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Cherwell

DISTRICT COUNCIL
NORTH OXFORDSHIRE

Committee: Accounts, Audit and Risk Committee

Date: Wednesday 28 July 2021

Time: 6.30 pm

Venue: Bodicote House, Bodicote, Banbury, Oxon OX15 4AA

Membership

Councillor Mike Kerford-Byrnes (Chairman)

Councillor Conrad Copeland
Councillor Tony Ilott
Councillor Tom Wallis

Councillor Hugo Brown (Vice-Chairman)

Councillor Matt Hodgson
Councillor Nicholas Mawer
Councillor Sean Woodcock

AGENDA

1. Apologies for Absence and Notification of Substitute Members

2. Declarations of Interest

Members are asked to declare any interest and the nature of that interest which they may have in any of the items under consideration at this meeting.

3. Petitions and Requests to Address the Meeting

The Chairman to report on any requests to submit petitions or to address the meeting.

4. Minutes (Pages 5 - 10)

To confirm as a correct records the Minutes of the meetings of the Committee held on 19 May 2021 and 21 June 2021.

5. Chairman's Announcements

To receive communications from the Chairman.

6. Urgent Business

The Chairman to advise whether they have agreed to any item of urgent business being admitted to the agenda.

7. Internal Audit Charter (Pages 11 - 28)

Report of Director of Finance

Purpose of report

This report presents the Internal Audit Charter and Internal Audit Quality Assurance Programme for 2021/22.

Recommendations

The committee is Recommended to:

- 1.1 Approve the Internal Audit Charter.
- 1.2 Note the Quality Assurance and Improvement Programme.

8. Counter Fraud Annual Plan 2021/22 (Pages 29 - 50)

Report of Director of Finance

Purpose of report

This report presents the Annual Plan for the Counter-Fraud service at CDC for 2021/22. It provides an overview of the current Service (resources, arrangements) and the detailed Plan and actions for the current financial year. The Plan supports the Council's Anti-Fraud and Corruption Strategy by ensuring that the Council has in place proportionate and effective resources and controls to prevent and detect fraud as well as investigate those matters that do arise.

This report also presents the new set of performance indicators that will be reported to the Accounts Audit and Risk Committee going forwards.

The updated Counter-Fraud Strategy which is public on the Council's Intranet and website, is also presented in this report.

1.0 Recommendations

The meeting is recommended to:

- 1.1 Comment and note the Annual Counter Fraud Plan for 2021/22
- 1.2 Note the updated Counter Fraud Strategy and Performance Framework in Appendix 1 and Appendix 2

9. Support to Subsidiaries (Pages 51 - 54)

Report of Director of Finance

Purpose of report

To inform the Committee of the overall level of support provided to the Council's subsidiaries and how this is considered as part of the external audit.

Recommendations

The meeting is recommended:

- 1.1 To note the report and raise any queries on the exempt appendix.

10. Work Programme (Pages 55 - 56)

To consider and review the Work Programme.

11. Exclusion of Press and Public

The following report(s) contain exempt information as defined in the following paragraph(s) of Part 1, Schedule 12A of Local Government Act 1972.

3- Information relating to the financial or business affairs of any particular person (including the authority holding that information).

Members are reminded that whilst the following item(s) have been marked as exempt, it is for the meeting to decide whether or not to consider each of them in private or in public. In making the decision, members should balance the interests of individuals or the Council itself in having access to the information. In considering their discretion members should also be mindful of the advice of Council Officers.

Should Members decide not to make a decision in public, they are recommended to resolve as follows:

“That under Section 100A of the Local Government Act 1972, the public and press be excluded from the meeting for the following item(s) of business on the grounds that, if the public and press were present, it would be likely that exempt information falling under the provisions of Schedule 12A, Part I, Paragraph 3 would be disclosed to them, and that in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.”

12. Support to Subsidiaries - Exempt Appendix (Pages 57 - 64)

Councillors are requested to collect any post from their pigeon-hole in the Members Room at the end of the meeting.

Information about this Meeting

Apologies for Absence

Apologies for absence should be notified to democracy@cherwell-dc.gov.uk or 01295

221554 prior to the start of the meeting.

Declarations of Interest

Members are asked to declare interests at item 2 on the agenda or if arriving after the start of the meeting, at the start of the relevant agenda item.

Local Government and Finance Act 1992 – Budget Setting, Contracts & Supplementary Estimates

Members are reminded that any member who is two months in arrears with Council Tax must declare the fact and may speak but not vote on any decision which involves budget setting, extending or agreeing contracts or incurring expenditure not provided for in the agreed budget for a given year and could affect calculations on the level of Council Tax.

Evacuation Procedure

When the continuous alarm sounds you must evacuate the building by the nearest available fire exit. Members and visitors should proceed to the car park as directed by Democratic Services staff and await further instructions.

Access to Meetings

If you have any special requirements (such as a large print version of these papers or special access facilities) please contact the officer named below, giving as much notice as possible before the meeting.

Watching Meetings

Please note that Council meetings are currently taking place in person (not virtually) with social distancing at the meeting. Meetings will continue to be webcast and individuals who wish to view meetings are strongly encouraged to watch the webcast to minimise the risk of COVID-19 infection.

Places to watch meetings in person are very limited as we continue to apply social distancing requirements. If you wish to attend the meeting in person, you must contact the Democratic and Elections Team democracy@cherwell-dc.gov.uk who will advise if your request can be accommodated and of the detailed COVID-19 safety requirements for all attendees.

Please note that in line with Government guidance, all meeting attendees are strongly encouraged to take a lateral flow test in advance of the meeting.

Mobile Phones

Please ensure that any device is switched to silent operation or switched off.

Queries Regarding this Agenda

Please contact Sharon Hickson, Democratic and Elections democracy@cherwell-dc.gov.uk, 01295 221554

Yvonne Rees
Chief Executive

Published on Tuesday 20 July 2021

Cherwell District Council

Accounts, Audit and Risk Committee

Minutes of a meeting of the Accounts, Audit and Risk Committee held at Spiceball Leisure Centre, Cherwell Drive, Banbury, OX16 2BW, on 19 May 2021 at 7.29pm

Present:

Councillor Mike Kerford-Byrnes (Chairman)
Councillor Hugo Brown (Vice-Chairman)
Councillor Conrad Copeland
Councillor Matt Hodgson
Councillor Tony Ilott
Councillor Nicholas Mawer
Councillor Tom Wallis
Councillor Sean Woodcock

1 Appointment of Chairman for the municipal year 2021/22

Resolved

- (1) That Councillor Mike Kerford-Byrnes be appointed be appointed Chairman of the Accounts, Audit and Risk Committee for the municipal year 2021/22.
- (2)

2 Appointment of Vice-Chairman for the municipal year 2021/22

Resolved

- (1) That Councillor Hugo Brown be appointed be appointed Vice-Chairman of the Accounts, Audit and Risk Committee for the municipal year 2021/22.

The meeting ended at 7.30 pm

Chairman:

Date:

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Cherwell District Council

Accounts, Audit and Risk Committee

Minutes of a meeting of the Accounts, Audit and Risk Committee held at Bodicote House, Bodicote, Banbury, Oxon OX15 4AA, on 21 June 2021 at 6.30 pm

Present:

Councillor Mike Kerford-Byrnes (Chairman)
Councillor Hugo Brown (Vice-Chairman)
Councillor Conrad Copeland
Councillor Matt Hodgson
Councillor Tony Ilott
Councillor Andrew Beere

Substitute Members:

Councillor Andrew Beere (In place of Councillor Sean Woodcock)

Also Present:

Maria Grindley, Associate Partner, Ernst & Young (External Audit)
Sue Gill, Ernst & Young (External Audit)

Apologies for absence:

Councillor Nicholas Mawer
Councillor Tom Wallis
Councillor Sean Woodcock

Officers:

Lorna Baxter, Director of Finance & Section 151 Officer
Anita Bradley, Director Law and Governance & Monitoring Officer
Michael Furness, Assistant Director Finance
Sarah Cox, Chief Internal Auditor
Kerry MacDermott, Interim Assistant Director for Revenues and Benefits Services
Louise Tustian, Head of Insight and Corporate Programmes
Joanne Kaye, Strategic Business Partner
Katherine Kitashima, Audit Manager
Georgina Cox, Senior Auditor
Sharon Hickson, Democratic and Elections Officer
Aaron Hetherington, Democratic and Elections Team Leader

3 **Declarations of Interest**

9. Housing Benefit Subsidy.
Councillor Hugo Brown, Non Statutory Interest, as a member of the CSN Board.

4 **Petitions and Requests to Address the Meeting**

There were no petitions or requests to address the meeting.

5 **Minutes**

The Minutes of the meeting of the Committee held on 17 March 2021 were agreed as a correct record and signed by the Chairman.

6 **Chairman's Announcements**

There were no Chairman's Announcements.

7 **Urgent Business**

There were no items of urgent business.

8 **Monthly Performance, Risk and Finance Monitoring Report**

The Director of Finance and Head of Insight and Corporate Programmes submitted a report which summarised the Council's Performance, Risk and Finance monitoring positions as at the end of March 2021.

The Chairman reminded Members that the Committee was responsible for monitoring the risk aspects of the report.

Resolved

- (1) That the risk aspects of the monthly Performance, Risk and Finance Monitoring Report be noted
- (2) That the revised Risk and Opportunities Management Strategy 2021-22 be noted

9 **Housing Benefit Subsidy**

The Director of Finance submitted a report which provided members with an update on the Housing Benefit subsidy claim audit for the financial year 2019-2020.

Resolved

- (1) That the contents of the report be noted

10 **Final 2019/20 Annual Audit Letter**

The Director of Finance submitted a report which presented the final External Audit 2019/20 Annual Audit Letter and 2019/20 Audit Fee.

The Committee thanked the External Audit team for the work carried out.

Resolved

- (1) That the final 2019/20 Annual Audit Letter be noted
- (2) That the £101,410 audit fee for work over and above the 2019/20 scale fee of £40,138 be noted.

11 **2020/21 Statement of Accounts Review**

The Director of Finance submitted a report which provided an opportunity for the Committee to review the draft 2020/21 Statement of Accounts.

The Committee thanked the finance team for the work carried out this year and in the previous year.

Resolved

- (1) That, having given due consideration, the draft 2020/21 Statement of Accounts be noted.
- (2) That the accounting policies as approved by the Chief Finance Officer be approved
- (3) That the draft Annual Governance Statement for 2020/21 be approved

12 **Annual Report of the Chief Internal Auditor 2020/21**

The Chief Internal Auditor presented a report which summarised the outcome of the Internal Audit work in 2020/21 and provided an opinion on the Council's System of Internal Control.

The Committee and Chief Internal Auditor thanked the internal audit team for their performance through the year and the effort required to deliver the plan.

Resolved

- (1) That, having given due consideration, the report be endorsed

13 **Internal Audit Strategy and Plan 2021/22**

The Director of Finance submitted a report which presented the Internal Audit Strategy and Plan for 2021/22.

Resolved

- (1) That the Internal Audit Strategy and Plan for 2021/22 be noted

14 **Treasury Management Outturn Report - 2020-21**

The Director of Finance submitted a report which provided information on treasury management performance and compliance with treasury management policy and Prudential Indicators for 2020-21 as required by the Treasury Management Code of Practice.

Resolved

- (1) That the contents of the 2020-21 Treasury Management Outturn Report be noted.
- (2) That Council be recommended to note the Council's Treasury Management Activity in 2020-21.

15 **Work Programme**

The Assistant Director of Finance gave an overview of the indicative work programme for the 2021/2022 municipal year.

Resolved

- (1) That the work programme be noted.

The meeting ended at 7.50 pm

Chairman:

Date:

Cherwell District Council

Accounts, Audit & Risk Committee

28 July 2021

Internal Audit Charter

Report of Director of Finance

This report is public

Purpose of report

This report presents the Internal Audit Charter and Internal Audit Quality Assurance Programme for 2021/22.

1. Recommendations

The committee is Recommended to:

- 1.1 Approve the Internal Audit Charter.
- 1.2 Note the Quality Assurance and Improvement Programme.

2. Introduction

- 2.1 This report presents both the Internal Audit Charter and the Quality Assurance and Improvement Programme for 2021/22. These are subject to annual review.

3. Report Details

Internal Audit Charter

- 3.1 The Public Sector Internal Audit Standards (PSIAS) came into force on 1 April 2013. (Updated 1 April 2017). These are the first Internal Audit standards to apply across the whole public sector. The PSIAS requires that an Internal Audit Charter is in place for each local authority. The Cherwell District Council Internal Audit Charter is included within Appendix 1.

- 3.2 The Charter sets out the purpose, authority and responsibility of the Internal Audit function, in accordance with the PSIAS. The Charter establishes the position of Internal Audit within the organisation, access and reporting requirements. It also outlines the key responsibilities of the Accounts, Audit & Risk Committee.
- 3.3 This Internal Audit Charter is subject to approval by the Accounts, Audit & Risk Committee of Cherwell District Council on an annual basis, in line with PSIAS requirements. There have been no material changes made since the Charter was last approved by the Committee in July 2020. Minor changes have been made under the “fraud” section to reflect the dedicated counter fraud team that has now been established within Internal Audit.

Quality Assurance Improvement Programme (QAIP)

- 3.4 The PSIAS require that the internal audit activity maintain a Quality Assurance and Improvement Programme (QAIP). This is included within Appendix 2.
- 3.5 The Chief Internal Auditor is required to communicate to senior management and the Accounts, Audit & Risk Committee on the internal audit activity's quality assurance and improvement programme, including results of ongoing monitoring at least annually, internal assessments upon completion and external assessments conducted at least every five years. The QAIP details what will be reported to the Accounts, Audit & Risk Committee and the frequency.

PSIAS – Self Assessment / External Assessment Update

- 3.6 Internal Audit received a CIPFA external assessment against the Public Sector Internal Audit Standards (PSIAS) during November 2017. The assessment outcome was very positive with only a small number of minor improvements to documentation required and an overall conclusion that the service is highly regarded.
- 3.7 There is a requirement for an annual self-assessment against PSIAS to be completed (with external assessment scheduled every 5 years). The self-assessment was completed during June 2021 and it can be confirmed that Internal Audit continues to comply in full, with the standards.

4. Conclusion and Reasons for Recommendations

- 4.1 This report presents the Internal Audit Charter to the Accounts, Audit & Risk Committee which is requirement of PSIAS.

5. Consultation

None

6. Alternative Options and Reasons for Rejection

6.1 The following alternative options have been identified and rejected for the reasons as set out below.

Option 1: No alternative options have been identified as this report is for information only.

7. Implications

Financial and Resource Implications

7.1 There are no financial implications arising directly from this report.

Comments checked by:

Michael Furness, Assistant Director of Finance, 01295 221845
michael.furness@cherwell-dc.gov.uk

Legal Implications

7.2 There are no legal implications arising directly from this report.

Comments checked by:

Richard Hawtin, Team Leader – Non-contentious, 01295 221695
richard.hawtin@cherwell-dc.gov.uk

Risk Management Implications

7.3 There are no risk management issues arising directly from this report.

Comments checked by:

Louise Tustian, Head of Insight and Corporate Programmes 01295 221786
louise.tustian@cherwell-dc.gov.uk

8. Decision Information

Key Decision

Financial Threshold Met: N/A

Community Impact Threshold Met: N/A

Wards Affected

All wards are affected

Links to Corporate Plan and Policy Framework

All corporate plan themes.

Lead Councillor

Councillor Tony Ilott – Lead Member for Financial Management and Governance

Document Information

Appendix number and title

- Appendix 1 - Internal Audit Charter 2020/21
- Appendix 2 - Internal Audit Quality Assurance and Improvement Programme 2020/21

Background papers

None

Report Author and contact details

Sarah Cox, Chief Internal Auditor, sarah.cox@cherwell-dc.gov.uk

APPENDIX 1:

Cherwell District Council Internal Audit Charter

Introduction

The Public Sector Internal Audit Standards (PSIAS) came into force on 1 April 2013. (Updated 1 April 2017). These are the first Internal Audit standards to apply across the whole public sector. The PSIAS requires that an Internal Audit Charter is in place for each local authority.

The Standards form part of the wider mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF) which includes the mission, core principles, definition of Internal Audit and Code of Ethics which define the way in which Internal Audit should be established and undertake its functions

This Charter sets out the purpose, authority and responsibility of Cherwell District Council's Internal Audit function, in accordance with the PSIAS and additional requirements for Local Government which are published via the Chartered Institute of Public Finance and Accountancy (CIPFA)

This Internal Audit Charter has been drawn up in line with the PSIAS requirements and replaces all previous Internal Audit Terms of Reference.

This Internal Audit Charter is subject to approval by the Accounts, Audit and Risk Committee of Cherwell District Council on an annual basis, in line with PSIAS requirements.

Definition of Internal Audit

Internal Audit has adopted the PSIAS definition of internal auditing as follows:

"Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisations operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes".

Mission of Internal Audit

The mission of Internal Audit is to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

Core Principles

To achieve Internal Audit's mission the following core principles for the professional practice of Internal Auditing are present and applied by Internal Audit:

- Demonstrates integrity.
- Demonstrates competence and due professional care.
- Is objective and free from undue influence (independent).
- Aligns with the strategies, objectives, and risks of Cherwell District Council.
- Is appropriately positioned and adequately resourced.
- Demonstrates quality and continuous improvement.
- Communicates effectively.
- Provides risk-based assurance.
- Is insightful, proactive, and future-focused.
- Promotes organisational improvement.

Code of Ethics

The Internal Audit function for Cherwell District Council has adopted the PSIAS Code of Ethics:

Integrity

- The integrity of internal auditors establishes trust and thus provides the basis for reliance on their judgement

Objectivity

- Internal Auditors exhibit the highest level of professional objectivity in gathering, evaluating and communicating information about the activity or process being examined. Internal Auditors make a balanced assessment of all the relevant circumstances and are not unduly influenced by their own interests or by others in forming judgements.

Confidentiality

- Internal Auditors respect the value and ownership of information they receive and do not disclose information without appropriate authority unless there is a legal obligation to do so.

Competency

- Internal auditors apply the knowledge, skills and experience needed in the performance of internal auditing services.

Internal Audit will also have a regard to the Committee on Standards of Public Life's Seven Principles of Public Life as contained within Cherwell District Councils Constitution and Officer's Code of Conduct

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

Statutory Requirement

Section 151 of the Local Government Act 1972 requires that authorities "make arrangements for the proper administration of their financial affairs and shall ensure that one of their officers has responsibility for the administration of those affairs." In Cherwell District Council, that officer is the Director of Finance.

Specific requirements are detailed in the Accounts and Audit Regulations 2015, in that a relevant body must undertake an adequate and effective internal audit of its accounting records and of its system of internal control in accordance with the proper practices in relation to internal control. Any officer or member of a relevant body must, if the body requires:

- a. make available such documents and records as appear to that body to be necessary for the purposes of the audit; and
- b. supply the body with such information and explanation as that body considers necessary for that purpose.

In accordance with these regulations, internal audit staff should have access to any financial or non-financial records maintained by the council, or its partners in delivering council services, that are relevant to the audit activity being performed.

Definition of the Chief Audit Executive (CAE)

Chief Audit Executive describes a person in a senior position responsible for effectively managing the internal audit activity in accordance with the internal audit charter and the mandatory elements of the International Professional Practices Framework. Within Cherwell District Council the Chief Internal Auditor is the designated 'Chief Audit Executive'

Definition of the Board

The PSIAS lays out the role of a Board in relation to specific standards. In a local authority the role of the Board may be satisfied by an Audit Committee. In Cherwell District Council the Accounts, Audit and Risk Committee, for the purposes of the key duties laid out in the PSIAS, is the Board.

The key duties of the Board (Accounts, Audit and Risk Committee) as laid out in the PSIAS are as follows:

- Approve the Internal Audit charter
- Receive the risk based Internal Audit plan including the Internal Audit resource plan
- Receive communications from the Chief Internal Auditor on internal audit's performance relative to its plan and other matters
- Receive an annual confirmation from the Chief Internal Auditor with regard to the organisational independence of the internal audit activity
- Receive the results of the Quality Assurance and Improvement Programme from the Chief Internal Auditor.
- Make appropriate enquiries of the management and the Chief Internal Auditor to determine whether there are inappropriate scope or resource limitations.

Definition of Senior Management

The PSIAS anticipates the role of Senior Management includes the following:

- Input to the risk based Internal Audit plan
- Receive periodic reports from the Chief Internal Auditor on internal audit activity, that includes follow up reports
- Receive the results of the Quality Assurance and Improvement Programme from the Chief Internal Auditor

Within Cherwell District Council 'Senior Management' is defined as the Section 151 Officer (Director of Finance)

Professionalism

The Internal Audit function for Cherwell District Council will govern itself by adherence to The Institute of Internal Auditors' mandatory guidance including the Definition of Internal Auditing, the Code of Ethics, and the International Standards for the Professional Practice of Internal Auditing (Standards). This mandatory guidance constitutes principles of the fundamental requirements for the professional practice of internal auditing and for evaluating the effectiveness of the internal audit activity's performance.

The Internal Audit function for Cherwell District Council maintains an Audit Procedures Manual which is consistent with PSIAS requirements. These procedures are applied for all audit engagements.

Authority

The Internal Audit function for Cherwell District Council, with strict accountability for confidentiality and safeguarding records and information, is authorised full, free, and unrestricted access to any and all of the organisation's records, physical properties, and personnel pertinent to carrying out any engagement. All employees are required to assist the internal audit activity in fulfilling its roles and responsibilities. The internal audit activity will also have free and unrestricted access to, and communicate and interact directly with, the Accounts, Audit and Risk Committee.

Organisation

The Chief Internal Auditor will report functionally to the Accounts, Audit and Risk Committee, for example approving the charter and internal audit plan, and administratively to the Director of Finance, such as approving the internal audit activity's HR administration and budgets.

The Chief Internal Auditor will communicate and interact directly with the Accounts, Audit and Risk Committee, including in executive sessions and between meetings as appropriate.

Independence and objectivity

The internal audit function within Cherwell District Council will remain free from interference by any element in the organisation, including matters of audit selection, scope, procedures, frequency, timing, or report content to permit maintenance of a necessary independent and objective mental attitude.

Internal auditors will have no direct operational responsibility or authority over any of the activities audited within Cherwell District Council. Accordingly, they will not implement internal controls, develop procedures, install systems, prepare records, or engage in any other activity that may impair internal auditor's judgment.

Internal Audit will ensure through the planning and resourcing process that any potential conflicts of interest are recognised and addressed through internal audit staff not undertaking an audit for at least two years in an area where they have had previous operational roles and/or undertaken consulting activity and that responsibilities for audit assignments are rotated periodically within the internal audit team.

Internal auditors must exhibit the highest level of professional objectivity in gathering, evaluating, and communicating information about the activity or process being examined. Internal auditors must make a balanced assessment of all the relevant circumstances and not be unduly influenced by their own interests or by others in forming judgments. Internal auditors will disclose any impairment of independence or objectivity, in fact or appearance, to the appropriate parties.

The Chief Internal Auditor will confirm to the Accounts, Audit and Risk Committee, at least annually, the organisational independence of the internal audit activity.

The Chief Internal Auditor will disclose to the Accounts, Audit and Risk Committee any interference and related implications in determining the scope of internal auditing, performing work, and communicating results.

Responsibility- Scope & Objectives

Internal audit is an assurance service that provides an independent and objective opinion to the council on the entire control environment comprising risk management, performance, control and governance by evaluating the effectiveness in achieving the organisation's objectives. Internal Audit objectively examine, evaluate and report on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources.

Internal Audit is accountable to the Director of Finance (Section 151 Officer) for the terms of reference, scope and coverage of its audit activities. In addition there is a responsibility to those charged with corporate governance being the council (through the Accounts, Audit and Risk Committee) and the Head of Paid Service to give an annual opinion on the whole system of internal control and to support the Monitoring Officer in respect of matters of standards/ legality.

The council's external auditor relies on Internal Audit to undertake a continuous programme of audits of key corporate controls. Also, due priority needs to be given to the key strategic risks of the council including the requirements of the Section 151 Officer. Audit work is included to ensure an opinion can be given on the whole of the control environment. These priorities constitute most of the Annual Plan the balance being risks identified by Internal Audit. The Chief Internal Auditor collates an annual report on the effectiveness of the council's internal control environment.

Internal audit may perform consulting and advisory services related to governance, risk management and control as appropriate for the organisation. It may also evaluate specific operations at the request of the Accounts, Audit and Risk Committee or management, as appropriate.

Based on its activity, Internal audit is responsible for reporting significant risk exposures and control issues identified to the Accounts, Audit and Risk Committee and to Senior Management, including fraud risks, governance issues, and other matters needed or requested.

Internal audit plan

At least annually, the Chief Internal Auditor will submit to the Accounts, Audit and Risk Committee an internal audit plan for review and approval. The Chief Internal Auditor will communicate the impact of resource limitations and significant interim changes to senior management and the Accounts, Audit and Risk Committee.

The internal audit plan will be developed based on a prioritisation of the audit universe using a risk-based methodology, including input of senior management, including the Chief Executive, Director of Finance, Directors and Deputy Directors. It will be developed in accordance with the Internal Audit Charter and will link to the strategic objectives and priorities of Cherwell District Council. Prior to submission to the Accounts, Audit and Risk Committee for approval, the plan may be discussed with appropriate senior management. Any significant deviation from the approved internal audit plan will be communicated through the periodic activity reporting process.

The audit plan is dynamic in nature and will be reviewed and realigned on a regular basis to take account of new, emerging and changing risks and priorities. It will be based on a risk assessment that covers financial materiality and business risks as well as any suspected or detected fraud, corruption or impropriety that has come to the attention of the Chief Internal Auditor.

Internal Audit will consult with the Council's external auditor and with other relevant inspection/assurance and review bodies, as required, in order to co-ordinate effort, ensure adequate coverage and minimise any duplication.

As part of the planning process, the Chief Internal Auditor will identify other potential sources of assurance and will include in the risk-based plan the approach to using other sources of assurance and any work required to place reliance upon those other sources.

For each audit assignment, Internal Auditors will develop and document a plan including the objectives of the review, the scope, and timing and resource allocations. In planning the assignment, auditors will consider, in conjunction with the auditees, the objectives of the activity being reviewed, significant risks to the activity and the adequacy and effectiveness of the activity's governance, risk management and control processes.

Reporting and monitoring

A written report will be prepared and issued by the Chief Internal Auditor or designee following the conclusion of each internal audit engagement and will be distributed as appropriate. Internal audit results will also be communicated to the Accounts, Audit and Risk Committee. The internal audit report will include an opinion on the adequacy of controls in the area that has been audited.

The draft report will be discussed with the auditees and management actions agreed for the weaknesses identified, along with timescales for implementation. The final report will be issued to the relevant Director, Director of Finance and other officers in line with directorate protocols.

The internal audit activity will be responsible for appropriate follow-up on engagement findings and monitoring and reporting on the implementation of management actions.

Arrangements for appropriate resourcing

Internal Audit must be appropriately staffed in terms of numbers, grades, qualification levels and experience, having regard to its objectives and to the standards. All Internal Auditors will hold a professional qualification or be training towards a professional qualification.

In the event that the risk assessment, carried out to prepare the annual plan, identifies a need for more audit work than there are resources available, the Chief Internal Auditor will identify the shortfall and advise the Director of Finance followed by the Accounts, Audit and Risk Committee as required to assess the associated risks or to recommend additional resources are identified.

The audit plan will remain flexible to address unplanned work including responding to specific control issues highlighted by senior management during the year.

Internal audit work is prioritised according to risk, through the judgement of the Chief Internal Auditor, informed by the Council's risk registers and in consultation with senior management and External Audit.

All internal auditors have a personal responsibility to undertake a programme of continuing professional development (CPD) to maintain and develop their competence. This is fulfilled through the requirements set by professional bodies and through the Council's appraisal and development programme.

Fraud and Corruption

In administering its responsibilities; the Council has a duty to prevent fraud and corruption, whether it is attempted by someone outside or within the Council such as another organisation, a resident, an employee or Councillor. The Council is committed to an effective Anti-Fraud and Corruption culture, Internal Audit fully considers the risk of fraud and corruption when undertaking its activities by promoting high ethical standards and encouraging the prevention and detection of fraudulent activities.

The Council's Anti-Fraud and Corruption Strategy, sets out responsibilities in this area.

Internal Audit – Counter Fraud Team within Cherwell District Council is responsible for developing and implementing the Anti-Fraud and Corruption Strategy and monitoring the investigation of any reported issues. To ensure that all suspected or reported irregularities are dealt with promptly and in accordance with this strategy and that action is identified to improve controls and reduce the risk of recurrence. Internal Audit - Counter Fraud Team maintains the fraud log for Cherwell District Council. Internal Audit – Counter Fraud Team undertakes investigations into potential financial irregularities. In some circumstances this may be delegated to the service itself following an assessment of risk and financial impact.

Internal Audit – Counter Fraud Team also facilitates Cherwell District Council's participation in the National Fraud Initiative (NFI) in which data from the Council's main systems are matched with data supplied from other Local Authorities and external agencies to detect potentially fraudulent activity.

Definition of Assurance Services

The PSIAS defines assurance services as follows: *"An objective examination of evidence for the purpose of providing an independent assessment on governance, risk management and control processes for the organisation."*

Internal Audit provide this assurance across all parts of the Council reviewing the Council's "control environment" comprising risk management, control and governance, this enables the Chief Internal Auditor to provide an annual opinion on the effectiveness of these arrangements. This opinion supports the Council's Annual Governance Statement.

Definition of Consulting Services

The PSIAS defines consulting services as follows: *"Advisory and client related service activities, the nature and scope of which are agreed with the client, are intended to add value and improve an organisation's governance, risk management and control processes without the internal auditor assuming management responsibility. Examples include counsel, advice, facilitation and training."*

The PSIAS requires that approval must be sought from the Accounts, Audit and Risk Committee for any significant additional consulting services not already included in the audit plan, prior to accepting the engagement.

Quality assurance and improvement programme

The internal audit activity will maintain a quality assurance and improvement programme that covers all aspects of the internal audit activity, and evaluates the activity's conformance with the Standards and application of the Code of Ethics. As such, the programme assesses the efficiency and effectiveness of the internal audit activity and identifies opportunities for improvement.

The Chief Internal Auditor will communicate to senior management and the Accounts, Audit and Risk Committee on the internal audit activity's quality assurance and improvement programme, including results of ongoing monitoring at least annually, internal assessments upon completion and external assessments conducted at least every five years. Disclosure will include:

- The scope and frequency of both internal and external assessments.
- The qualifications and independence of the assessor(s) or assessment team, including potential conflicts of interest.
- Conclusions of assessors.
- Corrective action plans.

The results of the quality assurance and improvement programme and progress against any improvement plans must also be included in the annual report.

Signed by:

Sarah Cox, Chief Internal Auditor
Lorna Baxter, Director of Finance
Councillor Mike Kerford-Byrnes, Chairman of the Accounts, Audit and Risk Committee

Date approved: 28 July 2021 – Accounts, Audit and Risk Committee
Date of next review: July 2022

APPENDIX 2

Internal Audit - Quality Assurance and Improvement Programme

Introduction

Internal Audit's Quality Assurance and Improvement Program (QAIP) is designed to provide reasonable assurance to the various stakeholders of Cherwell District Council Internal Audit function that Internal Audit:

- Performs its work in accordance with its Charter, which is consistent with the Public Sector Internal Audit Standards, Definition of Internal Auditing and Code of Ethics;
- Operates in an efficient and effective manner;
- Is adding value and continually improving the service it provides.
- The Chief Internal Auditor is ultimately responsible for maintaining the QAIP, which covers all types of Internal Audit activities. The QAIP must include both internal and external assessments. Internal assessments are both ongoing and periodical and external assessments must be undertaken at least once every five years.

Internal Assessments

Internal Assessment is made up of both ongoing reviews and periodic reviews.

Ongoing Reviews

Ongoing assessments are conducted through:

- Supervision of audit engagements
- Regular, documented review of work papers during engagements by appropriate Internal Audit staff
- Applying relevant audit policies and procedures, including those set out in the Internal Audit Manual, to ensure applicable audit planning, fieldwork and reporting quality standards are met
- Review of all audit reports and agreed management actions by the Chief Internal Auditor prior to formal circulation.
- Feedback from Customer Satisfaction Questionnaires (CSQs) on individual audit assignments
- Established key performance indicators (KPIs) designed to improve Internal Audit's effectiveness and efficiency. These are signed off each year by the Accounts, Audit & Risk Committee.
- Corporate performance monitoring

- In assigning audit work to an individual auditor consideration is given to their level of skills, experience and competence and an appropriate level of supervision exercised
- Feedback from CSQs, performance against KPIs and reviews of working papers and audit reports will form part of the discussion during regular meetings / 121 discussions.

Periodic Reviews

Periodic assessments are designed to assess conformance with Internal Audit's Charter, the Standards, Definition of Internal Auditing, the Code of Ethics, and the efficiency and effectiveness of internal audit in meeting the needs of its various stakeholders. Periodic assessments will be conducted through:

- Chief Internal Auditor / Audit Manager file reviews to ensure performance in accordance with Internal Audit's Quality Procedures Manual.
- Review of internal audit Key Performance Indicators by the Chief Internal Auditor on a monthly basis, including elapsed time between start of audit and exit meeting, elapsed time between exit meeting and issue of draft report, elapsed time between issue of draft report and issue of final report, % of planned activity completed and % of management actions implemented.
- Quarterly activity and performance reporting to the Accounts, Audit & Risk Committee and Section 151 officer.
- Annual self-review of conformance with the Public Sector Internal Audit Standards. Any resultant action plans will be monitored by the Chief Internal Auditor on a quarterly basis.
- Independent annual review of the effectiveness of Internal Audit by the Council's Monitoring Officer, with results reported to and reviewed by the Accounts, Audit & Risk Committee.

External Assessment

External assessments will appraise and express an opinion about Internal Audit's conformance with the Standards, Definition of Internal Auditing and Code of Ethics and include recommendations for improvement, as appropriate.

An external assessment will be conducted every 5 years by a qualified, independent assessor from outside the Council. The assessment will be in the form of a full external assessment, or a self-assessment with independent external validation. The format of the external assessment will be discussed with the Accounts, Audit & Risk Committee.

Reporting

Internal Assessments – Quarterly activity and performance reporting to the Accounts, Audit & Risk Committee and Section 151 officer.

External Assessments – results of external assessments will be reported to the Accounts, Audit & Risk Committee and Section 151 officer at the earliest opportunity following receipt of the external assessors report. The external assessment report will be accompanied by a written action plan in response to significant findings and recommendations contained in the report.

Follow Up - the Chief Internal Auditor will implement appropriate follow-up actions to ensure that action plans developed are implemented in a reasonable timeframe.

Signed by:

Sarah Cox, Chief Internal Auditor

Lorna Baxter, Director of Finance

Date approved: July 2021

Date of next review: July 2022

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Cherwell District Council

Accounts Audit and Risk Committee

28 July 2021

Counter Fraud Annual Plan 2021/22

Report of Director of Finance

This report is public

Purpose of report

This report presents the Annual Plan for the Counter-Fraud service at CDC for 2021/22. It provides an overview of the current Service (resources, arrangements) and the detailed Plan and actions for the current financial year. The Plan supports the Council's Anti-Fraud and Corruption Strategy by ensuring that the Council has in place proportionate and effective resources and controls to prevent and detect fraud as well as investigate those matters that do arise.

This report also presents the new set of performance indicators that will be reported to the Accounts Audit and Risk Committee going forwards.

The updated Counter-Fraud Strategy which is public on the Council's Intranet and website, is also presented in this report.

1.0 Recommendations

The meeting is recommended to:

- 1.1 Comment and note the Annual Counter Fraud Plan for 2021/22
- 1.2 Note the updated Counter Fraud Strategy and Performance Framework in Appendix 1 and Appendix 2

2.0 Introduction

2.1 The latest Local Government Counter Fraud and Corruption Strategy – Fighting Fraud and Corruption Locally was launched in 2020. The Council's Counter-Fraud arrangements are designed to adhere to the "6 C's" Themes contained within this national Strategy, which are:

- **Culture** – creating a culture where fraud and corruption are unacceptable
- **Capability** - assessing the full range of fraud risks and ensuring that the range of counter fraud measures deployed is appropriate

- **Capacity** - deploying the right level of resources to deal with the level of fraud risk that is monitored by those charged with governance
- **Competence** - having the right skills and standards commensurate with the full range of counter fraud and corruption activity
- **Communication** - raising awareness internally and externally, deterring fraudsters, sharing information, celebrating successes
- **Collaboration** - working together across internal and external boundaries: with colleagues, with other local authorities, and with other agencies; sharing resources, skills and learning, good practice and innovation, and information

2.2 The Council has a Counter-Fraud Strategy (see Appendix 1) which guides the Council's approach to its fraud response. The Strategy states that "the Council has a duty to prevent fraud and corruption, whether it is attempted by someone outside or within the Council such as another organisation, a resident, an employee or Councillor. The Council is committed to a **zero-tolerance** approach to fraud, corruption and theft."

The Counter-Fraud team's purpose is therefore to adhere and to promote the zero-tolerance approach to fraud by thoroughly investigating any instances of fraud; applying the appropriate sanctions; undertaking proactive and preventive work to prevent and detect fraud through training, awareness raising, data matching and proactive reviews.

The Strategy has just been updated as part of its twice-yearly review and is attached in Appendix 1 for the Committee to note. Whilst there haven't been any material changes to the tone and content of the Strategy; there have been changes to the fraud referral and investigation process contained in Appendix A of the Strategy, to reflect the new practices with having the new in-house fraud team in place.

3.0 Report Details

- 3.1 The Counter Fraud Service changed from 1st April 2021 to form a new in-house service across both CDC and Oxfordshire County Council (OCC), as part of the joint Internal Audit service (which went live 1st April 2020). Previously, the Counter Fraud service had been delivered at CDC by Oxford Investigation Services (run by Oxford City Council). That contract ended on 31st March 2021. A new team has been recruited and inducted to deliver the service across both Councils, which consists of an Audit Manager, 2 Counter Fraud Officers and 1 Intelligence & Data Officer.
- 3.2 The first quarter of 2021/22 has therefore been dedicated to establishing the new Counter-Fraud team, meeting relevant staff within CDC and CSN, taking on the cases handed over from the previous service provider, dealing with new referrals and documenting processes.
- 3.3 The new team has been building a number of new networks externally. In particular to note is a new working arrangement with TVP (Thames Valley Police) to refer fraud cases directly into the TVP fraud team to action and allocate to an officer in charge. A working relationship has also been established with DWP fraud contacts, as well as with Sanctuary Housing.

3.5 A new performance framework has been drafted. Appendix 2 provides the suggested set of performance information to be submitted to the Accounts Audit & Risk Committee twice a year to update on progress against the annual plan and the operational performance.

3.6 In total 5 cases were handed over from the previous service provider on 1st April. A further 23 cases were referred and investigated this quarter by the team. In total, 20 cases are currently open under investigation and 8 have been closed. The breakdown by fraud type of these 28 cases is as follows:

Housing (subletting/non-residency/tenancy issues):	13
Council Tax (Single Person Discount/CT Reduction):	11
Covid support Grants:	3
Business Rates:	1

Of the 8 cases that have been closed, all have been 'NFA' (No Further Action) as there was insufficient evidence to take forward the investigation or the allegation was not substantiated.

3.7 In one Housing case still under investigation, an early benefit of the joint working arrangement across OCC / CDC has been evident, as the Counter Fraud Team were able to access social care records to identify that the Sanctuary Housing resident had moved into a care home in 2018. We were then able to communicate across the various relevant teams in OCC and CDC to resolve the issue, with the property due to be reclaimed by Sanctuary Housing.

3.8 The team continue to provide support to the Covid business support grants scheme to ensure the grant award process includes anti-fraud controls. One case that is currently open has been referred to the national fraud team (NATIS) that is co-ordinating investigations into national organised criminal groups targeting these covid support grant schemes. The other case in this category that is still open under investigation relates to a fraudulent claim for the grant funding as well as small business rates relief.

Counter Fraud Plan 2021/22

3.9 With the new team in place and inducted into the Council and the Counter-Fraud service, the focus for the coming year will be to refine the processes we have been establishing for referrals and investigations to ensure efficiency and operational effectiveness until business as usual is fully established.

3.10 The team will then be in a position to move increasingly into the proactive anti-fraud work such as delivering more fraud awareness training & communications, as well as undertaking fraud detection exercises. To inform this work, the fraud risk assessment process (which has started but hasn't been fully developed) will be built within the team, with the objective being a Fraud Risk Register is in place and updated routinely to inform proactive work areas. Meetings with relevant teams in CDC will continue in order to properly document the fraud risk areas.

3.11 The work into investigating the NFI data matches from the 2020 upload will continue. The team have been in discussion with other Local Authorities to discuss pooling resources to investigate greater use of data matching capabilities for Councils. Later this year or going into 2022/23 this will be developed further.

Objective	Actions
<p>Strategic: Establish BAU referral and investigation processes; agree and start using the Performance framework; move into building proactive anti-fraud work</p> <p>Culture Capacity Competence</p>	<ol style="list-style-type: none"> 1. Document key processes and flow charts for the CF Team (Q2) 2. Sign-off the proposed Performance Framework to monitor the team's performance, case levels and outcomes. (Q2) 3. Monitor team performance and outcomes (Ongoing)
<p>Proactive: Undertake proactive counter-fraud activities to reduce the risk of fraud in the Council.</p> <p>Culture Capability Capacity Communication Collaboration</p>	<ol style="list-style-type: none"> 1. Complete and routinely update the Fraud Risk Register (Q2) 2. Deliver fraud awareness training (as identified from fraud risk assessment) (ongoing and by Q4) 3. Undertake joint fraud/audit exercises (ongoing and by Q4) 4. Deliver fraud communications in line with a comms strategy under development (internal and external) 5. Maintain fraud procedures, webpages and referral routes up to date (ongoing and by Q4)
<p>Reactive: Manage fraud referrals and investigations</p> <p>Capacity Competence Collaboration</p>	<ol style="list-style-type: none"> 1. Manage fraud referrals 2. Investigate 3. Implement appropriate sanctions 4. Make recommendations to improve the control environment 5. Work with partner agencies and teams.
<p>Data: Use data to detect and prevent fraud</p> <p>Competence Collaboration</p>	<ol style="list-style-type: none"> 1. Complete the 2020 NFI data matching (ongoing and by Q4) 2. Continue to participate into potential data matching exercise with other LA's.

4.0 Conclusion and Reasons for Recommendations

- 4.1 In conclusion, this paper presents a review of Counter Fraud activity for Q1 of 2021/22 and a forward-looking plan for the remainder of the year. As described, the new team is embedding within the Council and will transition during the year from establishing the business as usual fraud referral and investigation process towards increasing proactive work to prevent fraud against the Council.

The Committee are requested to review and comment on the Plan, with a recommendation that the Plan is agreed for the coming year. Progress against the Plan will be reported to the Committee (as detailed in Appendix 2).

5.0 Consultation

Not applicable

6.0 Alternative Options and Reasons for Rejection

- 6.1 Not applicable

7.0 Implications

Financial and Resource Implications

- 7.1 There are no financial implications arising directly from this report.

Comments checked by:

Michael Furness, Assistant Director of Finance, 01295 221845
michael.furness@cherwell-dc.gov.uk

Legal Implications

- 7.2 There are no legal implications arising directly from this report.

Comments checked by:

Richard Hawtin, Team Leader – Non-contentious, 01295 221695
richard.hawtin@cherwell-dc.gov.uk

Risk Management Implications

- 7.3 There are no risk management issues arising directly from this report.

Comments checked by:

Louise Tustian, Head of Insight and Corporate Programmes 01295 221786
louise.tustian@cherwell-dc.gov.uk

8.0 Decision Information

Key Decision

Financial Threshold Met: N/A

Community Impact Threshold Met: N/A

Wards Affected

All wards are affected

Links to Corporate Plan and Policy Framework

All corporate plan themes.

Lead Councillor

Councillor Tony Ilott – Lead Member for Financial Management and Governance

Document Information

Appendix number and title

- Appendix 1 – Counter Fraud Performance Framework
- Appendix 2 – Counter Fraud Strategy

Background papers

None

Report Author and contact details

Tessa Clayton, Audit Manager,

Tessa.clayton@cherwell-dc.gov.uk 07393 001217

Appendix 1: Performance Framework

The bi-annual updates (in November and March) to the Accounts Audit & Risk Committee will include a Service & Resource update, an update against the annual Counter Fraud Plan and the following performance indicators.

CF Objective:	How	Measure
To log, investigate and close down fraud referrals and cases on a timely basis	Add new cases in OPUS (the fraud case management system) – complete investigation – close down.	No. new cases YTD and previous f/y No. open cases total (broken down by FY)
To recover costs and funds where possible; to prevent future losses; to apply relevant sanction	Sanctions will be pursued where fraud or overpayment is proven; repayments requested; fines applied Investigation costs will be allocated for cases going to Court. Hours spent per case (for cases likely to go to prosecution) will be recorded on OPUS Loss, recovery and prevented loss values will be recorded in OPUS	Figures on the financial loss; recovery; prevented loss figures per case for last 6 months. Outcomes: No. prosecutions; dismissals; warning letters issued etc for last 6 months. Cases to note
To identify control weaknesses / exposures and lessons learnt for the Service to address	Investigation Reports (includes control weaknesses, lessons learnt and recommendations) Actions for CF to take forward eg fraud training, will be covered under the Fraud RR.	No. Investigation Reports issued in 6-month period Narrative: added value examples for last 6 months

CF Objective:	How	Measure
To undertake proactive and preventive fraud work	Fraud Training Fraud Comms Data matching NFI Fraud Risk Assessments Proactive Reviews National fraud developments Participating in fraud networks and training	Figures and narrative on: Fraud trainings delivered Fraud comms issued Proactive reviews Update on data matching/NFI work Update on the Fraud Risk Register, with any new or emerging fraud risks nationally or locally. And any narrative on participation in fraud networks, meetings, trainings, or any other partnership working initiatives.

ANTI-FRAUD AND CORRUPTION STRATEGY



1. INTRODUCTION

- 1.1 The Council is responsible for ensuring the public funds it administers are spent in a way that best serves the people of Cherwell District. In administering its responsibilities, the Council has a duty to prevent fraud and corruption, whether it is attempted by someone outside or within the Council such as another organisation, a resident, an employee or Councillor. The Council is committed to a **zero-tolerance** approach to fraud, corruption and theft.
- 1.2 The Director of Finance as the “Section 151 Officer” has a statutory responsibility under section 151 of the Local Government Act 1972 to ensure the proper arrangements for the Council’s financial affairs and has developed financial codes of practice and accounting instructions. The Director of Finance exercises a quality control on financial administration through delegation of responsibilities to the Assistant Director of Finance and the Strategic Finance Business Partners.
- 1.3 The Director of Law & Governance (Monitoring Officer) has a statutory responsibility to advise the Council on the legality of its decisions and to ensure that the Council’s actions do not give rise to illegality or maladministration. It is therefore essential for employees to follow the Council’s policies and procedures to demonstrate that the Council is acting in an open, transparent and lawful manner.
- 1.4 Cherwell District Council will thoroughly investigate all allegations of fraud, corruption or theft, both from within the Council and from external sources, which it recognises can:
- Undermine the standards of public service that the Council is attempting to achieve.
 - Reduce the level of resources and services available for the residents of Cherwell.
 - Result in consequences which reduce public confidence in the Council.
- 1.5 Any proven fraud will be dealt with in a consistent and proportionate manner. Appropriate sanctions and redress will be pursued against anyone perpetrating, or seeking to perpetrate fraud, corruption or theft against the Council.
- 1.6 The Council is committed to the highest possible standards of openness, probity, honesty, integrity and accountability. The Council expects all staff, Councillors and partners to observe these standards which are defined within the Code of Conduct, underpinned by its values.

2. DEFINITIONS

- 2.1 **FRAUD:** Is defined by The Fraud Act 2006 as follows:

A person is guilty of fraud if s/he is in breach of any of the following:

Fraud by false representation; that is if a person:

- (a) dishonestly makes a false representation, and
- (b) intends, by making the representation:
 - (i) to make a gain for himself or another, or
 - (ii) to cause loss to another or to expose another to a risk of loss.

Fraud by failing to disclose information; that is if a person:

- (a) dishonestly fails to disclose to another person information which he is under a legal duty to disclose, and
- (b) intends, by failing to disclose the information:
 - (i) to make a gain for himself or another, or
 - (ii) to cause loss to another or to expose another to a risk of loss.

Fraud by abuse of position; that is if a person:

- (a) occupies a position in which he is expected to safeguard, or not to act against, the financial interests of another person,
- (b) dishonestly abuses that position, and
- (c) intends, by means of the abuse of that position:
 - (i) to make a gain for himself or another, or
 - (ii) to cause loss to another or to expose another to a risk of loss.

The term “fraud” is usually used to describe depriving someone of something by deceit, to make a financial, material or other gain to themselves or loss to another. It has to have been intentional in order to qualify as being fraudulent.

- 2.2 **CORRUPTION:** Is the deliberate use of one’s position for direct or indirect personal gain. “Corruption” covers the offering, giving, soliciting or acceptance of an inducement or reward, which may influence the action of any person to act inappropriately.
- 2.3 **THEFT:** Is the physical misappropriation of cash or other tangible assets. A person is guilty of “theft” if he or she dishonestly appropriates property belonging to another with the intention of permanently depriving the other of it.
- 2.4 **MONEY LAUNDERING:** Money laundering is the process by which criminals attempt to 'recycle' the proceeds of their criminal activities in order to conceal its origins and ownership and which leaves them with money that cannot be traced back.

All employees are instructed be aware of the increasing possibility of receiving requests that could be used for money laundering and illicit requests for money through e-mails. Detailed guidance is set out in the Council’s Money Laundering Policy.

- 2.5 Any Service that receives money from an external person or body is potentially vulnerable to a money laundering operation. The need for vigilance is vital and if there is any suspicion concerning the appropriateness of the transaction then advice must be sought. The Council’s Money Laundering Reporting Officer (MLRO) is the Director of Finance.

2.6 **BRIBERY:** Prior to the Bribery Act 2010, bribery had been viewed within the definition of corruption. The Bribery Act 2010 introduces four main offences, simplified as the following:

- Bribing another person: a person is guilty of an offence if he/she offers, promises or gives a financial or other advantage to another person.
- Offences relating to being bribed: a person is guilty of an offence if he/she requests, agrees to receive, or accepts a financial or other advantage. It does not matter whether the recipient of the bribe receives it directly or through a third party, or whether it is for the recipient's ultimate advantage or not.
- Bribery of a foreign public official: a person who bribes a foreign public official is guilty of an offence if the person's intention is to influence the foreign public official in their capacity, duty or role as a foreign public official.
- Failure of commercial organisations to prevent bribery: organisations, which include the County Council, must have adequate procedures in place to prevent bribery in relation to the obtaining or retaining of business.

Note: A 'financial' or 'other advantage' may include money, assets, gifts or services.

2.7 Prior to entering into any business arrangements, all Council officers and/or business units should ensure that they have taken all reasonable steps to identify any potential areas of risk relating to bribery or corruption.

3. SCOPE

3.1 This document applies to:

- All County Council Employees (including Agents and Agency Staff) and Councillors
- Staff and Committee Members of Council funded voluntary organisations
- Partner organisations
- Schools
- Council Suppliers, Contractors and Consultants
- General Public

4. AIMS AND OBJECTIVES

4.1 The aims and objectives of the Anti-Fraud and Corruption Strategy are to:

- Ensure that the Council is protected against fraud and loss.
- Protect the Council's valuable resources by ensuring they are not lost through fraud but are used for improved services to Cherwell residents and visitors.
- Create an "anti-fraud" culture which highlights the Council's zero tolerance of fraud, corruption and theft, which defines roles and responsibilities and actively engages everyone (the public, Councillors, staff, managers and policy makers).
- To provide a best practice "counter-fraud" service which:

- Proactively deters, prevents and detects fraud, corruption and theft in the Council.

- Investigates suspected or detected fraud, corruption and theft.
- Enables the Council to apply appropriate sanctions and recovery of losses.
- Provides recommendations to inform policy, system and control improvements, thereby reducing the Council's exposure to fraudulent activity.

5. PRINCIPLES

- 5.1 The Council will not tolerate abuse of its services or resources and has high expectations of propriety, integrity and accountability from all parties identified within this strategy. The Council will ensure that the resources dedicated to "counter-fraud" activity are sufficient and all those involved are trained to deliver a professional "counter-fraud" service to the highest standards.
- 5.2 All fraudulent activity is unacceptable and will result in consideration of legal action being taken against the individual(s) concerned. The Council will also pursue the repayment of any financial gain from individuals involved in malpractice and wrongdoing. The Council will ensure consistency, fairness and objectivity in all its "counter-fraud" work and that everyone is treated equally.
- 5.3 This strategy encourages those detailed in section 3.1 to report any genuine suspicions of fraudulent activity. However, malicious allegations or those motivated by personal gain will not be tolerated and, if proven, disciplinary or legal action may be taken. Sections 8.3 and 8.4 detail the reporting arrangements in relation to incidents of fraud or irregularity.
- 5.4 The Council will work with its partners (such as the Police, City/District/County Councils and other investigative bodies) to strengthen and continuously improve its arrangements to prevent fraud and corruption.

6. RESPONSIBILITIES

STAKEHOLDER	SPECIFIC RESPONSIBILITIES
Chief Executive Officer	Ultimately accountable for the effectiveness of the Council's arrangements for countering fraud and corruption.
Director of Finance (Section 151 Officer)	To ensure the Council has adopted an appropriate anti-fraud strategy, there is an effective internal control environment in place and there is an adequately resourced and effective Internal Audit service to deliver "counter-fraud" work.
Director of Law & Governance (Monitoring Officer)	To advise Councillors and Officers on ethical issues, standards and powers to ensure that the Council operates within the law and statutory Codes of Practice.
Accounts Audit &	To monitor the Council's strategies and policies and consider the effectiveness of the arrangements for Raising Concerns at

Risk Committee	Work, Whistle-blowing Procedures, Anti-Fraud and Corruption and the Complaints Process.
Councillors	To comply with the Code of Conduct and related Council policies and procedures, to be aware of the possibility of fraud, corruption and theft, and to report any genuine concerns accordingly.
External Audit	Statutory duty to ensure that the County Council has adequate arrangements in place for the prevention and detection of fraud, corruption and theft.
Internal Audit and Counter Fraud	Responsible for developing and implementing the Anti-Fraud and Corruption Strategy and monitoring the investigation of any reported issues. To ensure that all suspected or reported irregularities are dealt with promptly and in accordance with this strategy and that action is identified to improve controls and reduce the risk of recurrence.
Strategic Directors, Directors, Deputy / Assistant Directors, Heads of Service and Service Managers	To promote staff awareness and ensure that all suspected or reported irregularities are immediately referred to Internal Audit. To ensure that there are mechanisms in place within their service areas to assess the risk of fraud, corruption and theft and to reduce these risks by implementing strong internal controls.
Staff	To comply with Council policies and procedures, to be aware of the possibility of fraud, corruption and theft, and to report any genuine concerns to management, Internal Audit or via the Raising Concerns at Work policy and Whistleblowing Procedures.
Public, Partners, Suppliers, Contractors and Consultants	To be aware of the possibility of fraud and corruption against the Council and report any genuine concerns / suspicions.

7. APPROACH TO COUNTERING FRAUD

- 7.1 Cherwell District Council will fulfil its responsibility to reduce fraud and protect its resources by completing work in each of the following key areas:
- 7.2 **PREVENT AND DETECT:** The Council will promote and develop a strong “anti-fraud” culture, raise awareness and provide information on its counter-fraud work. This includes dedicated fraud web pages, a fraud e-learning tool for all staff,

delivering fraud training to Officers, undertaking proactive fraud detection work and investigations.

Internal Audit and Counter-Fraud will work with managers and policy makers to ensure new and existing systems, procedures and policy initiatives consider any fraud risks and anti-fraud controls are built in. Audit activity will also consider fraud risks as part of each review.

Fraud trends will be monitored and a Fraud Risk Register maintained and routinely updated to identify areas of new or existing fraud exposure – preventive and detective measures can then be taken.

The Council also relies on employees, Councillors and the public to be alert and to report suspicion of fraud and corruption. Managers should pay particular attention to circumstances which may require additional and sensitive monitoring or supervision. Examples of Fraud Indicators are detailed in Appendix B.

- 7.3 **INVESTIGATION:** The Council will securely record all fraud referrals and cases, which will be robustly investigated to conclusion by the Counter-Fraud team. Please see Appendix A for the Protocol for Investigating Irregularities.
- 7.6 **SANCTIONS:** The Council will apply realistic and effective sanctions for individuals or organisations where an investigation reveals fraudulent activity. This will include legal action in addition to criminal and disciplinary action, where appropriate.
- 7.7 **REDRESS:** A crucial element of the Council's response to tackling fraud is seeking financial redress. The recovery of defrauded monies is an important part of the Council's strategy and will be pursued, where appropriate.
- 7.8 In addition to the above, Internal Audit also prepares an annual Counter-Fraud Work Plan that details the key objectives and areas of work for the year and when actions are due to be completed. The work plan is agreed and monitored by the Audit & Governance Committee and Section 151 Officer.

8. REPORTING, ADVICE AND SUPPORT

- 8.1 The Council's expectation is that Councillors and managers will lead by example and that employees at all levels will comply with the Constitution, Council Policies, Financial Regulations, Financial and Contract Procedure Rules and directorate Procedures.
- 8.2 The Council recognises that the primary responsibility for the prevention and detection of fraud rests with management. It is essential that employees of the Council report any irregularities, or suspected irregularities to their line manager and if this is not appropriate then to the Head of Service or Service Manager. The Council will provide all reasonable protection for those who raise genuine concerns in good faith, in accordance with the Raising Concerns at Work, Grievances and Whistle-blowing policies.

8.3 The line manager, Service Manager or Assistant Director/Head of Service who receives the allegation (whether from a Councillor or a Council employee) must refer the matter to the Counter-Fraud team (corporatefraud@cherwell-dc.gov.uk) and where appropriate the following people, to determine how the potential irregularity will be investigated:

- Director of Finance (Section 151 Officer)
- Director of Law & Governance (Monitoring Officer)
- Relevant Director
- Chief Internal Auditor
- Director of HR
- HR and Finance Business Partners

8.4 Where appropriate, the Director of Law & Governance (Monitoring Officer) will liaise as appropriate with the Leader, Deputy Leader and relevant portfolio holder where the irregularity is material and/or could affect the reputation of the Council. The Section 151 Officer will liaise with the Cabinet Member for Finance, as appropriate. The Media Team should also be informed if the matter is likely to be communicated externally.

8.5 The Investigating Officer will follow the Protocol for Investigating Irregularities (Appendix A), which includes the need to:

- Deal promptly with the matter
- Recover and record all evidence received
- Ensure that evidence is sound and adequately supported
- Ensure security of all evidence collected
- Contact other agencies if necessary e.g. Police (see appendix A - Police Involvement)
- Notify the Council's insurers if applicable
- Implement Council disciplinary procedures where appropriate

8.6 The Council will also work in co-operation with the following bodies that will assist in scrutinising our systems and defences against fraud and corruption:

- Local Government Ombudsman
- External Audit – Relationship Manager
- National Fraud Initiative and related Audit Networks
- Central Government Departments
- HM Revenue and Customs
- UK Border Agency
- Department for Work and Pensions
- Police

8.7 Any concerns or suspicions reported will be treated with discretion and in confidence. Key contacts include:

- Chief Internal Auditor – Tel: 07393 001 246
- Audit Manager and Counter-Fraud Lead – Tel: 07393 001 217

Confidential e-mail: corporatefraud@cherwell-dc.gov.uk

8.8 Other Council means for raising concerns:

▪ Chief Executive Officer	Write to: Cherwell District Council Bodicote House Banbury OX15 4AA
▪ Director of Finance (Section 151 Officer)	
▪ Director of Law & Governance (Monitoring Officer)	
▪ Relevant Director	
▪ Audit Committee Chairman	

8.9 External means of raising concerns:

▪ External Audit (Ernst & Young)	0118 928 1234
▪ Citizens Advice Bureau	Website: www.citizensadvice.org.uk
▪ Police	Website: www.thamesvalley.police.uk
▪ Your Local Councillor	Website: www.cherwell.gov.uk Click on: About your Council > Councillors.

8.10 Attached are the following Appendices:

- Appendix A: The Protocol for Investigating Irregularities
- Appendix B: Examples of Fraud Indicators

9. FURTHER INFORMATION

9.1 Further information on Council policy can be found in the following documents:

- The Constitution
- Codes of Conduct (Councillors and Officers)
- Raising Concerns at Work – Grievances
- Whistle-Blowing Procedure
- Bribery Act Policy
- Gifts and Hospitality Policy
- Policy on Declaring and Registering Interests
- Financial Regulations
- Contract Procedure Rules and the Contract Procedure Rules - Exemption Procedure
- Money Laundering Policy
- Regulation of Investigatory Powers Act (RIPA)

10. STRATEGY REVIEW

10.1 The Accounts Audit & Risk Committee will continue to review and amend this strategy as necessary to ensure that it continues to remain compliant and meets the requirements of the Council.

Responsible Officer: Chief Internal Auditor

Date: July 2021

Review Date: July 2023

APPENDIX A

PROTOCOL FOR INVESTIGATING IRREGULARITIES

a) Fraud Referral and Investigation

Employees, Councillors and other groups are encouraged to report suspected fraud and irregularities in accordance with section 5.3 of the Strategy and the Council's Raising Concerns at Work, Grievances and Whistle-blowing policy.

When a referral or allegation is raised, the Deputy Director/Head of Service or Service Manager will report the incident to the Counter-Fraud team (corporatefraud@cherwell-dc.gov.uk) and key contacts detailed in section 8.3 above, as appropriate.

The referral will then be assessed by the Counter-Fraud Team and if after a risk assessment it is determined that it meets the threshold for referral, a case will be opened on the Council's Fraud case management system.

Where necessary a strategy meeting will be called to discuss the matter between the relevant parties (eg. the Service, HR, Legal, Counter-Fraud). The decisions and actions from this meeting will be documented and circulated to attendees.

For very large, sensitive or complex investigations, an independent Investigation Manager (internal or external) may be identified to lead on the investigation. In these cases, the case will be steered and monitored by the relevant Director(s). Specialist professional advice should be sought from HR, Legal and Counter-Fraud. The Investigation Manager will have access to management and records as appropriate to conduct the investigation.

For smaller or more routine fraud investigations, these will be undertaken by the Counter-Fraud team, who will liaise with others as necessary to complete the investigation.

Where issues are of an HR nature – these will be investigated by HR. Where they are of a fraudulent nature – these will be investigated by the Counter-Fraud Team. In some cases, the Service is best placed to investigate the matter. The responsibility for investigation will be clarified between the various parties. In all cases that are logged on the Counter-Fraud case management system, these will be monitored for progress by the Counter-Fraud team.

b) Evidence and Interviews

All evidence gathered will be regarded as strictly confidential and will be the property of the investigation team. It will only be made more widely available on agreement with the necessary officers. The team will be responsible for gathering all evidence, whether it is verbal, written or electronic, which may include the need to interview employees or others.

If it is necessary to interview employees, the Deputy Director/Head of Service or Service Manager should be informed. HR should also be contacted to ensure the interview is arranged, conducted and managed correctly to ensure the employee is supported and the investigation is not compromised. Interviews with employees must be conducted in

accordance with the relevant Council standards and procedures, with allowances for proper representation.

When obtaining written evidence, the source copy of any documentation should be obtained. Electronic evidence will be stored on the Counter-Fraud and the case management system. Hard evidence will be stored in the appropriate evidence store.

Some investigations may require either covert surveillance or a covert operation to obtain information. If this is required, formal authorisation will need to be obtained under the Regulation of Investigatory Powers Act 2000 (RIPA). Authorising any action under RIPA regulation needs to be obtained from the Director of Law and Governance (Monitoring Officer).

The conduct of interviews and gathering of evidence which may subsequently be used as criminal evidence is governed by specific rules and Acts. In this respect, the following statutes are relevant:

- Police and Criminal Evidence Act 1984 (PACE).
- Regulation of Investigatory Powers Act 2000 (RIPA).
- Human Rights Act 1998.
- Data Protection Act 1998 and GDPR
- Proceeds of Crime Act 2002 (POCA)

The investigation team should ensure that a fully referenced investigation file is maintained, which includes all documentation, records and notes collated during the investigation. These must also adhere to Disclosure requirements.

c) Disciplinary and Criminal Proceedings

Assistant Directors/Heads of Service and Service Managers will be expected to take action in accordance with the Council's Disciplinary and Capability Procedures, where the outcome of the investigation indicates improper behaviour. This must be undertaken upon advice and support from HR.

If an investigation requires that an employee is suspended, this must be done in accordance with the Disciplinary Procedure upon completion of a suspension risk assessment. The procedure states that the suspension period should be as short as is reasonably practical. Senior employees should record in writing a decision to suspend and any subsequent review of that decision, setting out the reasons for the decision and whether alternative options have been considered.

The Assistant Director/Head of Service or Service Manager should ensure, normally through the investigation team, that the relevant written reports are available timely, for disciplinary and criminal proceedings. Necessary members of the investigation team may be required to give written evidence and attend at hearings to give verbal evidence and answer questions.

Where there is a possibility of criminal proceedings, the disciplinary process should ensure that any relevant evidence is gathered and reported in such a way that it could be admissible in court. It should also ensure that it doesn't compromise a potential criminal

proceeding, such as for fraud. In these cases therefore, careful collaboration between the Service, HR and Counter-Fraud should be ensured and clarity on roles and outcomes documented. Normally, any internal disciplinary process can take place at the same time as the fraud investigation. However, this should be agreed in advance by all parties to ensure both investigations are not compromised.

d) Police Involvement

Reporting incidents to the Police must be considered on an individual basis. If criminal activity is suspected, the matter should be promptly reported to the Police once sufficient evidence has been gathered. Approval to report the matter to the Police must be obtained from the Director of Finance, Service Director and Director of Law & Governance.

The Counter-Fraud team in most cases are best placed to report the case to the Police as they have an agreed reporting route for fraud and economic crime cases to TVP. In these cases, the Counter-Fraud team would then maintain ongoing contact with the TVP Officer in Charge in order to progress the investigation and report back to the relevant Service managers or Directors, as appropriate.

e) Post Investigation

For the larger or more impactful investigations, once the investigation work has been concluded, the team will need to prepare a written report detailing the initial referral or allegation, the work completed (including documents obtained and interviews conducted) and an opinion or conclusion on the outcome of the investigation.

The report should also detail any breakdown in management, operational or financial controls to the Assistant Director/Head of Service or Service Manager, who will have to agree the necessary actions to address the issues.

The report should be circulated to the Director of Finance, Director of Law & Governance, Service Director, Chief Internal Auditor and Director of HR (as appropriate). Other officers should be notified on a strictly confidential, need to know basis.

The Council wishes to see that following an investigation, action is taken to minimise future occurrence. This may involve improvements in control, changes to systems and procedures or employee training.

Any publicity arising from an investigation will be co-ordinated by the Council's Media Team.

f) Training

The Council acknowledges that the continuing success of its Anti-Fraud and Corruption Strategy and its general credibility will depend largely on the effectiveness of programmed training and responsiveness of employees and Councillors throughout the organisation. To facilitate this, the Council has introduced a Fraud Awareness e-learning package that has been rolled out across the organisation and is encouraged to be included as part of officer induction arrangements. The subject is also included as part of Councillor training.

The Counter Fraud team also delivers anti-fraud awareness sessions as required, or as a result of their investigations and audits.

APPENDIX B

A number of frauds can come to light because of suspicions aroused by, for instance, the behaviour of certain individuals. It is impossible to give a definitive list of fraud indicators or warning signs. The following are types of risk factors that may, either alone or cumulatively with other factors, suggest the possibility of fraud and may therefore warrant further investigation or enquiry.

- **Unusual employee behaviour:** Refusal to comply with normal rules and practices, fails to take leave, refusing promotion, managers by-passing subordinates, subordinates by-passing managers, living beyond means, regularly working long-hours, job dissatisfaction/unhappy employee, secretiveness or undue defensiveness.
- **Financial irregularities:** Key documents missing (e.g. invoices, contracts); absence of controls and audit trails; missing expenditure vouchers and official records; general ledger out of balance; bank and ledger reconciliations are not maintained or cannot be balanced; excessive movements of cash or transactions between accounts; numerous adjustments or exceptions; constant overdue pay or expense advances; duplicate payments; ghost employees on the payroll; large payments to individuals; excessive variations to budgets or contracts.
- **Bad procurement practice:** Too close a relationship with suppliers/contractors; suppliers/contractors who insist on dealing with only one particular member of staff; unjustified disqualification of any bidder; lowest tenders or quotes passed over with minimal explanation recorded; defining needs in ways that can be met only by specific contractors; single vendors; vague specifications; splitting up requirements to get under small purchase requirements or to avoid prescribed levels of review or approval.
- **Disorganisation:** Understaffing in key control areas; consistent failures to correct major weaknesses in internal control; inadequate or no segregation of duties.
- **Inadequate supervision:** Policies not being followed; lack of senior management oversight; inadequate monitoring to ensure that controls work as intended (periodic testing and evaluation); low staff morale, weak or inconsistent management.
- **Lax corporate culture:** Management frequently override internal control; climate of fear or a corporate culture; employees under stress without excessive workloads; new employees resigning quickly; crisis management coupled with a pressured business environment; high employee turnover rates in key controlling functions.
- **Poor work practices:** Lack of common sense controls; work is left until the employee returns from leave; post office boxes as shipping addresses; documentation that is photocopies or lacking essential information; lack of rotation of duties; unauthorised changes to systems or work practices.

Cherwell District Council

Accounts, Audit and Risk Committee

28 July 2021

Support to Subsidiaries

Report of Director of Finance

This report is public

Appendix 1 to this report is exempt from publication by virtue of paragraph 3 of Schedule 12A Local Government Act 1972

Purpose of report

To inform the Committee of the overall level of support provided to the Council's subsidiaries and how this is considered as part of the external audit.

1.0 Recommendations

The meeting is recommended:

- 1.1 To note the report and raise any queries on the exempt appendix.

2.0 Introduction

- 2.1 The Council has several subsidiaries which are consolidated into its Group Accounts. Each of these subsidiary companies are required to be audited externally and each audit requires a Letter of Support from the Council as Parent. The Letter of Support is a document which demonstrates that the Parent will ensure its subsidiaries are able to meet their liabilities and are relied upon by the subsidiary auditors in determining the Going Concern status of the company. A Going Concern is a company which is financially stable enough to meet its obligations and continue to trade for the foreseeable future.
- 2.2 The Council also needs to demonstrate its status as a Going Concern to its external auditors. Having a robust understanding of its financial commitments is crucial in assessing whether the Council has the financial security to support itself and its subsidiaries.

3.0 Report Details

- 3.1 Demonstrating that the Council is a Going Concern is increasingly important to the Council's external auditors, and auditors across all sectors, not least because of the impact of the Covid-19 pandemic and its impact on businesses. An entity's Management is responsible for assessing its status as a Going Concern and part of how it does so is to prepare detailed forecasts which reflect potential scenarios and Management's plans to deal with them.
- 3.2 For the 2019/20 assessment of Going Concern, the Council provided a detailed cashflow forecast with assumptions of its own cash in and outflows. This forecast was then tested for sensitivities to expected cash inflows (e.g. 5% reduction in Council Tax collection) and outflows (e.g. a subsidiary requiring financial assistance).
- 3.3 The external auditors were keen to determine what the overall cash position of the council would be if all of the identified risks happened on the same day; could the Council manage financially? Appendix 1 details the level of support committed to the Council's subsidiaries in their Letters of Support and quantifies, where possible, the level of financial exposure this entails. Each is then assessed for its potential impact on the Council's cashflow and the likelihood of the Council being called on to step in. The document then details the mitigations and governance arrangements the Council has in place to manage the risk.
- 3.4 Sections 3 and 4 of the Appendix assesses the ability of the Council to cope financially with the worst-case scenario which consist of a selection of the identified risks occurring on the day the Council is forecasting its lowest cash position. This scenario results in the Council being required to borrow in the short term to manage its cashflow, but comfortably within the limits which were set as part of the Capital Strategy approved by Council in February 2021.
- 3.5 The document that is Appendix 1 will now become an integral part of the Council's Going Concern assessment and will be regularly updated and brought to this committee as part of the governance and mitigation to which it refers. It will also be used to ensure the borrowing boundaries in the Capital Strategy are set appropriately.

4.0 Conclusion and Reason for Recommendations

- 4.1 The information in Appendix 1 summarises the support the Council has extended to its subsidiaries. It is important that the Committee is aware of the level of support extended in order to ensure good governance, manage risk and to inform decision making.

5.0 Consultation

- 5.1 None

6.0 Implications

Financial and Resource Implications

- 6.1 There are no new financial implications to the Council arising as a result of this report. The report does however set out the scale of the financial support provided to its subsidiaries and the Council should be mindful of this in the future.

Comments checked by: Michael Furness, Assistant Director of Finance, 01295 221845, Michael.Furness@cherwell-dc.gov.uk

Legal Implications

- 6.2 There are no legal implications arising directly as a result of this report.

Comments checked by: Richard Hawtin, Team Leader – Non-contentious, 01295 221695, richard.hawtin@cherwell-dc.gov.uk

Risk Implications

- 6.3 There are no new risk management implications to the Council arising directly from this report

Comments checked by: Louise Tustian, Head of Insight and Corporate Programmes, 01295 221786, louise.tustian@cherwell-dc.gov.uk

7.0 Decision Information

Key Decision N/A

Financial Threshold Met: N/A

Community Impact Threshold Met: N/A

Wards Affected

All

Links to Corporate Plan and Policy Framework

All

Lead Councillor

Councillor Tony Ilott, Lead Member for Financial Management and Governance

Document Information

Appendix No and Titles

- Appendix 1 – Support to Subsidiaries (Exempt)

Background Papers

None

Report Author and contact details

Joanne Kaye, Strategic Finance Business Partner

Joanne.kaye@cherwell-dc.gov.uk

Agenda Item 10

Account Audit & Risk Committee Work Programme 2021 -2022

22 September 2021	Chief Internal Auditor - Private Session External Auditor - Private Session Performance, Finance and Risk Monitoring Report - Q1 - May 2021 Report of Those Charged with Governance 2020/21 External Audit - Annual Audit Opinion 2020/21 Final Statement of Accounts and Letter of Representation 2020/21 Treasury Management Q1 Update 2021/22 Appointment of PSAA to Undertake Auditor Appointments Internal Audit Progress Update 2021/22
17 November 2021	Treasury Management Q2 2021/22 Performance, Finance and Risk Monitoring Report - Q2 - September 2021 Counter Fraud Update 2021/22
19 January 2022	Internal Audit Progress Update 2021/22 Draft Capital and Investment Strategy and Treasury Management Strategy 2022/23
16 March 2022	Counter Fraud Update 2021/22 Annual Report of AARC Performance, Finance and Risk Monitoring Report - Q3 - December 2021 Treasury Management Q2 2021/22 Housing Benefit Subsidy Audit Housing Benefit Risk Based Verification Policy External Audit Update

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By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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