appendix C

	Scope and Objective		Р	rogress Summar	γ	
	To provide assurance that the agreed		Completed	In progress	Not Started	Total
Housing Income	actions to mitigate against risk exposure,	Priority 1	0	0	0	0
	identified within the 2021/22 audit of	Priority 2	1	2	0	3
	Housing Income, have been implemented.	Priority 3	8	3	0	11
		Total	9	5	0	14

The original audit was completed in November 2021 under the shared service arrangement with Wokingham Borough Council. The audit received the following audit opinion: Range of Risk Mitigation Controls is incomplete, and risks are not effectively mitigated.

The Council has introduced a new Accommodation Rent Accounting (ARA) system since the previous audit review. This has replaced the need for spreadsheets meaning that risks relating to invoices for accommodation, the receipt and allocation of temporary accommodation income and those relating to housing benefit claims have been mitigated.

This follow up audit review has found that nine of the 14 actions from the previous audit review have been completed. Revised implementation dates have been provided for the five actions which remain in progress.



Follow-up Audits Appendix C

All Saints C of E Junior School – Financial & Administration Framework

	S	cope and O	bjectiv	/e		
То	provide	assurance	that	the	agre	ed
act	ions to m	nitigate aga	ainst ri	sk ex	posu	re,
ide	ntified w	ithin the	2021/	22 a	udit	of
Но	using Inco	me, have b	een in	nplen	nente	d.

	Progress Summary					
р		Completed	In progress	Not Started	Total	
٠,	Priority 1	0	0	0	0	
f	Priority 2	5	0	0	5	
	Priority 3	36	2	0	38	
	Total	41	2	0	43	

The original audit was completed in December 2021 under the shared service arrangement with Wokingham Borough Council. The audit received the following audit opinion: Range of Risk Mitigation Controls is incomplete, and risks are not effectively mitigated.

Following the internal audit review, the school had an Ofsted inspection. This resulted in changes to the governance arrangements within the school; with the dissolution of the governing body and the establishment of the Interim Strategic Management Operational Board. The school is also set to become a sponsored academy from the beginning of 2023. In the meantime, the school arranged for the School Business Manager from Courthouse Junior School to carry out essential financial tasks, one day a week.

The school has put in place new budget monitoring arrangements and has updated its Finance Policy, Lettings Policy, Purchasing Policy, purchase order and purchasing card processes. This, together with the skills and expertise now available on the Interim Strategic Management Operational Board, provides assurance that the school is in a better financial position for its change to academy status.

We have assessed that 41 of the 43 actions from the original audit have been completed. The school has provided the names of the responsible officers and revised implementation dates for the remaining two actions.





	Audit Tupo	Audit Area	No of Rec	1 = Major	*	3 = Medium		
	Audit Type	Audit Area	Status	Opinion		Recommend		
						1	2	3
		Comple	te			***************************************		
	Grant	Local Enterprise Partnership (LEP) Core Growth Hub	Final	Certified				
	Grant	Local Enterprise Partnership (LEP) Peer Networks	Final Certified					
	Grant	New - Contain Outbreak Management Fund (COMF)	Final	nal Certified				
	Grant	New - Test and Trace Support Payment Scheme Funding	Final	Final Certified				
	Operational	Fleet Safety Compliance Checks	Final	Final Limited		2	2	2
51	Governance	Climate Change - Governance Arrangements	e Change - Governance Arrangements Final Reasonable		5	0	2	3
	Operational	Risk Management	gement Final Limited		14	3	7	4
	Grant	Disabled Facilities Grant (DFG)	ant (DFG) Final Certified					
	Grant	Bus Service Operator Grant (BSOG)	Final	Certified				
	Grant	New – Universal Drug Treatment	Final	Certified				
	Advisory	New - NFI Advisory Report	Final N/A					
	Governance	Baseline Assessment of Maturity in Relation to Fraud	Final	Advisory	Foui	nd to requ	ire impro	ovement
	Governance	ICT Governance Risk Review	Final	Advisory Some significant findings			dings	
	Operational	Schools Financial Management	Final	Final Reasonable 6		0	0	6
	Financial	Pension Fund Investments	Final	Reasonable	2	0	0	2
	Governance	Delegated Decision Making	Final	Limited	10	5	4	1



Summary of Audit Work Appendix D

	Audit Tura	Adit Area	Chahua	Oninian	No of Rec	1 = Major	*	3 = Medium
	Audit Type	Audit Area	Status	Opinion			commen	
						1	2	3
	Governance	Records Management	Final	Limited	7	4	1	2
	Governance	Contract Management	Draft	Limited	20	6	11	3
	Operational	Adults Direct Payments	Final	Limited	10	4	5	1
	Operational	Adults Financial Assessments	Final	Limited	Limited 6 0 3			3
	Follow-up	Housing Income	Final	N/A	Risk reduced - No further work required			
	Follow-up	All Saints C of E Junior School Financial and Administration Framework	Final	N/A	Risk reduced - No further work required			ner work
	Grant	Green Homes Grant	Final	Certified				
52	Grant	nt Local Transport Capital Funding Grant		Certified				
	Grant	New - Adult Weight Management Services Grant	Final	Certified				
	Grant	New - ITT Training Bursary	Final	Certified				
		Reportii	ng			<u> </u>		
	Financial Corporate Debt Management		Draft					
		In progre	ess	.t.	i			
	Operational	Supporting Families Grant	Ongoing					
	Governance	National Fraud Initiative (NFI)	Ongoing					
	Operational	Homelessness Strategy	In progress					
	Operational	In progress						



Summary of Audit Work Appendix D

	Audit Type	Audit Area	Status	Opinion	No of Rec	1 = Major	commen	3 = Medium
						1	2	3
	Governance	CyberSecurity Framework Review	In progress					
	Governance	Fraud Risk Assessment	In progress					
	Advisory	Adults - Safeguarding	In progress					
	Finance	New - Accounts Payable	In progress					
	Operational	Economic Development	In progress	gress				
		Waiting to	Start					·
သ ည	Follow-up	Cash and Bank Reconciliation	Waiting to start					
	Operational	Public Health – Drug and Alcohol Contract	Waiting to start					
•	Governance	Medium Term Financial Plan (MTFP)	Waiting to start					
	Operational	Children's to Adult's services transition. (Joint AfC audit).	Waiting to start					
	Governance	Fraud Training	Waiting to start					
	Governance	Business Continuity Planning	Waiting to start					
	Operational	AfC/Optalis Contract Management	Waiting to start					



Audit Type	Audit Area	Status	Opinion	No of Rec	1 = Major Re	commen	3 = Medium dation	
					1	2	3	
	Deferred							
Operational	Children's – Strategic Commissioning SEND	Deferred	Deferred until 23/24 at service request. Resources released for additional grant work.					
Operational	Children's - Strategic Review of Early Intervention	Deferred	Deferred until 23/24 due to inappropriate timing.					
Finance	Management of the Capital Budget	Deferred	Deferred until 23/24. Resources released for Accounts Payable review.					
Governance	Procurement	Deferred	Deferred until 23/24 at service request to allow them to focus on Contract Management.				ow them to	





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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Essential information

Items to be assessed: (please mark 'x')

Strategy	Plan	Pr	oject	Service procedure	X
Responsible officer	Andrew Vallance	Service area	Finance	Directorate	Resources
Stage 1: EqIA Screen	ning (mandatory) Date cre	eated: 3/2/2023	Stage 2 : Full assessme	ent (if applicable) Date cre	eated : NA

Approved by Head of Service / Overseeing group/body / Project Sponsor:

"I am satisfied that an equality impact has been undertaken adequately."

Signed by (print): Andrew Vallance

Dated: 3/2/2023

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Guidance notes

What is an EqIA and why do we need to do it?

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advancing equality of opportunity between those with 'protected characteristics' and those without them.
- Fostering good relations between those with 'protected characteristics' and those without them.

EqIAs are a systematic way of taking equal opportunities into consideration when making a decision, and should be conducted when there is a new or reviewed strategy, policy, plan, project, service or procedure in order to determine whether there will likely be a detrimental and/or disproportionate impact on particular groups, including those within the workforce and customer/public groups. All completed EqIA Screenings are required to be publicly available on the council's website once they have been signed off by the relevant Head of Service or Strategic/Policy/Operational Group or Project Sponsor.

What are the "protected characteristics" under the law?

The following are protected characteristics under the Equality Act 2010: age; disability (including physical, learning and mental health conditions); gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

What's the process for conducting an EqIA?

The process for conducting an EqIA is set out at the end of this document. In brief, a Screening Assessment should be conducted for every new or reviewed strategy, policy, plan, project, service or procedure and the outcome of the Screening Assessment will indicate whether a Full Assessment should be undertaken.

Openness and transparency

RBWM has a 'Specific Duty' to publish information about people affected by our policies and practices. Your completed assessment should be sent to the Strategy & Performance Team for publication to the RBWM website once it has been signed off by the relevant manager, and/or Strategic, Policy, or Operational Group. If your proposals are being made to Cabinet or any other Committee, please append a copy of your completed Screening or Full Assessment to your report.

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Enforcement

Judicial review of an authority can be taken by any person, including the Equality and Human Rights Commission (EHRC) or a group of people, with an interest, in respect of alleged failure to comply with the general equality duty. Only the EHRC can enforce the specific duties. A failure to comply with the specific duties may however be used as evidence of a failure to comply with the general duty.

Stage 1 : Screening (Mandatory)

1.1 What is the overall aim of your proposed strategy/policy/project etc and what are its key objectives?

The report is the third progress report on the internal audit plan for 2022/23 agreed at the May 2022 meeting. It will be presented by the Council's new internal auditors, South West Audit Partnership (SWAP).

DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Audit and Governance Committee notes the report

1.2 What evidence is available to suggest that your proposal could have an impact on people (including staff and customers) with protected characteristics? Consider each of the protected characteristics in turn and identify whether your proposal is Relevant or Not Relevant to that characteristic. If Relevant, please assess the level of impact as either High / Medium / Low and whether the impact is Positive (i.e. contributes to promoting equality or improving relations within an equality group) or Negative (i.e. could disadvantage them). Please document your evidence for each assessment you make, including a justification of why you may have identified the proposal as "Not Relevant".

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqlA: Internal Audit Progress Report Q3 2022/23

Protected	Relevance	Level	Positive/negative	Evidence
characteristics				
Age				Further EQIAs will be produced at later stages on detailed budget
	Not			proposals and the overall budget
	Relevant			
Disability	Not			
_	Relevant			
Gender re-	Not			
assignment	Relevant			
Marriage/civil	Not			
partnership	Relevant			
Pregnancy and	Not			
maternity	Relevant			
Race	Not			
	Relevant			
Religion and belief	Not			
	Relevant			
Sex	Not			
	Relevant			
Sexual orientation	Not			
	Relevant			

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Outcome, action and public reporting

Screening Assessment Outcome	Yes / No / Not at this stage	Further Action Required / Action to be taken	Responsible Officer and / or Lead Strategic Group	Timescale for Resolution of negative impact / Delivery of positive impact
Was a significant level of negative impact identified?	No	Not at this stage		
Does the strategy, policy, plan etc require amendment to have a positive impact?	No	Not at this stage		

If you answered **yes** to either / both of the questions above a Full Assessment is advisable and so please proceed to Stage 2. If you answered "No" or "Not at this Stage" to either / both of the questions above please consider any next steps that may be taken (e.g. monitor future impacts as part of implementation, rescreen the project at its next delivery milestone etc).

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Stage 2 : Full assessment

2.1 : Scope and define

2.1.1 Who are the main beneficiaries of the proposed strategy / policy / plan / project / service / procedure? List the groups who the work is targeting/aimed at.

EQUALITY IMPACT ASSESSMENT

EqlA: Internal Audit Progress Report Q3 2022/23

2.1.2 Who has been involved in the creation of the proposed strategy / policy / plan / project / service / procedure? List those groups who the work is targeting/aimed at.
2.2 : Information gathering/evidence
2.2.1 What secondary data have you used in this assessment? Common sources of secondary data include: censuses, organisational records.

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

2.2.2 What primary data have you used to inform this assessment? groups, questionnaires.	Common sources of primary data include: consultation through interviews, focus

Eliminate discrimination, harassment, victimisation

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EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

Advance equality of opportunity

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

Foster good relations

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

2.4 Has your delivery plan been updated to incorporate the activities identified in this assessment to mitigate any identified negative impacts? If so please summarise any updates.

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Progress Report Q3 2022/23

These could be service, equality, project or other delivery plans. If you did not have sufficient data to complete a thorough impact assessment, then an action should be incorporated to collect this information in the future.

Report Title:	Internal Audit Plan 2023/24
Contains	No - Part I
Confidential or	
Exempt Information	
Cabinet Member:	Councillor Hilton, Cabinet Member for Asset
	Management & Commercialisation, Finance
	and Ascot
Meeting and Date:	Audit and Governance Committee – 16
	February 2023
Responsible	Adele Taylor, Executive Director, Resources
Officer(s):	Andrew Vallance, Head of Finance
Wards affected:	All



REPORT SUMMARY

The report recommends an internal audit plan for 2023/24. It will be presented by the Council's internal auditors, South West Audit Partnership (SWAP).

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Audit and Governance Committee notes the report and:

APPROVES the Internal Audit Plan for 2023/24

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

2.1 To ensure that the internal audit programme for 2023/24 is agreed.

Options

Table 1: Options arising from this report

Option	Comments
To agree the Internal Audit Plan	This is the preferred option for the
This is the recommended option	reasons set out in the report

3 BACKGROUND

- 3.1 South West Audit Partnership (SWAP) took over the role of the Council's internal auditors from 1 April 2022.
- 3.2 An Internal Audit Plan for 2023/24 has been drawn up after discussions with the Head of Finance and Directors and is attached as **Appendix 1**.

- 3.3 The Internal Audit Plan provides the basis of the annual internal audit opinion of the Authority's risk management, governance and control environment. To achieve this the plan needs to provide sufficient coverage across the Council's key risks and core processes.
- 3.4 The strategic risk register has recently been updated to reflect the revised corporate plan goals. The Internal Audit Plan has been built around the new risk register to ensure that resources are directed to the areas where internal audit can offer the most value and insight.
- 3.5 The importance of a strong framework of core processes and compliance with this is recognised by the Council. A focus on these core processes has also been agreed for 2023/24 and to support this a Healthy Organisation review has been included. This strategic overview provides an objective assessment of the management control framework or 'health' of an organisation against nine corporate themes.
- 3.6 Key staff from SWAP will attend the meeting to present the plan.

4 FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no direct financial consequences of this decision.

5 LEGAL IMPLICATIONS

5.1 None.

6 RISK MANAGEMENT

6.1 SWAP have undertaken a review of current risk management arrangements as part of the 2022/23 audit plan. An action plan is now being implemented as a result of that review.

7 POTENTIAL IMPACTS

- 7.1 Equalities. An Equality Impact Assessment is attached as **Appendix 2**. A screening assessment has been completed which indicates the proposal does not have any equality impacts.
- 7.2 Climate change/sustainability. There are no impacts as a consequence of the decision.
- 7.3 Data Protection/GDPR. No personal data has been processed.

8 CONSULTATION

8.1 The Head of Paid Service, the Section 151 Officer, the Monitoring Officer and the Deputy Monitoring Officer have been consulted on the report.

9 TIMETABLE FOR IMPLEMENTATION

9.1 By 31 March 2024

10 APPENDICES

- 10.1 Appendix 1 Internal Audit Plan 2023/24
- 10.2 Appendix 2 EQIA

11 BACKGROUND DOCUMENTS

11.1 None

12 CONSULTATION

Name of consultee	Post held	Date sent	Date returned
Mandatory:	Statutory Officers (or deputies)		
Adele Taylor	Executive Director of Resources/S151 Officer	3/2/23	3/2/23
Emma Duncan	Director of Law and Strategy / Monitoring Officer	3/2/23	8/2/23
Deputies:			
Andrew Vallance	Head of Finance (Deputy S151 Officer)	Report Author	
Elaine Browne	Head of Law (Deputy Monitoring Officer)	3/2/23	
Other consultees:			
Directors (where relevant)			
Tony Reeves	Interim Chief Executive	3/2/23	
Kevin McDaniel	Executive Director of People	3/2/23	
Andrew Durrant	Executive Director of Place	3/2/23	
External (where relevant)			
N/A			

Confirmation	Cabinet Member for Asset	Yes
relevant Cabinet	Management and	
Member(s)	Commercialisation, Finance and	
consulted	Ascot	

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
Audit and Governance Committee for Approval	No No	No No

Report Author:	
Andrew Vallance, Head of Finance andrew.vallance@rbwm.gov.uk	





Royal Borough of Windsor and Maidenhead

2023-24 Internal Audit Plan and Internal Audit Charter

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The Internal Audit Plan: Summary

The internal audit plan provides a summary of the audit approach that the internal audit team will follow to deliver the 2023/24 internal audit plan. This plan will be kept live throughout the year.

Delivery of an internal audit programme of work that provides sufficient and appropriate coverage, will enable us to provide a well-informed and comprehensive year-end annual internal audit opinion.

Introduction and Objective of the Internal Audit Plan

Internal audit provides an independent and objective opinion on the Authority's risk management, governance, and control environment by evaluating its effectiveness.

SWAP, in conjunction with senior management, agree a proposed audit approach to deliver an internal audit plan. The objective of our planning process and subsequent programme of work agreed is to put us in a position to provide a well-informed and comprehensive annual audit opinion, based on sufficient and appropriate coverage of key business objectives, associated risks, and risk management processes.

The outcomes of each of the audits will provide senior management and members with assurance that the current risks faced by the Authority in these areas are adequately controlled and managed.

It should be noted that internal audit is only one source of assurance, and the outcomes of internal audit reviews should be considered alongside other sources, as part of the 'three lines' assurance model. Key findings from our internal audit work should also be considered in conjunction with completion of the Authority's AGS.

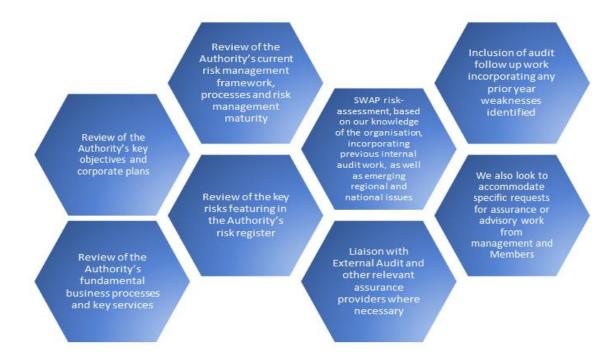
It is the responsibility of the Authority's Leadership Team, and the Audit and Governance Committee, to determine that the audit coverage contained within the proposed audit plan is sufficient and appropriate in providing independent assurance against the key risks faced by the organisation.



To develop an appropriate risk-based audit plan, SWAP have consulted with senior management, as well as reviewing key documentation, to obtain an understanding of the organisation's strategies, key business objectives, associated risks, and risk management processes.

Approach to Internal Audit Planning 2023/24

The factors considered in putting together the 2023/24 internal audit plan have been set out below:



The above factors are used to identify the areas of highest risk across the Council, in line with our risk-based approach.



The Internal Audit Plan: Risk Assessment

A documented risk assessment prior to developing an internal audit plan, ensures that sufficient and appropriate areas are identified for consideration.

Internal Audit Annual Risk Assessment

Our 2023/24 internal audit programme of work is based on a documented risk assessment, which SWAP will re-visit regularly, this will be at least on a quarterly basis.

Below we have set out a summary of the outcomes of the risk assessment for Windsor and Maidenhead:

Local Issues

High housing costs
Infrastructure development
Climate change
Cost of living crisis
Better outcomes for children
Adults with additional needs
Economic growth
Placemaking leadership
Better Accessibility

Core Areas of Recommended Coverage

Risk Management
Financial Management
Corporate & Ethical Governance
Performance Management
Cyber Security
Fraud Prevention & Detection
Information Management
Procurement and/ or Contract Management
Project Management
Commissioning

SWAP 'Top 10 Risks'

Planning, housing, environment and local economy Governance Supporting communities Financial sustainability Health, safety and wellbeing Education Contracts, procurement and commissioning Workforce

Risk Assessment

Information management
Strategic asset management
Long and short term projects

National Issues

Financial Resilience
Environmental, Social and Governance (ESG)
Affordable housing and homelessness

Homeworking, capacity and wellbeing Cybersecurity and data security Information Governance Adult Social Care Children's Social Care and SEND Fraud



The Internal Audit Plan: Risk Assessment

Following our SWAP Risk Assessment above, we have set out how the proposed 2023/24 plan presented in Annex A provides coverage of the Authority's key corporate challenges and strategic risks, as well as our core areas of recommended audit coverage.

Internal audit is only one source of assurance and should be considered in this context.

Internal Audit Coverage in 2023/24

Our aim is to produce an agile, risk-assessed work plan, containing key areas of coverage.

Traditionally an annual plan is presented to committee ahead of the start of the financial year. Fixing a plan and agreeing it in advance always means that it is subject to a high degree of uncertainty and change. It is now recognised across the profession that a better approach is to build our plan in conjunction with management and add to it as the year progresses. This planning approach means that the 2023/24 audit plan will be flexible to respond to new and emerging risks, as and when they are identified.

Meetings have been held with the CEO, Executive Directors and other Senior Managers to obtain their input into the plan. These meetings have been key to agreeing a programme of work reflective of the revised corporate plan goals and associated risks. This approach ensures that resources are directed to the areas where internal audit can offer the most value and insight. The risk register has been recently revised to reflect the updated corporate plan and it is these risks that have been considered in building this plan. We have set out the proposed plan in Annex A. It has been structured to demonstrate coverage across the Authority's corporate goals and strategic risks, as well as our core areas of recommended audit activity.

The current (interim) Chief Executive and Executive Leadership team recognise the importance of a strong framework of core processes and compliance with this. In identified areas of risk, such as contract management, compliance with core processes facilitates the delivery of quality services and helps demonstrate Value for Money at the Borough. A focus on these core processes has been agreed for 2023/24 and to support this we will be completing a Healthy Organisation review. This strategic overview provides an objective assessment of the management control framework or 'health' of an organisation. As can be seen from the diagram below the review framework assesses against nine corporate themes. The review will also provide valuable insight across the organisation to the new chief executive as well as the new s.151 officer and monitoring officer.

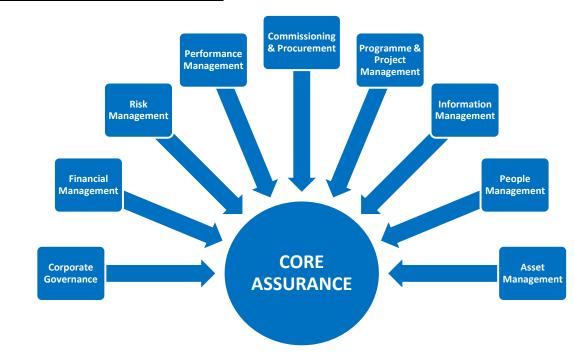


The Internal Audit Plan: Approach

Following our SWAP Risk Assessment above, we have set out how the proposed 2023/24 plan presented in Annex A provides coverage of the Authority's key corporate challenges and strategic risks, as well as our core areas of recommended audit coverage.

Internal audit is only one source of assurance and should be considered in this context.

Healthy Organisation – Core Areas



Internal audit coverage can never be absolute and responsibility for risk management, governance and internal control arrangements will always remain fully with management. As such, internal audit cannot provide complete assurance over any area, and equally cannot provide any guarantee against material errors, loss or fraud.



The Internal Audit Plan: Approach

SWAP Internal Audit Services is a public sector, not-for-profit partnership, owned by the public sector partners that it serves. The SWAP Partnership now includes 25 public sector partners, providing services throughout the UK.

As a company, SWAP has adopted the following values, which we ask our clients to assess us against following every piece of work that we do:

- Candid
- Relevant
- Inclusive
- Innovative
- Dedicated

Your Internal Audit Service

Conformance with Public Sector Internal Audit Standards

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Every three years, SWAP is subject to an External Quality Assessment of Internal Audit Activity. The last of these was carried out in February 2020 which confirmed conformance with the Public Sector Internal Audit Standards. An annual self-assessment process confirms ongoing compliance.

Conflicts of Interest

We are not aware of any conflicts of interest within the Royal Borough of Windsor and Maidenhead that would present an impairment to our independence or objectivity. Furthermore, we are satisfied that we will conform with our IIA Code of Ethics in relation to Integrity, Objectivity, Confidentiality, & Competency.

Consultancy Engagements

As part of our internal audit service, we may accept proposed consultancy engagements, based on the engagement's potential to improve management of risk, add value and improve the organisation's operations. Consultancy work that is accepted, will contribute to our annual opinion and will be included in our plan of work.

Approach to Fraud

Internal audit may assess the adequacy of the arrangements to prevent and detect irregularities, fraud and corruption. We have dedicated counter fraud resource available to undertake specific investigations if required. However, the primary responsibility for preventing and detecting corruption, fraud and irregularities rests with management who should institute adequate systems of internal control, including clear objectives, segregation of duties and proper authorisation procedures.

Internal Audit Charter

The nature, role, responsibility, status and authority of internal auditing within the Royal Borough of Windsor and Maidenhead and an outline of the scope of internal audit work is provided in the Charter at Annex B.



The Internal Audit Plan: Approach

Over and above our internal audit service delivery, SWAP will look to add value throughout the year wherever possible. This will include:

- Benchmarking and sharing of best-practice between our publicsector Partners
- Regular newsletters and bulletins containing emerging issues and significant risks identified across the SWAP partnership
- Communication of fraud alerts received both regionally and nationally
- Member training sessions

Our Reporting

A summary of internal audit activity will be reported quarterly to senior management and the Audit and Governance Committee. This reporting will include any significant risk and control issues (including fraud risks), governance issues and other matters that require the attention of senior management and/or the Audit and Governance Committee. We will also report any response from management to a risk we have highlighted that, in our view, may be unacceptable to the organisation.

Internal Audit Performance:

As part of our regular reporting to senior management and the Audit and Governance Committee, we will report on internal audit performance. The following performance targets will be used to measure the performance of our audit activity:

Performance Measure	Performance Target
<u>Delivery of Annual Internal Audit Plan</u> Completed at year end	>90%
Quality of Audit Work Overall Client Satisfaction (did our audit work meet or exceed expectations, when looking at our Communication, Auditor Professionalism and Competence, and Value to the Organisation)	>95%
Outcomes from Audit Work Value to the Organisation (client view of whether our audit work met or exceeded expectations, in terms of value to their area)	>95%



Page 6

These reviews form our Internal Audit plan for 2023/24. The plan will continue to be added to as the year progresses to reflect corporate priorities and updated strategic risks.

It should be noted that the audit titles and high-level scopes included below are only indicative at this stage for planning our resources. At the start of each audit, an initial discussion will be held to agree the specific terms of reference for the piece of work, which includes the objective and scope for the review.

Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
SR1 – Impact of winter flu and future pathogen variants	Emergency planning – see below	
SR2 – Uncertainty and delivery of major schemes and commercial projects involved in regeneration SR3 – Insufficient emergency	 Property - Commercial leases \$106 - the collection, allocation and spending of CIL monies is not effective is a medium/high operational risk Healthy Organisation – programme and project management Emergency Planning 	
response by the council. SR4 – Inadequate business continuity planning (including asset management)	Business Continuity included in 2022/23 plan • Healthy Organisation – asset management	
SR5 – Major Safeguarding Issue	Children's Safeguarding	Executive Director of People Services
SR6 – Delivery of Best Value	 Contract Management follow-up Contracts Register Contract Management of Grounds Maintenance Contract Safety of Tree Stock - a medium/high operational risk 	Monitoring Officer/ Executive Director of Place
SR7- Non compliance with new legislation	 Records Management follow-up Information Management 	Monitoring Officer
SR8 – ICT infrastructure failure	Hosting arrangementsInfrastructure audit	Executive Director of Place
SR9 – Change of Political control		

Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale Audit Sponsor/ Seni Management Lead			
SR10 – Lack of workforce capacity	Healthy Organisation – Human Resources	Executive Director of Resources		
SR11 – Cost of Living Crisis	Strategic review of early intervention To support continuous improvement in delivery of the early help offer. Temporary Accommodation Cost of temporary accommodation is a medium/high operational risk. Short- break care (children's) Identified as a high risk within the Achieving for Children's strategic risk register.	Executive Director of People Services		
SR12 – Fraud and Corruption	Council Tax Investigations Investigation of Council Tax referrals carried out by SWAP Counter fraud Team. Fraud Awareness Session with members Part of new member induction. Fraud Baseline Assessment of Maturity in Relation to Fraud follow-up Follow-up of 22/23 review.	Executive Director of Resources		
SR13 – Climate Change	(Climate change - Review completed in 22/23 and reasonable assurance given)	Head of HR, Corporate Projects and ICT		
SR14 – Mental Health Crisis	Mental Health Specific scope to be agreed at initial meeting.	Executive Director of People Services		
SR15 – Effectiveness of Financial Strategy	Management of Parking Income Largest source of fees and charges. Consider how it is ensured that income is maximised.	Executive Director of Resources		



Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
	Also see Healthy Organisation - Financial Management below for other relevant audit work.	
SR16 – Maidenhead Regeneration Plan	Premises Health and Safety Look at compliance across the Borough.	Executive Director of Place Services

Corporate Plan Priorities (CP)/ Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
Healthy Organisation This strategic review provides an objective assessment of the management control framework or 'health' of an organisation. As can be seen from the diagram below the review framework assesses against nine corporate themes.		Statutory Officers Group
Corporate governance Corporate governance refers to the strategic management practices and values and beliefs by which the Council operates.	Follow-up Delegated Decision Making Follow-up of 22/23 audit.	Monitoring Officer
Financial management Effective Financial management is the bedrock of any successful organisation and is vital to the ongoing ability of local authorities to deliver services that the public wants.	 Management of the Revenue Budget Corporate Debt Management follow/up Adults Debt Management Treasury Management Payroll Schools Financial Management Council Tax 	Executive Director of Resources



Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
Risk management Organisations which operate under a structured and active risk management approach, are far more likely to be able to focus upon their key priorities and outcomes and, in doing so, take informed and robust decisions.	Pension Fund Risk management. Provide assurance in relation to updates to the risk management arrangements. Risk Management Follow-up Follow-up of 22/23 audit.	Executive Director of Resources
Performance management Performance management provides a transparent platform upon which the service is accountable to its citizens and service users for the effectiveness of its service provision and delivery of its objectives.	Healthy Organisation review.	Monitoring Officer
Commissioning & procurement Assessing procurement & commissioning activity of a Local Authority is a critical determinant in establishing its effectiveness in both being able to deliver benefit for its community, but also in showing whether it can maximise value for money for its taxpayers.	See above under strategic risks:	Across Senior Leadership Team
ICT/information management Effective ICT will facilitate and support effective working, better decision-making, improved customer service and business transformation.	See above under strategic risks:	Executive Director of Resources/Monitoring Officer



Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
Programme & project management Organisations which can demonstrate and operate under a structured and active approach are far more likely to be able to focus their efforts and successfully achieve the delivery of anticipated outcomes.	Healthy Organisation Review	
People management Organisations which can demonstrate and operate under a structured and active approach are far more likely to be able to focus resources against key priorities and, as a direct result, deliver improved outcomes.	Healthy Organisation Review	
Asset management Organisations which can demonstrate and operate under a structured and active approach are far more likely to be able to focus resources against key priorities and, as a direct result, deliver improved outcomes.	 Property- commercial leases Health and Safety of Premises 	Executive Director of Place

Corporate Plan Priorities (CP)/ Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
Follow-up audits	Review implementation of agreed actions and to assess appropriate reduction of risk. Fraud Baseline Assessment of Maturity in Relation to Fraud Risk Management Contract Management Corporate Debt Management Delegated Decision Making Records Management Fleet Safety Compliance Adults Direct Payments	Across Senior Leadership Team



Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
	Adults Financial Assessments	
Counter-fraud related	Council Tax Investigations Investigation of Council Tax referrals carried out by SWAP Counter fraud Team. Fraud Awareness Session with members Part of new member induction. Fraud Baseline Assessment of Maturity in Relation to Fraud follow-up Follow-up of 22/23 review. National Fraud Initiative (NFI) Maintaining oversight of this data matching exercise.	Executive Director of Resources
Grant certification As required by funding stream.	Grant certification will be carried out in line with audit certification requirements. The following grants have already been identified: • Supporting Families programme • Local transport capital funding • Bus Service Operator Grant (BSOG) • LEP – core growth • LEP – peer networks • Disabled facilities • Initial Teacher Training (ITT) Bursary	Across Senior Leadership Team
Advice and support	 Audit advice and planning including Head of Internal Audit role. Committee reporting and attendance at other corporate meetings. Committee training. 	



Strategic Risk (SR)/Corporate Theme/Other	Areas of Coverage and Brief Rationale	Audit Sponsor/ Senior Management Lead
	 Data Analytics – involvement in SWAP wide data analytics work and benchmarking. News round-up and fraud alerts. 	



Purpose

The purpose of this Charter is to set out the nature, role, responsibility, status and authority of internal auditing within the Royal Borough of Windsor and Maidenhead, and to outline the scope of internal audit work.

Approval

This Charter is required to be reviewed and approved each year to confirm it remains accurate and up to date.

Provision of Internal Audit Services

The internal audit service is provided by the SWAP Internal Audit Services (SWAP). This charter should be read in conjunction with the Service Agreement, which forms part of the legal agreement between the SWAP partners.

The budget for the provision of the internal audit service is determined by the Royal Borough of Windsor and Maidenhead in conjunction with the Members Meeting. The general financial provisions are laid down in the legal agreement, including the level of financial contribution by the organisation, and may only be amended by unanimous agreement of the Members Meeting. The budget is based on an audit needs assessment that was carried out when determining the organisation's level of contribution to SWAP. This is reviewed each year by the S151 Officer in consultation with the Chief Executive of SWAP.

Role of Internal Audit

The Accounts and Audit (England) Regulations 2015, state that: "A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account the public sector internal auditing standards or guidance."

Internal audit is an independent, objective assurance and consulting activity designed to add value and improve the Organisation's operations. It helps the Royal Borough of Windsor and Maidenhead accomplish its objectives by bringing a systematic disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Responsibilities of Management, Audit and Governance Committee and Internal Audit

Management¹

Management is responsible for ensuring SWAP:

- has the support of management and the organisation; and
- has direct access and freedom to report to senior management, including the Chief Executive and the Audit and Governance Committee
- is notified of suspected or detected fraud, corruption or impropriety.

Management is responsible for maintaining internal controls, including proper accounting records and other management information suitable for running the Organisation. Management is also responsible for the appropriate and effective management of risk.

Audit and Governance Committee²

The Audit and Governance Committee is responsible for approving the scope of internal audit work, receiving communications from the SWAP Assistant Director on the progress of work undertaken,

² In this instance the Audit and Governance Committee relates to "The Board" referred to in the PSIAS.



 $^{^{\,1}}$ In this instance Management refers to the Senior Management Team and Statutory Officers.

reviewing the independence, objectivity, performance, professionalism and effectiveness of the Internal Audit function, and obtaining reassurance from the SWAP Assistant Director as to whether there are any limitations on scope or resources.

Internal Audit

The SWAP Assistant Director, as Head of Internal Audit, is responsible for determining the scope, except where specified by statute, of internal audit work and for recommending the action to be taken on the outcome of, or findings from, their work.

Internal audit is responsible for operating under the policies established by management in line with best practice.

Internal audit is responsible for conducting its work in accordance with the mandatory elements of the Code of Ethics and Standards for the Professional Practice of Internal Auditing as set by the Institute of Internal Auditors and further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note. SWAP has been independently assessed and found to be in Conformance with the Standards.

Internal audit is not responsible for any of the activities which it audits. SWAP staff will not assume responsibility for the design, installation, operation or control of any procedures. SWAP staff who have previously worked for the organisation will not be asked to review any aspects of their previous department's work until one year has passed since they left that area.

Relationship with the External Auditors/Other Regulatory Bodies

Internal Audit will co-ordinate its work with others wherever this is beneficial to the organisation.

Status of Internal Audit in the Organisation

*The Chief Executive of SWAP is responsible to the SWAP Board of Directors and the Members Meeting. Appointment or removal of the Chief Executive of SWAP is the sole responsibility of the Members Meeting.

The Chief Executive for SWAP and Assistant Director also report to the Section 151 Officer, and reports to the Audit and Governance Committee as set out below.

The Assistant Director will be the first and primary point of contact for the organisation for all matters relating to the Audit and Governance Committee, including the provision of periodic reports, as per company policy. The Assistant Director is also responsible for the design, development and delivery of audit plans, subject to the agreement of the Royal Borough of Windsor and Maidenhead.

Scope and authority of Internal Audit work

There are no restrictions placed upon the scope of internal audit's work. SWAP staff engaged on internal audit work are entitled to receive and have access to whatever information or explanations they consider necessary to fulfil their responsibilities to senior management. In this regard, internal audit may have access to any records, personnel or physical property of the organisation.

Internal audit work will normally include, but is not restricted to:

- reviewing the reliability and integrity of financial and operating information used for operational and strategic decision making, and the means used to identify, measure, classify and report such information;
- evaluating and appraising the risks associated with areas under review and make proposals for improving the management and communication of risks;



- appraise the effectiveness and reliability of the enterprise risk management framework and recommend improvements where necessary;
- assist management and Members to identify risks and controls with regard to the objectives of the organisation and its services;
- reviewing the systems established by management to ensure compliance with those policies, plans, procedures, laws and regulations which could have a significant impact on operations and reports, and determining whether the organisation is in compliance;
- reviewing the means of safeguarding assets and, as appropriate, verifying the existence of assets;
- appraising the economy, efficiency and effectiveness with which resources are employed;
- reviewing operations or programmes to ascertain whether results are consistent with established objectives and goals and whether the operations or programmes are being carried out as planned, with performance and accountabilities established.
- reviewing the operations of the organisation in support of their anti-fraud and corruption policy, ethical expectations and corporate values, investigating where necessary.
- at the specific request of management, internal audit may provide consultancy services (including fraud investigation services) provided:
 - > the internal auditor's independence is not compromised
 - the internal audit service has the necessary skills to carry out the assignment, or can obtain such skills without undue cost or delay
 - the scope of the consultancy assignment is clearly defined and management have made proper provision for resources the work.
 - management understand that the work being undertaken is not internal audit work.

Planning and Reporting

SWAP will submit to the Audit and Governance Committee for approval, an annual internal audit plan, setting out the recommended scope of their work in the period.

The annual plan will be developed with reference to the risks the organisation will be facing in the forthcoming year, whilst providing a balance of current and on-going risks, reviewed on a cyclical basis. The plan will be reviewed on a quarterly basis to ensure it remains adequately resourced, current and addresses new and emerging risks.

SWAP will carry out the work as agreed, report the outcome and findings, and will make recommendations on the action to be taken as a result to the appropriate manager and Director. SWAP will report at least two times a year to the Audit and Governance Committee or as agreed. SWAP will also report a summary of their findings, including any persistent and outstanding issues, to the Audit and Governance Committee on a regular basis.

Internal audit reports will normally be by means of a brief presentation to the relevant manager accompanied by a detailed report in writing. The detailed report will be copied to the relevant line management, who will already have been made fully aware of the detail and whose co-operation in preparing the summary report will have been sought.



The Assistant Director will submit an annual report to the Audit and Governance Committee providing an overall opinion of the status of risk and internal control within Royal Borough of Windsor and Maidenhead, based on the internal audit work conducted during the previous year.

In addition to the reporting lines outlined above, the Chief Executive of SWAP and SWAP Directors and Assistant Directors have the unreserved right to report directly to the Leader of the Council, the Chairman of the Audit and Governance Committee, the organisation's Chief Executive Officer or the External Audit Manager.



EqIA: Internal Audit Plan 2023/24

Essential information

Items to be assessed: (please mark 'x')

Strategy	i	Plan		Х	Project			Service procedure		
Responsible officer	Andrew	Valance	Servic	ce area		Finance	Di	rectorate	Reso	urces
		·								

Stage 1: EqIA Screening (mandatory)

Date created: 3/2/2023

Stage 2 : Full assessment (if applicable)

Date created: NA

Approved by Head of Service / Overseeing group/body / Project Sponsor:

"I am satisfied that an equality impact has been undertaken adequately."

Signed by (print): Andrew Valance

Dated: 3/2/2023

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

Guidance notes

What is an EqIA and why do we need to do it?

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advancing equality of opportunity between those with 'protected characteristics' and those without them.
- Fostering good relations between those with 'protected characteristics' and those without them.

EqIAs are a systematic way of taking equal opportunities into consideration when making a decision, and should be conducted when there is a new or reviewed strategy, policy, plan, project, service or procedure in order to determine whether there will likely be a detrimental and/or disproportionate impact on particular groups, including those within the workforce and customer/public groups. All completed EqIA Screenings are required to be publicly available on the council's website once they have been signed off by the relevant Head of Service or Strategic/Policy/Operational Group or Project Sponsor.

What are the "protected characteristics" under the law?

The following are protected characteristics under the Equality Act 2010: age; disability (including physical, learning and mental health conditions); gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

What's the process for conducting an EqIA?

The process for conducting an EqIA is set out at the end of this document. In brief, a Screening Assessment should be conducted for every new or reviewed strategy, policy, plan, project, service or procedure and the outcome of the Screening Assessment will indicate whether a Full Assessment should be undertaken.

Openness and transparency

RBWM has a 'Specific Duty' to publish information about people affected by our policies and practices. Your completed assessment should be sent to the Strategy & Performance Team for publication to the RBWM website once it has been signed off by the relevant manager, and/or Strategic, Policy, or Operational Group. If your proposals are being made to Cabinet or any other Committee, please append a copy of your completed Screening or Full Assessment to your report.

Enforcement

Judicial review of an authority can be taken by any person, including the Equality and Human Rights Commission (EHRC) or a group of people, with an interest, in respect of alleged failure to comply with the general equality duty. Only the EHRC can enforce the specific duties. A failure to comply with the specific duties may however be used as evidence of a failure to comply with the general duty.

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

Stage 1 : Screening (Mandatory)

1.1 What is the overall aim of your proposed strategy/policy/project etc and what are its key objectives?

The report recommends an internal audit plan for 2023/24. It will be presented by the Council's new internal auditors, South West Audit Partnership (SWAP).

RECOMMENDATION: That Audit and Governance Committee notes the report and:

APPROVES the Internal Audit Plan for 2023/24

1.2 What evidence is available to suggest that your proposal could have an impact on people (including staff and customers) with protected characteristics? Consider each of the protected characteristics in turn and identify whether your proposal is Relevant or Not Relevant to that characteristic. If Relevant, please assess the level of impact as either High / Medium / Low and whether the impact is Positive (i.e. contributes to promoting equality or improving relations within an equality group) or Negative (i.e. could disadvantage them). Please document your evidence for each assessment you make, including a justification of why you may have identified the proposal as "Not Relevant".

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

Protected	Relevance	Level	Positive/negative	Evidence
characteristics				
Age				
	Not			
	Relevant			
Disability	Not			
	Relevant			
Gender re-	Not			
assignment	Relevant			
Marriage/civil	Not			
partnership	Relevant			
Pregnancy and	Not			
maternity	Relevant			
Race	Not			
	Relevant			
Religion and belief	Not			
	Relevant			
Sex	Not			
	Relevant			
Sexual orientation	Not			
	Relevant			

EqIA: Internal Audit Plan 2023/24

Outcome, action and public reporting

Screening Assessment Outcome	Yes / No / Not at this stage	Further Action Required / Action to be taken	Responsible Officer and / or Lead Strategic Group	Timescale for Resolution of negative impact / Delivery of positive impact
Was a significant level of negative impact identified?	No	Not at this stage		
Does the strategy, policy, plan etc require amendment to have a positive impact?	No	Not at this stage		

If you answered **yes** to either / both of the questions above a Full Assessment is advisable and so please proceed to Stage 2. If you answered "No" or "Not at this Stage" to either / both of the questions above please consider any next steps that may be taken (e.g. monitor future impacts as part of implementation, rescreen the project at its next delivery milestone etc).

EqIA: Internal Audit Plan 2023/24

Stage 2 : Full assessment

2.1 : Scope and define

2.1.1 Who are the main beneficiaries of the proposed strategy / policy / plan / project / service / procedure? List the groups who the work is targeting/aimed at.

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

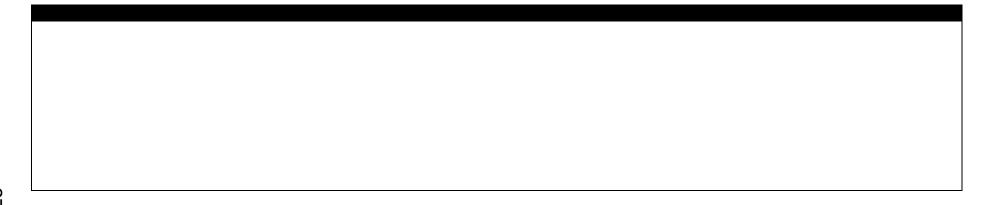
EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

2.1.2 Who has been involved in the creation of the proposed strategy / policy / plan / project / service / procedure? List those groups who the work is targeting/aimed at.
2.2 : Information gathering/evidence
2.2.1 What secondary data have you used in this assessment? Common sources of secondary data include: censuses, organisational records.

2.2.2 What primary data have you used to inform this assessment? Common sources of primary data include: consultation through interviews, focus groups, questionnaires.

EqIA: Internal Audit Plan 2023/24



Eliminate discrimination, harassment, victimisation

EqIA: Internal Audit Plan 2023/24

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

Advance equality of opportunity

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ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

EQUALITY IMPACT ASSESSMENT

EqIA: Internal Audit Plan 2023/24

Foster good relations

Protected Characteristic	Advancing the Equality Duty: Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

2.4 Has your delivery plan been updated to incorporate the activities identified in this assessment to mitigate any identified negative impacts? If so please summarise any updates.

These could be service, equality, project or other delivery plans. If you did not have sufficient data to complete a thorough impact assessment, then an action should be incorporated to collect this information in the future.

EqIA: Internal Audit Plan 2023/24

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WORK PROGRAMME - AUDIT AND GOVERNANCE COMMITTEE

DIRECTORS	Tony Reeves (Interim Chief Executive)
	Adele Taylor (Executive Director of Resources and S151
	Officer)
	Emma Duncan (Monitoring Officer and Director of Law &
	Governance)
LINK OFFICERS &	External Auditors – Deloitte
HEADS OF SERVICES	Internal Auditors - SWAP
	Steve Mappley (Insurance & Risk Manager)
	Andrew Vallance (Head of Finance)
	Elaine Browne (Head of Law and Governance)

MEETING: 30th MAY 2023

ITEM	RESPONSIBLE OFFICER
Work Programme	Democratic Services

MEETING: 20th JULY 2023

ITEM	RESPONSIBLE OFFICER
Work Programme	Democratic Services

MEETING: 21st SEPTEMBER 2023

ITEM	RESPONSIBLE OFFICER
Work Programme	Democratic Services

MEETING: 16th NOVEMBER 2023

ITEM	RESPONSIBLE OFFICER
Work Programme	Democratic Services

MEETING: 22nd FEBRURARY 2024

ITEM	RESPONSIBLE OFFICER
Work Programme	Democratic Services

ITEMS SUGGESTED BUT NOT YET PROGRAMMED

ITEM	RESPONSIBLE OFFICER
Climate Governance Audit	Lisa Fryer, South West Audit Partnership
Statement of Account 2020/21	External Auditors
Statement of Accounts 2021/22	External Auditors

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