

Borough Council of King's Lynn and West Norfolk

Annual Report and Opinion 2021/22

**Responsible Officer: Faye Haywood – Internal Audit Manager for Borough Council of King's
Lynn and West Norfolk**

CONTENTS

| | |
|-----------------------------------------------------------------------|-----------|
| 1. INTRODUCTION..... | 2 |
| 2. ANNUAL OPINION OF THE HEAD OF INTERNAL AUDIT..... | 2 |
| 2.1 <i>Roles and responsibilities.....</i> | <i>2</i> |
| 2.2 <i>The opinion itself.....</i> | <i>3</i> |
| 3. AUDIT WORK UNDERTAKEN DURING THE YEAR..... | 4 |
| 4. THIRD PARTY ASSURANCES..... | 6 |
| 5. ANNUAL REVIEW OF THE EFFECTIVENESS OF INTERNAL AUDIT..... | 7 |
| APPENDIX 1 – AUDIT WORK UNDERTAKEN DURING 2021/22..... | 10 |
| APPENDIX 2 – STATUS OF AGREED INTERNAL AUDIT RECOMMENDATIONS . | 12 |
| APPENDIX 3 - OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS..... | 14 |
| APPENDIX 4 – LIMITATIONS AND RESPONSIBILITIES..... | 33 |

1. INTRODUCTION

- 1.1 The Accounts and Audit Regulations 2015 require 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 public sector internal auditing standards or guidance”.
- 1.2 Those standards – the Public Sector Internal Audit Standards - require the Chief Audit Executive to provide a written report to those charged with governance (known in this context as the Audit Committee) to support the Annual Governance Statement (AGS). This report must set out:
- The opinion on the overall adequacy and effectiveness of the Council’s framework of governance, risk management and control during 2021/22, together with reasons if the opinion is unfavourable;
 - A summary of the internal audit work carried from which the opinion is derived, the follow up of management action taken to ensure implementation of agreed action as at financial year end and any reliance placed upon third party assurances;
 - Any issues that are deemed particularly relevant to the Annual Governance Statement (AGS);
 - The Annual Review of the Effectiveness of Internal Audit, which includes; the level of compliance with the PSIAS and the results of any quality assurance and improvement programme, the outcomes of the performance indicators.
- 1.3 When considering this report, the statements made therein should be viewed as key items which need to be used to inform the organisation’s Annual Governance Statement, but there are also a number of other important sources to which the Audit Committee and statutory officers of the Council should be looking to gain assurance. Moreover, in the course of developing overarching audit opinions for the authority, it should be noted that the assurances provided here, can never be absolute and therefore, only reasonable assurance can be provided that there are no major weaknesses in the processes subject to internal audit review. The annual opinion is thus subject to inherent limitations (covering both the control environment and the assurance over controls) and these are examined more fully at **Appendix 3**.

2. ANNUAL OPINION OF THE HEAD OF INTERNAL AUDIT

2.1 Roles and responsibilities

- The Council is responsible for establishing and maintaining appropriate risk management processes, control systems, accounting records and governance arrangements.
- The AGS is an annual statement by the Leader of the Council and the Chief Executive that records and publishes the Council’s governance arrangements.
- An annual opinion is required on the overall adequacy and effectiveness of the Council’s framework of governance, risk management and control, based upon and limited to the audit work performed during the year.

This is achieved through the delivery of the risk based Annual Internal Audit Plan discussed and approved with the Management Team and key stakeholders and then approved by the Audit Committee.

The Internal Audit plan was approved at the meeting held 15 March 2021. This opinion does not imply that internal audit has reviewed all risks and assurances, but it is one component to be considered during the preparation of the AGS.

The Audit Committee should consider this opinion, together with any assurances from management, its own knowledge of the Council and any assurances received throughout the year from other review bodies such as the external auditor.

2.2 The opinion itself

The overall opinion in relation to the framework of governance, risk management and control at Borough Council of King's Lynn and West Norfolk is **reasonable**.

A total of 15 assurance audits of 20 planned have now been completed. A total of 14 of the completed audits have received a positive assurance grading.

It is encouraging to note that of those 14 mentioned above, six audits have resulted in a Substantial assurance grading:

- Economic Development
- Planning Enforcement
- Information Legislation
- Street Cleaning
- Licensing
- Payroll

One audit on Alive West Norfolk has resulted in a Limited assurance grading. A total of six recommendations were raised, two high, one medium and three low.

We recommend that the high and medium priority findings raised within this report are referenced within the Council's Annual Governance Statement, until such time that verification work to demonstrate that improvements are embedded is undertaken, a summary of those recommendations can be found at section 3.4 of this report.

Work is concluding on the following three areas. Reports with indicative gradings are imminent.

- Accounts Payable
- Food Health and Safety
- Capital Programme
- Housing Standards
- Waste Services

Overall, the majority of areas audited in the 2021/22 Internal Audit Plan have resulted in a positive assurance grading. A reasonable opinion of the governance risk and control framework at Borough Council of King's Lynn and West Norfolk is therefore indicated.

In providing the opinion the Council's risk management framework and supporting processes, the relative materiality of the issues arising from the internal audit work during the year and management's progress in addressing any control weaknesses identified therefrom have been taken into account.

The opinion has been discussed with the Section 151 Officer prior to publication.

3. AUDIT WORK UNDERTAKEN DURING THE YEAR

3.1 **Appendix 1** records the internal audit work delivered during the year on which the opinion is based, and provides the assurance opinion, the number of recommendations raised and the year-end position in addressing the issues raised.

3.2 Summary of the internal audit work

In summary, a total of 20 audits were planned for 2021/22. Internal Audit so far has issued 15 assurance reports – six substantial, seven reasonable and one limited and one position statement on Covid-19 Business Grants. A further five audit reports are currently being finalised and due to be issued soon.

Revisions to the audit plan in October 2021 resulted in two additions - one for Waste Services and one for Housing Standards, the results of which are imminent.

The finalised 2021/22 reports, have now been presented to the Audit Committee, ensuring open and transparent reporting, and enabling the Committee to review key service area controls and the conclusions reached.

Finance System Licencing

During November 2021 to December 2021, the Internal Audit team were requested to assist in the investigation of a software licensing contractual dispute in respect of the Council's Financial Management system, this work was completed outside of the agreed audit plan for 2021/22.

As part of the terms and conditions of the Financial Management system contract, a licensing audit had been undertaken by the software providers with this identifying an overuse of "professional licences". Following the audit, the Council were notified by the software provider of penalty fees to be payable because of the overuse. Following a request by the Council's Section 151 Officer, Internal Audit carried out an investigation in conjunction with the Financial Services Department where it was established that there was no reporting mechanism or means for the Council to determine how many users it held within each type of licence category. Investigation of the agreed terms and conditions within the signed contract agreement identified that the pricing structure being applied by the software providers was in dispute. It also emerged that the annual subscription fee had been overpaid by the council due to the incorrect application by the supplier of indexation-based increases to the rates:

- As a result of the investigation and then further negotiation by the financial services department the fees payable were reduced.
- Overpayments were also identified following the internal audit investigation of incorrectly applied annual subscription indexation-based increase rates.
- In addition to the incorrect indexation-based increases being applied, this further established a risk that applications of indexation-based increases could have been further compounded in future years upon the annual subscription fees payable.

The work undertaken on this matter by the Internal Audit team has been factored into the development of the assurances required for the 2022/23 Internal Audit plan.

3.3 Follow up of management action

In October 2021 the Internal Audit Manager presented a report to the Audit Committee in respect of compliance with the Public Sector Internal Audit Standards. In conformance with standard 2500 Monitoring Progress, a follow-up process must be established to ensure that internal audit actions have been effectively implemented or that senior management has accepted the risk of not taking action.

The Internal Audit team holds a Recommendations Database showing all agreed Internal Audit recommendations. There is a total of 131 recommendations outstanding, starting from 2016/17 and leading up to 2021/22. Please see **Appendix 2 – Status of Agreed Internal Audit Recommendations**.

Two of these recommendations are high priority; 57 are medium; and 72 are low priority.

In order to adhere to the above-mentioned standard, it was proposed that an exercise would be undertaken to obtain an update for all overdue high and medium priority recommendations.

The database has been circulated to all the Assistant Directors and progress updates requested. As a result of this exercise a total of 30 have been verified as complete.

A significant number of recommendations remain outstanding; however, the Management Team have committed to working with Internal Audit to complete and close actions. Please see **Appendix 3 – Outstanding Internal Audit Recommendations** for the latest updates provided by management.

On a quarterly basis a report will be produced containing the reason for all overdue recommendations for Management Team. This meeting will occur prior to the report being produced for each Audit Committee meeting to enhance accountability and ensure that risks identified by Internal Audit are resolved in a timely manner.

Where recommendations are raised during Internal Audit reviews, the auditors will work with the responsible officers to determine a deadline that they have confirmed is achievable in line with grading guidelines provided below. Once accepted, this deadline can be revised; however, a reason for any delays must be justified and provided to Management Team and the Audit Committee for their awareness.

The following table indicates how many recommendations are outstanding in the financial year they were raised. The Internal Audit team urges management to prioritise the resolution of the high and historical recommendations.

| Financial Year | Recommendations |
|----------------|-----------------|
| 2017/18 | 4 |
| 2018/19 | 31 |
| 2019/20 | 65 |
| 2020/21 | 15 |
| 2021/22 | 16 |
| Total | 131 |

We recommend that any outstanding medium actions from limited assurance reports and any overdue high priority actions are referenced within the Council's annual governance statement until they are verified as complete.

3.4 Issues for inclusion in the Annual Governance Statement

Overall, in 2021/22 a total of 15 Internal Audit assurance audit have been carried out.

A total of 14 of these have resulted in a positive assurance grading. As stated within the opinion statement, Internal Audit recommends that the two high, and one medium recommendation raised from the Limited Alive West Norfolk (AWN) audit report are highlighted within the Council's Annual Governance Statement until they are complete. The recommendations are summarised as follows:

- A suite of new SLA's and agreed set of KPI's should be developed for the relevant Service Areas included in the previous SLA. These need to be developed at the earliest possible opportunity and reported to the AWN Board and Council if required.
- Responsible officers from finance and AWN to consider the SLA fees and charges going forward, including any additional costs with a view to amending these to the appropriate values. Budgets should be amended and reflect actual, and agreed, costs rather than expected costs.
- When the Management Agreement is next due for review, consider if it is appropriate for member involvement in decisions of AWN.

In addition to the above-mentioned actions, we recommend that any outstanding medium recommendations from previous limited assurance reports and any high priority recommendations raised that remain unresolved are reflected in the Councils AGS until they have been verified as complete. The following recommendations apply:

Planning Control 2020/21 – Limited Opinion Medium Recommendation

- Fees and charges on the website need to be amended to show the correct costs for each area of the service to the customer.

Alive West Norfolk 2019/20 – Substantial Opinion High Recommendation

- Retention schedules need to be introduced for AWN once records and retention processes have been agreed.

Child Protection 2019/20 – Substantial Opinion High Recommendation

Property Services to follow the risk assessment procedures set out within the Safeguarding Policy for "High" and "Medium" risk rated tenants and provide the relevant safeguarding information within the Tenant Information Pack.

The council may also wish to disclose that it is committed to reducing the significant number of outstanding internal audit recommendations. This will ensure that good governance can be demonstrated by mitigating the risks that have been identified by internal audit work in a timely manner.

4. THIRD PARTY ASSURANCES

- 4.1 In arriving at the overall opinion reliance has not been placed on any third-party assurances.

5. ANNUAL REVIEW OF THE EFFECTIVENESS OF INTERNAL AUDIT

5.1 Quality Assurance and Improvement Programme (QAIP)

5.1.1 Internal Assessment

A checklist for conformance with the Public Sector Internal Audit Standards (PSIAS) and the Local Government Application Note has been completed for 2021/22. This covers: the Definition of Internal Auditing, the Code of Ethics and the Standards themselves.

The Attribute Standards address the characteristics of organisations and parties performing Internal Audit activities, in particular, Purpose, Authority and Responsibility, Independence and Objectivity, Proficiency and Due Professional Care, and Quality Assurance and Improvement Programme.

The Performance Standards describe the nature of Internal Audit activities and provide quality criteria against which the performance of these services can be evaluated, in particular: Managing the Internal Audit Activity, Nature of Work, Engagement Planning, Performing the Engagement, Communicating Results, Monitoring Progress and Communicating the Acceptance of Risks.

An assessment was carried out in October 2021 by the Internal Audit Manager and a total of nine recommendations were identified. Progress against agreed actions is as follows:

1. **To provide assurance required over complex risks identified within the Corporate Risk Register it is advised that IT audit resource is used to undertake this work for the Council in future.**
 - Complete - a total of 10 days' worth of Internal Audit coverage has been allocated to an IT audit specialist for the agreed 2022/23 plan following the completion of a risk-based planning process.
2. **The Internal Audit Charter is updated to provide a Mission Statement and provides details of fraud related work undertaken by the Senior Internal Auditor. The Internal Audit Charter should then be reapproved by Management Team and Audit Committee.**
 - Complete – Charter updated and approved in April 2022.
3. **Performance metrics are designed across a range of Internal Audit objectives and are agreed by Management Team, the Audit Committee and results against target are provided within progress reports.**
 - Six new key performance measures have been designed and agreed with senior management for 2022/23. Progress against performance will be provided within progress reports to the committee throughout the year. Further refinements are also planned to ensure audit feedback and performance targets are easily comparable.
4. **An externally validated assessment is scheduled to provide independent assurance over conformance with the PSIAS.**
 - External assessment booked for October 2022.

5. Internal Audit plan to be revised to reflect the current risk profile of the Council.

- The 2021/22 Internal Audit plan was revised and presented for approval at the October 2021 Audit Committee. A total of 102 days were removed, and two audits were added to the plan to provide assurance over significant risks.

6. Risk Maturity Assessment to be undertaken by the Internal Audit Manager ahead of the 2022/23 planning process.

- Assessment completed to inform the approach to Internal Audit Planning for 2022/23. Report with recommendations presented to management for consideration. Full report with agreed actions to be presented to the Audit Committee in 2022.

7. Audit Universe populated by the Internal Audit Team and used to support an Assurance Framework.

- Completed and provided with the Strategic and Annual Internal Audit Plan 2022/23.

8. Follow up process to be redesigned allowing for quarterly reporting to Management Team, Audit Committee and to allow for Internal Audit verification of completed recommendations.

- The first stages of the process are underway. Updates have been gathered. Continuous monitoring to be actioned throughout 2022.

9. Audit opinions to be revised.

- Four-tiered grading terminology has been amended and is now reflected within Internal Audit reports.

5.1.2 External Assessment

The PSIAS requires all Internal Audit functions in the UK Public Sector to be independently externally assessed every five years. The last external assessment was undertaken in September 2014 and was therefore due in September 2019. Due to the pandemic this review was postponed. It has now been scheduled for October 2022.

5.2 Performance Indicator outcomes

5.2.1 The Internal Audit Service was benchmarked against two performance indicators in 2021/22. The results are as follows:

| Measure | Target | Result |
|------------------------------------|--------|------------------------|
| Delivery of audit plan | 95% | Target achieved 95.86% |
| Percentage of time spent on audits | 60% | Target achieved 67.25% |

5.2.2 In addition to the above, internal audit have started to collect data relating to internal audit satisfaction from auditees. So far four responses to post audit surveys have been received and positive feedback provided in all cases.

APPENDIX 1 – AUDIT WORK UNDERTAKEN DURING 2021/22

| Audit Area | Assurance | No of Recs | Implemented | High OS | Medium OS | Low OS | Not yet due |
|--------------------------------------------|------------------------|------------|-------------|----------|-----------|----------|-------------|
| Economic Development | Substantial | 6 | 0 | 0 | 4 | 0 | 2 |
| Planning Enforcement | Substantial | 6 | 0 | 0 | 4 | 2 | 0 |
| Information Legislation (DPA, FOI, EIR) | Substantial | 5 | 3 | 0 | 0 | 0 | 2 |
| Street Cleansing | Substantial | 4 | 0 | 0 | 0 | 1 | 3 |
| Council Tax & Business Rates | Reasonable | 10 | 0 | 0 | 1 | 0 | 9 |
| Financial Management Systems | Reasonable | 4 | 0 | 0 | 0 | 1 | 3 |
| Benefits | Reasonable | 3 | 0 | 0 | 2 | 0 | 1 |
| Emergency Planning & Management | Reasonable | 3 | 1 | 0 | 2 | 0 | 0 |
| Covid-19 Business Grants | Consultancy engagement | 7 | 0 | 0 | 7 | 0 | 0 |
| Policies | Reasonable | 10 | 0 | 0 | 0 | 0 | 10 |
| Alive West Norfolk | Limited | 6 | 0 | 0 | 0 | 0 | 6 |
| ICT Disaster Recovery | Reasonable (DRAFT) | 11 | 0 | 0 | 0 | 0 | 11 |
| Licensing | Substantial | 2 | 0 | 0 | 0 | 1 | 1 |
| Financial Governance and Budgetary Control | Reasonable | 7 | 0 | 0 | 0 | 0 | 7 |
| Payroll, expenses and allowances | Substantial | 2 | 0 | 0 | 0 | 0 | 2 |
| Accounts Payable | TBC | | | | | | |
| Food Safety & Health and Safety | TBC | | | | | | |
| Capital Programme | TBC | | | | | | |
| Waste Services | TBC | | | | | | |
| Housing Standards | TBC | | | | | | |
| Total | | 86 | 4 | 0 | 20 | 5 | 57 |

| Assurance level definitions | | Number |
|-----------------------------|--------------------------------------------------------------------------------|--------|
| Substantial Assurance | Based upon the issues identified there is a robust series of suitably designed | 7 |

| Assurance level definitions | | Number |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| | controls in place upon which the organisation relies to manage the risks to the continuous and effective achievement of the objectives of the process, and which at the time of our audit review were being consistently applied. | |
| Reasonable Assurance | Based upon the issues identified there is a series of internal controls in place, however these could be strengthened to facilitate the organisations management of risks to the continuous and effective achievement of the objectives of the process. Improvements are required to enhance the controls to mitigate these risks. | 7 |
| Limited Assurance | Based upon the issues identified the controls in place are insufficient to ensure that the organisation can rely upon them to manage the risks to the continuous and effective achievement of the objectives of the process. Significant improvements are required to improve the adequacy and effectiveness of the controls to mitigate these risks. | 1 |
| No Assurance | Based upon the issues identified there is a fundamental breakdown or absence of core internal controls such that the organisation cannot rely upon them to manage risk to the continuous and effective achievement of the objectives of the process. Immediate action is required to improve the controls required to mitigate these risks. | 0 |

APPENDIX 2 – STATUS OF AGREED INTERNAL AUDIT RECOMMENDATIONS

| Audit Ref | Audit Area | Assurance Level | Completed since November 2021 | | | Outstanding | | | Total Outstanding | Not Yet Due | High | Medium | Low |
|---------------------------------------|---------------------------------------------------------------------|-----------------|-------------------------------|--------|-----|-------------|--------|-----|-------------------|-------------|------|--------|-----|
| | | | High | Medium | Low | High | Medium | Low | | | | | |
| 2016/17 Internal Audit Reviews | | | | | | | | | | | | | |
| 16/17.4 | Insurance | Substantial | | 4 | 1 | | | | 0 | | | | |
| 2017/18 Internal Audit Reviews | | | | | | | | | | | | | |
| 17/18.3 | Ethical Culture | Substantial | | | | | | 1 | 1 | | | | |
| CO8 | Asset Management | Substantial | | 1 | | | 2 | 1 | 3 | | | | |
| 2018/19 Internal Audit Reviews | | | | | | | | | | | | | |
| CO7 | Accounts Receivable | Full | | 5 | 1 | | 1 | | 1 | | | | |
| 18/19.12 | Electoral Services | Full | | | 1 | | | | 0 | | | | |
| 18/19.2 | Legal Services | Substantial | | | | | 1 | 7 | 8 | | | | |
| 18/19.14 | Waste & Recycling | Substantial | | | | | 3 | | 3 | | | | |
| 18/19.1 | Risk Management | Substantial | | 3 | 3 | | | | 0 | | | | |
| 18/19.7 | Vehicle Fleet | Substantial | | | | | 6 | 2 | 8 | | | | |
| 18/19.8 | General Data Protection Regulations 2016 & Data Protection Act 2018 | Substantial | | | | | 2 | 9 | 11 | | | | |
| 2019/20 Internal Audit Reviews | | | | | | | | | | | | | |
| 19/20.2 | Anti-Fraud, Bribery & Corruption | Substantial | | | 1 | | 3 | | 3 | | | | |
| 19/20.1 | Annual Governance Statement | Substantial | | 2 | 5 | | 2 | 1 | 3 | | | | |
| 19/20.8 | Car Parking & Civil Enforcement | Substantial | | | | | 4 | 7 | 11 | | | | |
| 19/20.5 | Careline | Substantial | | 4 | | | 5 | 1 | 6 | | | | |
| 19/20.7 | Alive West Norfolk - Governance | Substantial | | | 1 | 1 | 1 | 3 | 5 | | | | |
| 19/20.3 | Whistleblowing Arrangements | Substantial | | | 1 | | | 12 | 12 | | | 1 | |
| N/A | Personal Identifier & Financial Relationship | Substantial | | | | | 2 | | 2 | | | | |
| 18/19.3 | Child Protection | Substantial | | | 1 | 1 | | 3 | 4 | | | | |
| 19/20.4 | Council Offices & Sites | Substantial | | | | | 3 | 5 | 8 | | | | |
| 19/20.12 | Planning Support | Substantial | | | | | 3 | 4 | 7 | | | | |
| 19/20.6 | ICT - Document Management | Substantial | | | | | 2 | 2 | 4 | | | | |

| | | | Completed since November 2021 | | | Outstanding | | | Total Outstanding | Not Yet Due | | |
|---------------------------------------|---------------------------------------------------|-----------------|-------------------------------|-----------|-----------|-------------|-----------|-----------|-------------------|-------------|-----------|-----------|
| | | | High | Medium | Low | High | Medium | Low | | | | |
| Audit Ref | Audit Area | Assurance Level | | | | | | | | | | |
| 2020/21 Internal Audit Reviews | | | | | | | | | | | | |
| 20/21.11 | CCTV | Substantial | | | | | | 2 | 2 | | | |
| 20/21.6 | Contract Management | Substantial | | 2 | 2 | | | | 0 | | | |
| 20/21.12 | Planning Control | Limited | | | | | 1 | 1 | 2 | | | |
| | ICT - Cyber Security | Substantial | | 2 | 5 | | 5 | 3 | 8 | | | |
| 20/21.16 | Planning Enforcement | Substantial | | | | | | 3 | 3 | | | |
| 2021/22 Internal Audit Reviews | | | | | | | | | | | | |
| 21/22.3 | Covid-19 Business Grants Post Assurance | Consultancy | | 7 | | | | | 0 | | | |
| 21/22.10 | Emergency Planning & Management | Reasonable | | | 1 | | 2 | | 2 | | | |
| | Regeneration & Economic Development | Substantial | | 2 | | | 2 | | 2 | | 2 | |
| 20/21.17 | Street Cleansing | Substantial | | | | | | 1 | 1 | | | 3 |
| CO4 | Benefits | Reasonable | | | | | 2 | | 2 | | | 1 |
| 21/22.9 | Alive West Norfolk | Limited | | | | | | | 0 | 2 | 1 | 3 |
| CO9 | Financial Governance & Budgetary Control | Reasonable | | | | | | | 0 | | 3 | 4 |
| 20/21.1 | Policies | Reasonable | | | | | | | 0 | | 4 | 6 |
| 21/22.8 | Data Sharing Arrangements/Information Legislation | Substantial | | | 3 | | | | 0 | | 2 | |
| CO1 | CTAX & NNDR | Reasonable | | | | | 1 | | 1 | | | 9 |
| 21/22.14 | Licensing | Substantial | | | | | | 1 | 1 | | | 1 |
| | Disaster Recovery | Reasonable | | | | | | | 0 | | 5 | 6 |
| | Payroll | Substantial | | | | | | | 0 | | | 2 |
| CO3 | Financial Management Systems | Reasonable | | | | | | 1 | 1 | | 1 | 2 |
| 20/21.16 | Planning Enforcement | Substantial | | | | | 4 | 2 | 6 | | | |
| TOTALS | | | 0 | 32 | 26 | 2 | 57 | 72 | 131 | 2 | 18 | 38 |

APPENDIX 3 - OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS

2017/18

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------|------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Asset Management | Future reconciliations between the various systems should be considered to ensure all assets are identified and recorded. A unique reference for each asset should be used, as IDOX and TF need to cross reference. | Medium | Once the stock take exercise at the Town Hall is complete, an update of Technology Forge will be undertaken to reflect the actual stock recorded. This will be reconciled at appropriate intervals in the future (i.e. when Insurance is due for renewal). | AD Resources | 30/06/2019 | 31/03/2023 | Outstanding | The Asset Register is under review and will be circulated for review by service managers during 22/23 and built into the year-end timetable. |
| Asset Management | A stock take exercise whereby descriptions and photos of assets at the town hall should be undertaken, so as to arrive at a definitive list that can be used on all council systems in the future. | Medium | The stock take exercise at the Town Hall is almost complete, so once the final list has been confirmed, the insurers will be updated if there is any material change to the value currently insured. | AD Property and Projects | 30/03/2019 | 31/03/2023 | Outstanding | The Asset Register is under review and will be circulated for review by service managers during 22/23 and built into the Year-end timetable. |

2018/19

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------|------------------|-------------|----------------------------------------------------------------------------------------------------------------------|
| Accounts Receivable | Accounts Payable Supervisor to review the accounts receivable/income section of the Financial Regulations to consider the points raised by Internal Audit (The Auditor is to provide details of areas where the financial regulations can be enhanced/further controls can be included). | Medium | Agreed. Internal Audit to provide details to the Accounts Payable/Receivable Supervisor. | AD Resources | 31/12/2019 | 31/12/2022 | Outstanding | The Financial Services Manager will review and update the Financial Regulations for proposal to Council in Q3 22/23. |
| Legal Services | A formal contract monitoring process should be put in place to ensure that Eastlaw comply with the Terms of the Agreement as set out in the SLA. Regular monitoring reports should be reported to the senior management team at the Council. The reports should detail the work undertaken by Eastlaw on behalf of the Council and compliance with their own Service Standards, as set out in the SLA. | Medium | Contract monitoring will be discussed as part of the ongoing review of the SLA. | Assistant to the Chief Executive | 31/03/2022 | | Outstanding | No additional information |
| Waste & Recycling | Consider creating a link on the waste & recycling webpages to "Keep Britain Tidy" to provide householders with further information and advice to help reduce excess waste. | Medium | The drivers for 'good recycling' are complex and appear to be driven more by levels of education/household formation/income and other factors such as deprivation & affluence. The demographic of areas and contamination have been mapped by the Norfolk Waste Partnership and have been the subject of research by WRAP and these may be more appropriate benchmarks in communications and campaigns. | AD Operations & Commercial | 31/07/2021 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------|------------------|-------------|---------------------------|
| Waste & Recycling | Consider providing information to the public on how much contamination can cost and how they can help in a positive way to reduce contamination. | Medium | Positively informing households on how to recycle well and to overcome some of the barriers to quality recycling for part of the communications plan which has now been adopted on 19/11/20. | AD Operations & Commercial | 31/07/2021 | | Outstanding | No additional information |
| Waste & Recycling | Conduct more frequent inspections and hotspot / heatmapping activities when the new contract is fully implemented. | Medium | Significant resources were provided to the previous inspections undertaken in 2016 as a result of a Norfolk wide settlement with the MRF. With more community involvement through groups such as Community Action Norfolk and Age UK within the new waste contract from April 2021, these community groups could potentially be utilised to help nudge residents into recycling more and more effectively through methods such as more frequent inspections. The new computer system should also be able to assist through more refined processes to identify poor areas/addresses for targeted interventions. | AD Operations & Commercial | 31/07/2021 | | Outstanding | No additional information |
| Vehicle Fleet | Main documentation (V5 Document, Purchase Order / Invoice, Current years MOT, Tax, Service and maintenance records) should be kept in all hard copy files at the depot. This would enable all key documents to be found in one place if required. | Medium | All hard copies of key documents are to be kept in individual vehicle files at the depot. This will be an on-going exercise. | AD Operations & Commercial | 30/11/2020 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------|------------------|-------------|---------------------------|
| Vehicle Fleet | Before updating the Fuel spreadsheet, the Admin Assistant should verify with the Operations Assistant, that the vehicle should be added to the data. | Medium | Training Issue to be addressed to relevant officers. | AD Operations & Commercial | 30/09/2020 | | Outstanding | No additional information |
| Vehicle Fleet | The Daily Checklist form should be updated to allow drivers to record the date and mileage, when vehicles have been re-fuelled. This will allow checks against the Fuel Genie Invoice to be more accurate, than they are at present. | Medium | Procedure documents are due to be amended and updated in March 2020. | AD Operations & Commercial | 30/09/2020 | | Outstanding | No additional information |
| Vehicle Fleet | Amend the fuel spreadsheet to allow the recording of mileage from the fuel receipts received by drivers. | Medium | Some fuel cards do not require mileage to be recorded when being used. However, the majority of fuel cards do require this, so discussions will take place between Public Open Space Manager and Fuel Genie to ensure mileage is asked for as a standard. Public Open Space Manager to speak to drivers to ensure they are providing the correct information to re-fuelling stations. | AD Operations & Commercial | 30/09/2020 | | Outstanding | No additional information |
| Vehicle Fleet | All applicable vehicles should be correctly recorded within Technology Forge. | Medium | As the Finance team are currently heavily involved in annual estimates and the construction of the new finance system, these areas will be discussed during the follow-up in 6 months' time. | AD Operations & Commercial | 31/12/2020 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Vehicle Fleet | If part-exchange is involved when purchasing new vehicles / equipment, there should be a clear indication on the purchase documents of the value of part-exchange received and the records should be easily attainable from within the finance system. (See Recommendation Number Three). | Medium | Copies of part-exchange values agreed within tender documentation will be placed within individual vehicle files at the depot. | AD Operations & Commercial | 31/03/2021 | | Outstanding | No additional information |
| General Data Protection Regulations 2016 & Data Protection Act 2018 | The revised Data Protection Policy (DPP) should go through the prescribed approval process and, if deemed appropriate, be approved by Cabinet. | Medium | Agreed. This will be discussed at the next Governance Committee meeting, before putting the DPP to Cabinet for approval. | Deputy SIRO | 31/12/2019 | | Outstanding | No additional information |
| General Data Protection Regulations 2016 & Data Protection Act 2018 | The revised DPP should be publicised to officers and Members. This could be done via an article in Internal Affairs. | Medium | Agreed. Once the revised DPP has been approved by Cabinet, it will be publicised. | Deputy SIRO | 31/12/2019 | | Outstanding | No additional information |

2019/20

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Anti-Fraud, Bribery & Corruption | The Council's anti-fraud message should be communicated to staff, agency workers, volunteers, contractors, suppliers, Members and to the general public. The Council should issue regular fraud awareness communications to staff, publicising its anti-fraud stance, the action it takes against fraudsters, and what is being done to protect it against fraud. This could take the form of regular articles in Internal Affairs. | Medium | Agreed. A quarterly anti-fraud update will be included within Internal Affairs. This will include such fraud related topics as the Fraud Risk Register, contacts in the Audit & Fraud Team, links to anti-fraud policies, current scams which staff need to be aware of, recent local and national fraud cases, and what staff should do if they suspect fraud. | AD Resources | 31/05/2020 | 31/07/2022 | Outstanding | When resources permit this will be revisited. An annual update and half yearly update is delivered to members of the Audit Committee. The Council has a corporate anti-fraud and anti-corruption policy available on InSite. As well as an Anti-Money Laundering Policy. |
| Anti-Fraud, Bribery & Corruption | Senior management should review the level of resources devoted to anti-fraud and corruption and consider whether it is sufficient to enable the Council to meet its commitment of maintaining an anti-fraud culture. Increased resources would enable the Council to cope with the ever rising demand, particularly with regards to NFI data matching, participation in the Norfolk FraudHub and joint working with DWP. It would also enable local proactive exercises to be undertaken on specific high risk areas. | Medium | The Internal Audit Manager will discuss the current counter fraud provision at the Council and the adequacy of the level of resources devoted to anti-fraud with the new S151 Officer when they are in post. | AD Resources | 31/07/2020 | 31/07/2022 | Outstanding | We are in the process of organising outsourcing of the SPD canvassing review of over 3,300 data matches to an external provider. Furthermore on the return of the Revenues & Benefits Manager from a period of leave we will be revisiting the appointment to a previously un-filled position within the Revenues Team that was aimed to assist with the investigation work identified through data matching exercises through the Norfolk County Council funded Premium SPD project work. |
| Anti-Fraud, Bribery & Corruption | Fraud awareness training should be provided to all staff and Members. For staff, this could take the form of an e-learning training package which all staff would be required to complete on an annual basis; it should also form part of the induction process for new staff. Members and key officers should receive face-to-face training. Targeted anti-fraud training should | Medium | Internal Audit Manager to ascertain the possible types of anti-fraud training available which could be provided to staff and Members. | AD Resources | 30/09/2020 | 31/07/2022 | Outstanding | There is a requirement to spend time to look at this, but the Senior Internal Auditor is currently working on other projects at the current time. Once these have been concluded time can be placed upon developing relevant training, |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | be provided to key officers, such as those working in Finance and Procurement. | | | | | | | |
| Annual Governance Statement | All items listed as supporting evidence in the AGS and Code of Corporate Governance should be made available on either the Council's website or on the intranet, as appropriate. | Medium | Agreed. Items of supporting evidence in the AGS and Code will be posted onto the website and/or intranet, as appropriate. | Assistant to the Chief Executive | 31/12/2019 | | Outstanding | No additional information |
| Annual Governance Statement | Those policies where there is a lack of evidence of regular review being undertaken should be reviewed and updated, as appropriate. All policies should be dated, have a review date and state the frequency of review | Medium | Agreed. The process for undertaking the regular review of policies to ensure their currency will be discussed at Service Planning meetings. | Assistant to the Chief Executive | 31/12/2020 | | Outstanding | No additional information |
| Car Parking & Civil Enforcement | As referred to in the King's Lynn Transport Strategy, BCKLWN should develop a Car Parking Strategy. This would ensure that a town-wide approach to car parking management is achieved, together with enabling the delivery of the Transport Strategy's suggested improvements. | Medium | AECOM have been appointed by BCKLWN to prepare a Parking Strategy for King's Lynn town centre setting out how the town can cater for existing and future car parking demand up to 2030. The current draft Parking Strategy (version 2.0), dated 13/10/20, incorporates comments raised by BCKLWN. The strategy is still a draft as it has yet to receive senior management sign off from within AECOM; a final version will be issued once signed off. | AD Operations & Commercial | 31/03/2021 | | Outstanding | No additional information |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Car Parking & Civil Enforcement | The Annual Maintenance Agreement with Metric Group Ltd. for the maintenance of the car park ticket machines should be enhanced with the introduction of an annual review clause stating "The parties shall conduct an annual review of the services and performance under the contract on 1st April each year or the most convenient date thereafter. The parties shall review any areas for improvement, any efficiencies that can be made and best value". The agreement should clearly state that each machine will have a preventative maintenance visit each year. The agreement should include a cap on any price increases imposed by Metric, make reference to annual inflation rises and detail how the price is determined each year. | Medium | Agreed. The maintenance agreement will be enhanced to include the following: An annual review clause; State that each machine will have a maintenance visit each year; A cap on price increases, make reference to annual inflation rises and detail how the price is determined each year. | AD Operations & Commercial | 31/03/2021 | | Outstanding | No additional information |
| Car Parking & Civil Enforcement | The terms and conditions of the contract between BCKLWN and Loomis for the collection and banking of cash and cheques should be agreed as soon as possible. The contract should state that it will be subject to annual review and set out key performance indicators. The contract should state that the parties will conduct an annual review of the services and performance under the contract on 1st April each year (or the most convenient date thereafter), including a review of any areas for improvement, any efficiencies that could be made and best value. | Medium | BCKLWN have engaged Zurich to increase the coin holding limit from the current £50k limit to £150k. Ongoing tender exercise to engage a HGV to collect coins on a weekly basis, subject to tender and process re-engineering. | AD Operations & Commercial | 31/03/2021 | | Outstanding | No additional information |
| Car Parking & Civil Enforcement | The SLA between BCKLWN and Newlyn PLC should be revised so that it states that it will be reviewed on an annual basis. The SLA should state that "The parties shall conduct an annual review of the services and performance under the contract on 1st April each year or the most convenient date thereafter. The parties should review any areas for | Medium | Agreed. The SLA will be revised so that it states that it will be reviewed on an annual basis and will give an actual end date. | AD Operations & Commercial | 31/03/2021 | | Outstanding | No additional information |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | improvement, efficiencies that could be made and best value." The SLA should give an actual end date, rather than being open-ended. | | | | | | | |
| Careline | <p>More than one officer should be able to book appointments at any one time. A trial period to ascertain and gain assurance that the system has the ability to allow this without double bookings being made could be used.</p> <p>Explore alternative solutions to the current method. For example whether using Outlook, or similar, as an option to ensure appointment times are not double booked.</p> | Medium | <p>The appointments need to come through to Careline as the appointment needs to cater for locality efficiencies.</p> <p>Journey information and mapping needs to be updated on the system before considering other options.</p> | AD Community & Partnerships | 30/06/2021 | N/A | Outstanding | CCS Manager, Senior Careline Support Officer and Business Development Officer are reviewing the system and processes with the Systems and Administration Manager. Meetings have been held to instigate this:- Nov 21/Jan 22/Mar 22. In progress. |
| Careline | The process of a client calling into the Council and requesting a Careline product should be a seamless process. Consideration should be given to allow one department (CIC or Careline) to follow the process from start to finish. This would allow the customer to call in to request a product, the officer to record all the necessary information, apply the correct costs to any items required, and book a mutually convenient appointment for a Visiting Officer to carry out the works required. | Medium | Team currently providing response to Covid to vulnerable people as part of the community hub. Options will be given further review and discussion early 2021/22. | AD Community & Partnerships | 30/06/2021 | N/A | Outstanding | CIC are unable to take on any more duties on behalf of Careline due to demands on their team. Management decision needed to progress this. |
| Careline | <p>Careline and ICT to develop a process during discussions regarding the various methods of recording customer data onto the system, and the pros and cons of each method on both officers and the system.</p> <p>The technology being used by the Visiting Officers should be available at all times and fit for purpose.</p> | Medium | The difficulties have been due to various factors such as signal, sim cards and the rural locality. Electronic devices and offline storage was also previously trialled but this was not successful. Resolving this issue will require significant resource for 3-6 months which will | AD Community and Partnerships | 30/06/2021 | N/A | Outstanding | Current system is being reviewed between Careline/ICT (AH) and Systems and Administration Manager as per R2. |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | | | <p>be dependent on future decisions around the use of the system.</p> <p>Will review the future use of current system in Spring 2021 and decide further action from there.</p> | | | | | |
| Careline | Job timings and item costs should be updated on the system to eradicate the need to amend timings and costs by individual officers. | Medium | Will amend system to remove setup and clean up time of 20 minutes to assist with initial time estimates. Costing and timings to be reviewed and updated where appropriate. | AD Community and Partnerships | 31/03/2021 | N/A | Complete, awaiting evidence and internal audit verification | No additional information |
| Careline | Any time saving / efficiency methods of working within the department should be notified and available to all officers. | Medium | Linked to R6&R7 response | AD Community and Partnerships | 30/06/2021 | N/A | Outstanding | In progress. There are signal issues when out on visits and the team are awaiting sims for laptops. Currently staff have to use both laptops and paperwork. It is hoped that when sims for laptops are received, this will increase efficiencies. |
| Alive West Norfolk – Governance | Retention schedules need to be introduced for AWN once records and retention processes have been agreed. | High | This will be determined in line with the GDPR/Data Protection Policy. | MD Alive West Norfolk | 30/11/2021 | 31/07/2022 | Outstanding | Retention schedule being produced in line with Council policy. |
| Alive West Norfolk - Governance | Decisions need to be made regarding whether AWN require their own GDPR/DPA Policy or whether they can adopt the Council's policy. If the Council policy is adopted it will need to be refreshed to include AWN. | Medium | This will be discussed with the Borough Council of King's Lynn & West Norfolk's Deputy SIRO. AWN would prefer their own policy and privacy policies to be put in place. A privacy policy has already been produced by AWN and is also available on the AWN website. | MD Alive West Norfolk | 28/02/2021 | 31/07/2022 | Outstanding | AWN are required to have their own GDPR/DPA policy and this is currently being developed in line with Council policy. System Development and Insight Manager attending Data Protection Officer training. |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Personal Identifier & Financial Relationship | <p>That all service areas where there is a prolonged financial relationship request and record as a minimum; forenames, surnames, addresses, where possible middle names and contact details, a Date of Birth, and a National Insurance Number*</p> <p>*Some areas of the authority will request/record and require more personal details than this such as Benefits requiring a Date of Birth, a National Insurance Number, this recommendation is not intended to be a substitute for legislative/regulatory requirements, rather general guidance for each area of the authority with prolonged financial relationships with customer(s).</p> | Medium | <p>The Deputy SIRO will feed this guidance to Management Team for service areas to be made aware and to allow service areas where possible to implement this.</p> | Deputy SIRO | 28/02/2021 | | Outstanding | No additional information |
| Personal Identifier & Financial Relationship | <p>Car Parks, Crematorium, Open Space and Property Services require their own departmental privacy notices that include that personal data will be used for all lawful purposes, including but not limited to the prevention and detection of crime, including fraud and money laundering. These should sit on the Council's Privacy Policy web pages</p> | Medium | <p>The Assistant Director Operations and Commercial to complete Privacy Notices for Car Parks, Crematorium and Open Space and provide them to the Deputy SIRO to be uploaded onto the Council's Privacy webpages.</p> <p>The Assistant Director Property and Projects to complete a Privacy Notice for Property Services and provide it to the Deputy SIRO to be uploaded onto the Council's Privacy webpages.</p> | AD Property and Projects/AD Operations and Commercial | 28/02/2021 | | Outstanding | No additional information |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Child Protection | Property Services to follow the risk assessment procedures set out within the Safeguarding Policy for "High" and "Medium" risk rated tenants and provide the relevant safeguarding information within the Tenant Information Pack. | High | Agreed. | AD Property and Projects | 31/12/2019 | | Outstanding | No additional information |
| Council Offices & Sites | Documentation that has not been located for each site needs to be verified by Property Services and the responsible officer for each site. | Medium | Individual records have been created in Uniform or F:Drive to store certification for each Building Test and Inspection – Awaiting clarification of document retention schedule to ensure all records kept for required period before destruction. | AD Property and Projects | 31/03/2022 | | Outstanding | No additional information |
| Council Offices & Sites | Standardised processes and procedures should be in place and documented to provide consistency and resilience. | Medium | Property Services Manager to decide the preferred method of documenting the processes and procedures, and referencing of information to ensure a consistent approach within the department. | AD Property and Projects | 31/03/2022 | | Outstanding | No additional information |
| Council Offices & Sites | Any remedial works required on all council offices and sites should be documented to allow responsible officers greater oversight of each buildings maintenance requirements. The following should be included in any documentation:- <ul style="list-style-type: none"> • What works are required to be carried out; • Who will be carrying out the works; • When the works are expected to start and finish; and • The expected cost of the works (if not already included within a contractual arrangement) | Medium | A process is in place currently that allows relevant officers to be informed of when remedial works may be carried out. Where keys are required by contractors to access sites relevant officers are informed and are aware. A new worktab is in use within the Works/Maintenance area in Uniform and this is now updated for additional information. | AD Property and Projects | 31/03/2022 | | Outstanding | No additional information |

| Job | Recommendation | Priority | Management Comments | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | | | This is currently being used for multi-site contracts, with the intention to start using on individual contracts by the end of the financial year. | | | | | |
| Planning Support | Adjust the cost of the service on an annual basis based on the actual departmental costs for the previous year, also adjusting for any surplus / deficit from the previous year to meet legislative requirements. | Medium | Agreed. | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| Planning Support | Consider a review, peer review or similar, to gain assurance whether all costs that could be allocated to services provided by the land charges team have actually been included in BCKLWN costs. | Medium | Agreed. | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| Planning Support | Consider increasing the cost of the service to the actual cost of the service provided at the next available opportunity, and review these costs annually to meet legislative requirements. | Medium | Agreed. | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| ICT Document Management | The Retention Schedule needs to be updated and maintained on an ongoing basis to ensure continuous compliance with legislative requirements. | Medium | The Policy is next due for review in March 2021 and by then the document should be correct and up to date. | Deputy SIRO | 31/03/2021 | | Outstanding | No additional information |
| ICT Document Management | Revenues and Benefits SLA to reflect current system in operation. | Medium | Agreed. | Deputy SIRO | 31/03/2021 | | Outstanding | No additional information |

2020/21

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Contract Management | Approval and awarding of all council contracts should follow standard council procedures, irrespective of the value of the contract. | Medium | <p>The Tree Surgery Framework has, in recent years, been valued at c£120,000 over the framework period. Because the Major Projects team had started to use the framework for work on housing development sites, the value was increased in the tender advertising, as a precaution, to cover the additional work. However, an error was made in not then including it in the Key Decisions list.</p> <p>It is very unlikely that these circumstances will occur again.</p> | AD Programme & Project Delivery | 31/03/2022 | N/A | Complete, pending internal audit verification | This recommendation is complete, pending internal audit verification. A Procurement and Contract Management audit is booked in for Q2 of this year, during which evidence will be sought after to demonstrate that all contracts, regardless of value, are going through the Council's procedures. |
| Planning Control | Fees and charges on the website need to be amended to show the correct costs for each area of the service to the customer. | Medium | The fee sheet will be removed from the council's website, and replaced with a link to the Planning Portal. Any future changes to fees will then be amended within the Planning Portal removing the risk of the fees not being correctly shown on the council website. | AD Environment and Planning | 31/12/2021 | | Outstanding | No additional information |
| ICT – Cyber Security | Guidance on how to identify, and more importantly respond, to any Cyber-Attack should be documented within ICT policies. Whether this is included within an existing policy or developed as a new policy by itself needs consideration. | Medium | Section on Cybersecurity guidelines to be added to ICT Security Policy. | AD Resources | 31/12/2021 | 31/05/2022 | Outstanding | Draft update to ICT Security Policy with Cybersecurity section (aligning with upcoming staff Cybersecurity training) is under review. Final version to be published May 2022 |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| ICT – Cyber Security | Update the current suite of ICT policies as per policy. | Medium | Policies to be updated. | AD Resources | 31/12/2021 | 31/05/2022 | Outstanding | Policies have been updated but further revision of Security Policy is in draft |
| ICT – Cyber Security | Include Cyber Security within the updated policies to help inform officers / members about current methods of cyber attacks. This may also help to mitigate / prevent future attacks. | Medium | Section on Cybersecurity guidelines to be added to ICT Security Policy. | AD Resources | 31/12/2021 | 31/05/2022 | Outstanding | Draft update to ICT Security Policy with Cybersecurity section (aligning with upcoming staff Cybersecurity training) is under review. Final version to be published May 22 |
| ICT – Cyber Security | Ensure all officers and members have completed the compulsory training by the required date. (Those that haven't completed – Any deterrent?) | Medium | Updated version of the Cybersecurity course with new deadline to be issued for all staff. Investigate possibility of cybersecurity eLearning for members. | AD Resources | 31/03/2022 | 01/08/2022 | Outstanding | Unfortunately our current supplier has stopped developments on our e-learning package. Discussions are underway with a new supplier for Cyber Security e-learning. ICT are currently testing the course and will then look to ask the supplier to amend as necessary. Once complete we will look to procure the NCSC approved course and rollout to user base. |
| ICT – Cyber Security | ICT officers should be included in the preparation and delivery of project plans throughout the authorisation, to ensure all ICT aspects are fully considered and understood within the project. | Medium | A global email to be issued reminding employees and service managers of the ICT Development Group and that when considering projects to consult with ICT at an early stage to ensure resources and programming needs are met. Furthermore that the ICT Development Group must be consulted within all tender exercises that will require ICT resources and programming needs prior to advertising the contract to ensure value for money considerations. | AD Resources | 31/03/2022 | 31/05/2022 | Outstanding | Proposed email to be brought to ICT Development Group for agreement at meeting 28-4-22 |

2021/22

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Emergency Planning & Management | Consider a formal "out of hours" standby cover of Emergency Planning & Management. | Medium | Agreed. | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| Emergency Planning & Management | Gold Group or Management Team to review the debrief document for the Covid-19 pandemic emergency and develop an action plan to implement the recommendations made, including details of responsible officers and target dates. The Gold Group or Management Team should monitor the progress of the action plan. | Medium | Agreed. | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| Regeneration & Economic Development | <p>An overarching document should be produced or the Schedule of the Council's Major Projects Programme (point 9 of the Terms of Reference in the Major Projects Officers Board) should be enhanced or a suite of progress/performance monitoring documents should be produced that relate to specific roles and responsibilities within the life cycle of projects/initiatives to provide details of ALL ongoing projects, the funding source for each project and overall budget allocation for each project, the name/job title of the lead officer, the team/resources in place for the project, and the current position/progress that has been made with the project and the priority of the project against other projects that are in progress.</p> <p>Once in place these can be used to help manage resourcing and prioritise ALL projects, inform stakeholders, and to monitor projects against key milestones</p> | Medium | Consideration of either an overarching document or the enhancement of the Schedule of the Council's Major Projects Programme or a suite of progress/performance monitoring documents that relate to specific roles and responsibilities within the life cycle of projects/initiatives to include details of ALL ongoing projects, the funding source and overall budget allocation for each project, the name/job title of the lead officer, the team/resources in place for the project, the current position/progress that has been made with the project and the priority of the project against other | AD Property and Projects | 31/03/2022 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | | | projects/initiatives that are in progress. | | | | | |
| Regeneration & Economic Development | Within the review of Management Team and the inclusion of a new programme management and monitoring regime, roles and responsibilities need to be clearly identified and set out for the life cycle of projects/initiatives and their performance/progress monitoring requirements. There needs to be clarity between the various roles and the responsibilities under each role within the strategic, project development, client management, project delivery. | Medium | Consideration of either an overarching document or the enhancement of the Schedule of the Council's Major Projects Programme or a suite of progress/performance monitoring documents that relate to specific roles and responsibilities within the life cycle of projects/initiatives to include details of ALL ongoing projects, the funding source and overall budget allocation for each project, the name/job title of the lead officer, the team/resources in place for the project, the current position/progress that has been made with the project and the priority of the project against other projects/initiatives that are in progress. | AD Property and Projects | 31/03/2022 | | Outstanding | No additional information |
| Planning Enforcement | Create a worksheet to recorded cases awaiting hearings. Document within the worksheet when the case was heard, when the outcome of the case was received, and the what the outcome of the case was. This should enable outstanding cases awaiting hearings to be monitored and ensure decisions are recorded within the system. | Medium | To be removed, the decision is being recorded on the Planning system, suggested to create a worksheet that can record when a case has had a hearing and then a further column that can be updated to show when a decision has been returned. | AD Environment and Planning | 31/12/2021 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| | | | This can be used to monitor how many cases are outstanding and to ensure decisions are being recorded on the system. | | | | | |
| Planning Enforcement | There should be a consistent method of how and where documentation is recorded within each module of the system (i.e. Enforcement, Appeals etc.) These methods should be documented to ensure all officers are aware of how the documentation should be recorded within the system. | Medium | Matt Clarey is going to speak to Ruth Redding about this and come back to us. UPDATED – 21/09/21 – MC Agreed | AD Environment and Planning | 31/03/2022 | | Outstanding | No additional information |
| Planning Enforcement | A process should be developed to ensure finance are notified via Legal Services of those sundry debts as a result of court cases. Finance would then be responsible for maintaining accounts related to court costs awarded to the authority. | Medium | Financial Services Manager to discuss this with Planning Enforcement and Legal Services to develop a procedure to enable court costs awarded to the authority to be accurately recorded and monitored. | AD Environment and Planning | 31/12/2021 | | Outstanding | No additional information |
| Planning Enforcement | Considerations to be made to make attempts to contact with the Courts in order to get the relevant reference numbers added to the payments being made. | Medium | Financial Services Manager to discuss this with Planning Enforcement and Legal Services to develop a procedure to enable court costs awarded to the authority to be accurately recorded and monitored. | AD Environment and Planning | 31/12/2021 | | Outstanding | No additional information |
| Benefits | Review current system access and ensure that all users and access levels are relevant/authorised. Where no staff members can be identified these user accounts should be disabled. And then annual reviews thereafter. | Medium | There is a complete user list held within the Civica system. But agree a review of all users is undertaken. Regular reviews had not recently been completed due to Covid-19 response. | AD Resources | 30/04/2022 | | Outstanding | No additional information |

| Audit area | Recommendation | Priority | Management Response | Responsible Officer | Due Date | Revised Due Date | Status | Latest Response |
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| Benefits | Appropriate knowledge needs to be transferred to the team for areas of work that are currently only being undertaken by the Subsidy Appeals and Overpayments Officer and accompanying procedure notes produced to ensure business continuity. | Medium | Agreed. There is a process now underway for any knowledge to be transferred over to remaining members of the team on a good will basis. | AD Resources | 30/04/2022 | | Outstanding | No additional information |
| Council Tax and NNDR | NNDR VOA schedule reconciliations to be checked by another officer to confirm reconciliations have been undertaken accurately and to ensure appropriate segregation of duties. | Medium | There is an element of NNDR VOA schedules checking in NNDR programme which helps mitigate the highlighted risks. The Revenues Manager can start to do this again now able to share paperwork between members of staff (this was suspended due to Covid). | AD Resources | 30/04/2022 | | Outstanding | No additional information |

APPENDIX 4 – LIMITATIONS AND RESPONSIBILITIES

Limitations inherent to the Internal Auditor's work

The Internal Audit Annual Report has been prepared and the internal auditors undertook the agreed programme of work as approved by management and the Audit Committee, subject to the limitations outlined below.

Opinions

The opinions expressed are based solely on the work undertaken in delivering the approved 2021/22 Annual Internal Audit Plan. The work addressed the risks and control objectives agreed for each individual planned assignment as set out in the corresponding audit planning memorandums (terms of reference) and reports.

Internal Control

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate the risk of failure to achieve corporate/service policies, aims and objectives: it can therefore only provide reasonable and not absolute assurance of effectiveness. Internal control systems essentially rely on an ongoing process of identifying and prioritising the risks to the achievement of the organisation's policies, aims and objectives, evaluating the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically. That said, internal control systems, no matter how well they have been constructed and operated, are affected by inherent limitations. These include the possibility of poor judgement in decision-making, human error, control processes being deliberately circumvented by employees and others, management overriding controls and the occurrence of unforeseeable circumstances.

Future Periods

Internal Audit's assessment of controls relating to Borough Council of King's Lynn and West Norfolk is for the year ended 31 March 2022. Historic evaluation of effectiveness may not be relevant to future periods due to the risk that:

- The design of controls may become inadequate because of changes in the operating environment, law, regulation or other matters; or,
- The degree of compliance with policies and procedures may deteriorate.

Responsibilities of Management and Internal Auditors

It is management's responsibility to develop and maintain sound systems of risk management, internal control and governance and for the prevention and detection of irregularities and fraud. Internal Audit work should not be seen as a substitute for management's responsibilities for the design and operation of these systems.

The Internal Audit Manager has sought to plan Internal Audit work, so that there is a reasonable expectation of detecting significant control weaknesses and, if detected, additional work will then be carried out which is directed towards identification of consequent fraud or other irregularities. However, internal audit procedures alone, even when carried out with due professional care, does not guarantee that fraud will be detected, and internal auditors' examinations should not be relied upon to disclose all fraud, defalcations or other irregularities which may exist.