

BABERGH DISTRICT COUNCIL and MID SUFFOLK DISTRICT COUNCIL

COMMITTEE: Joint Audit and Standards Committee	REPORT NUMBER: JAC/19/11
FROM: Corporate Manager – Internal Audit	DATE OF MEETING: 27th January 2020
OFFICER: Corporate Manager – Internal Audit	KEY DECISION REF NO. N/A

INTERIM INTERNAL AUDIT REPORT 2019/20

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to inform Councillors of the work undertaken within the Internal Audit Service for the first half year, 2019/20 and provides Councillors with a review of the variety and scope of projects and corporate activities which are supported through the work of the team.

2. OPTIONS CONSIDERED

- 2.1 This is a regulatory report and there are no options to consider.

3. RECOMMENDATIONS

- 3.1 That the contents of this Internal Audit report, supported by Appendix A, be noted.

REASON FOR DECISION

For the Committee to note the Internal auditor's half year report for 2019/20.

4. KEY INFORMATION

4.1 Requirement of Internal Audit - Public Sector Internal Audit Standards (PSIAS)

The PSIAS require the Corporate Manager – Internal Audit to report periodically to senior management and this Committee on Internal Audit's performance relative to its Internal Audit Plan including significant risk exposures and control issues where relevant, fraud risks and governance issues.

- 4.2 As the Councils' Delivery Programme and management review continues and re-shapes and transforms its services the demand on Internal Audit's services to provide assurance, support and guidance on a diverse range of activities continues. The management review, Phases 2 and 3, will also require a level of input from Internal Audit to ensure key controls are maintained. The Corporate Manager – Internal Audit monitored requests, with a risk-based approach, for the re-allocation of Internal Audit resources from the approved 2019/20 Internal Audit Plan.

- 4.3 Subsequent to the 2018/19 Year End the current Specialist Lead for Internal Audit, retired, leaving a resource shortfall in the team. The position has been further compounded following the appointment of the Specialist Lead for Risk Management to a role within the Councils' Finance Team, effective from 9th December 2019. A

recent recruitment campaign for the Specialist Lead for Audit proved unsuccessful. With the latest resource shortfall the Corporate Manager – Internal Audit is currently considering a number of options with senior management.

- 4.4 In determining and managing the resource shortfall the Corporate Manager – Internal Audit is allocating audits from the 2019/20 plan based on the level of risk and the skills and experience within the team. The situation is being carefully monitored to ensure that coverage and the consequent annual audit opinion is not compromised.
- 4.5 There was due consideration in conducting this year’s audits to ensure that Internal Audit maintained its objectivity and independence. As further demonstration of organisational independence, the Corporate Manager – Internal Audit can confirm that there has been no inappropriate scope or resource limitations placed upon him.
- 4.6 In line with the Councils’ Internal Audit Charter the work was conducted to ensure that it delivers against the PSIAS and the requirement to produce an annual Head of Internal Audit opinion. In doing this it can be confirmed that the work conducted covered the following activities:
- Governance processes
 - Monitoring
 - Ethics
 - Information and Information technology governance
 - Risk management
 - Fraud management

5. LINKS TO CORPORATE PLAN

The delivery of a comprehensive Internal Audit service supports the strategic priorities within the Councils’ Corporate Plan.

- 5.1 Appendix A provides a summary of the work undertaken under the relevant strategic priority. This work will contribute to the 2019/20 overall Internal Audit opinion on the Councils’ control environment provided by the Corporate Manager – Internal Audit, as required by the Accounts and Audit (England) Regulations 2015.

6. FINANCIAL IMPLICATIONS

- 6.1 There are no direct financial implications arising from this report. All Internal Audit recommendations must be considered in terms of their cost effectiveness.

7. LEGAL IMPLICATIONS

- 7.1 There are no direct legal implications arising from this report.

8. RISK MANAGEMENT

- 8.1 This report is not directly linked with any one of the Councils’ Significant Risks. The key risk, however, is set out below:

Risk Description	Likelihood	Impact	Mitigation Measures
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<p>Internal controls within each Council may not be efficient and effective.</p> <p>As a result each Council may not identify any significant weakness that could impact on the achievement of their aims and/or lead to fraud, financial loss or inefficiency.</p>	<p>Unlikely 2</p>	<p>Bad 3</p>	<p>Councillors receive and approve the Internal Audit work programme and other reports on internal controls throughout the year.</p> <p>The work programme is based on an assessment of risk for each system or operational area.</p>
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9. CONSULTATIONS

- 9.1 The 2019/20 Internal Audit Plan was approved by the Joint Audit and Standards Committee on 11th March 2019 (Paper JAC/18/20), having previously been endorsed by the S151 Officer and the Senior Leadership Team.

As part of the preparation for this Plan, auditors engaged with senior management to identify their view of the coming year's risks linked to the Corporate Plan and Delivery Programme, and to gather and map management assurance across the Councils' functions.

- 9.2 During preparation this report has been shared with both Chairs of the Joint Audit and Standards Committee; Cabinet Lead Members for Customers, Digital Transformation & Improvement; the Senior Leadership Team, including the Section 151 Officer and the Assistant Director, Law and Governance and Monitoring Officer.

10. EQUALITY ANALYSIS

An equality analysis has not been completed because the report content does not have any impact on the protected characteristics.

11. ENVIRONMENTAL IMPLICATIONS

There are no environmental implications arising from this report.

12. APPENDICES

Title	Location
(a) Appendix A - Overview of Internal Audit Work	Attached

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Appendix A

Overview of Internal Audit Activity, 6 Months to 30th September 2019

1. Introduction

- 1.1 The work completed by Internal Audit to date for the Financial Year 2019/20 is reported here to the Joint Audit and Standards Committee.
- 1.2 Internal audit within the public sector in the United Kingdom is governed by the Public Sector Internal Audit Standards (PSIAS) which have been in place since 1 April 2013, were revised on 1 April 2016 and have been further revised on 1 April 2017.

2. Internal Audit reports with Adverse Opinions

- 2.1. 2 audits with an audit opinion of 'Limited Assurance' have been issued this period and are detailed below. All audits conducted this period are listed in Section 6 below.

The reviews that returned an audit opinion on the control environment of "Limited Assurance" in the last financial year (2018/19) where actions were outstanding have been kept under review by audit and, where appropriate, the management actions have been reassessed with the appropriate manager. These audits, with their present status are outlined below:

2018/19

1. Land Charges (Fee reconciliations) (to be revisited following conclusion of the management review)
2. Sourcing contracts and tendering process and contract management (to be revisited following conclusion of the management review)
3. Contract spend (to be revisited following conclusion of the management review)
4. Governance – Gifts and hospitality and Declarations of Interest (audit closed)
5. Housing Delivery (request from management to follow-up during 2020/21)
6. Payroll (audit closed)

2019/20

7. Workplace security
8. IT purchases

- 2.1.1 2018/19 Land Charges (Fee Reconciliations): Internal Audit Opinion: "Limited Assurance"

Key Risk	Issue Raised	Management Response
Fee income is not recognised through	Fee levels have not been reviewed recently; nor the	We need to annually review the land charges search

inadequate processes and controls.	two largest self-billing customers' invoices reconciled to searches conducted.	fees to ensure that the income covers the cost of delivery of the service, which is currently the case. Formal annual reviews to be established. Regular reconciliation of searches against income will be established, along with a retrospective reconciliation.
<p>Present status at this report date:</p> <p>The full reconciliation of income against delivery cost, including the two largest self-billing customers, will be carried out in parallel with phase 3 of the management review and a further proposed restructure in 2020. Considerations will still need to be given to capital costs of service improvement which now fall across multiple services following the management restructure.</p>		

2.1.2 2018/19 Sourcing contracts and tendering process and contract management: Internal Audit Opinion: "Limited Assurance"

Key Risk	Issue Raised	Management Response
<p>The Councils are vulnerable to reputational and financial risks as contracts may fail to meet performance expectations, exceed budget and/or breach compliance.</p> <p>Poor communication with contractor fails to correct performance.</p>	<p>Although no issues were identified during testing, due to a lack of meeting minutes, it was not clear for all contracts tested, what actions take place to address any service delivery issues should they arise.</p> <p>It could not be:</p> <ul style="list-style-type: none"> • Evidenced that contracts include expected performance measures and associated penalties for not meeting these; • Confirmed that appropriate contractor insurance is in place as no evidence was obtained by contract managers. 	<p>Many of the recommendations made within this report could potentially be addressed through appropriate training provided to the Contract Managers which they would benefit from.</p> <p>It remains however, the responsibility of Managers to manage this process once equipped with the tools to do so.</p> <p>Furthermore, consideration could be given to escalating these issues to the Procurement Board which would strengthen this course of action.</p>
<p>Present status at this report date:</p> <p>The Corporate Manager for Finance and Commissioning and Procurement has commissioned a piece of work with the East of England Local Government Association to</p>		

undertake a review of the entire commissioning and procurement function. This review will involve a workshop, interviews and a survey to understand how this function is operating within the organisation, with recommendations for best practice and a programme of implementation for improvements to follow, including a training programme for managers on effective contract management and establishing their responsibilities.

The team have now migrated all paper contracts to Suffolk Sourcing which is the software the Council has opted to use for contract management, the next phase will be a training programme for all Corporate Managers/contract owners which will assist them with effective contract management.

Whilst a Business Partner model operates within this area, the Corporate Manager acknowledges that this needs reviewing, therefore a workshop for all corporate managers and Assistant Directors is scheduled for February to explore how this is working and how this can be improved.

2.1.3 2018/19 Contract spend: Internal Audit Opinion: 'Limited Assurance'

Key Risk	Issue Raised	Management Response
Loss of money through poor and/or inadequate contractual arrangements for supplier services.	Inconsistent operating model to describe relationship and service provision between Contract Manager and the Finance and Procurement Business Partners.	Whilst management have responded positively to the findings and recommendations in the report it is recognised that the Councils' operational services are embarking on a significant restructuring. Whilst the principles of the findings should not be lost it is likely that the detail of how and when they will be considered and enacted is presently open.
Present status at this report date: The same comments refer as reported in 2.1.2 above		

2.1.4 2018/19 Governance – Gifts and Hospitality and Declarations of Interest: Internal Audit Opinion: "Limited Assurance"

Key Risk	Issue Raised	Management Response
Undeclared gifts or interests may lead to challenges of independence; of inability to demonstrate fair and lawful actions; and a lack of transparency to our stakeholders.	Staff gifts, hospitality and 'declarations of interest' are not subject to review and would appear that not all staff are aware of this log and procedures to report.	Online form generated. A user guide to go alongside this is being produced and a process for logging completed forms is to be agreed.

		All Senior staff are currently required to complete annual related party transaction declarations which covers part of the Declaration of Interests already.
<p>Present status at this report date: (Sufficient) Reasonable assurance</p> <p>Officers are working on a common corporate approach for registering and monitoring Declaration of Interests and Gifts and Hospitality. Once agreed, communications will go out to all officers and Councillors and will also form part of the induction process.</p>		

2.1.5 2018/19 Housing Delivery: Housing Delivery: Internal Audit Opinion: 'Limited Assurance'

Key Risk	Issue Raised	Management Response
<p>Statutory and regulatory obligations are not complied with (e.g. servicing of boilers; fire alarms; etc.)</p> <p>Failure to implement an agreed Compliancy Action Plan may lead to a lack of focus and critical deadlines for compliance improvements being missed.</p>	<p>Without full confidence that all relevant Council owned properties are registered on the Open Housing (OH) system, no assurance can be given that the Councils are compliant in meeting the required housing servicing and maintenance checks.</p> <p>Close liaison between the Corporate Asset Register and the OH system should continue to ensure all known properties meet the required standards.</p>	<p>An Interim Corporate Asset Manager has recently been appointed to undertake this task.</p>

Present status at this report date:

An Interim Building Services Manager was appointed in November 2019 and their role is to focus on ensuring Babergh and Mid Suffolk are compliant as a Landlord by conducting a review.

As a result, in the past two months a full audit of Gas Compliance has taken place with work undertaken to check compliance as well as policy and procedural changes to ensure we are compliant going forward.

The focus has now moved on to Fire Safety and Legionella.

As a result of the recent housing consultation the planned staffing structures now support an Asset Compliance Manager and the introduction of an Administration Team Leader focussed on Compliance management. In addition, a dedicated inhouse Asbestos Surveyor has been introduced rather than relying solely on external contractors.

The development of a business case in relation to a Joint Venture between Babergh, Mid Suffolk and Flagship Housing includes measuring compliance and identifying any gaps with a plan to close those gaps, thereby ensuring compliance. These matters were recently raised with the Chief Executive and the Health and Safety Board. Future corporate awareness will be achieved through the development of a Corporate Compliance dashboard, which is now in development.

Housing would like to see in the 2020/21 Corporate Audit Plan a focus on checking controls and procedures as well as the compliance of individual Council owned properties.

2.1.6 2018/19 Payroll: Internal Audit Opinion: 'Limited Assurance'

Key Risk	Issue Raised	Management Response
Penalty or censure arising from incorrect treatment for contractors and temporary employees assessed as inside IR35.	A lack of awareness of the legislation by Corporate Managers.	<p>A recruitment policy has been drafted and includes IR35 guidance. The policy will be published on Connect, promoted in Working Together and in Managers' Monthly email 'Bulletin'.</p> <p>The Interim Corporate Manager will also liaise with the Corporate Manager, Finance to ensure Commissioning and Procurement and Human Resources agree the best internal process.</p>
<p>Present status at this report date: (Sufficient) Reasonable assurance</p> <p>IR35 guidance has been produced, communicated to staff and published on 'Connect'.</p>		

2.2 As well as conducting audit reviews Internal Audit had significant involvement within the period in a variety of different Council activities/issues, which included:

Section Reference:

- 3 Council Governance**
- 4 Risk Management**
- 5 Probity**
- 6 Audits conducted**
- 7 Business support activities**

3 Council Governance

3.1 Annual Governance Statement (AGS)

Internal Audit has led on the production of the AGS which was completed as at the end of the financial year 2018/19, presented to this Committee on 29th July 2019 (Paper JAC/19/2) alongside an Assurance Mapping exercise across the Councils designed to identify gaps in good practice and aid the 2019/20 Internal Audit planning process. The outcome of the planning was reported to this Committee on 11th March 2019 (Paper JAC/18/20).

3.2 Statutory Officers Working Group

The Corporate Manager – Internal Audit attends this meeting in his capacity as ‘Head of Internal Audit’ and as the Councils’ Deputy Monitoring Officer to provide appropriate professional determination on governance matters as they arise. This Group also has responsibility for managing Information Governance and compliance with the requirements of the General Data Protection Regulations (GDPR) 2018.

3.3 Deputy Monitoring Officer (DMO)

The Corporate Manager - Internal Audit is one of two DMOs for the Councils with the specific duty to ensure that the Councils, their officers, and elected councillors, maintain the highest standards of conduct in all they do, pursuant to Section 5 of the Local Government and Housing Act 1989, as amended by Schedule 5 paragraph 24 of the Local Government Act 2000.

3.4 Developing our Values

The Councils have championed the development of values through a natural work team approach. The Corporate Manager - Internal Audit believes that a clear set of values and behaviours is a cornerstone to supporting good governance and has provided team resource to support the project.

4 Risk Management

4.1 Internal Audit continues to maintain and facilitate development of the Councils’ Significant Risk register with councillors and senior management. As a living document Internal Audit regularly review the content with management and report half yearly to Cabinet (reported in December 2019). The End of Year Significant Risks register was reported to this Committee on 29th July 2019 (Paper JAC/19/5). This report also includes areas where we have strengthened the risk management process.

4.2 Audit has provided support to Corporate Managers in the development of their operational risk registers, which forms part of their service plans.

5 Probity

5.1 Full details of the anti-fraud and corruption work undertaken during the year was reported to this Committee in a report entitled ‘Managing the Risk of Fraud and Corruption’. The last report was for 2018/19 and presented on 11th March 2019 (Paper JAC18/19).

5.2 The data requirements and data specifications for the 2019/20 National Fraud Initiative (NFI) exercise commenced in October 2019 using the NFI's secure electronic upload facility. Elections and single person discounts data were uploaded in December 2019. Final outcomes are to be confirmed, but already the exercise has identified one case with a recoverable overpayment of £6,300. The overpayment was caused by the claimant not notifying that they were a full-time student and in receipt of student finance.

5.4 The release of matches of information across all the contributor's data is managed on a risk-based approach by the system users, supported by Internal Audit. The system users access their data from the NFI and can investigate, in conjunction with the matched partner / contributor, to evaluate the potential fraud indicated by the match.

6 Audits Conducted

6.1 In line with the 2019/2020 Internal Audit Plan, reporting of outcomes is associated with all the Councils' strategic priorities. Both audits in progress and completed are reported below, with the latter given with their associated audit opinion on the control environment.

6.1.1 Economy

AUDIT	PURPOSE OF AUDIT	KEY RISK(S)	SUMMARY OF KEY FINDINGS	AUDIT OPINION
1 Receivables (Focus on debt management, analysis and reporting)	Audit has worked with Finance Staff to review and evaluate the revised working practices in the transaction team.	Monies due to the Councils are not recognised, accounted for or collected on a timely basis.	This was consultative and advisory work and does not result in a report with findings. However, this area will be subject to a subsequent review in early 2020.	No formal opinion is currently offered.
2 BMS Invest	As reported to the Board (BDC Suffolk Holdings Ltd and MSDC Suffolk Holdings Ltd) in June 2018 the audit approach would follow several stages of review. The first, Governance, has been concluded and the next area proposed was the transactional testing, to verify the key processes and procedural controls created by management are fit for purpose and operating as planned.	General considerations are insufficient to ensure best fit to company strategy. Legal and money laundering considerations are not sufficiently robust or not undertaken in early due diligence. An inappropriate tenant is engaged in the property.	Acquisitions selected confirmed that appropriate controls were in place for all aspects reviewed: * Market research undertaken was appropriate and complete. * Adequate consideration has been given to legal implications of the acquisitions. * Appropriate money laundering checks were undertaken * Terms of tenancies detail roles and responsibilities of	Substantial assurance

		Financial investment and risk considerations are ineffective.	tenants. * Risks are managed and monitored at Board level with Council oversight.	
3 General Ledger	To review the controls in operation in both the structure and management of the operating system and the associated key reconciliations between the host and feeder systems to ensure that posting accuracy and financial integrity are assured.	Control accounts and reconciliations are mismanaged or ineffective and mis-posting may go unnoticed.	Reconciliations of the principal control accounts were at the time of testing found to be performed regularly and on a timely basis.	(Sufficient) Reasonable assurance
4 IT purchasing	Following a request from the Assistant Director, Customer Services, Digital Transformation and Improvement, Internal Audit reviewed the adequacy of internal controls operating under the ordering, receiving and payment of IT equipment.	Unauthorised IT purchases may be made.	There is no internal proof of IT goods received to confirm against the purchase order. Furthermore, there is no formal monitoring or records maintained of who receives the equipment. This provides a further risk to the Council of potential loss of assets.	Limited Assurance (Follow-up planned by the end of 2019/20)
5 Corporate Payment Cards	With the introduction of a new payment card user guide in January 2019 the audit sought to gain assurance that appropriate controls are in place and operating effectively in relation to usage.	Non-compliance with user guide. Cardholders may not be appropriately trained. Fraudulent spending patterns may go undetected.	Work in progress - outcomes will be reported in the full year report to this Committee.	-

<p>6 Fees and Charges</p>	<p>A review of the Councils fees and charges was included within the 2019/20 Audit Plan to identify any new potential income streams, benchmark to other authorities and gain assurances of oversight and review.</p>	<p>There may not be adequate oversight of charging processes within service areas.</p> <p>Fees and charges may be inappropriate and the Councils may miss opportunity to bring in more revenue.</p> <p>The Councils may lose business if their fees and charges are not competitive with other providers.</p>	<p>Work in progress - outcomes will be reported in the full year report to this Committee.</p>	
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6.1.2 Housing

AUDIT	PURPOSE OF AUDIT	KEY RISK(S)	SUMMARY OF KEY FINDINGS	AUDIT OPINION
<p>7 Voids</p>	<p>The purpose of the audit was to provide assurance that effective controls and processes are in place for managing void properties.</p>	<p>Processes and procedures to obtain notification of empty property and promotion of empty properties are inadequate.</p> <p>Inadequate prioritisation and assessment of the potential tenant results in the property remaining empty.</p> <p>Appropriate decisions and actions not being taken to support the effective operation to resolve empty and void properties.</p>	<p>Work in progress - outcomes will be reported in the full year report to this Committee.</p>	

8 Disabled Facilities Grants	This audit focused on the administration function to ensure grants are awarded in accordance with the Councils' criteria and the conditions set by Central Government.	Funding is not given to the correct people, meeting the correct criteria or reclaimed appropriately.	The conditions attached to the Disabled Facilities Capital Grant Determination (2018-19) No [31/3337] have been complied with.	Prescribed declaration presented to the Ministry for Housing, Communities and Local Government via the administrating authority, Suffolk County Council.
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6.1.3 Customers and Wellbeing

AUDIT	PURPOSE OF AUDIT	KEY RISK(S)	SUMMARY OF KEY FINDINGS	AUDIT OPINION
9 Workplace security	The audit sought to provide management with reasonable, but not absolute, assurance on the adequacy and effectiveness of key controls relating to building security through site visits; security of information within the buildings; and compliance with the Councils' IT policies.	<p>Access to the workplace is not secure and controlled.</p> <p>Passwords are not kept confidential.</p> <p>Printing is not secure and sensitive data is not disposed of safely.</p> <p>IT equipment is not kept secure at all times.</p>	<p>Council responsibility for Health and Safety issues in Endeavour House unclear.</p> <p>Instances were identified at Endeavour House and Creeting Road depot where IT and security policies and procedures have not been followed.</p>	<p>Limited Assurance</p> <p>(Follow-up planned by the end of 2019/20)</p>

6.2 In undertaking this work there was due consideration to ensure that Internal Audit maintained its objectivity and independence. The prioritisation of work took account of the requirements of the approved audit plan.

Objectivity was maintained in that the auditors had no personal or professional involvement with or allegiance to the area audited. The determination of appropriate parties to which the details of an impairment to independence or objectivity is disclosed was dependent upon the expectations of the activity and was expressed during the planning of each audit.

Annual declarations of interest were signed by each auditor.

7 Business Support Activities

- 7.1 Babergh and Mid Suffolk District Councils and West Suffolk Council commissioned a joint review into the implementation and delivery of the Shared Legal Services team. The Corporate Manager – Internal Audit was part of a team that undertook a light touch gateway review, which involved interviewing key officers who use the service, with a view to take the learning from what has been achieved and to look at opportunities for further developing the service.
- 7.2 Internal Audit aim to retain close working relationships with colleagues and have provided support and advice on proposed system and control developments, enhancements and changes. The material of which have been described within the report.

In addition, Internal Audit will undertake specific investigations and reviews at the request of management. These are often not in the original audit plan and, if not appropriate to an existing piece of work, are conducted at the discretion of the Corporate Manager, Internal Audit.

8. Resources

- 8.1 Subsequent to the 2018/19 year end the Specialist Lead for Internal Audit, has retired, leaving a resource shortfall in the team. The position has been further compounded by the appointment of the Specialist Lead for Risk Management to a role within the Councils' Finance Team, effective from 9th December 2019. A current recruitment campaign for the Specialist Lead for Audit proved unsuccessful. With the latest resource shortfall the Corporate Manager – Internal Audit is currently considering a number of options with senior management.
- 8.2 In determining and managing the resource shortfall the Corporate Manager – Internal Audit is allocating audits from the 2019/20 plan based on the level of risk and the skills and experience within the team. The situation is being carefully monitored by the Corporate Manager – Internal Audit to ensure that coverage and the consequent annual audit opinion is not compromised.

9 Professional Practice

9.1 Membership of audit bodies

It is important to keep abreast of best professional practice. Internal Audit has strong links with audit colleagues both within Suffolk and nationally and are members of the Suffolk Working Audit Partnership (SWAPs) and the Midland Audit Group.

9.2 Public Sector Internal Audit Standards (PSIAS)

The team has fully reviewed their working practices to ensure that the Internal Audit documents and processes comply with, and can be evidenced to, the PSIAS.

This has resulted in a refining of the Internal Audit Charter Strategy, Internal Audit Services Manual, Internal Audit Risk Log, Quality Assurance and Improvement

Programme, procedure notes and working papers. These documents are published on the Councils' intranet, 'Connect', and remain subject to regular review. Subsequent to this exercise the actions arising from the review are materially implemented.

9.3 Independence

Internal Audit will remain sufficiently independent of the activities that it audits to enable auditors to perform their duties in a manner, which facilitates impartial and effective professional judgements and recommendations.

The Corporate Manager – Internal Audit is also responsible for overseeing the risk management and most recently following the phase 2 management review data protection arrangements across both Councils. Each of these roles has an independent sponsor to champion reports and proposals. These are vested in the Assistant Director, Law & Governance and Monitoring Officer.

10 **Conclusions**

The Corporate Manager – Internal Audit considers that there are no additional audit related issues that currently need to be brought to the attention of this committee.

Draft Circulation:

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