



# Ashfield District Council – Audit Progress Report

Audit Committee: 28 November 2022



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## Our Vision

Through continuous improvement, the central midlands audit partnership will strive to provide cost effective, high quality internal audit services that meet the needs and expectations of all its partners.

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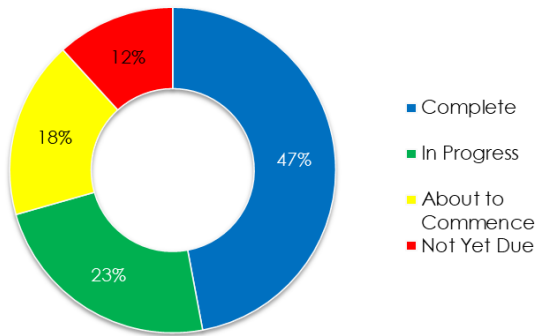
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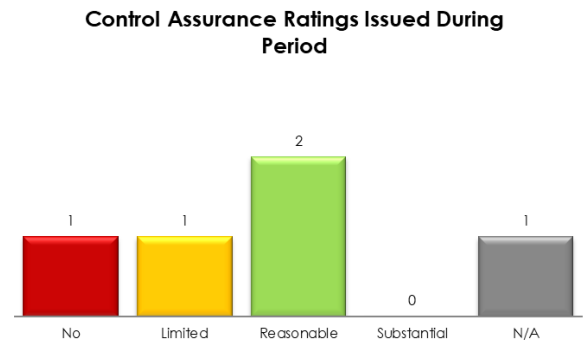
# Ashfield District Council – Audit Progress Report

## AUDIT DASHBOARD

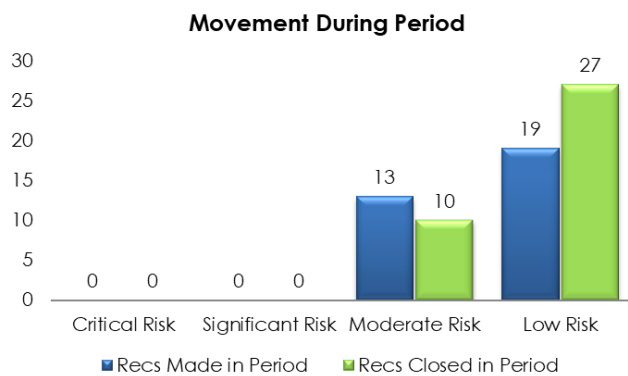
### Plan Progress



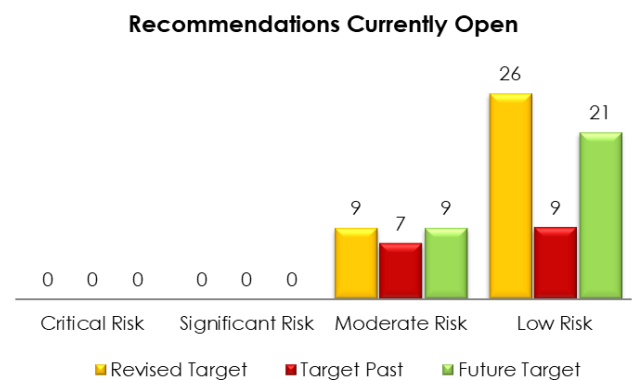
### Assurance Ratings



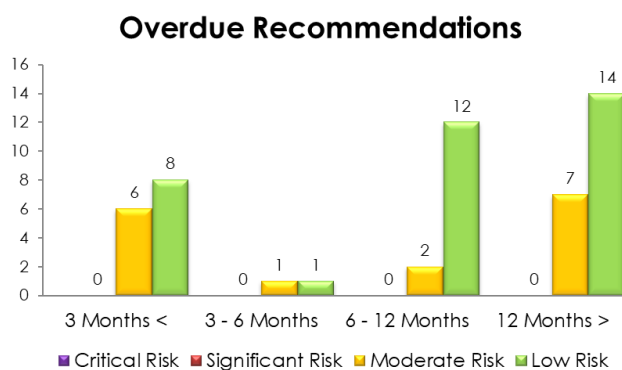
### Recommendations



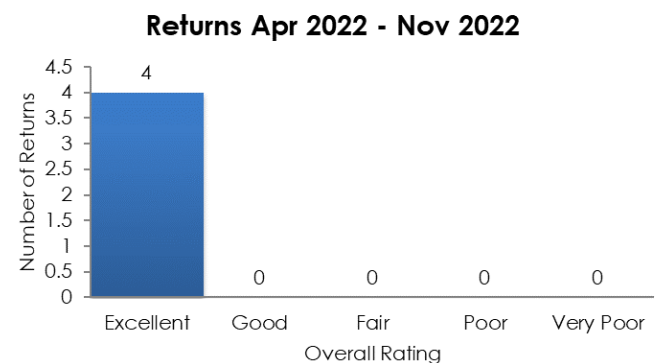
### Recommendations



### Recommendations



### Customer Satisfaction



# Ashfield District Council – Audit Progress Report

## AUDIT PLAN

### Progress on Audit Assignments

The following table provides the Committee with information on how audit assignments were progressing as of 15 November 2022.

2022-23 Jobs	Status	% Complete	Assurance Rating
Anti-Fraud & Corruption 2022-23	In Progress	15%	
Organisational Culture and Ethics 2022-23	Not Allocated		
General Ledger – Data Analytics 2022-23	Allocated		
Treasury Management 2022-23	Final Report	100%	Reasonable
IT Asset Inventory 2022-23	Final Report	100%	Limited
Estates 2022-23	Allocated	5%	
Licensing 2022-23	Final Report	100%	Reasonable
Section 106 2022-23	In Progress	45%	
Leisure Centre 2022-23	Allocated	5%	
Future High Streets Fund 2022-23	Not Allocated		
Housing – Data Quality 2022-23	Final Report	100%	No
Climate Change & Sustainability 2022-23	Draft Report	95%	
Health & Safety 2022-23	In Progress	60%	
Homes England Grant	Complete	100%	N/A
B/Fwd Jobs	Status	% Complete	Assurance Rating
Accounting Systems	Final Report	100%	Substantial
Corporate Credit Cards 2021-22	Final Report	100%	Reasonable
Planning	Final Report	100%	Reasonable

### Audit Plan Changes

None to report.

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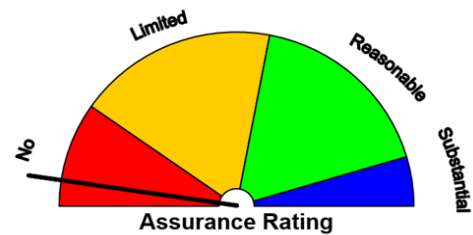
## AUDIT COVERAGE

### Completed Audit Assignments

Between 12 July 2022 and 15 November 2022, the following audit assignments have been finalised since the last progress update was given to the Audit Committee.

Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Housing Data Quality 2022-23	No	0	0	9	2	9%
Homes England Grant 2022-23	N/A	0	0	0	0	n/a
Treasury Management 2022-23	Reasonable	0	0	1	2	67%
Licensing 2022-23	Reasonable	0	0	1	5	33%
IT Asset Inventory 2022-23	Limited	0	0	2	10	0%
<b>TOTALS</b>		<b>0</b>	<b>0</b>	<b>13</b>	<b>19</b>	<b>16%</b>

Control Objectives Examined	Assurance Rating			
	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The property components and attributes are up to date and accurate, when compared to other records in repairs and planned maintenance.	8	0	2	6
The Council has the tenant profiling data available, and this can be extracted.	3	0	0	3
<b>TOTALS</b>	<b>11</b>	<b>0</b>	<b>2</b>	<b>9</b>
Summary of Weakness		Risk Rating	Agreed Action Date	
Components were not automatically updated in the Capita Housing System following repairs and maintenance work tickets being completed. The manual process had led to instances of inaccuracy and inconsistency in the data sets maintained in the System.		Moderate Risk	31/03/2023	
Testing identified that windows component data was not always being updated, or updated completely and accurately, in the Capita Housing System following completion of routine planned maintenance works.		Moderate Risk	31/03/2023	
The data in the component fields within the Capita Housing System did not accurately reflect the details of the Gas Servicing Certificates. The spreadsheets used as an		Moderate Risk	30/11/2022	

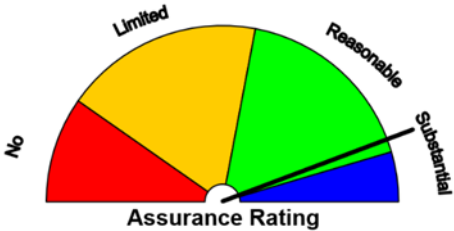


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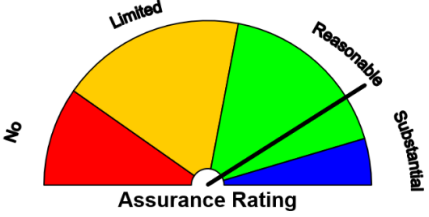
alternative to the System contained blank fields and therefore were not a reliable audit trail for the gas servicing process.		
There were three different components for electrical testing within the Capita Housing System, all containing inconsistent information and possible errors.	Moderate Risk	31/10/2022
Data Matching and testing identified that the smoke detector component fields within the Capita Housing System do not accurately reflect the true status of the smoke detectors in Council properties.	Moderate Risk	30/11/2022
The three components in the Capita Housing System relating to boilers and flue types contained information that was inconsistent for the majority of the Council's properties.	Moderate Risk	30/11/2022
There were sets of data stored outside of the Capita Housing System which were required to ensure the Council could provide complete and accurate property status reports.	Low Risk	31/03/2023
Address data was not held in an appropriate format in the Capita Housing System; records were inconsistent, not all property had a Unique Property Reference Number and data had been overwritten.	Low Risk	31/12/2022
The personal and sensitive data stored in the Capita Housing System, may be out of date as it was obtained at the point of tenancy application and not refreshed thereafter.	Moderate Risk	31/03/2023
Access to the various Excel spreadsheets used to record component works such as checks, installations and replacements, had not been appropriately restricted.	Moderate Risk	31/10/2022
Access to confidential database reports containing personal and sensitive data (including special category data) on Council tenants had not been appropriately restricted.	Moderate Risk	Implemented

<h2>Homes England Grant Certification 2022-23</h2>	<p>Assurance Rating - Not Applicable</p>
<p><i>The Council was required to appoint an independent auditor to carry out compliance audits for two capital grants. The first scheme was to demolish the Poplars Community Centre and build affordable housing on the site. This was a follow-on from an audit carried out in 2021/22. The second scheme was to demolish garages at Chatsworth Drive and erect a block of four flats.</i></p> <p><i>CMAAP were asked to undertake the role of independent auditor and carry out the audit of the Poplars and Chatsworth Drive Affordable Homes schemes and submit our findings in line with Homes England requirements. Audit findings are not permitted to be shared with the Council, only Homes England. Homes England will report to the Council prior to 31 March 2023 and the findings will be shared with the Audit Committee.</i></p>	

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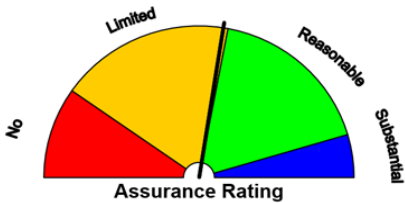
<p>Treasury Management 2022-23</p>	 <p>Assurance Rating</p>				
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls	
There are appropriate and approved treasury management strategy, policy and procedures in place which are regularly reviewed and maintained.	6	6	0	0	
Treasury Measurement transactions are authorised and promptly recorded, and controls are in place to ensure that interest is received/recovered or paid/repaid in a timely manner.	8	7	1	0	
Effective forecasting and monitoring systems have been established to ensure that movements of cash are appropriately managed and cash-flow statements are produced to support treasury management decisions.	5	3	2	0	
There are measures in place to maintain the appropriate levels of data security.	4	3	0	1	
<b>TOTALS</b>	<b>23</b>	<b>19</b>	<b>3</b>	<b>1</b>	
Summary of Weakness		Risk Rating	Agreed Action Date		
The Council's calculations of interest did not equal the amount of interest paid for 3 of 18 interest payments tested and there was no evidence that the differences had been investigated.		Low Risk	Implemented		
Long-term cashflow projections were not being calculated, potentially inhibiting the ability to make long-term investment decisions.		Moderate Risk	31/03/2023		
Access to the various Excel spreadsheets used to record and control Treasury Management activities had not been appropriately restricted.		Low Risk	31/10/2022		

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Licensing 2022-23				
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Licensing service area are using processes that are effective and efficient at ensuring regulations are adhered to.	6	1	4	1
The income generated from licensing fees is accounted for appropriately.	5	4	1	0
<b>TOTALS</b>	<b>11</b>	<b>5</b>	<b>5</b>	<b>1</b>
Summary of Weakness		Risk Rating	Agreed Action Date	
The acupuncture, ear piercing, tattooing and electrolysis licences were not being recorded on the Civica App system. Therefore, this was not consistent with the recording of all other licences.		Low Risk	30/4/2023	
There was no evidence that the Licensing service area had made the required notifications historically and advertised the premises licence applications on the Council's website for the consultation process.		Low Risk	Implemented	
Controls over the delivery of safeguarding and driver knowledge tests were not sufficient to detect instances where an imposter could take the tests on behalf of the licensing applicant. There were also instances where current drivers had not completed the delayed testing process and had received a number of reminders.		Low Risk	01/04/2023	
There was a lack of robust controls regarding the receipt of documents and document verification checks for licensing applications.		Low Risk	30/04/2023	
Access to supporting documentation containing personal and sensitive data on licensing applicants had not been appropriately restricted.		Moderate Risk	Implemented	
There was some confusion over what communications had taken place between the Licensing Manager and Finance section regarding the movement of monies, to ensure that income is ring-fenced to the service.		Low Risk	31/10/2022	



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IT Asset Inventory 2022-23					
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls	
Review and evaluate policies and procedures for controlling the procurement and movement of IT hardware including desktops and laptops.	16	4	0	12	
<b>TOTALS</b>	<b>16</b>	<b>4</b>	<b>0</b>	<b>12</b>	
Summary of Weakness		Risk Rating	Agreed Action Date		
There was no dedicated ICT asset management policy, and other policies did not address all requirements of an effective asset management process.		Low Risk	31/12/2022		
Evidence of management approval could not be provided for 3 applications for new laptops submitted by non-managerial personnel.		Low Risk	31/12/2022		
Important information such as device location, warranty status, and overall lifecycle (that is, when equipment was no longer eligible for supplier support) was not being recorded for all assets in the inventory.		Moderate Risk	31/12/2022		
A visual inspection of desktops reported to be in 3 office locations as per the Councils asset management inventory records, highlighted that the inventory was inaccurate in 30% of cases sampled.		Low Risk	31/01/2023		
There was no standard operating procedure or policy requirement that defined how often stock checks should take place, and by who.		Low Risk	31/12/2022		
The process for retrieving, re-imaging and redistributing devices used by former employees was not comprehensive.		Low Risk	31/01/2023		
The process for investigating inactive and disconnected computer devices was ad-hoc and not comprehensive.		Moderate Risk	31/01/2023		
Current device transfer and upgrade procedures were not comprehensive, leading to officers holding onto unused duplicate equipment.		Low Risk	28/02/2023		
Evidence of data erasure and wiping process completion (both internal and external) was not being attached to the asset record in Snipe-IT.		Low Risk	28/02/2023		
Minor vulnerabilities and opportunities for improvement were noted with generic Paxton access cards, and with the current process for protecting physical keys that granted access to ICT storage and communications rooms.		Low Risk	28/02/2023		

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Paxton access cards had not always been deactivated for a sample of recent leavers.	Low Risk	28/02/2023
A network discovery scan found devices in active use that had not been recorded as deployed assets in the asset management database.	Low Risk	28/02/2023

# Ashfield District Council – Audit Progress Report

## RECOMMENDATION TRACKING

Final Report Date	Audit Assignments with Open Recommendations	Assurance Rating	Recommendations Open		
			Action Due	Being Implemented	Future Action
14-Feb-19	Risk Registers	Reasonable	1	0	0
24-Apr-18	ICT Performance Management	Reasonable	0	2	0
16-Aug-19	Fire Safety	Reasonable	0	1	0
12-Mar-19	Treasury Management & Banking Services	Reasonable	0	1	0
03-Dec-19	Data Quality & Performance Management	Reasonable	0	1	0
31-Jan-20	Information Governance	Reasonable	0	2	0
09-Jul-20	Digital Transformation	Reasonable	0	3	0
21-Jun-21	Management of Fraud Risk	Limited	0	9	0
10-May-21	People Management	Reasonable	0	6	0
21-Jun-21	Delegated Decisions	Reasonable	0	1	0
16-Aug-21	Teleworking Security	Reasonable	0	3	0
01-Oct-21	Environmental Health	Reasonable	1	1	1
05-Oct-21	PCI Compliance in Organisational Transformation	Reasonable	0	2	0
16-Feb-22	Housing Health & Safety Statutory Compliance	Reasonable	0	1	0
28-Feb-22	Outdoor Recreation - Sports Bookings	Limited	6	0	3
03-Mar-22	Payroll 2021-22	Reasonable	1	0	0
03-Mar-22	Risk Management 2021-22	Reasonable	0	0	1
29-Mar-22	Scrutiny	Reasonable	0	1	0
08-Apr-22	Accounting Systems 2021-22	Substantial	2	1	0
11-Jul-22	Planning	Reasonable	3	0	0
28-Jul-22	Housing - Data Quality 2022-23	No	2	0	8
24-Oct-22	Treasury Management 2022/23	Reasonable	0	0	1
25-Oct-22	Licensing 2022-23	Reasonable	0	0	4
10-Nov-22	IT Asset Inventory 2022-23	Limited	0	0	12
		<b>TOTALS</b>	<b>16</b>	<b>35</b>	<b>30</b>

**Action Due** = The agreed actions are due, but Internal Audit has been unable to ascertain any progress information from the responsible officer.

**Being Implemented** = The original action date has now passed and the agreed actions have yet to be completed. Internal Audit has obtained status update comments from the responsible officer and a revised action date.

**Future Action** = The agreed actions are not yet due, so Internal Audit has not followed the matter up.

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Audit Assignments with Recommendations Due	Action Due			Being Implemented		
	Significant Risk	Moderate Risk	Low Risk	Significant Risk	Moderate Risk	Low Risk
Risk Registers	0	0	1	0	0	0
ICT Performance Management	0	0	0	0	2	0
Fire Safety	0	0	0	0	1	0
Treasury Management & Banking Services	0	0	0	0	0	1
Data Quality & Performance Management	0	0	0	0	0	1
Information Governance	0	0	0	0	1	1
Digital Transformation	0	0	0	0	2	1
Management of Fraud Risk	0	0	0	0	1	8
People Management	0	0	0	0	0	6
Delegated Decisions	0	0	0	0	0	1
Teleworking Security	0	0	0	0	1	2
Environmental Health	0	0	1	0	0	1
PCI Compliance in Organisational Transformation	0	0	0	0	0	2
Housing Health & Safety Statutory Compliance	0	0	0	0	1	0
Outdoor Recreation – Sports Bookings	0	3	3	0	0	0
Payroll 2021-22	0	0	1	0	0	0
Scrutiny	0	0	0	0	0	1
Accounting Systems 2021-22	0	0	2	0	0	1
Planning	0	2	1	0	0	0
Housing – Data Quality 2022-23	0	2	0	0	0	0
<b>TOTALS</b>	<b>0</b>	<b>7</b>	<b>9</b>	<b>0</b>	<b>9</b>	<b>26</b>

# Ashfield District Council – Audit Progress Report

## Highlighted Recommendations

The following recommendations, that have not yet been implemented, are detailed for Committee's scrutiny.

### Being Implemented Recommendations

Information Governance	Rec No. 4
Summary of Weakness / Recommendation	Risk Rating
<p>Sensitive, personal data was being stored in locations which were not suitably restricted to only those officers with a genuine business need to access such information.</p> <p>We recommend that management take appropriate action to ensure that all personal, sensitive data is secured in files, within restrictive sub-folders, with access limited to only those officers who have a genuine business need to access such information.</p>	Moderate Risk
Management Response/Action Details	Action Date
<p>The IT Security Policy Framework is under review. As part of this review we will ensure it is updated to take account of GDPR requirements. Specifically, we will introduce the following measures to assist with ensuring access to data is suitably restricted to only those officers with a genuine business need to access such information:</p> <ul style="list-style-type: none"> <li>- Starters/Transfers/Leavers E-Form – to be completed by the Section Manager. This form will identify access rights of starters, amendments for staff transferring internally and identify when staff leave the Council. This will be used in conjunction/cross-references with the report received from HR on a quarterly basis.</li> <li>- E-Form for completion by Managers/Directors for folder access changes.</li> <li>- Introduction of new file structure guidelines and cascade through ELT/ALT, DMTs and MOD.</li> <li>- Provision of Group Access Permission lists on a quarterly basis to Service Managers for checking and confirmation/amendment. IT to meet with individual Managers to confirm, amend and clarify what is required of Managers as part of this new process.</li> </ul>	30/06/2020
Status Update Comments	Revised Date
<p>Actions have been taken to restrict folders and files. Internal Audit will be reviewing these actions as part of the ICT Key Controls audit.</p> <p>We are currently in the process of migrating documents to Sharepoint/Teams which will introduce private channels. This will make it easier for managers to check who has access to the data held in them.</p>	30/06/2022

ICT Performance Management	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating
<p>Despite commitment to performance management in the Council's latest Technology Strategy, we could not find any documented performance management metrics and goals to support this. Similarly, performance metrics for IT did not appear to be subject to annual review, or agreed or monitored by the Council.</p> <p>We recommend that Management defines performance management metrics for the IT service, and implements policies and procedures for monitoring and reporting compliance. Metrics, goals and targets should also be subject to annual review.</p>	Moderate Risk

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Management Response/Action Details	Action Date
There is a review of the ICT Helpdesk due shortly where performance metrics will be defined and agreed.	01/09/2018
Status Update Comments	Revised Date
<p>The Service Manager for ICT has updated audit that a prerequisite for this recommendation is the implementation of a new helpdesk system which will have appropriate reporting capabilities.</p> <p>The first version of the ICT Service Desk software is now in place but ICT still need to review its reporting capabilities. The post of Service Desk Team Leader is currently being advertised.</p> <p>The Service Manager for ICT has requested a further extension whilst the newly appointed service desk team leader investigates the implementation of the recommendation.</p> <p>To be resolved with the implementation of the House on the Hill service desk application.</p>	30/11/2022

ICT Performance Management	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
<p>Reviews of the team's performance in relation to the resolution of incidents and service requests did not appear to comply with a formal schedule, and evidence of previous reviews could not be provided as the actions/discussions were not documented in minutes.</p> <p>We recommend that Management defines a schedule for reviewing performance of incident and request resolution times, and ensures any agreed actions are documented in minutes which are retained.</p>	Moderate Risk
Management Response/Action Details	Action Date
There is a review of the ICT Helpdesk due shortly where performance metrics will be defined and agreed.	01/09/2018
Status Update Comments	Revised Date
<p>The Service Manager for ICT has updated audit that a prerequisite for this recommendation is the implementation of a new helpdesk system which will have appropriate reporting capabilities.</p> <p>The first version of the ICT Service Desk software is now in place but ICT still need to review its reporting capabilities. The post of Service Desk Team Leader is currently being advertised.</p> <p>The Service Manager for ICT has requested a further extension whilst the newly appointed service desk team leader investigates the implementation of the recommendation.</p> <p>To be resolved with the implementation of the House on the Hill service desk application.</p>	30/11/2022

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Digital Transformation	Rec No. 5
Summary of Weakness / Recommendation	Risk Rating
<p>The Council did not have signed, up to date and adequate contracts in place for some of the applications tested.</p> <p>We recommend that a review is undertaken to ensure that the Council has a signed, up to date and adequate contract in place for all Council applications. Where contracts are not in place, the Council should take action to formalise the provision and maintenance of applications in use.</p>	Moderate Risk
Management Response/Action Details	Action Date
Solution architecture review to be completed across the portfolio.	31/10/2020
Status Update Comments	Revised Date
<p>This review has now commenced by the Innovations and Solutions Manager and Procurement and Projects Officer.</p> <p>We need to look at each contract and make sure that on renewal contracts are detailed and in place for each application.</p> <p>We have reviewed all of the major applications. The review is now being finalised by the new interim solutions manager and will be completed by the end of August 2022.</p>	31/08/2022

Digital Transformation	Rec No. 6
Summary of Weakness / Recommendation	Risk Rating
<p>The contracts register did not include accurate detail for the applications reviewed as part of the audit.</p> <p>We recommend that the Council ensure all application contracts are included in the contracts register where appropriate, and any upgrades or new contract details are recorded on the register on a timely basis.</p>	Moderate Risk
Management Response/Action Details	Action Date
Solution architecture review to be completed across the portfolio.	31/10/2020
Status Update Comments	Revised Date
<p>We have looked at all of the contracts and dates in the contracts register but we need to make sure that all of our applications are fully covered.</p> <p>Innovations and Solutions Manager will be doing this work over the next months.</p> <p>Reviewed all of the major applications and will be reviewing the rest by April 22. All the entries on the software register have been reviewed by Solutions Manager and Procurement Officer, to get details of those known and applicable, including contract end dates and dates to review renewals. The review is now being finalised by the new interim solutions manager and will be complete by the end of August 2022.</p>	31/08/2022

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<b>Teleworking Security</b>	<b>Rec No. 2</b>
Summary of Weakness / Recommendation	Risk Rating
<p>Accounts with Remote Desktop Gateway access permissions were not always being disabled in a timely manner for leavers, creating data protection risks.</p> <p>We recommend that management defines, documents and implements a more comprehensive approach to disabling network access for former employees or 3rd parties. This could include populating the account expiration date in advance, once a leavers date has been agreed with the employee to reduce the risk of administrative error.</p>	Moderate Risk
Management Response/Action Details	Action Date
<p>We will review the process. We do have quite comprehensive processes in place but it is still possible to miss people leaving in the short term (they should get detected later due to another process). We will review each part of the process to ensure they are being carried out properly and look at implementing the "expiration date" where possible.</p>	01/10/2021
Status Update Comments	Revised Date
<p>Process is to be documented and added to Service Desk guidelines. 3rd party accounts are not left active when not in use. It will be raised that we need a proper process in place once HR comes back into the Council.</p>	30/09/2022

<b>Fire Safety</b>	<b>Rec No. 5</b>
Summary of Weakness / Recommendation	Risk Rating
<p>Not all entrance doors to flats comply with Fire Safety Regulations.</p> <p>We recommend that the Council reviews all flat entrance doors to identify those which do not comply with Fire Safety Regulations, or those that have failed recent government tests. The Council should then take action to ensure the appropriately accredited fire safety doors are installed at the entrances to all flats.</p>	Moderate Risk
Management Response/Action Details	Action Date
<p>An assessment of all flat entrance doors has been completed and the results forwarded to the Assets &amp; Investment Section for building into future door replacement programme(s). However, due to uncertainties around the manufacture, testing, certification and subsequent affected supply of composite fire doors, it is currently not possible to identify a definitive timescale for completion. The option to use alternative timber fire doors of the appropriate fire safety standards and specification are currently being looked into.</p>	31/03/2020
Status Update Comments	Revised Date
<p>Standard fire doors (majority); installations to commence 07/02/22 – all to be complete by contract max end date 31/03/22.</p> <p>Leaseholder fire doors: Legal to expedite the process. Subject to access, the hope is for the project to be completed by as close to the end of April 2022 as possible.</p>	30/04/2022



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<b>Management of Fraud Risk</b>	<b>Rec No. 6</b>
Summary of Weakness / Recommendation	Risk Rating
<p>The Council did not have trained fraud investigators with professional accreditation to review and investigate all areas of potential fraud.</p> <p>We recommend that the Council ensure they have access to fully trained fraud investigators, who can be called upon to investigate any areas of suspected fraudulent activity.</p>	Moderate Risk
Management Response/Action Details	Action Date
The Council will consider how to access a suitably trained fraud investigator.	30/04/2022
Status Update Comments	Revised Date
Action still being progressed.	31/03/2023

<b>Health &amp; Safety Statutory Compliance</b>	<b>Rec No. 3</b>
Summary of Weakness / Recommendation	Risk Rating
<p>The Council had not yet decided who will be the senior named person with responsibility for ensuring compliance with the Health and Safety obligations set out in the Social Housing White Paper.</p> <p>We recommend that the Council review the responsibilities in order to determine which officer will be responsible for the Health and Safety requirements in preparation for legislative changes in accordance with the Social Housing White Paper.</p>	Moderate Risk
Management Response/Action Details	Action Date
To identify responsible officer.	01/04/2022
Status Update Comments	Revised Date
We begin formal consultation on the DMA restructure at the end of this week so we are close to resolution. Would suggest action date is changed to 31/12/22.	31/12/2022

## Action Due

<b>Planning</b>	<b>Rec No. 2</b>
Summary of Weakness / Recommendation	Risk Rating
<p>There were no processes in place that enabled management to monitor progress against tasks detailed on the Local Plan Work Programme.</p> <p>We recommend that management is provided with performance information, linking to the Local Plan Work Programme, from the Forward Planning Team on a regular basis.</p>	Moderate Risk
Management Response/Action Details	Action Date
The team will be asked to provide a monthly report to the Assistant Director on a monthly basis.	31/07/2022
Status Update Comments	Revised Date

# Ashfield District Council – Audit Progress Report

<b>Risk Register</b>	<b>Rec No. 5</b>
Summary of Weakness / Recommendation	Risk Rating
<p>There was no evidence to confirm that Members had been suitably trained to fulfil their responsibilities in respect of risk management.</p> <p>We recommend, in accordance with the ALARM best practice guidance, that all Council Members should receive training on risk management. Given that all Elected Members, Council Cabinet and Audit Committee have specific responsibilities in respect of the Councils risk management framework, it is important that Members are appropriately trained such that they are able to actively support the Council in its management of risks and also challenge and scrutinise the Council's risk position. Evidence of the training given to Members should be retained.</p>	Low Risk
Management Response/Action Details	Action Date
To be reviewed as part of member induction training package following local elections.	31/07/2019
Status Update Comments	Revised Date