

**OVERVIEW AND SCRUTINY COMMISSION
18 MAY 2006**

**INTERNAL AUDIT ANNUAL ASSURANCE REPORT 2005/06
(Acting Director of Corporate Services and Resources - Finance)**

1. INTRODUCTION

- 1.1 Under the CIPFA Code of Practice for Internal Audit in Local Government, the Head of Audit is required to provide an annual assurance report timed to support and be consistent with the Statement on Internal Control (SIC), which accompanies the Council's annual accounts.

2. HEAD OF AUDIT'S OPINION 2005/06

- 2.1 **From the work undertaken during the year, the Head of Audit is of the opinion that key systems are operating soundly and that there is no fundamental breakdown of controls.**
- 2.2 **The general system of internal controls in place at Bracknell Forest Borough Council accords with proper practice, except for those specific areas summarised in paragraph 9.**

3. BACKGROUND

- 3.1 The system of internal control is designed to manage risk to a reasonable level. It cannot eliminate the risk of failure altogether, as no system of control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give that assurance. Internal Audit does, however, provide assurance on a range of financial and other systems in use in BFBC by undertaking a series of reviews in accordance with a risk-based audit plan.

4. WORK OF OTHER AGENCIES AND INSPECTORATES

- 4.1 The work of both Internal and External Audit is key to generating assurance on the internal control environment. This annual report takes assurance from these sources and also from a number of independent review agencies.

Annual Audit and Inspection Letter 2004/05 (AA&IL)

- 4.2 Steven Shuttleworth, the Audit Commission's Relationship Manager, attended the meeting of the Overview & Scrutiny Commission on 9 March 2006 and summarised the conclusions and significant issues arising from recent audits and inspections of the Council as identified in the AA&IL for 2004/05. The Letter confirmed that the authority's overall corporate governance arrangements are considered satisfactory, noting that "the Council has continued to maintain robust systems of internal control, and KPMG have not identified any significant weaknesses."

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- 4.3 The External Auditor also gave an unqualified opinion on the Council's accounts for 2004/05 and found that arrangements to prevent, detect, investigate and report upon fraud and corruption are satisfactory. External Audit also reported that they were again able to place reliance on the work undertaken by Internal Audit.
- 4.4 The Letter did, however, identify six areas on which the Council is recommended to give priority and focus. In brief these were: -
- long-term management of the Council's housing stock and meeting the decent homes standard (DHS) (also mentioned in last year's Letter)
 - housing management performance, where the CPA rating was 1 (on a scale of 1 – 4, when 4 is the best) and where most performance indicators are below average and over half are in the bottom 25% nationally (also mentioned in last year's Letter)
 - adult social services, where performance management systems are not yet fully embedded (also mentioned in last year's Letter but significant improvements in data quality are acknowledged)
 - Supporting People service, where an inspection revealed significant weakness but an improvement plan is now in place
 - value for money in future libraries provision, against a background of comparatively high costs and comparatively low levels of customer use and satisfaction
 - ensuring the Medium-Term Financial Strategy remains robust in the face of budget pressures, especially any decision to retain the management of the Borough's housing stock in-house and the resulting financial pressures caused by the need to achieve the DHS by 2010

Comprehensive Performance Assessment

- 4.5 Under the new arrangements (*CPA – the harder test*), the inspection work found that BFBC is a three star Council and is improving well. Good performance was highlighted in children's services, the plans to regenerate Bracknell Town Centre and partnership working/community leadership. Adult social care, planning and the benefits services were praised as areas of significant improvement. Less good performance was noted in housing and housing related services for vulnerable people.
- 4.6 The inspectors assessed overall value for money as good and praised the focus on achieving improved services and, at the same time, the necessary budget reductions. They suggested that further improvements in value for money should be possible in the library service and by extending joint procurement arrangements with other Councils.
- 4.7 The overall conclusion was that the Council "is improving well and is improving outcomes for local people in many areas." It also "has a strong history of focusing on priorities and meeting financial targets, and has the ability to sustain future improvement."

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- 4.8 The Council's Comprehensive Performance Assessment Improvement Plan 2005/6 – 2006/7 remains in place and the Internal Audit Plan for both 2005/06 and 2006/07 pays attention to the audit of performance data, including the Best Value Performance Indicators.
- 4.9 The inspectors assessed the Council's use of resources as scoring 3 out of 4, noting that there is a robust system for performance management. The Council was encouraged to consider producing an annual report if consultation with the public illustrates a demand. A further improvement would be to update the 'adequate' risk management processes by an annual review of the processes and by ensuring that relevant councillors receive risk management training.

Education and Children's Services

- 4.10 The joint Ofsted/CSCI annual performance assessment scored all relevant children and young people services as grade 3 ("a service that consistently delivers above minimum requirements for users"). Outcomes in all areas were assessed as good. Strengths included partnership working, early years' provision and increased use of the youth service. Areas for improvement included further reduction in teenage conception rates, the low number of foster carers and adopters for children with disabilities and the attendance and attainment of looked-after children.
- 4.11 72% of schools responded to the Audit Commission's Annual Survey of schools' views of their LEA in 2005. The overall level of satisfaction was even higher than in 2004. Of 51 services for which a comparison with 2004 was possible, 33 had improved. Of the total of 80 services included in the survey, 69 were in the top quartile and 41 were ranked in the top 10 authorities in England and Wales.
- 4.12 In addition, BFBC conducted its own survey into 'Services for Schools' and 68% of schools responded. This survey asked for opinions on 28 services supplied by the LEA and 17 had improved overall, notably Landscape Maintenance and Payroll. Only 8 were considered to have worsened and 3 had not changed.

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- 4.13 Ten Ofsted inspections were made during 2005/06 - five primary schools, four secondary schools and the pupil referral unit. The tables below summarise the overall conclusions in key areas: -

School	Achievement & Standards	Leadership & Management	Overall Effectiveness
College Town Junior	Satisfactory	Satisfactory	Satisfactory
Cranbourne Primary	Good	Satisfactory	Satisfactory
Great Hollands Primary	Satisfactory	Satisfactory	Satisfactory
Warfield CE Primary	Good	Good	Good
Edgbarrow Secondary School	Good	Good	Good
Ranelagh CE Secondary School	Outstanding	Outstanding	Outstanding
Sandhurst Secondary School	Good	Satisfactory	Good
Brakenhale Secondary School	Satisfactory	Satisfactory	Satisfactory
Wooden Hill Primary & Nursery	Good	Good	Good
College Hall Pupil Referral Unit	Good	Good	Good

- 4.14 All the Ofsted reports were broadly positive and none of the key assessments were less than 'satisfactory.' Special mention should be made of Ranelagh, which was assessed as 'outstanding' across the board and of Brakenhale, which was previously a school under special measures but which is now rated 'satisfactory' on the key assessment criteria.

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- 4.15 Schools were also asked to self assess their internal controls using the Audit Commission's "Keeping Your Balance" guidance. Internal Audit will check, as part of the standard audit programme, that the assessment is accurate and also that it has been reported formally to the Governing Body. The results are summarised in the following table: -

Returns with no matters arising	30
New schools with several areas still being developed (Great Hollands, the Pines)	2
Schools with issues over the audit of Private Funds (Harmanswater, St. Joseph's and St. Michaels - Easthampstead).	3
School with issue over ordering (Owlsmoor)	1
School not submitting a return (Warfield)	1
Total returns expected	37

- 4.16 Warfield Primary was the only school not to respond and was also the only school not to respond to the previous self-assessment exercise in 2003/04. As such, an in-depth audit of this school will be added to the 2006/07 audit plan.

CSCI Review 2005

- 4.17 The Annual Review of Performance by the Commission for Social Care Inspection was reported in late 2005. The result was to restore the second star lost in 2004. The star was restored because the Council's capacity for improvement in adults' services was reassessed as 'promising,' having been rated as 'uncertain' in 2004. The overall conclusion was that the Council was serving most children well with a promising capacity for improvement and serving some adults well, also with a promising capacity for improvement.
- 4.18 Adult Services were assessed as now having more challenging – but still realistic – plans and better structures to support the delivery of improved performance, including strengthened performance management arrangements. There were better arrangements to support those service users opting for direct payments and partnership arrangements with NHS bodies were assessed as good.
- 4.19 Improvements are still needed in ensuring real ownership of the performance management framework at all levels and in further improving access to direct payments and supporting people services to all user groups.

Benefits Fraud Inspectorate Assessment

- 4.20 In 2002, 2003 and 2004 the Benefits Fraud Inspectorate found the Council's level of performance to be 'fair.' The Council's failure to achieve the national targets set for the 5 key benefits performance indicators meant that the overall assessment could not be better than 'fair.'
- 4.21 In 2005, however, the Council was assessed as meeting 57 of the 65 qualitative targets, resulting in an overall assessment of 'excellent.' BFBC was assessed as meeting all the requirements of the verification framework and was praised for implementing previous recommendations and for having a comprehensive accuracy checking procedure and robust performance management arrangements.
- 4.22 In terms of claims administration, BFBC met or exceeded 4 of the 6 performance measures, although 2 were not met (time taken to process new claims and time taken to pay new rent allowance claims). BFBC also met or exceeded 2 of the 3 performance measures for security but 1 was not met (time taken to resolve data matches).
- 4.23 Benefits is considered to be a high risk area because of the volume of transactions and the significant income and expenditure involved, together with the risk of fraudulent activity. As a result, Council Tax and Housing Benefit features in the Internal Audit Plan every year and is also reviewed independently by External Audit for the purposes of certifying claims for government grant.

Audit Commission

- 4.24 The Audit Commission carried out an inspection early in the third year of the Supporting People programme. The conclusion was that it was a fair, one star service with uncertain prospects for improvement. The Commission praised a number of areas, including offering certain new or improved services to particular vulnerable groups, the strong financial accountability, a review of governance arrangements and the revised and improved structure and capacity of the service. Criticism was made of the failure to complete service reviews, of the late start in establishing proper governance arrangements, of the focus on traditional, accommodation-based services and of the poor quality of the literature available to potential clients. Further, the Commission concluded that the Council lacked sufficient understanding of the eligibility criteria, which threatened to compromise value for money arrangements and even to provide services ineligible for Supporting People funding.

Best Value Review

- 4.25 A BVR of Community Safety was undertaken jointly with the Royal Borough of Windsor and Maidenhead and Thames Valley Police. Although the review was not inspected, the services were commended for the commitment, skill and experience of the individuals involved and for good partnership working. Both Boroughs have very low rates of violent crime, the Youth Offending Teams are ranked in the second quartile nationally and public consultation was well developed. Numerous recommendations were made for further improvements.

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These included reducing the impact of anti-social behaviour, strengthening the links between the Community Safety Partnership and the business and voluntary sectors and introducing regular monitoring of public satisfaction on community safety issues.

5. CORPORATE GOVERNANCE

- 5.1 The Executive has approved a Local Code of Corporate Governance based on best practice guidance issued jointly by CIPFA and SOLACE in the publication 'Corporate Governance in Local Government – A Keystone for Community Governance'. At the time the Local Code was approved, seven minor areas of non compliance were identified including the need to develop procedures to deal with the requirements of the Freedom of Information Act and to update Contract Regulations.
- 5.2 Internal Audit has reviewed these areas of weakness and concluded that action has been taken to address each of them. It is Internal Audit's opinion that the Authority now complies with best practice.
- 5.3 The Code will be updated during 2006/07 and the revised version will be submitted to the Executive for formal approval. Further work will be required to promote and raise awareness of the corporate governance arrangements, including the Whistleblowing Policy, the Fraud and Corruption Policy and the Money Laundering Regulations.

6. RISK MANAGEMENT

- 6.1 The Council has approved a Risk Management Policy Statement, which sets out the Council's attitude to risk. The policy: -
- explains the Council's underlying approach to risk management
 - emphasises how the efficient and effective management of risk forms part of the Council's overall operational objectives
 - identifies the main responsibilities of the Strategic Risk Management Group (SRMG)
- 6.2 The SRMG has continued to meet on a quarterly cycle and has set up an Emergency Planning/Business Continuity Sub Group, which also meets quarterly. There is also a Financial Risk Sub Group, which is maintaining and reviewing regularly a list of risks including the budget, audit and insurance and major projects.
- 6.3 In their AA&IL, KPMG assessed risk management arrangements as 'adequate' but suggested that improvements should be made by updating the overall processes on an annual basis and ensuring that members with responsibility for risk management receive appropriate training.
- 6.4 A review of the Corporate Risk Register was planned for the autumn of 2005 but was deferred pending a wider benchmarking exercise, which was undertaken by consultants and their report was received in September 2005. The recommendations from this report and KPMG's comments are being incorporated into a risk management action plan to ensure that the Council

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complies with best practice and keeps its risk register and risk management processes up to date. Implementation has been delayed slightly as a direct result of being unable to recruit a Head of Audit and Risk Management in late 2005. Implementing the action plan is a priority now that the post has been filled on an interim basis.

- 6.5 The SRMG reports annually (and as necessary) to the Corporate Management Team (which also receives the SRMG minutes). The latest report to CMT in October 2005 included revised terms of reference for the Group.

7. INTERNAL CONTROL

Internal Audit Performance

- 7.1 The work of internal audit is carried out using a risk based approach and a five year strategic audit plan, which is updated each year to reflect new and changed risks. The annual audit plan is drawn up from this document and finalised by discussion and agreement with each department and other interested bodies.
- 7.2 The agreed audit plan for 2005/06 has been delivered in full, although some alterations were made to the original plan during the year in response to information gained during the year combined with known changes in risk.

Results of 2005/06 Audits

- 7.3 During the year 2005/06, 119 audits were completed but two opinions were given on separate aspects of two audits, giving a total of 121 opinions. A full schedule of the completed audits and their assurance opinions is set out in Appendix A. A summary of assurance levels is given in the table: -

ASSURANCE	2005/06	2004/05
Full	2	5
Satisfactory	92	101
Limited	10	11
None	0	0
No opinion given	3	3
Opinion to be confirmed – final report outstanding	14	0
Total	121	120

Assurance Opinion Classifications

7.4

OPINION LEVEL	DEFINITION
Full Assurance	There is a sound system of internal control designed to meet the system objectives and the controls are being consistently applied.
Satisfactory Assurance	There is basically a sound system of internal controls although there are some minor weaknesses and/or there is evidence that the level of non-compliance may put some minor systems objectives at risk.
Limited Assurance	There are some weaknesses in the adequacy of the internal control system which put the systems objectives at risk and/or the level of compliance or non compliance puts some of the systems objectives at risk.
No Assurance	Control is weak leaving the system open to significant error or abuse and/or there is significant non-compliance with basic controls.

“Double Limited Assurances”

7.5 The following audits received a ‘limited’ level of assurance both for the 2005/06 audit and the previous audit of that particular area:

- Home to School Transport
- Brakenhale School (2004/05 audit completed in 2005/06)

Feedback from Quality Questionnaires

- 7.6 Quality questionnaires are sent to each auditee with each draft audit report. 73 were returned to 3 May 2006 of 102 issued (72%), with the overall response being positive. The results are summarised as follows:

DEPARTMENT	VERY SATISFIED	SATISFIED	NOT SATISFIED	TOTAL
Chief Executive	n/a	1	0	1
Corporate Services & Resources	n/a	21	5	26
Education & Libraries	n/a	19	3	22
Environment & Leisure	n/a	11	2	13
Social Services & Housing	n/a	10	1	11
Total for 2005/06	n/a	62	11	73
Total for 2004/05	15	45	3	63

- 7.7 The questionnaire was simplified for 2005/06 and the overall assessment can only be 'satisfied' or 'not satisfied.' All unsatisfactory responses are followed up and any necessary actions taken. Questionnaires where the response is very positive are highlighted to the contract manager.
- 7.8 The increase in the number of 'unsatisfactory' replies is of concern. Issues raised more than once included inadequate or no exit meeting, the auditor appeared to lack sufficient knowledge of the service under review and the report was produced late. These are all quality issues and have been raised with the contractor (Deloitte) at the monthly contract monitoring meetings. A joint decision between the Council and Deloitte resulted in one auditor being removed from the BFBC contract during 2005/06 due to concerns about the quality of work.

Compliance with Code of Practice

- 7.9 Internal Audit has comprehensive quality control and assurance processes in place which comply with the requirements of the CIPFA standards and Code of Practice. Our assurance is drawn from: -
- our Internal Audit Contractor (Deloitte) has ISO9000 accreditation, awarded by independent assessors
 - the work of External Audit and their reliance on Internal Audit's work
 - our own in house internal quality reviews
 - feedback from auditees

8. OTHER INTERNAL AUDIT ACTIVITIES

National Fraud Initiative 2004/05

- 8.1 The National Fraud Initiative is the Audit Commission's data matching exercise and is designed to help participating bodies to detect fraudulent and erroneous payments from the public purse. It takes place every two years and BFBC received its data from the Audit Commission in January 2005. The Fraud Officer (Housing Benefits) and the Acting Head of Audit attended a training session to enable the information provided to be used in the most effective manner.
- 8.2 The final return was submitted on time, in December 2005. The exercise found 4 cases of fraud, which resulted in overpayments estimated to be in excess of £44,000. In one case, the claimant was convicted and sentenced to 120 hours community service and fined £200. In the other three cases, formal cautions have been issued and the overpayments are being recovered.

PAYE and NIC Reviews

- 8.3 Ernst and Young were contracted to look at the Council's PAYE and NIC arrangements and they developed an action plan to avoid possible penalties from HM Revenue and Customs.
- 8.4 This is a key risk area, as penalties are high, for example, for employing people not permitted to work in the UK or paying 'employees' as consultants. Internal Audit carried out a detailed review of employment status in 2005/06 to support the consultancy work.

Fraud and Irregularity

- 8.5 Several frauds and irregularities have been identified during the year. A financial irregularity affecting trade waste income was reported and investigated, together with allegations of falsifying records at a primary school.
- 8.6 Internal Audit investigated several minor thefts at Council establishments and a more significant theft from an Environment & Leisure imprest account. An invoice scam relating to payments for unsolicited entries in publications was also investigated.

9. SIGNIFICANT CONTROL WEAKNESSES

- 9.1 In forming its opinion, Internal Audit is required to comment on the quality of the internal control environment, which includes consideration of any significant risk or governance issues and control failures which arise. During the financial year 2005/06, key weaknesses were identified in the following areas and resulted in limited assurance opinions: -

Directorate	Audit
<p>Corporate Services & Resources</p>	<p>Pericles Council Tax and Housing Benefits System. Two high priority (referred to as priority 1) recommendations were made. One related to the need to upgrade to version 35 of the software once testing was complete, as the current version 34 had poor access controls and lacked a robust audit trail. The other related to improving password controls and lockout arrangements.</p> <p>Agresso Application & Operating System Review One Priority 1 recommendation was made. This related to the need to use the controls built into the Windows 2003 Operating System, including minimum password lengths, password history and lockout facilities.</p> <p>Contracting & Procurement. Two priority 1 recommendations were made relating to ensuring that all delegation and sub-delegation is properly documented and approved and to more consistent logging/maintenance of contract documentation.</p>
<p>Education, Children's Service & Libraries</p>	<p>Home to School Transport. The single priority 1 recommendation related to the need to ensure, and retain evidence of, CRB clearance for all drivers and escorts.</p> <p>Sensory Impairment Contract Monitoring. This audit was included in the 2005/06 plan as considerable monies are involved and the area has not been audited for some time. Two priority 1 recommendations were made. One advised an up to date Service Level Agreement, which was agreed but this issue will need to be addressed by the consortium. The second recommended that a clear pricing structure should be established and this will also need to be addressed by the consortium. All recommendations were agreed in principle but it is appreciated that they cannot be implemented by BFBC in isolation.</p> <p>Cranbourne Primary School. The priority 1 recommendation related to the personal files of staff which should include evidence of CRB checks, evidence of two references having been received and evidence of qualifications.</p> <p>Brakenhale School 2004/05 Audit. The school has made considerable progress to improve control over the last two years; however it is again having staffing difficulties with the position of bursar. The current bursar has been on long term sick leave, which has resulted in a lack of reliable budgetary information being reported to</p>

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	<p>governors. This resulted in a priority 1 recommendation. The second priority 1 recommendation related to retaining evidence that CRB checks have been carried out and a third priority 1 recommendation related to the failure to audit the Private Fund since 2002, despite a previous Internal Audit recommendation to that effect.</p>
Environment & Leisure	<p>Weighbridge.</p> <p>The audit was undertaken following the discovery of a major irregularity. Four priority 1 recommendations were made covering: -</p> <ul style="list-style-type: none">• user identification and passwords for IT systems• setting up a direct debit for the customer in question (this was the usual arrangement for all other trade customers)• improved checks in the billing process• independent authorisation of invoice lists
Social Services & Housing	<p>Anite Housing Management Application & Operating System Review</p> <p>One Priority 1 recommendation was made. This related to the need to use the controls built into the Windows 2000 Operating System, including minimum password lengths, password history and lockout facilities.</p>

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TABLE OF ASSURANCE

April 2005 to March 2006

REPORT	ASSURANCE LEVEL				RECOMMENDATIONS			
	Full	Satisfactory	Limited	None	CATEGORY			AGREED
					1	2	3	
Chief Executives								
Best Value Performance Indicators		X				n/a	n/a	n/a
Corporate Services & Resources								
Physical Security of Buildings		X				7	6	12*
New cash/chq procedure Times Sq.		X				3		3
Cash & Cheque (Cashiers)		X				5	1	5*
Customer Section & Reception		X				5	1	6
Council Tax		X				4		4
NNDR		X				6		6
Bank & Reconciliations		X				1		1
Budgetary Control		X					2	0+
Capital Accounting & Fixed Assets		X				1		1
Creditors		X				2	3	5
Debtors		X				2	1	3
Main Accounting		X					1	1
Payroll		X				6		6
Treasury Management		X				2	1	3
VAT		X				5	3	Reply o/s
BACSTEL		X				9	1	Reply o/s
Freedom of Information		X					1	1
Hospitality		n/a			n/a	n/a	n/a	n/a
Elections & Electoral Registration								Report o/s
Members' Allowances		X				3		3
Anti-Virus Controls IT		X				3		3
Departmental PC Controls		X				2	1	3
Pericles			X		2	5		7
Implications of E-Government		X				6		6
Disaster Recovery Arrangements								Report o/s
IT Security BS7799		n/a						£
Network Review								Report o/s
Agresso		X	X		1	7		Reply o/s\$
Content Management		X				5	5	10
Customer Relations Management								Report o/s
Registrars		X					1	1
Housing & Property Repairs - Contract		X				4		3*
Stores Procedures		X				3		3
Contracting & Procurement			X		2	8	1	11
Employment Status		X				5		Reply o/s
Commercial Property Estates Man't		X					2	Reply o/s

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REPORT	ASSURANCE LEVEL				RECOMMENDATIONS			
	Full	Satisfactory	Limited	None	CATEGORY			AGREED
					1	2	3	
Education, Children & Libraries								
Education Library Service		X				5	1	6
Libraries – Main Finance		X					1	1
Book Purchasing								Report o/s
Sandhurst Library		X					1	1
Binfield Library		X					2	2
SE Grid for Learning (Lead Authority)		X				1		1
Standards Fund	X							n/a
Teaching & Support Services	X						2	2
Adult & Community Learning		X			n/a	n/a	n/a	n/a
Student finance (Ltd 04/05)		X					1	1
Recoupment								Report o/s
Home to School Transport (Ltd 04/05)				X	1	3	1	Reply o/s
Early Years		X				3		3
PLASC		X				2		2
Sensory Impairment (Contract Monit)				X	2	3		5
Bracknell Family Centre		X				3	1	4
Special Educational Needs		X				1	1	2
School File Reviews		n/a						n/a
School Self-Assessment		n/a						n/a
Ascot Heath Junior		X				2	2	3*
Broadmoor Primary		X				3	4	7
College Town Junior		X				4	2	Reply o/s
Cranbourne CE Primary				X	1	5	5	Reply o/s
Easthampstead Park		X				6	5	11
Edgbarrow		X				1	2	3
Foxhill Primary		X				6		6
Garth Hill		X				7	3	10
Harmanswater Primary		X				1	3	4
Kennel Lane Special								Report o/s
Larchwood		X				5		5
New Scotland Hill Primary		X					2	Reply o/s
Meadowvale Primary (Irregularity)				X?				?
Meadowvale Primary								Report o/s
Owlsmoor Primary		X				6	1	7
Pines Infant Closing		X			n/a	n/a	n/a	n/a
Pines Junior Closing		X			n/a	n/a	n/a	n/a
Warfield CE Primary		X				5	4	9
Winkfield St. Mary's CE Primary		X				9	3	12
Other Care & Support Services		X				1	1	2
Environment & Leisure								
Car Parks		X				1		1
Leisure – Cash Spot Checks		X			n/a	n/a	n/a	n/a
Downshire Golf Complex		X				4		4
Edgbarrow & Sandhurst LC		X				4		4
Bracknell Sports and LC		X				3	6	Reply o/s

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REPORT	ASSURANCE LEVEL				RECOMMENDATIONS			
	Full	Satisfactory	Limited	None	CATEGORY			AGREED
					1	2	3	
Coral Reef		X				2	5	Reply o/s
Leisure Catering		X				1		Reply o/s
The Look Out		X				2		2
Dance Project (Ltd 04/05)		X				1		1
Easthampstead Park		X				1	4	5
Planning IT (Uniform)		X				5	1	6
Weighbridge			X		4	1	1	6
Cemetery & Crematorium		X				4	2	6
Section 106 & Planning Policy		X				2	1	2*
Community & Concessionary Transport		X				2		2
Highways Consultants		X				3		3
Rechargeable Works		X				1		1
Trading Standards		X				2	1	Reply o/s
Building Regs (incl. f/up 04/05)		X				2	1	3
Landscape Services (Ltd 04/05)								££
Local Land Charges (Ltd 04/05)		X				2	1	3
Environmental Health		X				1	3	4
Licensing		X					1	Reply o/s
Social Services & Housing								
Mental Health – day & other services		X				4	1	5
Direct Payments		X				7		7
The Look In		X				4		4
Older People Day Care								Report o/s
Learning Disabilities Residential								Report o/s
Physical Disabilities Residential etc.								Report o/s
Housing Needs		X				5	2	7
Sale of Council Houses		X				3	1	4
Supportive Housing (F/up 04/05)		X				3	2	5
Council Tax & Housing Benefit		X				6	2	8
Housing Rents		X				1	2	Reply o/s
Housing Management		X				2	1	Reply o/s
Forestcare								Report o/s
BROC		X				3		3
Heathlands		X				6	2	8
Ladybank OPH		X				5		5
Waymead – short term		X				3	2	5
Waymead – long term closing		X			n/a	n/a	n/a	n/a
Anite Hous. Man. System		X	X		1	3		Reply o/s\$
Late Completion 04/05								
Brakenhale School			X		3	3	3	9

* One recommendation disagreed.

+ Two recommendations disagreed.

Seven recommendations in total were not agreed by auditees during the year, in either category 2 or 3. Internal Audit considered the explanations received and concluded that

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failure to implement these would not materially affect the Council's overall internal control environment.

£ No opinion given and the 4 recommendations were not prioritised.

\$ Application assurance satisfactory but operating system assurance limited.

££ Draft report issued but further work required on inventory controls before report can be finalised.