CLACKMANNANSHIRE COUNCIL

Report to: Audit Committee

Date of Meeting: 03 December 2020

Subject: Internal Audit Annual Assurance Report 2019/20

Report by: Internal Audit Manager

1.0 Purpose

1.1. This report provides an overall assurance on the Council's arrangements for risk management, governance, and control, based on Internal Audit work undertaken during 2019/20.

2.0 Recommendations

2.1. The Committee is asked to note that:

- sufficient Internal Audit work was undertaken to support a balanced assurance;

- Internal Audit can provide **SUBSTANTIAL** assurance on the Council's arrangements for risk management, governance, and control for the year to 31 March 2020; and

- Internal Audit met, or exceeded, each of its Key Performance Indicators.

3.0 Overall Adequacy of the Council's Control Environment and Summary of Internal Audit Work Undertaken During 2019/20

3.1. Financial Regulations are clear that it is senior managers' responsibility to establish and maintain effective and proportionate risk management, governance, and control arrangements. Internal Audit is not an extension of, or substitute for, operational management.

3.2. The 2017 Public Sector Internal Audit Standards (the Standards) require the Internal Audit Manager to prepare an Annual Assurance Report. This report should include:

- a statement on the overall adequacy of the Council's control environment;

- a summary of Internal Audit work undertaken during the year; and

- a statement on the Internal Audit Section's conformance with the Standards.

3.3. This report has been prepared to meet those requirements.

3.4. The 2019/20 Internal Audit Plan set out sixteen main assignments to be completed by the team over the course of the year. Fifteen have been finalised, with one carried forward to the current year [1]. Sufficient Internal Audit work was undertaken to support a balanced opinion on the overall adequacy of the Council's control environment.

3.5. Internal Audit use a set of Assurance Categories. A summary of these is set out at **Appendix 1**.

3.6. On the basis of work undertaken, Internal Audit can provide **SUBSTANTIAL** assurance in relation to the Council's arrangements for risk management, governance, and control for the year to 31 March 2020.

3.7. A summary of work completed over the course of the year is set out at **Appendix 2** with the scope of, and findings arising from, each finalised assignment set out at **Appendix 3**.

3.8. Internal Audit measures performance against the following Key Performance Indicators.

Key Performance Indicator	2019/20	2018/19
Complete **85%** of main audit programme	**94%**	100%
Have **90%** of recommendations accepted	**100%**	100%
Issue **75%** of draft reports within 3 weeks of completion of fieldwork	**100%**	100%

3.9. Actual performance met or exceeded target for all three indicators. In relation to the first indicator, we will seek to finalise the assignment not completed as planned (as a result of COVID-19) during 2020/21 (recognising that the 2020/21 Plan must also be flexible given the ongoing COVID-19 position).

4.0   Compliance With Public Sector Internal Audit Standards

4.1. Internal Audit seeks to undertake all work in compliance with the Public Sector Internal Audit Standards 2017 (PSIAS). These standards have four objectives:

- to define the nature of Internal Auditing within the UK public sector;

- to set basic principles for carrying out Internal Audit in the UK public sector;

- to establish a framework for providing Internal Audit services, which add value to the organisation, leading to improved organisational processes and operations; and

- to establish the basis for the evaluation of Internal Audit performance and to drive improvement planning.

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[1] **NOTE**: that the planned review of Social Work Information System - Project Planning, Management, and Implementation, was deferred as a result of the COVID-19 outbreak.

4.2. The Standards require the Internal Audit Manager to establish a Quality Assurance and Improvement Programme (QAIP) to allow evaluation of compliance with the Standards. This comprises an annual self assessment and a five yearly external assessment.

4.3. Internal Audit services are provided on the basis of a Joint Working Agreement with Falkirk Council. The Internal Audit Manager undertook a detailed self assessment against the Standards during February 2020. This confirmed continuing compliance with the Standards, and will be subject to independent, external validation as part of a national review process established by the Scottish Local Authorities Chief Internal Auditors' Group.

5.0 Sustainability Implications

5.1. None Noted.

6.0 Resource Implications

6.1. Financial Details

6.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes ☐

6.3. Finance have been consulted and have agreed the financial implications as set out in the report. Yes ☐

6.4. Staffing

7.0 Exempt Reports

7.1. Is this report exempt? Yes ☐ (please detail the reasons for exemption below) No ☐

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box ☑)

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all ☐
Our families; children and young people will have the best possible start in life ☐
Women and girls will be confident and aspirational, and achieve their full potential ☐
Our communities will be resilient and empowered so that they can thrive and flourish ☐

(2) **Council Policies** (Please detail)

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?
Yes ☐   No ☐

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers.   Yes ☐

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

- **Appendix 1**: Definition of Internal Audit Assurance Categories.

- **Appendix 2**: Summary of 2019/20 Internal Audit Programme.

- **Appendix 3**: Details of 2019/20 Internal Audit Programme.

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)
Yes ☐ (please list the documents below)   No ☐

Author(s)

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Approved by

NAME	DESIGNATION	SIGNATURE
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Definition of Internal Audit Assurance Categories

Level of Assurance	Definition
Substantial assurance	Largely satisfactory risk, control, and governance systems are in place. There is, however, some scope for improvement as current arrangements could undermine the achievement of objectives or leave them vulnerable to error or abuse.
Limited assurance	Risk, control, and governance systems have some satisfactory aspects. There are, however, some significant weaknesses likely to undermine the achievement of objectives and leave them vulnerable to an unacceptable risk of error or abuse.
No assurance	The systems for risk, control, and governance are ineffectively designed and operated. Objectives are not being achieved and the risk of serious error or abuse is unacceptable. Significant improvements are required.

Summary of 2019/20 Internal Audit Programme

	Planned Assignments (as per 2019/20 Internal Audit Plan)		
	Directorate	**Assignment**	**Level of Assurance**
1.	All Directorates	Continuous Auditing	**Duplicate Creditors payments of £7.7k identified during 2019/20**
2.	All Directorates	National Fraud Initiative	**Not Applicable – Ongoing Assurance**
3.	Place	Climate Change Act Public Body Duties Audit	**Substantial Assurance**
4.	All Directorates	Follow Up of Internal Audit Recommendations	**Not Applicable – Ongoing Assurance**
5.	All Directorates	Ad hoc / Consultancy Work	**Not Applicable – Ongoing Assurance**
6.	Clackmannanshire and Stirling IJB	Risk Management	**To be reported to IJB Audit Committee**
7.	Central Scotland Valuation Joint Board	• Data Protection Arrangements; and • Payroll.	**Reported to Valuation Joint Board**
8.	Place	Procurement – Waste Services	**Substantial / Limited Assurance**
9.	Partnerships and Performance / All Directorates	Creditors Purchase to Pay Cycle (PO / Invoice Processing and Authorisation)	**Substantial Assurance**
10.	All Directorates	System Administration - Access Privileges to Key Corporate Systems	**Substantial Assurance**
11.	All Directorates	Savings Tracking	**Substantial Assurance**
12.	All Directorates	Business Continuity Management	**Substantial Assurance**
13.	All Directorates	Building Security (Operational Buildings)	**Limited Assurance**
14.	All Directorates	Strategic Workforce Planning	**Substantial Assurance**
15.	Place	Housing Rents	**Substantial Assurance**

Details of 2019/20 Internal Audit Programme

Assignment	Service	Assurance
Continuous Auditing	All Services	**N/A – Ongoing Assurance**

Scope	Final Report Executive Summary
This involves analysing Creditors payment data (payments to suppliers) to identify potential duplicate payments. We use audit interrogation software to identify matches on invoice date, amount, and number. We then check our initial results on TechOne to identify any cancelled payments; payments made to different suppliers; and duplicate payments already identified (and either cancelled or monies recovered).	For the period April 2019 to March 2020 we identified duplicate payments with a value of c£7.7k. Details of these have been passed to the Chief Finance Officer for appropriate recovery action.

Assignment	Service	Assurance
National Fraud Initiative	All Services	**N/A – Ongoing Assurance**

Scope	Final Report Executive Summary
The purpose of the NFI exercise is to review and investigate the outcomes of data matching undertaken by Audit Scotland on behalf of the Cabinet Office. Matches cover areas such as Payroll, Pensions, Housing / Council Tax Benefit, Council Tax Single Person Discount, and Creditors. The Internal Audit Manager acts as Key Contact for NFI, with responsibility for co-ordinating the process of ensuring that relevant matches are followed-up.	The 2018/19 NFI exercise is now complete. 160 'High Risk matches were released to Clackmannanshire Council for review and investigation. These have been risk assessed and followed up as appropriate. No instances of fraud or error have yet been identified. In addition to the core NFI exercise, Clackmannanshire Council participates in a related exercise designed to detect wrongly claimed Council Tax Single Person Discount. Since January 2019, as a result of participation in this exercise (which matches Council Tax and Electoral Roll data), 65 instances of wrongly claimed discount, totalling **c£60k**, were identified. Recovery action has been taken, or is underway, via adjustments to future Council Tax bills.

Assignment	Service	Assurance
Climate Change Act Public Body Duties Audit	Place	**Substantial Assurance**

Scope	Final Report Executive Summary
The Climate Change (Scotland) Act 2009 (the Act), introduced the requirement for public bodies to report on their climate change duties. In line with the timescales from the Act, the Council's annual report has to be submitted to the Sustainable Scotland Network (SSN) by end November 2019. Our work focused on reviewing the reporting arrangements and the accuracy of the information in the report.	To ensure the consistency of returns across public bodies, the Annual Report format is a standard template split into five areas: • Profile of Reporting Body; • Governance, Management, and Strategy; • Emissions, Targets, and Projects; • Adaptation; and • Procurement. We were able to provide Substantial Assurance on the Council's reporting arrangements and the accuracy of the information set out in each section of the Annual Report.

Assignment	Service	Assurance
Procurement – Waste Services	Place	**Limited / Substantial Assurance**

Scope	Final Report Executive Summary
For a sample of Waste Services contracts Internal Audit reviewed: • Contract Strategy roles and responsibilities, including the steps followed to: identify requirement; engage with stakeholders; agree tender process and selection and award criteria; and tender evaluation; • financial controls, including budget setting and monitoring arrangements, and billing and invoice validation / approval procedures; and • contract management and monitoring arrangements.	In overall terms, we found that Waste Services staff were clear about their roles and responsibilities. We were, however, only able to provide **Limited Assurance** in relation to Contract Strategy roles and responsibilities. We recommended that a Commodity Strategy for Waste Services is developed. We were able to provide **Substantial Assurance** in relation to financial control arrangements**.** We were content there were robust budget setting and monitoring arrangements and Purchase Order / Invoice Authorisation and Certification arrangements in place. We also provided **Substantial Assurance** in relation to contract management and monitoring arrangements. The Team Leader (Waste, Roads, and Street Lighting) is taking steps to ensure that the monitoring of contactor performance, and regular performance meetings and reporting, are in place for all high value / risk contracts. We recommended that the agreed approach is documented in the Commodity Strategy. We made a recommendation relating to: • the exemption reported to the Audit Committee at its December 2019 meeting (for the Treatment of Co-mingled Mixed Recyclate contract); • the two tender processes that were in progress (for the Treatment of Co-mingled Mixed Recyclate and Treatment on Inert Waste and Rubble contracts);and • agreeing the timetable for the Disposal of Bulky Waste tender process. We recognise these had already been identified by the Team Leader (Waste, Roads, and Street Lighting), and that work is in progress to rectify them. We included as recommendations to ensure that the actions identified are fully implemented.

Assignment	Service	Assurance
Creditors Purchase To Pay Cycle (PO / Invoice Processing and Authorisation)	Partnerships and Performance / All Directorates	**Substantial Assurance**
Scope	**Final Report Executive Summary**	

Scope	Final Report Executive Summary
We reviewed a sample of 30 transactions, across all Directorates, to ensure that Section 11 and 12 of the Financial Regulations were being complied with. This included testing to assess whether: • best value has been achieved; • the price and quantity of goods or services to be supplied are clearly stated on the order; • the order is within the authorising officer's delegated authority limit; • the invoice price matches the order price; and • the authorised signatory of the invoice is different from the authorised signatory of the order. The same sample was checked against the Council's Contract Register to assess the extent of on / off contract purchasing.	We reviewed a sample of 30 transactions across all Directorates. We concluded that, for 19 of these, Purchase Order and Invoice Authorisation and Certification arrangements were appropriate and in compliance with the Financial Regulations and Contract Standing Orders. For the remaining 11 transactions non-compliance issues included: • no Purchase Order raised; • Purchase Order raised after the invoice date; • Purchase Order included insufficient detail on quantities and prices; • rates charged not checked to contract terms; and • no evidence of a contract or formal agreement in place. We recommended that all Purchase Order and Invoice Authorisation and Certification officers are reminded of their roles and responsibilities, and of the requirement to comply with the Financial Regulations and Contract Standing Orders. We were content that there were no instances where Purchase Order / Invoice Authorisation and Certification approval limits had been exceeded. We found some discrepancies between delegated authorisation levels and the financial limits assigned in TechOne, and have recommended that these are reviewed.

Assignment	Service	Assurance
System Administration – Access Privileges to Key Corporate Systems	All Directorates	**Substantial Assurance**

Scope	Final Report Executive Summary
Internal Audit work focussed on assessing whether the following internal controls were operating effectively for the corporate finance system and all corporate IT systems which link to the TechOne Purchase Ledger: • clear roles and responsibilities for users with high privilege user access rights; • defined user account management arrangements for users with high privilege user access rights and individuals whose user profile combinations carry the greatest risk. We assessed whether users' access rights and profiles are being managed in line with each IT system's Access Control and Password Policy; and • segregation of duties relating to financial transactions, ensuring access to IT systems is restricted to appropriate levels.	This high level review focussed on ensuring that internal control weaknesses similar to those exploited at Dundee City Council (DCC) do not exist in relation to the high privilege users with access to TechOne, the corporate IT systems that interface with the TechOne purchase ledger, and BACS payment software. We reviewed the publicly available reports on the DCC fraud. From this, we identified seven key control weaknesses that were exploited. Our assessment of the effectiveness of these internal controls, based on the results of our audit fieldwork, in August 2019, is summarised in the table overleaf. We also focussed on providing assurance that the existing internal control framework was sufficient to minimise the risks associated with employee and insider threats. We provided **Substantial Assurance** in relation to the adequacy of the controls in place for System Administration – Access Privileges to Key Corporate Systems. We found that, in general, sound systems of control were in place. All staff consulted during the review were clear about their roles and responsibilities. We reviewed high privilege users' access rights to TechOne, the systems that interface with the TechOne purchase ledger, as well as the BACS payment software. We were content that no individual user has the same combination of high privilege access that had been exploited in DCC. That is high privilege access to TechOne (the supplier database and the purchase ledger), high privilege access to any of the systems that interface with the TechOne purchase ledger, and BACS access. We did, however, identify areas where there was scope to further improve the internal control framework. In particular, there was scope for reviewing TechOne permissions, and completing the current review of BACS user access.

	DCC Internal Control Weakness	Internal Control at Clackmannanshire Council	Internal Audit Conclusion
1.	IT employee with over 30 years' service who had extensive access to a large number of the Council's financial systems built up over many years.	We confirmed that no Council employee has high privilege access rights across TechOne, the systems that interface with the TechOne purchase ledger, and BACS payment software.	**Substantial Assurance**
2.	Employee combined knowledge of the systems, and systems access privileges, to insert false invoices into the purchase ledger for payment. These invoices appeared to have come through an interface from a sub-system and were payable to known suppliers. The sub-systems did not record these transactions.	For the corporate systems where payment files are uploaded onto TechOne we confirmed that control totals (number and value of payments in a payment file) are reviewed and verified at various stages of the payment process. For the corporate system where payment files are uploaded directly to the BACS software, we have suggested that once the BACS file has been processed the BACS submitting officer provides the corporate system administrator with the details of the number and value of payments processed.	**Substantial Assurance**
3.	The employee was able to intercept the false invoices and divert payments to bank accounts within their control.	The payment files that are uploaded directly to TechOne do not include payee bank details as these are held on the supplier database on TechOne. Previous Internal Audit work has provided assurance that there are processes in place for the creation of new suppliers and for making changes to existing supplier bank accounts by the Creditors Team. There is controlled access to add or amend supplier data.	**Substantial Assurance**
4.	The construction system was bespoke. The employee was involved in its development, and had extensive knowledge of the sub-system.	There are multiple corporate IT systems that interface with the Techone purchase ledger. The majority of these systems, with the exception of FINCH, are commercial off the shelf packages. We confirmed that no Council employee has high privilege access rights across Techone, FINCH, and BACS payment software.	**Substantial Assurance**
5.	Segregation of duties – the employee had unrestricted access to a number of key systems across the purchase to pay cycle that allowed the insertion of fictitious invoices and malicious code into interfaces and the BACS payment system.	We confirmed that no Council employee has high privilege access rights across TechOne, the systems that interface with the TechOne purchase ledger, and BACS payment software. There is scope to restrict TechOne permissions for one of the System Administrators, and two of the staff involved in the payments run process. We found there to be adequate segregation of duties in processing and authorising the payment files for all of the systems that we reviewed. We have recommended that the exercise to review and introduce a two stage input and approval process for BACS should be completed.	**Substantial Assurance**
6.	Interface reconciliations – interface reconciliations were ineffective. An effective interface reconciliation of the number and value of transactions interfaced may have allowed for earlier detection of the fraudulent activity.	For the corporate systems where payment files are uploaded onto TechOne we confirmed that control totals (number and value of payments in a payment file) are reviewed and verified at various stages of the payment process. For the corporate system where payment files are uploaded directly to the BACS software, we have suggested that once the BACS file has been processed the BACS submitting officer provides the corporate system administrator with the details of the number and value of payments processed.	**Substantial Assurance**
7.	Systems documentation – there was a lack of systems documentation and mapping which articulated the flow of transactions and set out how the interfaces work.	Some corporate systems that interface with the TechOne purchase ledger do not have Access Control Policies in place that document the arrangements for managing users' access. There is also a lack of procedural instructions outlining the steps to follow when exporting the payment file from the corporate system that interfaces with the TechOne purchase ledger.	**Substantial Assurance**

Assignment	Service	Assurance
Savings Tracking	All Services	**N/A – Ongoing Assurance**

Scope	Final Report Executive Summary
We reviewed: • Roles and responsibilities of those involved in delivering the savings and confirming that they have been achieved. • The arrangements for monitoring and reporting progress to the Strategic Leadership Group and elected Members. • a sample of savings proposals from across the three Directorates to ensure that: 　• they have been accurately assessed both in terms of the costs that can be saved and the timescale in which the savings are to be achieved; 　• firm plans are in place to outline how savings will be delivered; and 　• actual savings being reported are supported by credible data.	We provided **Substantial Assurance** in relation to the adequacy of Savings Tracking arrangements. At the August 2019 outturn stage 81.3% of savings were forecast to be achieved by 31 March 2020, with 18.7% at risk of not being achieved in year. This compared to the 83.3% of savings that were forecast to be achieved in the June 2019 outturn reports. We found that roles and responsibilities were clear, and we were content they were well understood and being consistently applied. We were also content with the arrangements for monitoring and reporting Savings Tracking progress. These were in line with the timescales defined in the Council's Budgetary Control Framework. Regular reports have been issued, and are planned to be issued, to the Strategic Leadership Group and elected Members. The Chief Finance Officer presents individual Directorate forecasted outturn positions to each of the portfolio Committees and a consolidated report to each meeting of the Audit Committee. Also, a Budget Strategy Update is provided quarterly to the Council and this sets out progress on delivery of the savings (and an update on the 2020/21 budget process). In addition, regular forecast information from the financial ledger is available to the Directorate Accountants, and Project Owners. The frequency and accuracy of monitoring and reporting ensures that the Project Owners can make robust and accurate judgements in relation to their individual Projects, and that the Strategic Leadership Group, and elected Members, are aware of the progress in achieving the savings targets. We reviewed a sample of savings projects, relating to £3.516m (73%) of the total savings, including all projects with in year savings targets in excess of £100k. These covered all Directorates. We were content that the RAG (Red / Amber / Green) status and forecast savings reported to Committee up to the August 2019 outturn reporting cycle could be reconciled to the financial ledger, and to the supporting documentation that the Directorate Accountants and Project Owners provided.

Assignment	Service	Assurance
Business Continuity	All Services	**Substantial Assurance**

Scope	Final Report Executive Summary

Work focussed on:
 	
• overarching arrangements at a corporate level for establishing business continuity and departmental recovery plans, including:
 	
  • roles and responsibilities;
 	
  • arrangements for identifying and risk assessing critical systems and activities; and
 	
  • ownership of, and accountability for, the completeness, proportionality, and effectiveness of the framework of business continuity and departmental recovery plans.
 	
• the availability of guidance, training, and support to staff responsible for implementing business continuity and departmental recovery plans; and
 	
• arrangements for testing the adequacy and robustness of documented plans.
	The Council has a Business Continuity Management Policy. All staff consulted during the review were clear about their roles and responsibilities.
	
	We were content that risk management had been fully embedded into the process, through the performance of a Business Impact Analysis at departmental level, and the development of a robust corporate Business Continuity Plan.
	
	We recommended that once the organisational structure is finalised the opportunity is taken to review the Business Continuity Management Policy, the corporate Business Continuity Plan, and Departmental Recovery Plans. This will ensure that the documented approach remains consistent with the new managerial structure, and that roles and responsibilities are understood by all new Strategic Leadership Group and Senior Managers.
	
	Guidance and training has been provided on the principles of Business Continuity Management. However, given the new managerial structure we recommended that training should be provided to the Strategic Leadership Group and Senior Managers.
	
	A comprehensive and robust testing programme was not in place and reliance was placed on Departmental Recovery Plans being tested during live incidents. We recommended, in order to ensure that Business Continuity Management arrangements are operating efficiently, effectively, and to the required standard, that a formal, comprehensive, and risk based, testing programme is prepared and implemented.

Assignment	Service	Assurance
Building Security – Operational Buildings	All Services	**Limited Assurance**

Scope	Final Report Executive Summary
The purpose of this review was to: • evaluate and report on the adequacy of the controls in place to ensure that Clackmannanshire Council's operational buildings, and the contents therein, are secure; and • follow up on progress with implementing the recommendations from our 2018/19 review of Building Security Arrangements.	Based on the sample of buildings visited, we can provide **Limited Assurance** in relation to the adequacy of building security arrangements. We undertook unannounced visits to a sample of 10 operational buildings and reviewed the physical security measures in place at each building to prevent unauthorised access. Particular emphasis was placed on buildings in which vulnerable people (eg, pupils and elderly residents) were users. These visits took place on 13 and 18 November 2019. Robust security measures were found to be in place to prevent and deter unauthorised access to the majority of the sampled buildings. These included a combination of two or more of the following controls: • perimeter fencing around the building and it's grounds; • remote locking entry doors to the main reception area; • locked and secure external doors (eg, fire exits); and • CCTV cameras. We did, however, gain unauthorised access to three buildings. On that basis, we recommended that all Premises Duty Holders are instructed to specifically review the physical security measures on all external doors that lead to kitchen areas and ensure these are secure and locked at all times. There has been a range of action taken corporately since the 2018/19 audit to raise staff awareness and vigilance. Some of these were reported to the Audit Committee in April 2019 and include: • a workplace security briefing was reissued on the intranet and communicated to all staff via a management cascade in early 2019; • briefings were provided to head teachers as duty holders for school premises and work on duty holders' roles and responsibilities continues through the Council's Health and Safety executive; • intranet page on Connect (Safety and Your Security) provides supervisors and staff with a range of information and advice on building security; and • Premises Duty Holders have been appointed and a Handbook, to assist in fulfilling responsibilities effectively, has been issued.

Assignment	Service	Assurance
Strategic Workforce Planning	All Services	**Substantial Assurance**

Scope	Final Report Executive Summary
Our work on Strategic Workforce Planning focussed on: • reviewing governance arrangements and the approach followed in developing, approving, and monitoring the Strategic Workforce Plan. This included the arrangements for implementing the Workforce Development Delivery Plan and for embedding workforce planning arrangements within each Directorate; and • confirming that the Strategic Workforce Plan is compatible with the Council's Corporate Plan priorities and values.	We provided **Substantial Assurance** in relation to strategic workforce planning arrangements. We found that robust arrangements were in place for the development, approval, and monitoring of the Strategic Workforce Plan. The Plan sets out the Council's workforce planning priorities for the three year period 2019-2022. The Strategic Workforce Plan priorities are aligned to the Corporate Plan, and also detail the key development milestones to be taken forward. The implementation of the milestones will help to ensure that good workforce planning priorities are embedded and sound governance practices are in place. The Workforce Development Delivery Plan outlines the programme of work to be undertaken to deliver the workforce planning priorities. The Delivery Plan includes impact, target action implementation dates, responsible lead officers, and how progress will be measured. Progress is also reported to the Partnership and Performance Committee. We reviewed the action taken for the 16 tasks, in the Delivery Plan, that are complete or in progress. We were content that, for all of these, the narrative and outputs that were recorded on the Delivery Plan were accurate and could be reconciled to supporting documentation. Work is ongoing to embed workforce planning arrangements within each Directorate. From 2020 / 21 onwards, the Directorate Business Plans and Workforce Plans will be submitted concurrently to the June 2020 Council meeting for approval.

Assignment	Service	Assurance
Housing Rents	All Services	**Substantial Assurance**

Scope	Final Report Executive Summary
We reviewed: • roles and responsibilities of those involved in the Housing Rent Collection and Arrears Management processes. This included the adequacy of policies, procedures, and guidance, and arrangements for ensuring their practical application; • the arrangements for ensuring Housing Rents are accurately calculated, billed, and collected; and • the adequacy of management information.	We were able to provide **Substantial Assurance**. We found that sound systems of control were in place for the calculation and collection of housing rents. Our testing of different transaction types confirmed that: • housing rent accounts are being raised on a timely basis with the correct rent charge for each property type; and • housing rent income is being allocated to the correct rent account on a timely basis. Arrangements for the management and collection of rent arrears are robust, with debt write-offs for the 2018/19 financial year authorised in line with the Council's Corporate Debt Recovery and Write-Off Policy. We confirmed that management information arrangements were sound, with a range of Housing Rent Collection and Arrears Management performance information being reported both internally and externally. Internally, this includes: the Annual Debtors Report; and Place Directorate's Business Planning. Externally, this includes: the Scottish Housing Regulator Annual Charter; tenants consultation and survey; and benchmarking as part of the Scottish Housing Network. Our work on written policies and procedure highlighted scope for improvement. This included the need to develop up to date written procedures for: raising charges and annual billing; identifying, recording and allocating payments received; reconciliations; management of suspense accounts; issuing accounts to Sheriff Officers; and write-offs. There was also scope to formally document the Housing Rent Collection and Arrears related roles and responsibilities of the Revenues Team, Accountancy Services, and Housing Services. This could be recorded in written procedures and referred to in a formal Rent Management Policy.