Report to: Audit Committee

Date: 21 November 2025

By: Chief Operating Officer

Title of report: Internal Audit Progress Report – Quarter 2 (01/07/25 – 30/09/25)

Purpose of report: To provide the Audit Committee with an update on all internal audit

and counter fraud activity completed during the quarter, including a summary of all key findings. To also provide an update on the

performance of the internal audit service during the period.

RECOMMENDATIONS: Audit Committee is recommended to note the report and consider any further action required in response to the issues raised.

# 1. Background

1.1 This progress report covers work completed between 1 July 2025 and 30 September 2025.

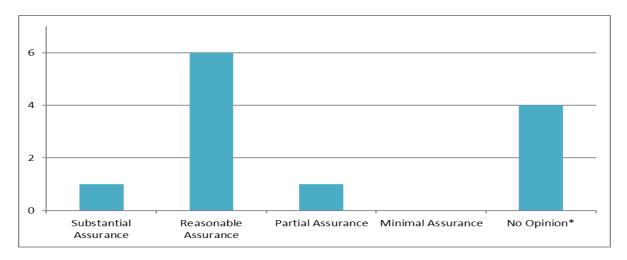
### 2. Supporting Information

2.1 The current annual plan for internal audit is contained within the Internal Audit Strategy and Annual Plan 2025-26 which was approved by Audit Committee on 28 March 2025.

#### 3. Conclusion and Recommendations

- 3.1 Key audit findings from final reports issued during Quarter 2 are summarised in Annex A.
- 3.2 Overall, of the 8 audits finalised during the quarter in which a formal audit opinion was given, 1 received an audit opinion of 'substantial assurance', 6 received 'reasonable assurance' opinions, and there was 1 partial assurance opinion, relating to a school. There were no minimal assurance opinions.

#### Graph to show assurance levels of formal audits completed in Quarter 2



<sup>\*</sup>No opinion – typically, this tends to be proactive advice and support activity where, due to the advisory nature of the audit work, provision of formal assurance-based opinions is not appropriate. It also includes grant certification work.

- 3.3 Although the same range of internal audit opinions is issued for all audit assignments (where an opinion is relevant), it is necessary to also consider the level of risk associated with each area under review when drawing an opinion on the Council's overall control environment. Taking into account these considerations, the Chief Internal Auditor continues to be able to provide assurance that the Council has in place an effective framework of governance, risk management and internal control.
- 3.4 The overall conclusion above has, therefore, been drawn based on all audit work completed in the year to date and considers the management response to audit findings and the level of progress in subsequent implementation. As at the end of quarter 2, it was confirmed that 8 of the 8 (100%) high-risk actions due to be implemented on a 12-month rolling basis had been actioned.
- 3.5 Progress against performance targets (focussing on a range of areas relating to the internal audit service) can also be found in Annex A (section 5). Whilst the majority are rated as on target (green), 1 target has not been achieved; this is in respect of audit days delivered where the team are slightly down on days. This is partly due to maternity leave, as reported previously. The team will continue to endeavour to address this slight shortfall during the remainder of the year through utilising resources from across Orbis Internal Audit.

# **ROS PARKER**

**Chief Operating Officer** 

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### **BACKGROUND DOCUMENTS:**

Internal Audit Strategy and Annual Plan 2025/26