



Wiltshire Council

Internal Audit Annual Opinion Report 2020/21

Internal Audit = Risk = Special Investigations = Consultancy

Unrestricted

Internal Audit Annual Opinion – 2020/21: 'At a Glance'

Annual Opinion



There is generally a 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.

| The Headlin | es | Internal Audit Assuran | ce Opinions 2020/21 | | | |
|--------------|--|---------------------------------------|---------------------|--|--|--|
| \wedge | Three Significant Risks identified in year. | Substantial | 5 | | | |
| | (However, actions have been agreed to significantly lower the residual risk) | Reasonable | 14 | | | |
| | 45 reviews delivered as part of the 2020/21 Internal Audit Plan. Includes assurance (22), advisory (11), grant certifications (5) and follow up reviews (7). | Limited | 3 | | | |
| | | No Assurance | 0 | | | |
| <u>ŵñŵ</u> ñ | Internal Audit staff redeployed directly into Council areas to assist with the COVID response. COVID 19 Business Grant processing and post payment checks. | Internal Audit Agreed Actions 2020/21 | | | | |
| | | Priority 1 | 0 | | | |
| | Significant improvements in the implementation of agreed actions. | Priority 2 | 35 | | | |
| | Range of innovations and enhancements made to our internal audit process throughout the year. | Priority 3 | 61 | | | |
| ₹₹) | One-page audit report, continuous audit and the introduction of Agile auditing and planning. | | 96 | | | |



SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation

Executive Summary

Internal Audit provides an independent and objective opinion on the effectiveness of the Authority's risk management, control and governance processes.

Purpose

The Head of Internal Audit (SWAP Assistant Director) should provide a written annual report to those charged with governance to support the Authority's Annual Governance Statement (AGS). This report should include the following:

- An opinion on the overall adequacy and effectiveness of the organisation's governance, risk management and internal control environment, including an evaluation of the following:
 - the design, implementation and effectiveness of the organisation's ethics-related objectives, programmes and activities;
 - whether the information technology governance of the organisation supports the organisation's strategies and objectives;
 - the effectiveness of risk management processes; and
 - the potential for the occurrence of fraud and how the organisation manages fraud risk.
- Disclose any qualifications to that opinion, together with the reasons for the qualification.
- Present a summary of the audit work from which the opinion is derived, including reliance placed on work by other assurance bodies.
- Draw attention to any issues the Head of Internal Audit judges particularly relevant to the preparation of the Annual Governance Statement.
- Compare the work actually undertaken with the work that was planned and summarise the performance of the internal audit function against its performance measures and criteria.
- Comment on compliance with these standards and communicate the results of the internal audit quality assurance programme.

The purpose of this report is to satisfy this requirement and Members are asked to note its content and the Annual Internal Audit Opinion given.



Executive Summary

Three Lines Model

To ensure the effectiveness of an organisation's risk management framework, the Audit and Governance Committee and senior management need to be able to rely on adequate line functions – including monitoring and assurance functions – within the organisation.

The 'Three Lines' model is a way of explaining the relationship between these functions and as a guide to how responsibilities should be divided:

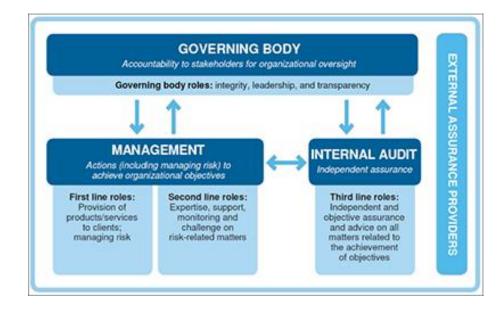
- the first line functions that own and manage risk.
- the second line functions that oversee or specialise in risk management, compliance.
- the third line functions that provide independent assurance.

Background

The Internal Audit service for Wiltshire Council is provided by SWAP Internal Audit Services. The team's 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. The work of the team is guided by the Internal Audit Charter which is reviewed annually.

Internal Audit provides an independent and objective opinion on the Authority's control environment by evaluating its effectiveness. This report summarises the activity of the Internal Audit team for the 2020/21 year.

The position of Internal Audit within an organisation's governance framework is best summarised in the Three Lines model shown below.





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Internal Audit Annual Opinion 2020/21

The Head of Internal Audit (SWAP Assistant Director) is required to provide an opinion to support the Annual Governance Statement.

Annual Opinion

On the balance of our 2020/21 audit work for Wiltshire Council, enhanced by the work of external agencies, I am able to offer a **Reasonable Assurance** opinion in respect of the areas reviewed during the year.

Just as in more normal times, audit work has been planned to ensure that sufficient assurance will be available to support the annual opinion. The professional requirements of PSIAS have remained unchanged and in line with these, new audit priorities to cover the risks from the impact of COVID-19 have been agreed throughout the year and that work supports the annual opinion.

The additional audits performed to carry out assurance work on new risks associated with the Covid-19 emergency response were:

- Work around business support grants;
- Audit of covid grants;
- Focussed analytical work; and
- Relevant advisory work.

It has been agreed to defer some of the less urgent audit work to 2021/22 and this has been replaced and reported as follows.

- Additional audit work on new risks associated with COVID-19 being delivered.
- Some areas of the Council facing significant resource challenges as leading the Council's response to the pandemic, meaning key staff/information/systems not accessible to internal auditors.
- Redeployment of audit staff to support the Council's response reducing the resource base for internal audit.



The following are considered key pieces of audit work that support the annual opinion on the overall adequacy and effectiveness of the organisation's governance, risk management and control.

- Healthy Organisation
- Business Continuity
- Continuous assurance
- Key financial audits
- Information governance and security
- Key front-line services



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Internal audit coverage should be aligned to key corporate priorities and key corporate risks.

Audit Coverage by Corporate Risk

| Corporate Risk | Coverage | Assurance assessment based on completed internal audit work |
|---|----------|---|
| CRR 01 – Safeguarding Children | | Limited |
| CRR 02 – Safeguarding Adults | | Reasonable |
| CRR 03 – Sailsbury Economy | | |
| CRR 04 – Interest Rate Changes | | Reasonable |
| CRR 05 – Cyber Resilience | | Advice and Guidance |
| CRR 06 – Staff Capacity | | |
| CRR 07 – Budget Management | | Reasonable |
| CRR 08 – Contract Management | | Limited |
| CRR 09 – Income Collection | | Reasonable |
| CRR 10 – Corporate Health, Safety & Wellbeing | | |
| CRR 11 – Information Governance | | Advice and Guidance |
| CRR 12 – COVID 19 Related Risks | | Advice and Guidance |

| Table Key |
|--|
| Reasonable internal audit coverage |
| Limited internal audit coverage |
| No recent internal audit coverage |
| Proposed internal audit coverage removed |

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided INTERNAL AUDIT SERVICES Helping Organisations to Succeed

Definitions of Corporate Risk

Significant Corporate Risks

High Risk

Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.

Medium Risk

Issues which should be addressed by management in their areas of responsibility.

Low Risk

Issues of a minor nature or best practice where some improvement can be made.

For those audits which have reached report stage through the year, we have assessed the following risks as 'High'.

Review

Deprivation of Liberty Safeguards

Objective:

The objective of this audit is to ensure that the key controls within the Deprivation of Liberty Safeguards are operating effectively.

Risk:

Deprivation of Liberty Safeguards (DoLS) Assessments are not completed within the statutory timeframe, resulting in loss of individuals freedoms without a right of appeal and subsequent reputational harm to the Council.

Updated Position:

The overall assurance opinion provided for this review was High Reasonable. However, the residual risk following conclusion of this audit remains high due to the current backlog of DoLS assessments. This risk had already been identified and escalated by the DoLS team to management. As a result, it has been decided to hire the services of a third party that will be responsible to assess the pending requests by April 2022. Once this has been addressed by the plan already in place, the residual risk will be significantly lowered.

The assurance opinion has not been impacted by the risk level as the Council had sufficient plans already in place prior to the audit.



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Review

Brokerage - Adults

Objective:

To assess whether processes in operation within the Adults Brokerage service are efficient and effective and whether both internal and external relationships are effective in achieving aims for the service.

Risk:

The Council fails in its duty to broker care packages for its service users.

Updated Position:

The overall assurance opinion provided for this review was High Limited. The review identified that due diligence processes are currently not effective in identifying providers with previous inadequate ratings with the Care Quality Commission (CQC) and some long-term contracts are also no longer fit for purpose.

A total of five actions have been discussed and agreed with management with a target date of the end of June 2021. Four of these actions have already been implemented, with the remaining Priority 3 action having a revised implementation date set as 30th August 2021.



Review

Third Party Spend – Purchase to Pay

Objective:

To provide assurance that the Council's tendering process is effective at procuring goods and services.

Risk:

The Council's procurement policy and procedure suite are not up to date with legislation, contract requirements and best practices and do not promote achieving value for money.

Updated Position:

The overall assurance opinion provided for this review was Low Limited. The review identified that the Procurement Strategy has not been reviewed since 2019, this should be undertaken annually and confirm that the Strategy complies with current Government legislation. Social value is also not currently supported by a Social Value Policy or reference to social value within the Procurement Rules.

A sample of contracts and business cases/sourcing plans were also reviewed. It was found that these varied in detail and quality. The large contracts examined mentioned savings however, we could not evidence how these savings were being monitored or captured. A centralised central record of collaborative or partnership arrangements is also not currently held.

All actions have been agreed with a target date of the end of October 2021. The procurement governance project has now been superseded by the Commercial Workstream and Organisational Recovery Programmes and several of the greed actions will be picked up by these programmes.



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Immediate action is required to

weaknesses or non-compliance

control is inadequate to effectively

manage risks to the achievement of

non-compliance were identified.

Improvement is required to the

management and control to effectively manage risks to the achievement of objectives in the

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

A sound system of governance, risk management and control exists,

objectives in the area audited. Significant gaps, weaknesses or

system of governance,

Assurance governance, risk management and

fundamental

The system

gaps,

of

risk

the

At the conclusion of audit assignment work each review is awarded a "Control Assurance

Assurance Definitions

address

identified.

area audited.

area audited.

Definition";

No

Reasonable

Summary of Audit Opinions

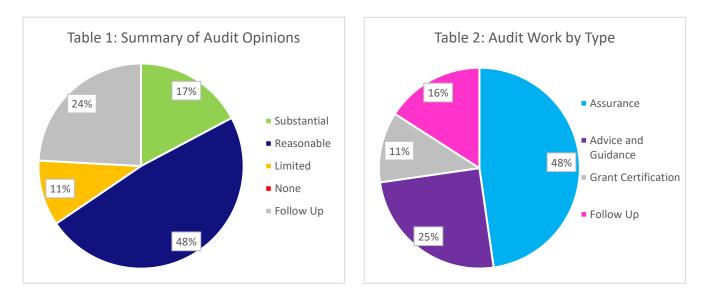


Table 1 above indicates the spread of assurance opinions across our work during the past year.

Table 2 indicates the audit work by type. Whilst assurance work is the main focus of internal audit, in a time of crisis such as the pandemic, internal audit has the knowledge and skills to be able to provide advisory work that supports the organisation through such turbulence. In addition, it was possible to progress COVID related advisory work whilst our normal assurance work was temporarily paused.



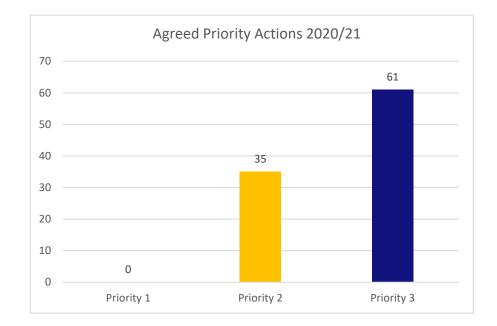
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SWAP Performance - Summary of Audit Actions by Priority

Priority Actions

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We rank our actions on a scale of 1 to 3, with 3 being medium or administrative concerns to 1 being areas of major concern requiring immediate corrective action





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Added Value

Added Value

Extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something more while adding little or nothing to its cost.

Throughout the year, SWAP strives to add value wherever possible i.e. going beyond the standard expectations and providing something 'more' while adding little or nothing to the cost.

Benchmarking

During the year we have provided benchmarking data across either the SWAP partnership or the wider reach of the Local Authority Chief Auditors Network (LACAN) for:

- Processes around the operation of Business Grants
- Value for Money
- Corporate Criminal Offence
- Unregistered Placements
- Protection of Property
- Contract Management

CIFAS Data Matching

SWAP has paid an annual subscription of £9,105 for 2020/21 to enable Wiltshire Council to be part of CIFAS. This data matching service will help the Council to both detect and prevent fraud. SWAP is working with both CIFAS and the Council to facilitate data matching work in the following areas:

- Insurance to identify whether claimants have been recorded within the database as attempting to perpetrate fraud.
- Human Resources to identify whether existing staff or staff offered a vacant position through the recruitment process have been identified as attempting to perpetrate fraud.
- Adult Services, residential homes and domiciliary services to identify whether contractors are continuing to claim for deceased service users.

Innovations and Enhancements to our Audit Process

During this exceptional year, we have taken the opportunity to implement and introduce a number of innovations and enhancements to our audit process. This has included:



Introducing the concept of 'Agile Auditing' to our audit process. With increased collaboration and a joint commitment with the service under review, it is possible to complete audits faster and more efficiently. We have used this concept to complete a number of audits this year and have had positive feedback from the senior managers working with us on these reviews.

Introduction of continuous audit reviews in relation to the key fundamental areas. This is a method whereby audit testing of key controls of an area or activity, is performed on a more frequent basis. It changes the audit approach from periodic reviews incorporating a small sample of transactions, to ongoing testing of a larger overall sample, with audit results produced shortly after testing. The benefits are a more reactive and timely approach to auditing which gives a continuous assurance on systems and processes throughout the year.

With the help of SWAP's two newly appointed Data Analysts, we are looking to include analysis of data as part of our auditing wherever possible. This allows us not only the opportunity to test whole populations of data, but where this is not possible or appropriate, to be able to use data analytics to target our testing in a more effective manner.

SWAP's Counter Fraud Team has also facilitated access to counter fraud intelligence resources and issued alerts and newsletters to key officers in the Council.

Introduced a new one-page audit report, that summarises all the key messages of the audit on one page for ease of consumption as well as increasing impact. Feedback on the report style has again been extremely positive.

Introduced a new continuous audit planning and risk assessment process.



Internal audit is responsible for conducting its work in accordance with 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).

SWAP Performance

SWAP's performance is subject to regular monitoring and review by both the SWAP Board of Directors and the Owners Board. The outturn performance results for Wiltshire Council for the 2020/21 year are as follows:

| Performance Target | Average Performance |
|--|---------------------|
| <u> Audit Plan – Percentage Progress</u> | |
| Final, Draft and Discussion 90% | 100% |
| In progress/Review | 0% |
| Yet to Commence | 0% |
| Customer Satisfaction Questionnaire | |
| Feedback 95% | 100% |

SWAP work is completed to comply with the International Professional Practices Framework (IPPF) 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.

Under these standards we are required to be independently externally assessed at least every five years to confirm compliance to the required standards. SWAP was recently assessed in February 2020 and confirmed that we are in conformance to PSIAS.

Attribute Standard 1300 of the IPPF requires Heads of Internal Audit to develop and maintain a Quality Assurance and Improvement Programme (QA&IP). Standard 1310 continues this dual aspect by stating that the programme must include both internal and external assessments. This acknowledges that high standards can be delivered by managers, but it also implies that improvements can be further developed when benchmarking is obtained from outside the organisation and the internal audit function. Following our External Assessment, we have pulled together our QA&IP and included additional improvements and developments identified internally that we want to make, as aligned to SWAP's Business Plan. The QA&IP is a live document and will be regularly reviewed by the SWAP Board to ensure continuous improvement and delivery on our actions.



Summary of Internal Audit Work 2020/21

| Audit Type | Audit Area | Status | Opinion | No of | 1 = Major | \leftrightarrow | 3 = Medium |
|---------------------|---|-------------|---------------------|---------|--------------|-------------------|---------------|
| | | | | Actions | 1 | Action 2 | 3 |
| | Com | pleted Work | | | - | 2 | 3 |
| Follow Up | Direct Payments | Completed | Follow Up | N/A | | | |
| Follow Up | Gross Loans | Completed | Follow Up | N/A | | | |
| Advisory | COVID Business Grants Spotlight Process Assurance Review | Completed | Advice and Guidance | N/A | | | |
| Advisory | COVID Business Grants Red Team Process Assurance Review | Completed | Advice and Guidance | N/A | | | |
| Assurance | Pension Fund Key Control Review | Completed | Medium Reasonable | 5 | 0 | 2 | 3 |
| Grant Certification | Local Transport Capital Grants | Completed | Certification | N/A | | | |
| Grant Certification | Local Authority Bus Subsidy | Completed | Certification | N/A | | | |
| Grant Certification | COVID-19 Bus Services Support Grant | Completed | Certification | N/A | | | |
| Grant Certification | Public Health Grant | Completed | Certification | N/A | | | |
| Assurance | Brokerage – Adults | Completed | High Limited | 5 | 0 | 3 | 2 |
| Advisory | COVID-19 Discretionary Grant | Completed | Advice and Guidance | N/A | | | |
| Assurance | Budget Management | Completed | High Reasonable | 4 | 0 | 0 | 4 |
| Advisory | Infection Control Funding Assurance | Completed | Advice and Guidance | N/A | | | |
| ІСТ | Cyber Security Framework Review | Completed | Advice and Guidance | N/A | | | |
| Assurance | Brokerage - Children's | Completed | Low Limited | 12 | 0 | 6 | 6 |



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| Audit Type | Audit Area | Status | Opinion | No of | 1 = Major | \longleftrightarrow | 3 = Medium |
|------------|---|-----------|---------------------|---------|--------------|-----------------------|---------------|
| Addit Type | Addit Alea | Status | Opinion | Actions | | | |
| | | | | | 1 | 2 | 3 |
| Follow Up | School Theme HR & Payroll - Holt | Completed | Follow Up | N/A | | | |
| Follow Up | School Theme HR & Payroll – St Patrick's | Completed | Follow Up | N/A | | | |
| Follow Up | Adult Services – Court of Protection: Deputyship and Appointeeship for Service Users | Completed | Follow Up | N/A | | | |
| Assurance | Treasury Management | Completed | High Reasonable | 4 | 0 | 2 | 2 |
| Assurance | Accounts Payable - Continuous Assurance and Data Analytics | Completed | Medium Reasonable | 3 | 0 | 1 | 2 |
| Follow Up | Christ the King Catholic School Amesbury | Completed | Follow Up | N/A | | | |
| Assurance | Accounts Receivable - Continuous Assurance and Data Analytics | Completed | Medium Reasonable | 3 | 0 | 1 | 2 |
| Advisory | Adult Safeguarding – Proactive Review of Finances | Completed | Advice and Guidance | N/A | | | |
| Assurance | Whiteparish All Saints C of E Primary School | Completed | Low Reasonable | 7 | 0 | 3 | 4 |
| Assurance | Southwick C of E Primary School | Completed | Medium Substantial | 3 | 0 | 0 | 3 |
| Assurance | Chilton Foliat CE (VA) Primary School | Completed | Medium Substantial | 3 | 0 | 0 | 3 |
| Assurance | Urchfont C of E Primary School | Completed | Medium Reasonable | 5 | 0 | 2 | 3 |
| Assurance | Crockerton C of E Primary School | Completed | Medium Reasonable | 5 | 0 | 2 | 3 |
| Assurance | Stonehenge School | Completed | Medium Substantial | 3 | 0 | 1 | 2 |
| Assurance | IR35 Compliance | Completed | Medium Reasonable | 3 | 0 | 3 | 0 |



| Audit Type | Audit Area | Status | Opinion | No of | 1 = Major | \leftrightarrow | 3 = Medium |
|-----------------------|--|-----------|---------------------|---------|--------------|-------------------|---------------|
| | | Status | Opinion | Actions | Action | | |
| | | | | | 1 | 2 | 3 |
| Advisory | CiFAS Data Matching Support | Completed | Advice and Guidance | N/A | | | |
| Advisory | Baseline Assessment of Maturity for Fraud | Completed | Advice and Guidance | N/A | | | |
| Special Investigation | Strategic Assets and Facilities Investigation | Completed | Advice and Guidance | N/A | | | |
| Grant Certification | Troubled Families | Completed | Certification | N/A | | | |
| Advisory | National Fraud Initiative (NFI) | Completed | Advice and Guidance | N/A | | | |
| Redeployment | COVID-19 Business Grants – Post Payment Checks | Completed | Support | N/A | | | |
| Assurance | Missing Children | Completed | Low Reasonable | 6 | 0 | 1 | 5 |
| Assurance | Housing Benefit and Council Tax Support - Continuous Assurance and Data Analytics | Completed | Medium Substantial | 1 | 0 | 0 | 1 |
| ICT | ICT Governance Review | Completed | Advice and Guidance | N/A | | | |
| Assurance | Deprivation of Liberty Safeguards | Completed | High Reasonable | 4 | 0 | 0 | 4 |
| Follow Up | Contract Management | Completed | Follow Up | N/A | * | | |
| Assurance | Main Accounting - Continuous Assurance and Data Analytics | Completed | Medium Reasonable | 3 | 0 | 1 | 2 |
| Assurance | Council Tax and Business Rates - Continuous Assurance and Data Analytics | Completed | Low Reasonable | 3 | 0 | 1 | 2 |
| Assurance | Housing Rent - Continuous Assurance and Data Analytics | Completed | High Reasonable | 3 | 0 | 1 | 2 |
| Assurance | Payroll - Continuous Assurance and Data Analytics | Completed | Medium Substantial | 3 | 0 | 0 | 3 |



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| Audit Type | Audit Area | Status | Opinion | No of | 1 = Major | \longleftrightarrow | 3 = Medium | |
|---------------------|---|---------------|--|--------------------------------|--------------|-----------------------|---------------|--|
| Addit Type | | | Opinion | Actions | | | | |
| | | | | | 1 | 2 | 3 | |
| Assurance | Third Party Spend – Purchase to Pay | Completed | Low Limited | 8 | 0 | 5 | 3 | |
| Redeployment | COVID-19 Business Grants - Processing | Completed | Support | N/A | | | | |
| | Audits De | eferred/Remov | /ed | | | | | |
| Assurance | Data Breaches | Deferred | This audit has been defented to supporte | rred to enabl t the Council | • | • | WAP staff | |
| Grant Certification | Growth Hub | Deferred | Review deferred to 2021/22, grant certification not due yet. | | | | | |
| Assurance | ICT Strategy | Removed | Replaced with ICT Governance Review | | | | | |
| Grant Certification | Test and Trace Service Support Grant | Deferred | The certification of this grant is not due until October 2021. | | | | | |
| Assurance | Council Oversight of Maintained Schools | Deferred | This audit has been deferred to enable the redeployment of SWAP staff to support the Council's COVID response. | | | | | |
| Assurance | Medium Term Financial Strategy | Removed | This audit has been defer to suppor | rred to enabl t the Council | | • | WAP staff | |
| Assurance | Culture and Ethics | Deferred | This audit has been defer to suppor | rred to enabl t the Council | - | | WAP staff | |
| Assurance | Hullavington C of E Primary School | Deferred | Due to staff shortages a a | nd the press udit has bee | | by the pand | emic this | |
| Assurance | Stratford Sub Castle C of E School | Deferred | Due to staff shortages and the pressures caused by the pandemic this audit has been deferred. | | | | | |
| Grant Certification | Additional Dedicated Home to School and College Grant | Deferred | Review deferred to 2021/22, grant certification not due yet. | | | | | |
| Grant Certification | COVID-19 Bus Services Support Grant (Restart) | Deferred | Review deferred to 2021/22, grant certification not due yet. | | | | | |
| Assurance | Climate Change | Deferred | This audit has been defented to support | rred to enabl t the Council | • | • | WAP staff | |



| Audit Type | Audit Area | Status | Opinion | No of Actions | 1 = Major | \longleftrightarrow | 3 = Medium | |
|------------|-------------------------------|--------------------------|---|------------------------------------|--------------|-----------------------|---------------|--|
| Addit Type | | | | | Action | | | |
| | | | | | 1 | 2 | 3 | |
| Assurance | Adults Safeguarding | This audit has been remo | ved to enabl | e the redepl | oyment of S | WAP staff | | |
| Assulance | Addits Saleguarding | Removed | to suppor | port the Council's COVID response. | | | | |
| Assurance | Virtual Schools | Deferred | This audit has been deferred to enable the redeployment of SWAP staff | | | | | |
| Assurance | | Deletteu | to suppor | il's COVID response. | | | | |
| | | | This audit has been remo | ved to enabl | e the redepl | oyment of S | WAP staff | |
| Assurance | Community Safety Partnerships | Removed | to support the Council's COVID response. An internal review of this area is | | | | | |
| | | | a | ilso being un | dertaken. | | | |
| Assurance | Commercialisation Strategy | Removed | This audit has been remo | ved to enabl | e the redepl | oyment of S | WAP staff | |
| Assulatice | | Renoved | to suppor | t the Council | 's COVID res | ponse. | | |

