

SLOUGH BOROUGH COUNCIL

REPORT TO: Audit and Corporate Guidance Committee

DATE: 10th December 2020

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(Section 151 Officer)

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WARD(S): All

PART I **FOR COMMENT & CONSIDERATION**

INTERNAL AUDIT UPDATE – QUARTER 3 2020/21

1. **Purpose of Report**

The purpose of this report is to report to members on the progress of the implementation of Internal Audit management actions.

2. **Recommendation(s)/Proposed Action**

That the Committee is requested to comment on and note the attached reports

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

3a. **The Slough Joint Wellbeing Strategy 2020-24**

The actions contained within the attached reports are designed to improve the governance of the organisation and will contribute to all of the emerging strategic priorities.

1. Starting Well
2. Integration
3. Strong, Healthy and Attractive Neighbourhoods
4. Workplace Health

3b. **Five Year Plan Outcomes**

The actions contained within this report will assist in achieving all of the five year plan outcomes

4. **Other Implications**

(a) **Financial**

There are no financial implications arising from the proposed actions

(b) Risk Management

<i>Recommendation</i>	<i>Risk/Threat/Opportunity</i>	<i>Mitigation(s)</i>
<i>That Audit & Risk Committee is requested to comment on and note the attached reports</i>	<i>This report concerns risk management across the Council</i>	

(c) Human Rights Act and Other Legal Implications

There are no Human Rights Act or other legal implications in this report

(d) Equalities Impact Assessment

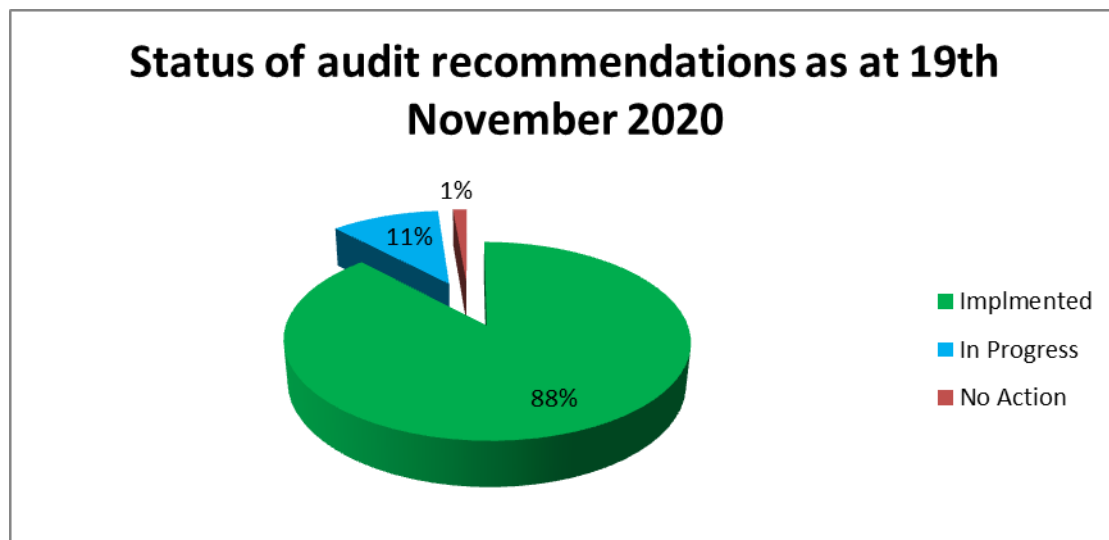
There is no identified need for an EIA

5. **Supporting Information**

5.1 **Monitoring Management Actions**

5.1.1 The Risk and Insurance Officer regularly monitors the progress of the implementation of the Management Actions made. Below is a graph that shows the percentage of High and Medium risk recommendations, from the current and two preceding audit years, that have either been implemented, are in progress, or no action has been taken.

The information presented below is based on staff confirming the actions are complete, and will be validated by RSM as part of their follow up reviews.



5.1.2 The percentage of completed actions increased to 88% from last quarter's report which showed a completion rate of 81%.

5.1.3 On a quarterly basis RSM our Internal Auditors conduct a follow up audit to review progress made by the Council to implement the previously agreed management actions. The actions covered are where Council staff have confirmed that the actions have been implemented, and the RSM work involves obtaining supporting evidence to confirm implementation.

- 5.1.4 The Quarter 1 follow up audit from RSM showed that the Council has made “**reasonable progress**” in implementing the agreed management actions..
- 5.1.5 Attached at Appendix 1 is a list of the ‘Medium’ Management Actions that are classified as still open and remain outstanding past the target date. While the ‘target date’ column reflects the updated date for implementing the action, the ‘update detail’ column shows the audit trail from the original date of implementation to the revised date where applicable.
- 5.1.6 Attached at Appendix 2 is a list of the “High” Management Actions that remain Outstanding past the target date. While the ‘target date’ column reflects the updated date for implementing the action, the ‘update detail’ column shows the audit trail from the original date of implementation to the revised date where applicable

Current Position		Previous Audit Committee	
No Action	Partially Complete	No Action	Partially Complete
0	1	0	2

6. **Comments of Other Committees**

There are no comments from other Committees

7. **Conclusion**

Members are requested to note the reports.

8. **Appendices Attached**

Appendix 1 – Details of outstanding Medium agreed management actions

Appendix 2 – Details of outstanding High agreed management actions

9. **Background Papers**

None