being least 2020 complex)		•	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Es Days 2017 2020
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AUDIT PLAN RATIONALE

1) Frequency of review is based on the overall risk rating and when the previous review was carried out.

Key risks to be covered

2) Level of audit resource is dependent on complexity of the area to be reviewed and the level of assurance required for the risks identified.

3) Risk assessment factors taken into account when determining the risk category:- degree of instability/complexity of system/sensitivity of information/likelihood of fraud or corruption/previous audit control opinion

- SR Strategic Risk
- KFS Key Financial System
- AFW Anti Fraud Work
- ACW Anti Corruption Work
- VFM Value for Money
- OR Operational Risk
- Sch Schools
- ADV Advisory

	APPENDIX B	Internal Audit V	Vork Programme	e - 2017-2020	0					
		Key risks to be covered	Complexity (Using F a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Corporate	Audits									
	Mileage Claims - Compliance with Council procedures	a) Inaccurate/inappropriate claims resulting in theft/fraud	1	Medium	AFW	2013-14				0
	Income collection - spot checks	a) Theft/Fraud	1	High	AFW	2014-15				0
		a) Legality of operations not fully explored or validated. b) Governance arrangements have not been clearly defined/established to monitor	4	High		New	20			20
	Compilation and Monitoring of the Capital Programme	achievement of stated aims and objectives a) Ineffective project management - budgets exceeded/deadlines exceeded/outcome does not meet client needs b) Implementation and usage of PMM	4	High	SR	2012-13				0
		a) Non compliance with legislation b) Inaccurate calculations could result in financial penalties and interest being incurred	t 3	High	SR	New	20			20
	Capital Programme - Education Services	a) Ineffective project management - budgets exceeded/deadlines exceeded/outcome does not meet client needs	4	High	OR	2015-16				0
		a) The Council is not effectively recording/monitoring CIL funds that are due/have been paid b) Policy targets are not met c) Corruption d) Income is not maximised	4	High	ADV	2013-14				0
	NFI Investigation work	a) fraud by employees/residents	2	High	AFW	2016-17	25	25	25	75
	Ensure information security	a) Non compliance with Data Protection Act b) Information not stored securely c) Personal information issued/sent to incorrect parties b) data could be amended/destroyed/sensitive data made public		High	SR	2014-15				0
		a) Inappropriate use of equipment/ineffective monitoring of personal calls resulting in unnecessary expenditure being incurred possibility of Fraud/abuse b) There isn't a consistent approach when determining who can be allocated telecoms equipment, therefore assessing the need for	3	Medium	AFW	2016-17				0
	Procurement cards	Ineffective monitoring of card usage resulting in inappropriate expenditure being incurred	e 2	High	AFW/SR	2012-13	15			15
	Online Grant Applications	a) Fraudulent applications made b) Grant conditions not met resulting in repayment and/or criticism	2	Medium	AFW	New	15			15
	Grant Allocation/monitoring	 a) Grants not awarded appropriately b) Grant allocations are not accurately recorded/effectively monitored. 	2	Medium	SR	2006-07	15			15
	Corporate Fraud Review	a) Council's approach to dealing with fraud does not meet the revised CIPFA guidance b) The Council is not being a pro-active as it could in deterring/highlighting fraud	2	Medium	AFW	2013-14				0
		a) Ineffective service provision b) Storage requirements not reviewed c) Unnecessary costs incurred	1	Medium	OR	201415				0
	total						110	25	25	160

APPENDIX B	Internal Audit Work Programme - 2017-2020								
	Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Resources Directorate									
Travel Claims	a) Fraudulent claims b) Inaccurate payments	1	Medium	AFW	2010-11				0
total									0
Head of Finance and Property									0
Accountancy									0
General Ledger	 a) Inaccurate information for management decisions b) Budgets exceeded c) Qualified accounts 	2	Medium	KFS	2016-17				0
Asset Management Strategy	a) Non compliance with legislation, b) Ineffective management of asset	2	Medium	SR	2016-17				0
Fixed Asset Register	portfolio a) Non compliance with accounting standards b) Qualified Accounts	2	Low	SR	2010-11		15		15
Budget Monitoring	a) Inaccurate Information b) poor decision making	2	High	SR	2015-16				0
MTFS (to incorporate Business Rates estimating and profiling)	a) Council's financial targets are not realised b) Budget pressures c) Increases in Council Tax	4	High	SR	2013-14			15	15
Treasury Management	 a) Inappropriate cashflow decisions - income not maximised b) Legislation/Internal polices not complied with 	2	Low	KFS	2014-15		12		12
Bank Reconciliation (cover Chaps payments)	a) Inappropriate transactions processed through the bank b) Inaccurate year end accounts c) Qualified opinion from External Auditors	2	Medium	OR	2010-11	15			15
VAT	 a) Non compliance with Revenues & Customs requirements - financial penalties 	2	Medium	OR	2013-14			15	15
H&S/Insurance/Risk Management									0
Insurance (claims management)	a) Inappropriate assessment of uninsured losses b) Inaccurate claims record for management information c) Ineffective claims management	2	High	SR	2015-16				0
Governance / Risk Management	a) Non compliance with Legal requirements b) Ineffective framework for AGS reporting	3	High	SR	2007-08	20			20
Health and Safety	a) Non compliance with H&S Legislation - legal action/penalties	2	Medium	SR	2012-13			15	15

	APPENDIX B	Internal Audit Work Programme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Prope	rty									0
	Building Maintenance	 a) Ineffective maintenance programme, b) Non compliance with legislation (internal, H&S, EU tendering policies) 	3	High	OR	2014-15				0
	Property Database - Assessment of implementation of phase 1	 a) System does not meet the defined outcomes for phase 1 b) Data is not up-to-date/inaccurate which could lead to incomplete/inaccurate system reports and inappropriate management decisions. 	2	High	OR	2015-16				0
	Asset Project Management	a) Failure to deliver major projects on budget, timely manner, to meet	4	High	SR	2015-16				0
	Commercial Rents	need of clients, b) Non compliance with legislation a) Non compliance with legislation, b) Loss of income/increased void periods, c) Misappropriation of leases	3	High	OR	2013-14		15		15
	Facilities Management	 a) Ineffective contract management which could result in lack of compliance with regulations b) Poor response to requests for service, resulting in staff Health and Safety issue. 	3	Medium	OR	2011-12			15	15
Exche	quer									0
	Accounts Payable	a) Inappropriate/fraudulent payments b) budgets exceeded	2	High	KFS	2014-15	15			15
	Accounts Receivable	a) Council's cash flow affected b) Income not maximised	2	High	KFS	2015-16			15	15
	Car Loans & Car Leasing	a) Inaccurate payroll deductions b) Non compliance with Inland Revenue requirements	2	Low	OR	2013-14				0
	Income Collection/Recording Processes	 a) Inaccurate processing of income - affecting cash flow decisions b) Fraud/theft c) Accounts could be qualified 	2	Medium	AFW	2016-17				0
Rever	ues									0
	National Non-domestic Rates	a) Non compliance with legislation/local schemes for exemptions b) Income generation/collection not maximised c) Qualified accounts	3	High	KFS	2014-15		15		15
	Housing Benefits	a) Non compliance with legislation b) Inaccurate/inappropriate payments made c) Accounts gualified	3	High	KFS	2014-15	15			15
	Council Tax	a) Non compliance with legislation/local schemes for reductions b) Income generation/collection not maximised c) Accounts qualified	3	High	KFS	2015-16		15		15
	Business Improvement District Levy	a) Accounting arrangement do not comply with regulations b) The billing	2	Medium	OR	New	15			15
	Total	and collection processes are not effective					80	72	75	227

	APPENDIX B	Internal Aud	lit Work Programn	ne - 2017-2020	0					
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of HR										
	Recruitment (process)	a) Delays in appointing staff - disruption to service delivery b) Non compliance with employment legislation C) DBS failure	2	High	AFW/SR	2012-13			15	15
	Absence Management	a) Council's sickness policy not being adhered to b) Inaccurate information for performance management	2	Medium	SR	2011-12		15		15
	Code of Conduct / HR Policies & Procedures	a) Staff not being managed consistently/to the Council's standards required standards b) New managers not being aware of the require standards and related procedures		Low	SR	2007-08				0
	Staff Training and Development (Corporate and Professional Training - across whole Council)	a) Failure to develop staff in accordance with good practice b) Failure inform new employees of legislation, key corporate policies and procedures they need to be aware of adhere to c) VFM/cost effective	eness	Low	SR	2014-15				0
	Payroll	not taken into account within services when making spending decisi a) Ghost employees set up b) Inaccurate payments made c) Inaccu deductions made		High	KFS	2014-15	15			15
	Apprenticeship Levy/Use of the Apprenticeship Service	a) Non compliance with legislation b) Budgets do not reflect the inc in costs c) Payment calculations are not correct d) Apprenticeship paid is not used therefore funds are lost.		High		New	15			15
	Total						30	15	15	60
Head of Leg	gal Services									
	Legal Services	 a) The collaborative agreement is not being effectively recorded/monitored b) Terms of the joint agreement are not being adhered to c) The service fails to retain its quality standard accredite 	2 ation	Medium	OR	2010-11			15	15
	Total						0	0	15	15

AF	PPENDIX B	Internal Audit Work Programme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of Strateg	gic Support									
		Service Delivery / intervention / legal obligations / performance indicators / linkages to Timelord	4	Medium	SR	2013-14				0
Eq		a) Non compliance with national guidance b) Unaware of impact of changes in policy/decisions on local community c) lack of transparency/accountability d) Judicial review overturns decisions	3	Medium	SR	2013-14				0
Me	embers expenses	a) Inappropriate payments, b) Over payments on budgets, c) Non compliance with legislation/policies	1	Medium	OR	2014-15				0
Co	•	a) Ineffective policies and processes in place, b) Non compliance with policies/processes	3	Medium	SR	2012-13			15	15
		a) Non compliance with legislation b) No Standard approach for dealing with requests c) Adequate records not maintained of	3	High	SR	2014-15				0
		a) Ineffective processes and procedures, b) Inappropriate information published - version control.	2	Medium	SR	2011-12				0
Civ	•	a) Contingency arrangements not in place/not effective b) Lack of compliance with legislation	2	Medium	SR	2011-12		15		15
Ele		a) Non compliance with legislation, b) Inappropriate entries on register,b) Incorrect payments/expenditure/charges	2	Low	OR	2016-17				0
tot	tal							15	15	30

APPENDIX B	Internal Audit W								
	Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of Customer Services and I.C.T.									
I.T. Strategy	a) Does not meet changing needs of the organisation b) Progress not measured/monitored - objectives not achieved	3	Medium	SR	2007-08			15	15
Software licences	a) Non compliance with legislation (software licences)	2	Low	OR	2003-04	15			15
Change Control Management	a) Inappropriate changes b) Changes do not meet the needs of usersc) Changes not operationally effective	3	Medium	OR	2016-17				0
Project Management (IT investment)	 a) Systems do not meet business/user needs b) Escalation of costs/time to implement 	3	Medium	SR	2006-07		20		20
Post Implementation Reviews (IT investment)	 a) Systems do not meet business/user needs b) Escalation of costs/time to resolve system issues 	3	Medium	SR	2013-14				0
Ensure continuous service (Disaster Recovery for I.T. Service)	a) Contingency plan not in place/not effective - service delivery affected	3	High	SR	2011-12			15	15
PSN Compliance Certificate	a) Non compliance with Government I.T. Security requirements b) Not able to access government data/share data with other government bodies	4	Medium	SR	2010-11				0
Ensure systems security	a) Non compliance with Data Protection Act b) Unauthorised access to data b) data could be amended/destroyed/sensitive data made public	3	High	SR	2011-12	15			15
Manage problems and incidents (help desk)	a) Interruptions to service delivery b) Staff performance adversely affected	3	High	OR	2012-13				0
EDI (BACs)	a) Inaccurate/inappropriate electronic transactions	3	Low	OR	Not audited			15	15
Printing Service	a) Inefficient operations b) Delivery targets not met	2	Low	OR	2014-15				0
Business Continuity Planning	a)Flu / fire / flood / terrorism / service delivery	3	High	SR	2007-08		20		20
I.T. Asset Management	a) Loss of I.T assets - increased cost on replacement equipment	3	Medium	OR	2007-08				0
Superfast Broadband Project	a) Ineffective Contract Management b) Key deliverables not being achieved/achieved as per contract c) External Funding may be withdrawn	4	Low	OR	2014-15				0
Total						30	40	45	115

	APPENDIX B	Internal Audit V								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of C	ommissioning									
	Brokerage/Care Commissioning Placement Processes	 a) Value for money not obtained when choosing external providers b) Care provision not formalised/not monitored - escalation of costs/ care standards not met 	3	High	OR	New	20			20
	Contract Letting/Monitoring ASC (Supporting People/Block Bed contracts)	 a) Value for money not obtained when choosing external providers b) Care provision not formalised/not monitored - escalation of costs/ care standards not met b) Non compliance with EU legislation 	3	Medium	OR	2001-02		20		20
	Contract letting	a) Non-compliance with Contract rules of Procedure b) Non compliance with EU legislation (Remedies Directive) c) Corruption	3	High	ACW	2014-15				
	Contract monitoring	a) Non-compliance with Contract rules of Procedure b) Contract spec not met c) Contract costs exceeded	3	High	SR	2007-08				0
	Total						20	20	0	40

	APPENDIX B	Internal Audit Work Programme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Communitie	es Directorate									
	Disclosure and Barring Service	a) Vulnerable adults/children could be put at risk due to the Council Scheme not meeting the requirements of the national guidance and/or local processes have not been established to ensure that backgrounds check are undertaken/recorded and updated.	2	High	SR	2014-15				0
	Travel Claims	a) Fraudulent claims b) Inaccurate payments	1	Medium	AFW	2011-12				0
	CareDirector Project	a) System control weaknesses are identified after implementation b)	4	High	ADV	2016-17	10			10
	total	Migrated data may be inaccurate					10			10
Head of Adu	ult Social Care									
	Better Care Fund	 a) Ineffective governance/communication between parties b) Effectiveness of arrangement not monitored - objectives not achieved/budgets exceeded. 	4	High	SR	New	20			20
	Care Act (Implementation of national eligibility criteria/carers assessments)	a) Care Act is not adhered to b) Assessments not undertaken timely/	3	High	SR	New		20		20
	Client Information and support	a) Care Act not adhered to b) Uninformed decisions/lack of choice on	3	Medium	OR	New			15	15
	covering services and providers New Way of Working (the three key offers)	care support options which may lead to care plans not being achieved a) Care Act not adhered to b) Aims of the initiative are not met c) Processes are not sufficiently robust to achieve the stated aims		High	SR	New		20		20
	Agency Staff	a) Inappropriate people could be appointed - risk to client b) Budgets	2	High	OR	2009-10			15	15
	Assessment of Needs/Purchase of Care - (MH/LD)	could be exceeded c) Standards of service required not met a) Legislation is not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	Medium	OR	2008-9			15	15
	Assessment of need /Purchase of Care - Respite	a) Legislation is not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	Medium	OR	2012-13				0
	Carers' Assessments/payments	a) Care Act is not adhered to b) Assessments not undertaken timely/ care plans not put in place c) Carers initial needs not met which could result in increased demand on services/budgets.	3	Medium	OR	New	15			15

APPENDIX B

Internal Audit Work Programme - 2017-2020

		onkirogramm		•					
	Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Resource Centres (3)	Establishment reviews - key risks - budgetary control/appropriateness of expenditure	1	Low	OR	2013-14			6	6
Residential Homes - Elderly (4)	Establishment review - key risks - budgetary control/appropriateness of expenditure	1	Low	OR	2010-11		6		6
Assessment of needs/Purchase of care - Home Care	a) Legislation is not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	Medium	OR	2006-07	20			20
Assessment/Purchase of Care - Residential/Nursing	a) Legislation is not adhered to b) Inappropriate care packages c) Budgets could be overspent	2	Medium	OR	2016-17				0
Shared Lives - Placements and Payments	a) Scheme not effectively managed b) Incorrect/inappropriate payments,c) Overspends on budget	3	Medium	OR	New		15		15
O/T - Equipment - pooled budget	 a) Ineffective governance/communication between parties b) Effectiveness of arrangement not monitored - objectives not achieved/budgets exceeded 	2	Medium	OR	2011-12				0
Personal Budgets (Use of payment cards)	a) Legislation/internal procedures not adhered to b) Inappropriate care packages c) Budgets could be overspent	4	High	ADV	New	15			15
Personal Budgets - Direct Payments	a) Legislation/internal procedures not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	High	OR	2013-14			15	15
Client Financial Assessments	a) Non compliance with legislation/Council's policy b) Inaccurate charges calculated c) Ineffective income collection/recovery procedures	3	High	OR	2016-17				0
Residents Property (Appointeeship/Deputyship)	a) Misappropriation of client property b) Inaccurate records of level/type of property held c) Non compliance with legislation	2	High	OR	2013-14			15	15
Social Fund Reform (Community Care Grants/Crisis Loans	 a) Grants not awarded in accordance with legislation/Council procedures b) Inappropriate payments made c) Records not up-to-date/accurate 	2	Medium	OR	2014-15				0
total						70	61	81	212

	APPENDIX B	nme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of E	ducation									
	Secondary Schools	Review of key risks - budgetary control, income collection, control of assets, school governance	2		Sch	Annual Programme	15	10	10	35
	Primary Schools We may be able to save time on schools, and maybe do 10 x 4 days	Review of key risks - budgetary control, income collection, control of assets, school governance	1		Sch	Annual Programme	40	40	40	120
	Nursery Schools (2) to include Children's Centres	Review key risks: Compliance with legislation, accurate completion of grant claims	1		Sch	2016-17				0
	Special Schools (2)	Review key risks: Compliance with legislation, budgetary control, control of assets,	1		Sch	2016-17		8		8
	Alternative Curriculum	Review key risks: Budgetary control, appropriateness of expenditure	1		OR	2015-16				0
	Reintegration Service	Review key risks: Budgetary control, appropriateness of expenditure	1		OR	2015-16				0
	Children's Centres	 a) Centres have not been set up in accordance with government guidelines b) governance arrangements between the Centre and key 	2		OR	New		12		12
	Formula funding / DSG	a) Non compliance with legislation, b) Ineffective budget builds	2	Medium	OR	2009-10			20	20
	School Census	a) Submission of incorrect returns, b) Inaccurate funding	1	Medium	OR	2012-13				0
	Family Support Packages for Disabled Children (to include short breaks)	d a) Non compliance with legislation, b) Inappropriate packages, c) Overspends on budgets	3	Medium	OR	2015-16				0
	School Admissions Policy	a) Non compliance with legislation, b) Unsuitable school offers, c) Invalid admissions data	2	High	OR	2009-10			15	15
	Home to School Transport Entitlemen	t a) Employment of inappropriate individuals, b) Misallocation of free transport,	2	Low	OR	2008-09		15		15
	Safeguarding in Schools/Children's Centres/Early Years settings	a) Schools/Children's Centres/Early Years Providers are not adequately supported/trained by WBC b) non compliance with national guidance	2	Medium	OR	2008-09	15			15
	Nursery Provision - early years grant	Review key risks: Compliance with legislation, accurate completion of grant claims	1	Medium	OR	2010-11	15			15
	After Schools Clubs	 a) Non compliance with government targets/legislation, b) Misuse of grant funds, c) Activities are not effectively monitored 	3	Medium	OR	2007-08		15		15
	Special Education Needs and Disability (SEND)	a) Not meeting requirements of the new legislation/guidance b) Expenditure may not be effectively monitored	3	Medium	OR	2016-17				0
	School Library and Museum Services (Joint arrangement)	a) Contract not effectively monitored b) Service not meeting client needs c) Value for money not obtained	2	Low	OR	2015-16				0
	Resource Units (7)	Review key risks: Compliance with legislation, budgetary control, control of assets.	1	High	OR	2011-12		5		5

APPENDIX B	Internal Audit Work Programme - 2017-2020										
	Key risks to be covered	Complexity (Using R a scale of 1-4, 1 being least complex)	tisk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020		
Adult Education	a) Non compliance with legislation, b) Non achievement of targets and standards, c) Overspends on budgets	2	Low	OR	Not audited			15	15		
School Meals Contract	Review of schools not in the contract a) Non compliance with legislation, b) Not meeting service user requirements, c) Contract not effectively	3	Medium	OR	2011-12			20	20		
total	monitored.					85	105	120	310		

APPENDIX B Internal Audit Work Programme - 2017-2020													
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020			
Head of Ch	ildren and Family Services												
	Castlegate	Review of key risks: Budgetary control, control of assets & cash, appropriate expenditure.	1	Medium	OR	2010-11	6			6			
	Assessment of Need/Purchase of care - Residential	 a) Non compliance with legislation, b) Inappropriate packages, c) Overspends on budgets 	3	High	OR	2008-09	15			15			
	Assessment of needs/Purchasing Care - Respite	a) Legislation is not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	High	OR	2013-14				0			
	Personal Budgets/Direct Payments	a) Legislation/internal procedures not adhered to b) Inappropriate care packages c) Budgets could be overspent	3	High	OR	2016/17				0			
	Assessment & collection of client contributions	a) Non compliance with legislation, b) Incorrect assessments, c) Contributions not being requested	3	Medium	OR	2011-12			15	15			
	Adoption - Recruitment, Placement and Allowances (Shared Service Arrangement)	a) Non compliance with legislation, b) Ineffective procedures to monitor the shared arrangement	3	Low	OR	New		15		15			
	Guardianship/Residence Orders	a) Non compliance with legislation, b) Incorrect/inappropriate payments,c) Overspends on budget	2	Medium	OR	2016/17				0			
	Payment of Carers (foster carers)	a) Non compliance with legislation, b) Incorrect/inappropriate payments,c) Overspends on budget	2	Medium	OR	2012-13				0			
	S17 - Payment of Support Costs/Allowances	a) Non compliance with legislation, b) Incorrect/inappropriate payments,c) Overspends on budget	2	Medium	OR	2015-16				0			
	Child Care Lawyers (joint arrangement with Berkshire Authorities	a) Incorrect submission of charges by WB, b) Ineffective communication with Children's' services, c) Cases wrongly undertaken by WB, d) Costs incorrectly calculated		Medium	OR	2004-05		15		15			
	Unaccompanied Children - Asylum Seekers	a) Non compliance with legislation, b) Asylum seeks/care leavers are not adequately supported, c) Inadequate financial controls re payment of allowances/fraud.	3	Medium	OR	2004-05	15			15			
	Agency Staff	a) Non compliance with legislation, b) Inappropriate people recruited	2	Medium	OR	2008-09			15	15			
	Youth Centres (3)	Review of key risks: Budget monitoring, control of expenditure, collection of income, security of assets	1	Low	OR	2010-11				0			
	Offsite Activities - review of external provision of service	a) Non compliance with legislation, b) Poor risk assessment c) Inappropriate activities undertaken	1	Medium	OR	2005-06		15		15			
	Supervision compliance checks	 a) Non compliance with the Service's management processes b) ineffective performance management of staff and/or poor caseload monitoring and management 	1	Medium	OR	2013-14				0			
	total		Page 13				36	45	30	111			

	APPENDIX B	Internal Audit Work Programme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of Pr	evention and Safeguarding									
	Turnaround Families Programme	a) Non compliance with requirements of the scheme b) Ineffective procedures to monitor and track outcomes c) Lack of evidence to validate grant payments claimed	3	Medium	OR	2016-17	10	10	10	30
	Quality Assurance system (social care processes)	a) Service quality requirements are not being met and this is not highlighted/rectified which could result in service outcomes not being achieved b) Council criticised/legal action taken for not meeting duty of	1	Medium	OR	New				0
	Child Protection Conferencing Processes	care a) Inappropriate arrangements in place, b) Non adherence to guidance, legislation.	2	Medium	OR	2010-11			15	15
	Deprivation of Liberty Safeguards	a) Legislation not adhered to b) Assessments inaccurate c) Supervision / review of contractors performing assessments inadequate	2	Medium	OR	New	15			15
	total						25	10	25	60
Head of Pu	blic Health and Wellbeing									
	Public Health Unit	a) Non compliance with legislation b) Ineffective joint working arrangements resulting in poor budgetary control and/or service provision	3	High	SR	2015-16				0
	total						0	0	0	0

	APPENDIX B	Internal Audit V								
		Key risks to be covered	Complexity (Using R a scale of 1-4, 1 being least complex)	isk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Economy	and Environment Directorate									
	Travel Claims	a) Fraudulent claims b) Inaccurate payments	1	Medium	AFW	2010-11				
	total									0
Head of Pu	blic Protection and Culture									
	Environmental Health/Trading Standards Joint Arrangement covering:-	a) Non compliance with terms of the joint arrangement b) ineffective monitoring of quality of service provision and costs	3	Medium	OR	New		20		20
	Contract Management					2013-14				
	Service requests for intervention					2002-03				
	Health and Safety Taxi Licensing Licensing Reform Purchase/Disposal of samples					2002-03 2008-09 2012-13 2013-14				
	Service requests for intervention					2013-14				
	Food Safety and Standards					2013-14				
	Building Control Joint Arrangement	a) Non compliance with terms of the joint arrangement b) ineffective monitoring of quality of service provision and costs	2	Medium	OR	New			20	20
	Leisure Centre Management	 a) Non compliance with legislation, b) Ineffective contract monitoring and management 	3	Medium	OR	2009-10	20			20
	Museums (1)	Review of key risks: Budgetary control, control of assets & cash, appropriate expenditure.	1	Low	OR	2016-17				0
	Archaeology	a) Non compliance with legislation and government guidelines, b) Ineffective communication between services	2	Low	OR	2011-12				0
	Berkshire Archive Service	 a) Non compliance with terms of the joint arrangement b) ineffective monitoring of quality of service provision and costs 	2	Low	OR	2008-09			15	15
	Libraries Purchasing/stock control	 a) Budgets overspent b) Inaccurate financial information for management decisions c) Stock may be misappropriated d) Purchasing arrangements are not cost effective 	3	Medium	OR	2014-15				0
	Libraries Income	a) Loss of stock is not reimbursed, resulting in additional expenditure b) Income collection not maximised	3	Medium	OR	2010-11		15		15
	Shaw House	a) Facilities' use/income opportunities are not being maximised b) The facilities do not offer value for money c) Costs are not being effectively controlled	3	Medium	OR	2016-17				0
	Adventure Dolphin & Outdoor Youth Activity	Review of key risks: Budgetary control, control of assets & cash, appropriate expenditure.	1	Medium	OR	2011-12		10		10
	Registrars Service	a) Ineffective budgetary control, b) Insufficient control of income, c) Insufficient control of assets, d) Inappropriate expenditure	2	Low	OR	2014-15				0
	total						20	45	35	100

	APPENDIX B	Internal Audit V	Vork Programn	ne - 2017-2020						
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of Stre	eetcare and Transport									
	Structural Maintenance / Engineering	a) Non compliance with legislation, b) Ineffective maintenance programme	3	Low	OR	2012-13				0
	Major Road Repairs (Projects)	a) Projects/schemes targets not met, b) Non compliance with internal policies, plans		Medium	OR	Not audited		20		20
	Traffic Management	a) Projects/schemes targets not met, b) Non compliance with internal	3	Low	OR	2013-14				0
	Highway Term Contract (excluding major road projects)	policies, plans a) Non compliance with H&S legislation, b) Ineffective contract monitoring, c) Non compliance with policies	2	High	OR	2011-12			20	20
	•	a) Employment of inappropriate individuals, b) Misallocation of free transport, c) contracts for transport	3	High	OR	2015-16				0
		a) Projects/schemes targets not met, b) Non compliance with internal policies, plans	2	Low	OR	Not audited				0
	Street Naming/numbering	a) Income not maximised, b) Misappropriation of funds	2	Low	OR	2004-05				0
	Concessionary Fares / Bus Passes	a) Fraud/theft, b) Non compliance with regulations	2	Medium	OR	2014-15				0
	Parking	a) Non compliance with legislation, b) Loss of income c) Fraud/theft	3	High	OR	2013-14	20			20
	-	a) inefficient or inappropriate use of vehicles b) Ineffective contract management c) health and safety issues re roadworthiness of vehicles	3	High	OR	2016-17				0
	•	a) Ineffective contract management resulting in poor quality of service/vfm not achieved/health and safety issues due to inappropriate drivers or vehicles being used.	2	Medium	OR	New		20		20
	•	a) Ineffective contract management resulting in increased costs/service quality issues b) Recycling initiatives not being met	4	High	SR	2014-15			20	20
	Grounds Maintenance/Tree Maintenance contract	 a) Contract specification is not met b) Inappropriate/inaccurate payments could be made 	2	Medium	OR	2010-11		15		15
	Management of Parks and Commons - Partnership Arrangement	 a) Non compliance with terms of the joint arrangement/ineffective monitoring of service provision 	2	Low	ADV	New			15	15
		a) Non compliance with legislation regarding plans for improvement and maintenance of rights of way b) Not having a robust challenge for	2	Low	OR	New				0
	total	insurance claim relating to public rights of way.					20	55	55	130

	APPENDIX B	Internal Audit Work Programme - 2017-2020								
		Key risks to be covered	Complexity (Using a scale of 1-4, 1 being least complex)	Risk Assessment Category	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020
Head of De	velopment and Planning									
	Enforcement	a) Planning Legislation is not adhered to b) Management information is not up-to-date/accurate	2	Low	OR	2010-11				0
	Community Infrastructure Levy (CIL)	a) Planning Legislation/local schemes are not adhered to b) Policy targets are not met c) Corruption d) Income is not maximised	4	High	OR	New	20			20
	S106 Obligations	 a) Planning Legislation is not adhered to b) Council's Planning Policy is not followed c) Ineffective monitoring of planning obligations 	4	Medium	OR	2007-08	15			15
	Common Housing Register / Advice	a) Legislation is not adhered to b) Register not appropriately administered	2	Medium	OR	2009-10		15		15
	Homelessness	 a) Legislation not adhered to b) Accommodation is not obtained promptly/cost effectively 	2	Medium	OR	2011-12			15	15
	Utilisation of Council Properties	 a) Purchase and use of Council's own properties for Housing needs is not monitored/reviewed to ensure business case objectives have been met b) Value for money is not being achieved 	3	Medium	SR	New		20		
	Renovation Grants/Disabled Facility Grants	 a) Grants not awarded in accordance with legislation/Council procedures b) Inappropriate payments made c) Records not up-to-date/accurate 	2	Medium	OR	2015-16				0
	4-4-1						25	25	45	05

total

35 35 15 85

APPENDIX B	Key risks to be covered	Internal Audit V	Nork Programme Complexity (Using F a scale of 1-4, 1 being least complex)	Audit Type	Date last audited	2017-18	2018-19	2019-20	TOTAL Est Days 2017- 2020	
Other Chargeable work (non service specific)										
Preparation of the audit plan/school visit programme						10	10	10	30	
Monitoring the audit plan/school visit programme						12	12	12	36	
Liaison with Portfolio Members						3	3	3	9	
Governance and Ethics Committee						3	3	3	9	
Audit Follow-ups Audit Advice						40 10	40 10	40 10	120 30	
School advice						5	5	5	30 15	
SFVS Monitoring						5	5	5	15	
External Professional Liaison						5	5	5	15 0	
Total						93	93	93	279 0	
Contingencies						40	40	40	120	
Total						40	40	40	120	
Planned Audit Days total						704	676	684	2054	
04-11 D						070				

Staff Days

676