

AUDIT COMMITTEE
29 MARCH 2012
INTERNAL AUDIT
STRATEGY AND PLAN 2012/13

Report from: Internal Audit

Author: Alison Russell, Audit Services Manager

Summary

To advise Members of the 2012/13 Internal Audit Strategy and Plan.

1. Budget and Policy Framework

- 1.1 Decisions regarding accounts and audit issues fall within the remit of this committee.

2. Background

- 2.1 Every year Internal Audit devise a proposed Internal Audit work plan for the financial year, which is presented to Audit Committee for approval. The Committee then receive outturn reports against agreed programme at each meeting.

3. Advice and analysis

- 3.1 The detail as to how the proposed work programme has been determined is outlined in Annex A, which is the 2012/13 Audit Strategy.
- 3.2 The proposed plan for 2012/13 is set out at Annex B. The plan records the proposed audits and other key work activities, and the time allocated to each area of planned audit work.
- 3.3 The planning process involves reviewing audit assurance provided over the previous two years, mapped to both the risk register, shown at Annex C, and the key corporate systems, shown at Annex D.
- 3.4 A Diversity Impact Assessment (DIA) screening was undertaken (see Annex E) and it is noted that it is not necessary to undertake a full impact assessment.

4. Risk Management

- 4.1 There are no risk management implications arising directly from this report. However, failure to deliver the internal audit programme could result in increased external audit fees and adverse comment from the external auditors.

5. Financial and legal implications

- 5.1 There are no financial or legal implications arising directly from this report.

6. Recommendations

- 6.1 Members are asked to approve the 2011/12 internal audit programme and to note the outcome of the 2010/11 work programme.

Lead officer contact

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Background papers

None.

Internal Audit Strategy 2012/13

The Annual Audit Plan is developed in order to provide independent assurance to Medway Council on the:

- effectiveness of internal control
- management of risk
- probity and compliance with legal and regulatory requirements
- appropriate pursuit of economy and efficiency

This annual assurance is presented to Audit Committee in the Internal Audit Annual Report at the first Audit Committee of the financial year. The Report includes an overall audit opinion on the four key areas noted above, and highlights key issues arising in year.

The assurance provided by Internal Audit is reasonable but not absolute, and is drawn from:

- audit assignments performed in current year
- audit coverage and opinion from the previous two years
- management response to audit recommendations
- control issues identified as a result of investigations undertaken
- control and risk advice work undertaken as a result of a request by management
- feedback from external audit
- the Council's risk management process

The proposed Annual Plan for 2012/13 includes an indicative scope for each audit, although the scope will be reviewed with management prior to the audit being undertaken. This proposed plan has been discussed and agreed with Senior Management and External Audit. There has also been liaison with relevant professional groups, including Kent Audit Group and the London Audit Group. However the most direct and relevant discussions were held with the Home Counties Chief Internal Auditors Group which provided a benchmark of audit coverage in Unitary Authorities.

Once the potential audits were identified, based on what would be necessary for providing the required annual audit opinion, the resources available within Internal Audit were reviewed to ascertain whether there were sufficient resources to deliver the identified audits. I can confirm that there are sufficient resources within Internal Audit, both in terms of number of audit days and expertise within the team, to deliver the proposed plan.

Required Elements Of The Plan

There are four audits undertaken annually relating to governance issues, and these are included on the plan.

The Annual Plan has time allocated for completion of 2011/12 audits, as well as follow-ups of the audits performed. These follow-ups are key in ensuring that there is evaluation and confirmation of whether the issues and risks identified during the audit

are appropriately addressed or mitigated. The follow-ups also include a review of the original audit opinion, which will be reported to Audit Committee.

Probity Reviews

A significant proportion of the Plan has been allocated to probity reviews, which will largely focus on financial management in Medway Council's schools. A separate risk assessment is being undertaken to determine the schools to be visited. Each visit will result in a report, and the intention is to also provide a report for March 2013 which sets out the overarching issues arising and provide an overall opinion on the management of the risk of fraud, theft and financial loss within Medway's schools. There will be continuing liaison with Education Finance and Governors Support in order to ensure that issues arising within one School are, where necessary, raised with all Medway Schools.

Other Assurance Work

Days have been allocated to fraud related work, which includes not only work on the National Fraud Initiative and the National Anti-Fraud Network, but also proactive work with managers, and investigations as they arise. Whilst the planned audit work is scheduled, and resources can be planned for its delivery, investigations of internal fraud are by their nature unplanned and the resource required to complete the investigations is difficult to estimate. Fraud referrals can be received as a result of an audit, or through a referral which may be made through the whistleblowing policy. The annual plan provides a resource allocation for unplanned probity work and investigations. Should no investigations arise then the days allocated will be used to undertake additional proactive probity reviews. Should investigations require more resource than is allocated then the potential impact on the annual audit plan will be reviewed and if there is any need to amend the plan then a proposal will be made to Audit Committee.

Planned Audits

Following identification of other demands on the Internal Audit resources, there remain 640 audit days available for delivering full audits of key systems within the Council. A documented process is followed to determine the audits to be included on the Annual Plan.

Internal Audit provides assurance on the management of the key risks as identified by management in Medway Council's Corporate Risk Register, and also provides assurance on the internal control arrangements for the key corporate systems and governance areas.

In order to determine the proposed audit plan for 2012/13 the following issues are considered:

- The level of coverage in previous years
- The audit opinion of the audits performed
- Medway Council's Corporate Risk Register
- Results of Fraud Risk Assessment and Action Plan
- Governance audits required annually

- Issues identified in minutes of Committee minutes
- New or changed Council responsibilities
- Projects and developments
- Changes to key personnel
- Assurance provided by other review agencies

The planning process involves mapping the audits undertaken over the previous two year to the risk register, and also to the identified key corporate systems and processes. There is not, however, a clear division between the two and therefore audits may appear more than once on these tables to show where assurance is being provided.

Through the 2012/13 year the intention is to identify and document other providers of assurance on the management of key risks and key systems so that it is evident where the Council rely on Internal Audit for assurance, and where the main source of assurance is from other sources.

Risk Based Audits

When allocating Internal Audit resources to provide assurance on the management of the key risks as identified by the Council the relative value of the assurance that Internal Audit can provide in relation to the identified risks has to be considered. The assessment of the value of Internal Audit assurance in relation to the management of strategic risks is in part based on the nature of the risk. For instance there is limited assurance that Internal Audit can provide in relation to “Longer Term Financial Risk”, as there are limited operational systems that relate to this area, whilst Internal Audit can contribute greater levels of assurance on issues such as “performance management”. For this reason the coverage of the key risks is not evenly spread.

Internal Audit looks to provide assurance on key control systems that management place heavy reliance upon. Medway Council’s corporate risk register contains only high residual risks, where management have determined that the risk has not been mitigated to an acceptable level, and as such the value of Internal Audit assurance is more limited. Internal Audit can however provide assurance on the quality of data to measure the management of the risk, and the appropriateness of the actions identified. The intention is that at least one audit a year will be included on the annual plan to provide this assurance for one or more of the risks on the register. Internal Audit can also provide consultative advice to management to assist with the identification and development of control procedures to mitigate the risk further.

Where Internal Audit work undertaken contributes to assurance on the risk identified in the Corporate risk register, but is not directly listed on the corporate risk register, the contributory elements have been noted on the table in brackets, for instance audits relating to services and facilities contribute to the Council’s assurance relating the risks around “Delivering Regeneration”.

As the corporate risk register is constantly under review and subject to change the audit focus will vary over time, and potentially in year. Should there be any relevant changes made during 2012/13 the annual audit plan may need to be revised to ensure that audit resources are being focused most appropriately. Any proposed revisions to the plan will be presented to Audit Committee for approval.

Cyclical Audits

The audit of the key corporate processes (**ANNEX C**) shows a more regular and widespread pattern of audits, as the risks relating to these systems remain broadly static and therefore the resources allocated are more regular.

There are a number of finance systems that are audited on a cyclical basis in order to provide regular assurance on processes where the materiality is high but previous audit history has demonstrated that the controls are robust. These audits are undertaken focusing on the key risk areas, but the approach is also adapted to ensure that the requirements of External Audit are met so that they can place reliance on the work of Internal Audit and thereby reduce the time and cost of the end of year audit.

Some audits of key financial systems, whilst not considered by internal audit to be sufficiently high risk to audit annually, are undertaken each year on behalf of External Audit. Where this is the case we give consideration to limiting the scope and approach of the audit to that required by the External Auditor

Audit Process

An Internal Audit Manual has been developed which has been reviewed against the CIPFA and Chartered Institute of Internal Auditors Codes. The Manual documents the key stages of the audit, including management agreement to the scope, timing and approach to the audit, and also management agreement to the report and ensuing actions. The manual also sets out the process for Internal Audit to follow up on the actions arising. The Audit Team will be reviewing the procedures through 2012/13 to see whether there are opportunities to further streamline the current processes.

Additional Work for 2012/13

Audit Presence

The Audit Services Website has been developed and will be launched for 2012/13, advertising the services provided.

We have increased our profile with School management by providing presentations to Headteachers and School Governors on the fraud and error risks in schools, and providing guidance on key issues on the school forums website. We will be looking to maintain this involvement throughout 2012/13.

Medway Internal Audit will be taking the lead in organising the annual Kent Audit Group Conference in October 2012. The responsibility for organising this event is shared on a cyclical basis.

Analytical Work

Internal Audit has access to IDEA, an audit tool with which to interrogate large volumes of data. We have used this tool to assist in the delivery of audits and to

provide data for investigations. In 2012/13 the use of this tool will be extended to providing source data for undertaking proactive investigations work.

Staffing Issues

The Internal Audit team is comprised of two Principal Auditors and four Auditors. The two Principal Auditors are both Chartered Members of the Institute of Internal Auditors and as such undertake Continuing Professional Development.

Three of the four auditors have only recently joined Internal Audit. All three have worked within Medway for some time and each brings different areas of expertise and knowledge to the team. One is currently working towards a qualification with the Chartered Institute of Internal Auditors, and another has joined Internal Audit with an accountancy qualification. All the team attend the Kent Audit Group Conference, and the Audit Services Manager or Principal Auditors attend the London Audit Group, Home Counties Chief Internal Auditors Group and Kent Audit Group, which provide forums for knowledge sharing. There are monthly team meetings and these are occasionally used for more formal training events, the most recent being training regarding how to handle allegations of fraud.

Alison Russell
March 2012

2012/13 Audit Plan	Quarter	Detail	ANNEX B
Completion of 2011/12 audits			
Personal Budgets			
ICT Asset Management		1 This audit will review the systems that Medway Council has put in place to monitor the handling of personal budgets by clients. 3 The audit will review procedures for purchase of hardware to ensure that all equipment purchased has been procured via ICT and has been recorded appropriately in the ICT inventory.	
Corporate Governance		1 Annual Audit for compliance with CIPFA/SOLACE Framework	
Wrap up of outstanding audits		1 12 days	
TOTAL 2011/12 Audits			62
Follow Ups			
Blue Badges Follow Up		1 Original Audit Opinion - Uncontrolled	
Business Continuity Follow Up		1 Original Audit Opinion - Uncontrolled	
Insufficient and above		Shorter reviews to confirm action since audit	
TOTAL Follow Ups			100
Annual Governance Audits			
Risk Management		An annual review of the Council's progress in ensuring a consistent method for the identification, evaluation and recording of risk.	
Corporate Governance	4	An annual review to assess the effectiveness of the Council's arrangements covered by the six core principles of the CIPFA / SOLACE Framework	
Fraud and Corruption		The audit will review the arrangements designed to promote and ensure probity and propriety in the conduct of authorities' business and will include review of the current policies on expected standards of ethical and moral behaviour, communication of these to members and officers, and examination of registers of offers of gifts and hospitality and declaration of interests.	
Carbon Reduction	4	The audit will review the carbon reduction annual report provided by the Council	
TOTAL Governance Audits			60
Financial Audits			
<i>Annual</i>			
NNDR	1 & 4	Quarter 1 to review new systems following changes under Better 4 Less and testing in Quarter 4	
Housing Benefit	1 & 4	Quarter 1 to review new systems following changes under Better 4 Less and testing in Quarter 4	
Housing Rents	4	Audit in Quarter 4, this will be complemented by the Fraud Risk Assessment re Tenancy Fraud	
Council Tax	1 & 4	Quarter 1 to review new systems following changes under Better 4 Less and testing in Quarter 4	
<i>Cyclical</i>			
Procurement/purchasing		Audit of purchasing compliance and pursuit of value for money OR category management	
Grant Management/accounting		Audit of the financial management, procurement of assets and accounting of grant income	
Bank Account Management		Audit of the management of Medway's bank accounts	
Creditor Payments		Audit of the central processes for creditor payments	
TOTAL Financial Audits			180
Probity Reviews	1, 2, 3 & 4	Probity reviews in schools and other satellite sites	
TOTAL Probity Reviews			220
Risk audits			
Waste Contracts	2	Audit of waste contracts - management and monitoring of cost and service	

Partnerships		Audit of partnership arrangements, covering inter alia management of costs, service delivery monitoring, mitigation of data and reputational risks, governance arrangements Focus on CCTV abd Building Control p/ships	
CRB	2	Audit to focus on contractors, volunteers, transferred staff	
IT External Assurances		Review of eternal reviews performed, action plans arising, implementation of issues, and reporting mechanisms	
HR data security	1	Audit of staff data security - focusing on third party arrangements	
Energy		Utilities procurmeent, monitoring, and payments	
Events	3	Audit of event in terms of cost/benefit analysis, and value for money - and look at key legislative compliance e.g. H&S	
Improvements from Better for Less - benefits	3	Audit of whether planned benefits are identified, monitored, measured and reported	
Capital/Projects	2	Audit of mechanisms for decision making, monitoring and management of Capital Projects	
Parking	3	KCC are undertaking an audit of their street parking arrangements and we are awaiting scope of their audit in order to determine approach - in doing this we should gain helpful benchmarking data	
Data Quality - one Risk Sched	2	Focus on audit of Risk Schedule relating to the Economic Downturn. Review data sources, their relevance and accuracy, and reporting mechanisms....	
Health	3	Audit of the governance arrangements with the new Health ... and the Director of Public Health	
Maintenance Contracts	2	Audit of procurement, monitoring, reporting and exit arrangements - possibly housing Measured Term Contract	
Asset Management - Divestments	2	Audit of how decisions are taken, income is timely and maximsed in property divestments, and reputation and service risksare identified and mitigated	
TOTAL Risk Audits			380
Grant Claim Verification	1, 2, 3 & 4	30 days	
Risk and Control Advice	1, 2, 3 & 4	20 days	
Probiy/Investigations/NFI/NAFN	1, 2, 3 & 4	75 days	
Risk Assessments	1, 2, 3 & 4	10 days	
TOTAL Additional Work			135
OVERALL TOTAL DAYS ALLOCATED			1137

Audits identified from Risk Register

DRAFT

ANNEX C

Risk	Corporate Priority	2009/10 Audits	2010/11 Audit	2011/12 Audit	Proposed 2012/13
Finances - Longer Term	Giving Value for Money				
Downturn in the economy	Giving Value for Money				Data Audit Capital Programme
Keeping vulnerable young people safe and on track	Children and young people having the best start in life	Social Care Case Recording Schools Recruitment Security of Social Care Records Free School Meals	I I U S	Security of Confidential Records SEN Allocation of Resources 1P-U - Home to school transport TPU - Home to School Transport (f/up)	X CRB
Equality and Diversity	Putting our customers at the centre of everything we do	Contact Point Free School Meals Concessionary Dares	G S S	Blue Badges	U
Delivering Regeneration	Everyone benefiting from the areas regeneration	Housing Repairs Contract Mgt Housing Procurement Local & regional Planning	I I S	Section 106 Planning Arrangements HRA Grants	HCA Grants Asset Divestments Partnerships Capital/Projects Waste Management
(Services/Facilities)				Highways Maintenance (f/up) Rochester Christmas Market	Waste Management (initial)
(Events)				Roch Christmas Market (f/up)	Events
Maximising outcomes for Looked After Children in the context of increasing demand	Children and young people having the best start in life	Foster Care Capacity Planning	I		
Government Changes to Local Authority responsibility for Schools	Children and young people having the best start in life				Non Audit Work in relation to determining governance role re Academies
Transition to new provider of Mental Health adult social care services	Putting our customers at the centre of everything we do				
Delivering better for less transformation	Giving value for money			Council Tax and NNDR fol up	X Benefits/Customer First

Performance Management	Giving value for money older and vulnerable people maintaining their independence	Council Plan Monitoring	S	Council Plan Monitoring	I	Council Plan Monitoring	S	Data Quality
Adult social care demographics (Adult Safeguarding)	Security of Social Care Records	U	U	Security of Confidential Records	I	Personal Budgets	X	CRB
Procurement (Energy)	Giving value for money	Housing Repairs	I			Waste Management Contract		Procurement/Purchasing
		Grounds Maintenance						Maintenance Contracts
		CRC	I			Civic Centre Fuel Pumps	U	Energy
						Vehicle Fuel Purchasing		
Treasury Management						Treasury Management Strategy		
Business Continuity and Emergency Planning	Giving value for money					Business Continuity Planning	U	
Changes to Health System	safe, clean and green Medway Putting our customers at the centre of everything we do							Health - New Governance Arrangements

Key:

U = Uncontrolled
I = Insufficient
S = Satisfactory
G = Good
X = not yet complete
= completed, no audit opinion

2012/13 Cyclical Audit Plan

ANNEX D

2009/10		2010/11		2011/12		2012/13	
Key Financial Audits							
Asset Management	Asset Management	I				Asset Mgt - Divestments	
	Mobile Phones	S					
Bank Accounts							
		Schools Bank Accounts X Bank Account Management					
Budgets							
See Local Financial Controls Audits							
Cash and Banking	Imprest Accounts	U	Imprest Account (f/up)	S	Cash and Banking	X	
Creditors	Creditors		Care Director Payments	I	Foster Payments	X	Creditors
			Care Director Payments	I			
Council Tax	Council Tax	G	Council Tax	G	Council Tax	G	Council Tax
Counter Fraud	Schools recruitment	I	Tenancy Fraud	S			CRB/Employment Vetting
Debt Management			Care Director Income	?	Debtors	X	
Local Financial Controls	Corn Exchange		Medway Park		Halling School		Probity Review Programme
	Parklands		Parklands		School Probity Audit	X	
	Robert Bean Lodge		Silverbank		School Inv		
	Stirling Centre		Corn Exchange	U	Sheltered Housing Inv		
	Woodlands				Satellite Site Inv		
					General Ledger	I dr	
General Ledger							
Housing Benefits	Housing Benefit	S	Housing Benefits	S	Housing Benefits	S	Housing Benefits
Housing Rents	Housing Rents	I	Housing Rents	I	Housing Rents	I	Housing Rents
Income	Libraries	I	Direct Debit Income	S	Markets (f/up)	I	Parking
	Markets	U	Homelessness Rental Income	I	Blue Badges	U	Grant Mgt/Accounting
	Concessionary Fares	S	Leisure Membership				
			Care Director Income	I			
			Section 106 Agreements	G			
NNDR	NNDR	G	NNDR	G	NNDR	G	NNDR
Payments	BACS Payments	S	Credit Card Refunds	I	Foster Payments	X	Energy
			Care Director Pay	I			Grant Mgt/Accounting
			Concessionary Fares	S			
Payroll	Schools Payroll		Payroll	S	Satellite Sites	X	

Pensions		Payroll Pensions		G	
Petty Cash/Imprest Accounts	Imprest Accounts	U	Imprest Account (f/up)	S	
Procurement	Housing	I	Council Fuel Pumps	U	Category Management
					Energy
Contract Management	Housing Repairs	I	Vehicle Fuel	TPU (f/up)	X
	Grounds Maintenance	S	TPU	U	Waste Management
			Highways Maintenance	S	Maintenance Contracts
Stock Control	Bar Stock control	I	Council Fuel Pumps	U	Maintenance Contracts
Treasury Management			TM Strategy	G	
VAT			VAT	S	
BSD Audits					
IT	IT Governance	I	IT Security	S	IT External Assurance
	Mobile Phones	S			Data Quality
IT Systems			Care Director	I	IT External Assurance
HR	Schools recruitment				HR Data Security
	Workforce Planning	X			
Health and Safety	Health & Safety	I			Events
Governance					
Corporate Governance	Corporate Gov	S	Corporate Gov	S	Corporate Gov
Fraud Prevention	Prevention F&C	I	Prevention F&C	I	Prevention F&C
Risk Management	Risk Management	S	Risk Management	S	Risk Management
Business Continuity			Business Continuity	U	
Performance Management	Council Plan Monitor	S	Council Plan monitor	I	Council Plan Monitor
Legislative Compliance (DPA, FOI, PIDA, RIPA etc)	Prevention F&C (PIDA)		IT Security (DPA), Security of Confidential Records (DPA), Prevention F&C (PIDA and Moneylaundering)		Prevention F&C, Assurance, Partnerships, HR Data Security, CRC

Key:

U = Uncontrolled

I = Insufficient

S = Satisfactory

G = Good

X = not yet complete

= completed, no audit opinion

Diversity Impact Assessment: Screening Form

Directorate	Name of Function or Policy or Major Service Change		
Business Support Department	Internal Audit Strategy		
Officer responsible for assessment	Date of assessment	New or existing?	
Alison Russell, Audit Services Manager Mick Hayward, Chief Finance Officer	14 March 2012	New	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	The Internal Audit Strategy sets out the Internal Audit plans for delivering assurance over the Council's internal control arrangements.		
2. Who is intended to benefit, and in what way?	The policy has been introduced to benefit the Council, employees and service users.		
3. What outcomes are wanted?	Desired outcomes: <ul style="list-style-type: none"> - Enhanced internal control - Reduced fraud vulnerability - Effective and efficient use of internal audit resources - Informed annual audit opinion of the Council's internal control arrangements 		
4. What factors/forces could contribute/detract from the outcomes?	Contribute <ul style="list-style-type: none"> - support of senior management - Support of Audit Committee - 	Detract <ul style="list-style-type: none"> - Resources required to address unplanned audit activity is disruptive to plan; - delays in management responses - agreed management actions not implemented 	
5. Who are the main stakeholders?	The council, employees and service users.		
6. Who implements this and who is responsible?	The lead for this strategy is Alison Russell, Audit Services Manager, reporting on delivery to Mick Hayward, CFO and the Audit Committee.		

ANNEX E

Assessing impact		
7. Are there concerns that there <u>could</u> be a differential impact due to <i>racial groups</i> ?	NO	Internal Audit is subject to professional standards and delivery of the audit function is fully set out and documented in the Internal Audit Manual. All audit work is subject to supervisory review
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i> ?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i> ?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
10. Are there concerns there <u>could</u> be a differential impact due to <i>sexual orientation</i> ?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
11. Are there concerns there <u>could</u> be a have a differential impact due to <i>religion or belief</i> ?		See above
	NO	
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
12. Are there concerns there <u>could</u> be a differential impact due to people’s <i>age</i> ?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	

ANNEX E

13. Are there concerns that there <u>could</u> be a differential impact due to <i>being trans-gendered or transsexual</i> ?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
14. Are there any <i>other</i> groups that would find it difficult to access/make use of the function (e.g. young parents, commuters, people with caring responsibilities or dependants, young carers, or people living in rural areas)?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	
15. Are there concerns there <u>could</u> have a differential impact due to <i>multiple discriminations</i> (e.g. disability <u>and</u> age)?	NO	See above
What evidence exists for this?	Internal Audit work is evidence based – the only “opinion” relates to the assessment of controls in each audit report – and this is always subject to discussion and agreement by management.	

Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse impact?	YES	N/A
	NO	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?	YES	N/A
	NO	
Recommendation to proceed to a full impact assessment?		
NO	This strategy complies with the requirements of the legislation and there is evidence to show this is the case.	
NO, BUT ...	What is required to ensure this complies with the requirements of the legislation? (see DIA Guidance Notes)?	Employees must be mindful of their responsibilities under the Dignity at Work (Bullying and Harassment) Policy and the implications of discriminating against colleagues, service users or others. This policy and other employment policies are promoted periodically and are available at all times on the councils intranet.

ANNEX E

YES	Give details of key person responsible and target date for carrying out full impact assessment (see DIA Guidance Notes)	N/A
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ANNEX E

Action plan to make Minor modifications		
Outcome	Actions (with date of completion)	Officer responsible

Planning ahead: Reminders for the next review		
Date of next review	On-going	
Areas to check at next review (e.g. new census information, new legislation due)	Check changes in professional standards	
Is there <i>another</i> group (e.g. new communities) that is relevant and ought to be considered next time?		
Signed (completing officer/service manager)	Date	
A Russell	14/3/12	
Signed (service manager/Assistant Director)	Date	