



RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

MUNICIPAL YEAR 2021/22

COMMITTEE: GOVERNANCE AND AUDIT COMMITTEE 12 th July 2021	ITEM NO. 10
REPORT OF: THE HEAD OF THE REGIONAL INTERNAL AUDIT SERVICE in consultation with the DIRECTOR OF FINANCE & DIGITAL SERVICES	ANNUAL INTERNAL AUDIT STRATEGY AND RISK BASED PLAN 2021/22

Author: Mark Thomas (Head of Regional Internal Audit Service) and Lisa Cumpston (Group Audit Manager)

1. PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to provide members of the Governance and Audit Committee with the Annual Internal Audit Strategy and Risk Based Plan for 2021/22.

2. RECOMMENDATIONS

It is recommended that Members:

- 2.1 Review and approve the Annual Internal Audit Strategy (**Appendix A**) and Risk Based Internal Audit Plan for 2021/22 (**Appendix B**).

3. REASONS FOR RECOMMENDATIONS

- 3.1 To help ensure that Governance and Audit Committee discharges its responsibilities in respect of reviewing, approving and ensuring the coordination of the Annual Internal Audit Strategy and Risk Based Audit Plan for the financial year.

4. BACKGROUND

- 4.1 The United Kingdom Public Sector Internal Audit Standards (Performance Standard '2010 Planning') provides the framework within which an internal audit plan should be compiled.
- 4.2 In line with the Public Sector Internal Audit Standards the Head of Internal Audit must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals.
- 4.3 To develop the risk-based plan, the Head of Internal Audit consults with senior management and the Board (Governance & Audit Committee) and obtains an understanding of the organisation's strategies, key business objectives, associated risks and risk management processes. The Head of Internal Audit must review and adjust the plan, as necessary, in response to changes in the organisation's business, risks, operations, programmes, systems and controls.
- 4.4 In order to produce the Internal Audit plan the following information is taken into account:
- Corporate Risk Register/Strategic Risk Register;
 - Corporate Plan;
 - Key Financial Systems;
 - Grant Claims that require Internal Audit certification;
 - Follow-up reviews;
 - Audit reviews that are carried forward from the previous audit plan;
 - Recommendations from External Inspectors / Regulators; and
 - Results of discussions with the Senior Leadership Team, including the Chief Executive, Section 151 officer and other senior officers.
- 4.5 The Public Sector Internal Audit Standards require a risk-based audit plan to be produced to cover the Council's overall control environment including risk, governance and internal controls as far as practicable.
- 4.6 By taking into account the sources of information noted above, this supports Internal Audit to achieve the following:
- Comply with the Public Sector Internal Audit Standards in compiling the draft Annual Audit Plan;
 - Enable The Governance & Audit Committee to monitor the adequacy of the risk management framework and the associated control environment of the Council for 2021/22 based on the audit reviews set out in the Risk Based Internal Audit Plan; and
 - Enables the Head of Internal Audit to form an opinion on the risk, governance and internal controls of the organisation.

Current situation/proposal

- 4.7 Attached as **Appendix A** is the draft Annual Internal Audit Strategy document for 2021/22. It demonstrates how the Internal Audit Service will be delivered and developed in accordance with our Terms of Reference. The Strategy will be reviewed and updated in consultation with stakeholders namely the Governance and Audit Committee, External Auditors and Senior Management as appropriate.
- 4.8 The 2021/22 draft Annual Risk Based Plan of work has been formulated in compliance with the PSIAS. The draft detailed plan is attached at **Appendix B**.
- 4.9 The proposed plan continues to recognise particular risks arising from COVID-19, availability of audit and service staff and challenges arising from the remote ways of working. The plan is also flexible to allow for changing circumstances and events that may occur, such as requests to respond to new issues that may arise. The draft detailed plan has already been shared with the Council's Senior Leadership Team.
- 4.10 Internal Audit work will be undertaken remotely using video conferencing (e.g. Microsoft Teams) and digital solutions as a basis for meetings and sharing documents and data.
- 4.11 The proposed plan at **Appendix B** will provide sufficient coverage to be able to provide an opinion at the end of 2021/22.
- 4.12 The Governance and Audit Committee will receive updates on how the plan is being delivered and any changes that may be required.

5. EQUALITY AND DIVERSITY IMPLICATIONS / SOCIO-ECONOMIC DUTY

- 5.1 There are no equality and diversity or socio-economic implications as a result of the recommendations set out in the report.

6. CONSULTATION

- 6.1 There are no consultation implications as a result of the recommendations set out in the report.

7. FINANCIAL IMPLICATION(S)

- 7.1 There are no financial implications as a result of the recommendations set out in the report.

8. LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

- 8.1 The provision of regular information in respect of the Council's Internal Audit Service supports the Council in demonstrating compliance with the Accounts and Audit (Wales) (Amendment) Regulations 2018.

8.2 Regulation 7 (Internal Audit) of Part 3 of the 2018 Regulations directs that: “A relevant body must maintain an adequate and effective system of internal audit of its accounting records and of its system of internal control.”

9. LINKS TO CORPORATE AND NATIONAL PRIORITIES AND THE WELL-BEING OF FUTURE GENERATIONS ACT

THE COUNCIL’S CORPORATE PLAN PRIORITIES

9.1 The work of Internal Audit aims to support the delivery of the priorities contained within the Council's Corporate Plan 2020-2024 “Making a Difference”, in particular ‘Living Within Our Means’ through ensuring that appropriate internal controls are in place to effectively manage resources.

WELL-BEING OF FUTURE GENERATIONS ACT

9.2 The Sustainable Development Principles, in particular Prevention, can be applied to the systematic reviews undertaken in order to provide assurance that risks to the achievement of objectives are being managed.

10. CONCLUSION

10.1 The Annual Internal Audit Strategy and Risk Based Plan for 2021/22 has been compiled in accordance with the Public Sector Internal Audit Standards and the Council’s Internal Audit Charter taking into account the unprecedented challenges caused by the COVID 19 pandemic.

10.2 The Council's Governance and Audit Committee, in line with its Terms of Reference, is requested to review and approve the Strategy and Risk Based Audit Plan for 2021/22.

LOCAL GOVERNMENT ACT, 1972

as amended by

THE ACCESS TO INFORMATION ACT, 1985

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

LIST OF BACKGROUND PAPERS

GOVERNANCE AND AUDIT COMMITTEE

12th July 2021

**REPORT OF THE HEAD OF THE REGIONAL INTERNAL AUDIT SERVICE in
consultation with the DIRECTOR OF FINANCE & DIGITAL SERVICES**

Author: Mark Thomas (Head of Regional Audit Service)

Item

10. Draft Annual Audit Strategy and Risk Based Audit
Plan 2021/22



RHONDDA CYNON TAF

DRAFT
STRATEGY
&
ANNUAL RISK BASED
INTERNAL AUDIT PLAN
2021/2022

1. Introduction

- 1.1 Internal Audit objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources. This opinion forms part of the framework of assurances that the Council receives and should be used to help inform the Annual Governance Statement. The purpose of this document is to provide a detailed Internal Audit Risk Based Plan for 2021/2022.
- 1.2 The audit plan ensures that the risks facing the Council are adequately addressed and internal audit resources are effectively utilised. The standards for “proper practice” in relation to internal audit are laid down in the Public Sector Internal Audit Standards (PSIAS).
- 1.3 The Internal Audit Service is delivered through the expanded shared service that came into existence on 1st April 2019. The service is hosted by the Vale of Glamorgan Council and provides internal audit services to the Vale, Bridgend, Merthyr Tydfil & Rhondda Cynon Taf Councils. The arrangement is underpinned by a detailed legal agreement between the four Councils which sets out a range of obligations (the core service is the same for each Council but there are differences in what is provided outside of the core service). The service reports to the four Governance & Audit Committees and is overseen at a strategic level by the Board which consists of the Chief Finance Officers of the four Councils.

2. Definition of Internal Audit

- 2.1 The Public Sector Internal Audit Standards (PSIAS) defines Internal Audit as follows:

“Internal audit is an independent, objective assurance and consulting activity designed to add value and improve an organisation’s operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes”.

3. Requirement for Internal Audit

- 3.1 Internal Audit is a statutory service. Part 3 of The Accounts and Audit (Wales) Regulations 2018 concerns financial management and internal control. Regulation 5 (responsibility for internal control and financial management) of Part 3 directs that:

‘The relevant body must ensure that there is a sound system of internal control which facilitates the effective exercise of that body’s functions and which includes:

- (a) Arrangements for the management of risk, and*
- (b) Adequate and effective financial management.’*

3.2 Regulation 7 (Internal Audit) of Part 3 directs that:

‘A relevant body must maintain an adequate and effective system of internal audit of its accounting records and of its system of internal control.’

3.3 PSIAS state:

“The chief audit executive must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation’s goals. The risk based plan must take into account the requirement to produce an annual internal audit opinion”

3.4 The overall opinion issued each year by the Head of Internal Audit on the adequacy and effectiveness of the control environment is used as a key source of assurance to support the Annual Governance Statement.

4. Section 151 Officer Responsibility

4.1 Internal Audit also has an important role to support the Council’s Section 151 Officer in discharging their statutory responsibilities, which include: -

- S151 Local Government Act 1972 – to ensure the proper administration of financial affairs.
- S114 Local Government Act 1988 – to ensure the Council’s expenditure is lawful.

5. Development of the Internal Audit Plan

5.1 The annual internal audit plan has been prepared after considering the Strategic Risk Register and the views of Corporate Directors and Senior Management as to where audit resource is most needed. In line with the PSIAS, this plan should enable Internal Audit to maximise the value and assurance it provides to the Council, whilst ensuring it fulfils its statutory obligation to review and report on the Council’s internal control environment, governance and risk management arrangements. As was the case for the 2020-21 plan, risks arising from the ongoing Covid-19 pandemic have also been considered when formulating the 2021-22 plan.

6. Risk Based Approach

6.1 The internal audit function will be delivered in accordance with the Internal Audit Charter 2021-22, as presented to the Governance & Audit Committee in March 2021. The Charter defines the role, scope, independence, authority and responsibility of the internal audit service and audits will be delivered in accordance with the Charter.

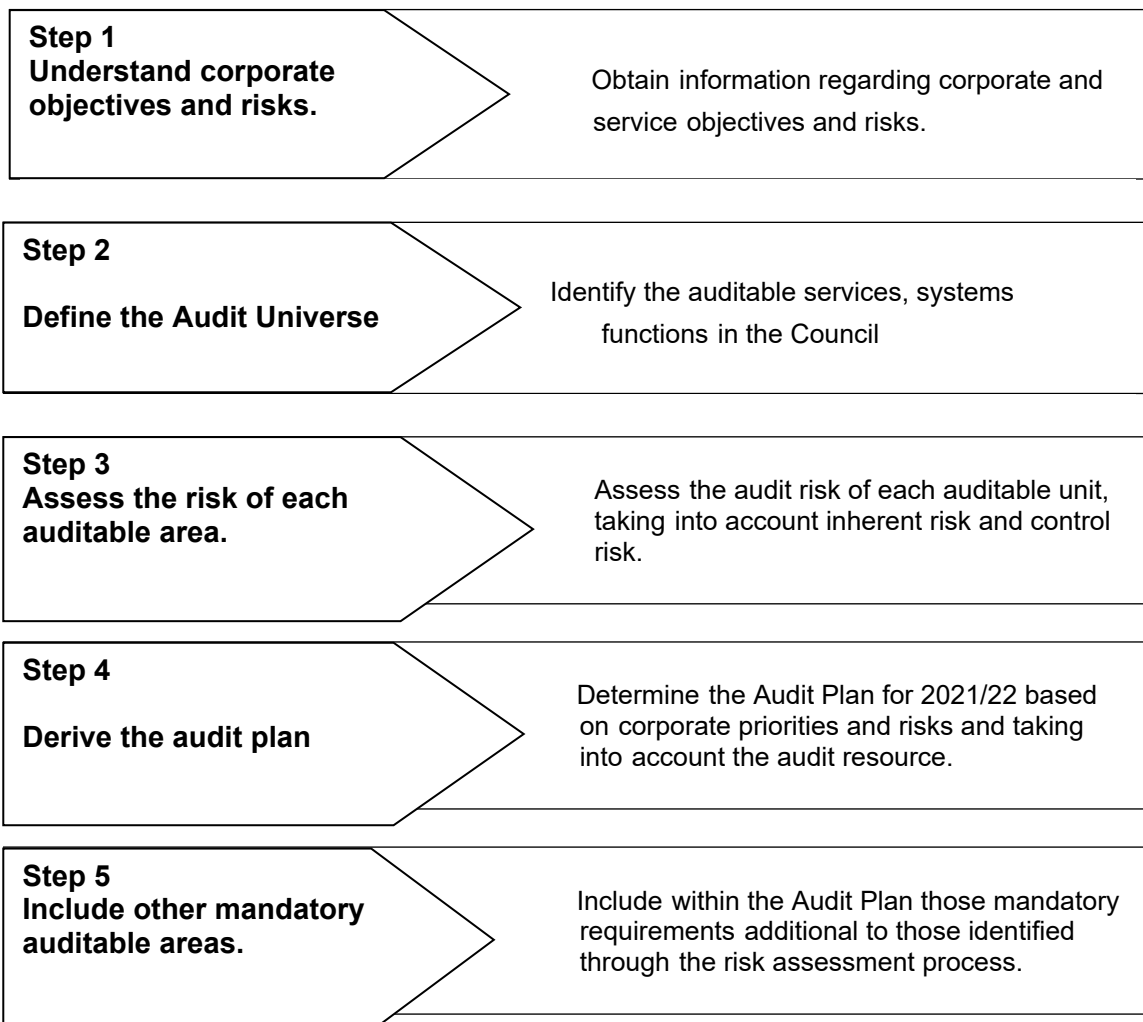
6.2 Risk based work is critical to the Council, as it seeks to improve the risk awareness of staff and improve overall control. The internal audit work

programme is designed to provide assurance that identified significant risks are being managed effectively. As part of this process Internal Audit will also examine the risk management and governance arrangements.

- 6.3 By adopting a risk-based audit approach there is a clear linkage between the significant risks identified in the Council's Strategic Risk Register and the work undertaken by Internal Audit in providing assurance against these. As a result, the starting point for the audit plan approach is an understanding of the Council's objectives and risks.

7. Methodology

- 7.1 A summary of our approach to the development of the Audit Plan for 2021/22 is set out below. The Plan is driven by the Council's organisational objectives and priorities as set out in the Corporate Plan and the risks that may prevent the Council from meeting these objectives.



8. The Risk Assessment Process

- 8.1 The information which has been used to prepare the risk assessment and proposed internal audit plan has been collected and collated from several different sources. The starting point for a risk-based audit approach is an understanding of the Council's priorities and risks. This has been achieved by meeting with all the Corporate Directors to understand what they perceive to be the main risks within their individual areas and where they feel internal audit could provide assurance that such risks are being effectively mitigated and managed, by reviewing the Corporate Plan and the Strategic Risk Register. A questionnaire on internal control and governance was also issued to all Service Directors and the responses received used to inform and design the audit plan.
- 8.2 The plan is based on an underlying risk assessment. The risks existing within each area are identified for audit as part of the audit planning process. The audits which make up the plan have been assessed by priority.

9. The Annual Internal Audit Plan

- 9.1 In accordance with the PSIAS, the Head of Audit is responsible for developing a risk-based annual audit plan which considers the Council's risk management framework. Within the Standards there is also a requirement for the Head of Audit to review and adjust the plan, as necessary, in response to changes in the Council's business, risks, operations, programs, systems, controls and resources. The Head of Audit must also ensure that Internal Audit resources are appropriate, sufficient and effectively deployed to achieve the approved plan.
- 9.2 An annual plan is derived following the audit risk assessment, whereby audits will be selected based on the greatest perceived risk. The Internal Audit Service will ensure that most effort is focused on high risk areas while, at the same time, not disregarding the potential for problems that may materialise in other areas.
- 9.3 Whilst the Internal Audit Service will adopt a risk-based approach to determine relative risk, there will remain areas where a purely cyclical approach may still be required i.e. programme of school audits, financial systems, and grant verifications.
- 9.4 Consideration is also given to planned external audit work to minimise duplication and to maximise audit coverage.
- 9.5 **Appendix B** is the detailed schedule of audits planned to be completed during 2021-2022 for each of the Council's Directorates including Whole Authority Arrangements.

- 9.6 The Head of Internal Audit will monitor progress against the audit plan. Where there is a need for material changes to the plan, a revised plan will be re-submitted to the Governance & Audit Committee for endorsement. The Governance & Audit Committee will also be advised of performance against the audit plan and be kept informed of the results undertaken.
- 9.7 The COVID 19 pandemic has meant that most Council staff have worked remotely since March 2020 and this is likely to continue to a large extent during 2021-22. Therefore, systems & processes have been adjusted to cater for the new ways of working. Similarly, the Internal Audit team will continue to work remotely, conducting audits and obtaining evidence digitally. Each audit will consider the potential impact of COVID 19 and remote working to ensure adequate controls and governance arrangements remained in place.

10. Resource Requirement

- 10.1 Resource requirements are reviewed each year as part of the audit planning process and are discussed and agreed with the Regional Internal Audit Service (RIAS) Board.

11. Contingencies

- 11.1 The internal audit plan needs to be flexible enough to enable the internal audit service to be able to respond, as required, to situations arising during the period covered by the plan. A contingency reserve element has been built in to assist in dealing with any such matters arising.

12. Audit Approach

- 12.1 The primary purpose of an audit review is to provide an independent and objective opinion to the Council on the framework of internal control, risk management and governance in operation and to stimulate improvement.
- 12.2 The approach will be :
- Fieldwork will take place following agreement of the audit objectives.
 - A draft report will be prepared and provided to Management for review and comment with an opportunity given for discussion or clarification.
 - The final report will incorporate Management comments together with a Management Action Plan for the implementation of recommendations.
 - The Governance and Audit Committee will be advised of the outcome of the audit and may receive a copy of the Final Report.

- Any serious issues arising during the audit review will be promptly reported to the Head of Internal Audit to determine the impact on the scope of the review. Serious issues will also be brought to management's attention to enable appropriate remedial action to be taken prior to being formally published in the audit report.
- The audit report will provide an overall assurance opinion, based on the auditor's professional judgement of the effectiveness of the framework of internal control, risk management and governance.

12.3 The audit assurance categories are :

AUDIT ASSURANCE CATEGORY CODE	
Substantial	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

12.4 A Management Action Plan will form an integral part of the report and will be used to record:

- Those risks considered to be inadequately controlled;
- A prioritisation of audit recommendations and the actions management propose to bring the risks within acceptable parameters, the officer(s) responsible for those actions and the dates for completion.

Audit recommendations will be prioritised as follows :

RECOMMENDATION CATEGORISATION	
Risk may be viewed as the chance, or probability, of one or more of the organisation's objectives not being met. It refers both to unwanted outcomes which might arise, and to the potential failure to realise desired results. The criticality of each recommendation is as follows:	
High Priority	Action that is considered imperative to ensure that the organisation is not exposed to high risks.
Medium Priority	Action that is considered necessary to avoid exposure to significant risks.
Low Priority	Action that is considered desirable and should result in enhanced control.

12.5 The implementation of the agreed recommendations will be monitored. Management will be contacted and asked to provide feedback on the status of each agreed recommendation once the target date for implementation has been reached.

12.6 Any audits concluded with a no assurance or limited assurance opinion will be subject to a follow up audit.

13. Follow Up Reviews

13.1 Where significant gaps in the control environment have been identified and where either limited or no assurance has been given, then these audits will be subject to a follow up. The timing of the follow up is very much dependent on available resources, but Internal Audit's aim will be to complete the follow up within three to six months of completion of the audit (depending on the assurance level).

14. Reports to the Governance & Audit Committee

14.1 A status report on internal audit work will be present to the Governance & Audit Committee on a quarterly basis (approximately). The purpose of these reports is to provide an update on the progress made against the delivery of the Internal Audit Plan. The report will provide details of audits completed to date, the assurance opinions given and the number and type of recommendations made.

15. Annual Assurance Report

15.1 A formal annual report to the Governance & Audit Committee presenting the Head of Internal Audit's opinion on the overall adequacy and effectiveness of the framework of governance, risk management and internal control, will be published to enable it to be taken into account when preparing the Council's

Annual Governance Statement. The format of the Head of Internal Audit's report will follow that set out in the Public Sector Internal Audit Standards (PSIAS) and will include:

- An opinion on the overall adequacy and effectiveness of the Council's framework of internal control, risk management and governance,
- Disclose any qualifications to that opinion, together with the reasons for qualification;
- Present a summary of the audit work from which the opinion is derived, including reliance placed on work by other assurance bodies;
- Any issues considered by the Head of Audit to be particularly relevant to the Annual Governance Statement;
- A comparison of work undertaken with that planned, with a summary of internal audit performance for the year; and comment on compliance with the Public Sector Internal Audit Standards and Internal Audit's Quality Assurance and Improvement Programme.

Appendix B – Draft Internal Audit Plan 2021/22

AUDIT AREA	RISK / PRIORITY	TYPE OF WORK	STRATEGIC RISK REGISTER / CONTROL ENVIRONMENT / FOLLOW-UP / PRIORITY PLANS
CHIEF EXECUTIVE			
HUMAN RESOURCES			
CONTRACT VARIATIONS / PAYMENTS IN ADVANCE	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PROCUREMENT ARRANGEMENTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
FINANCE & DIGITAL SERVICES			
ADMINISTRATION OF TRUST FUNDS	LOW	ASSURANCE	GRANT CERTIFICATION
OPERATION OF THE PRIMARY SCHOOL SICKNESS SCHEME	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
GRANTS TO BUSINESSES	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
SELF ISOLATION PAYMENTS - ADMINISTRATION OF THE WG SCHEME (COVID RELATED RISKS)	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
FAIRER CHARGING FOR ADULT NON-RESIDENTIAL CARE SERVICES - FOLLOW UP	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
BUDGETARY CONTROL - SCHOOL DEFICIT RECOVERY PROTOCOLS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PAYROLL - IMPLEMENTATION OF THE NEW PAYROLL SYSTEM	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ADMINISTRATION OF THE FURLOUGH SCHEME (COVID RELATED RISKS)	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
INCOME MANAGEMENT ARRANGEMENTS (COVID RELATED RISKS)	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CYBER SECURITY ARRANGEMENTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
DISTRIBUTION OF DEVICES TO DIGITALLY EXCLUDED LEARNERS (COVID RELATED RISKS)	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CORPORATE ESTATES			
CORPORATE LANDLORD COMPLIANCE	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ASSET MANAGEMENT	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PROSPERITY, DEVELOPMENT & FRONTLINE SERVICES			
HIGHWAYS & STREETCARE			
EMERGENCY PLANNING	HIGH	CONSULTANCY	GOVERNANCE
COMMUNITY RECYCLING CENTRES	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PROSPERITY & DEVELOPMENT			
CAPITAL PROJECTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT

REGENERATION & PLANNING	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
BUILDING CONTROL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
COMMUNITY & CHILDREN'S SERVICES			
ADULT SERVICES			
WCCIS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
DEPUTYSHIP	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ROTA MANAGEMENT REVIEW	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ADAPTION & COMMUNITY EQUIPMENT	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CARERS ASSESSMENTS	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
THE REVIEW TEAM	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CHILDREN'S SERVICES			
SECTION 17 PAYMENTS (PREVENTION PAYMENTS)	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ADOPTION SUPPORT & FOSTER CARER PAYMENTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CONTRACT MANAGEMENT PLACEMENTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PUBLIC HEALTH & COMMUNITY SERVICES			
LLWYDGOED CREMATORIUM	LOW	ASSURANCE	OVERALL CONTROL ENVIRONMENT
REGISTRATION SERVICES	LOW	ASSURANCE	OVERALL CONTROL ENVIRONMENT
EDUCATION & INCLUSION SERVICES			
EDUCATION IMPROVEMENT SERVICES			
SAFEGUARDING ARRANGEMENTS - CAPITA ONE	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
GOVERNOR SUPPORT - PROVISION OF GOVERNING BODY INFORMATION	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ATTENDANCE & WELLBEING SERVICE			
EXCLUSIONS & ATTENDANCE	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ACCESS & INCLUSION SERVICE			
STEP 4 PROVISIONS	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
TY GWYN PUPIL REFERRAL UNIT	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
SPECIAL SCHOOLS			
PARK LANE SPECIAL SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
SPECIAL SCHOOL SELF ASSESSMENT PROGRAMME & ANNUAL REPORT	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PRIIARY SCHOOLS			
ALAW PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT

CEFN PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CRAIG YR HESG PRIMARY	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CILFYNYDD PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
COEDPENMAEN PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CWMBACH CHURCH IN WALES PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CYMMER PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
DOLAU PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
FFYNON TAF PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
LLANTRISANT PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
MAESYBRYN PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PENDERYN COMMUNITY PRIMARY	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PENYWAUN PRIMARY SCHOOL	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PRIMARY SCHOOL SELF ASSESSMENT PROGRAMME & ANNUAL & REPORT	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
SECONDARY / ALL THROUGH SCHOOLS			
HAWTHORN HIGH SCHOOL - FOLLOW UP REVIEW	HIGH	ASSURANCE	REQUESTED BY AUDIT COMMITTEE
BRYNCELYNNOG COMPREHENSIVE SCHOOL	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
FERNDALE COMMUNITY SCHOOL	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
YSGOL GYFUN RHYDYWAUN	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
SECONDARY / ALL THROUGH SCHOOL SELF ASSESSMENT PROGRAMME & ANNUAL REPORT	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
RCT - REGIONAL CONSORTIA SCHOOL IMPROVEMENT GRANT (RCSIG)	HIGH	ASSURANCE	GRANT CERTIFICATION
RCT - EDUCATION IMPROVEMENT GRANT	HIGH	ASSURANCE	GRANT CERTIFICATION
RCT - PUPIL DEVELOPMENT GRANT	HIGH	ASSURANCE	GRANT CERTIFICATION
RCT - POST 16 GRANT CERTIFICATION (DCELLS)	HIGH	ASSURANCE	GRANT CERTIFICATION
WHOLE AUTHORITY ARRANGMENTS			
INFORMATION MANAGEMENT	HIGH	ASSURANCE	GOVERNANCE
PPE STOCK CONTROL ARRANGEMENTS	MEDIUM	ASSURANCE	OVERALL CONTROL ENVIRONMENT
ANTI-FRAUD, BRIBERY & CORRUPTION	HIGH	ASSURANCE	FRAUD, BRIBERY & CORRUPTION
SCHEME OF DELEGATION	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
PERFORMANCE MANAGEMENT ARRANGEMENTS	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CORPORATE SAFEGUARDING (COVID RELATED RISKS)	HIGH	ASSURANCE	OVERALL CONTROL ENVIRONMENT
CENTRAL SOUTH CONSORTIUM JOINT EDUCATION SERVICE			

CSC - REGIONAL CONSORTIA SCHOOL IMPROVEMENT GRANT (RSIG)	HIGH	ASSURANCE	GRANT CERTIFICATION
CSC - PUPIL DEVELOPMENT GRANT	HIGH	ASSURANCE	GRANT CERTIFICATION
CSC - GENERAL LEDGER	LOW	ASSURANCE	CORE FINANCIAL SYSTEM
AMGEN			
AMGEN - PAYROLL	MEDIUM	ASSURANCE	CORE FINANCIAL SYSTEM
AMGEN - DEBTORS	MEDIUM	ASSURANCE	CORE FINANCIAL SYSTEM
AMGEN - CREDITORS	MEDIUM	ASSURANCE	CORE FINANCIAL SYSTEM
AMGEN - GENERAL LEDGER	LOW	ASSURANCE	CORE FINANCIAL SYSTEM