

Risks, controls and actions Audit

as at 13/01/12

Risk Identified	Potential Consequences	Impact	Risk Rating	Control Measure	Final Risk Rating	Further Action Required
Audit						
Medium Risk recommendations not being implemented		1	4	Communication process in place Escalation process for information reminders Reminders for information given by email and telephone	7	Internal Audit protocol document to be circulated
Low Risk recommendations not being implemented		1	7	Communication process in place Reminders for information given by email and telephone	7	Internal Audit protocol document to be circulated
Lack of resources	affect on use of resources, failure to give full assurance on internal controls, affect on the annual governance statement.	3	6	Employee Development interviews Flexible working Homeworking Market forces used on short term basis of 3 years Reallocate audit plan to free up capacity Audit manual Agency staff used when necessary Knowledge transfer	6	Raise with Kelvin Turner Review audit plan
Information provided not accurate or timely		3	9	Notification of Audits given	6	Staff development

Risk Count: 14

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Grace Governance Solutions Ltd

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Audit				Reminders for information given by email and telephone Escalation process for information reminders Verification of the source of the information Analysis of information provided		Internal Audit protocol document to be circulated
Failure to retain key staff with experience & skills	Failure to provide the correct information and service to members and staff.	3	9	Flexible working Business continuity identified through process mapping Market forces used on short term basis of 3 years Employee Development interviews Homeworking	6	
Major investigation taking priority over audit plan	Failure to deliver on risk based audit plan	3	6	Agency staff used when necessary Reallocate audit plan to free up capacity Officers trained in investigation procedures Outside investigators employed as and when	6	Shared service arrangements with other authorities for assistance with investigations and/or the audit plan.

Risk Count: 14

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Audit				Investigating procedures training undertaken		
High Risk Recommendations not being implemented		3	6	Communication process in place Escalation process for information reminders Regularly report to Audit & Risk Committee, Chair and Director of Resources (Sec 151 Officer) on capacity issues Reminders for information given by email and telephone	6	Internal Audit protocol document to be circulated
Lack of co-operation from Managers		3	6	Communication process in place Escalation process for information reminders Notification of Audits given Regularly report to Audit & Risk Committee, Chair and Director of Resources (Sec 151 Officer) on capacity issues Reminders for information given by email and telephone	6	Internal Audit protocol document to be circulated

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Audit						
Failure to deliver managed audit requirement of the Audit Commission		3	3	Audit Plan document Improve relationships and have regular meetings between District Audit and Audit Manager Regularly report to Audit & Risk Committee, Chair and Director of Resources (Sec 151 Officer) on capacity issues	6	
Failure to recognise/be aware of fraud/corruption		3	6	Anti-fraud and anti-corruption strategy Financial Regulations Fraud manual for Heads of Service Fraud Awareness - A Guide for Managers Money laundering policy Standing Orders Countering Fraud and Corruption Staff Survey Member Code of Condu to be followed Employee Code of Conduct to be followed Fraud Response Plan	6	Staff training using Moodle Results of staff survey to be analysed Policies need to be revised for the Bribery Act

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Audit				Whistleblowing policy and fraud response plan for parties contracting with the Council		
Failure to fully identify all relevant controls		3	6	Access to web sites for information Audit manual CIPFA matrices Information sharing with other authorities	6	Refresher training in CIPFAs systems based audit methodology
Long-term sickness		3	6	Homeworking Knowledge transfer Agency staff used when necessary Employee Development interviews Absence management policy	3	
Failure to provide efficient staff capacity to deal with unplanned investigations	Failure of staff to follow correct procedures, leading to damage to Council reputation, adverse publicity, and loss of confidence from outside bodies and staff.	3	9	Outside investigators employed as and when Reallocate audit plan to free up capacity Regularly report to Audit & Risk Committee, Chair and Director of Resources (Sec 151 Officer) on capacity issues	3	Shared service arrangements with other authorities for assistance with investigations and/or the audit plan.

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Audit				<p>Corporate Governance issues reinforced through the Corporate Governance Working Group and associated processes</p> <p>Officers trained in investigation procedures</p> <p>Investigating procedures training undertaken</p> <p>New Staffordshire Chief Auditors Group Terms of Reference</p>		
Failure of District Audit to inform of changing policies and procedures	Damage to reputation. Failure to comply with legislation or best practice. Intervention from District Audit or the Law Courts.	3	9	<p>Improve relationships and have regular meetings between District Audit and Audit Manager</p> <p>Communication process in place</p> <p>Audit Plan document</p> <p>Continuing consultation and dialogue with Audit Commission</p>	3	

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