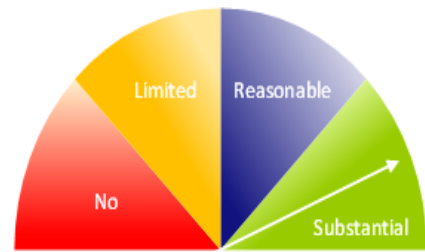


Audit Objective

The objective of this audit is to review the process for referring, assessing, investigating and managing potential whistle-blowing allegations and the extent to which these arrangements are clear and accessible to staff, consistent with the Council's whistle-blowing procedure.

Assurance Opinion



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.

Number of Actions

Priority	Number
Priority 1	0
Priority 2	0
Priority 3	3
Total	3

Risks Reviewed

1. Allegations of potential whistle-blowing are not referred, assessed, investigated and managed appropriately resulting in financial and reputational damage and legal recourse.

Assessment

Medium

Key Findings



Clear guidance is in place to make whistle-blowing reports which include appropriate arrangements to protect whistle-blowers from any adverse actions following a disclosure. We noted, however, that the whistle-blowing policy does not include a date for review or version control.



Whistle-blowing arrangements are included in the staff code of conduct and as mandatory staff training. Agency workers receive a handbook which includes whistle-blowing arrangements. Although this indicates a reasonable level of awareness, enhancements could be made to highlight whistle-blowing arrangements for volunteer workers and publicise successful prosecutions more widely.



Although reports to Audit Committee include the number of referrals and their status, they do not include summary outcomes or learning points.



Whistle-blowing events are captured on a central information system through to completion and there is a response protocol to direct referrals for investigation.

Audit Scope

The primary purpose of the audit was to review the process for referring, investigating and managing potential whistle-blowing allegations and to ensure that arrangements are clear and accessible to staff and consistent with the Council's whistle-blowing procedure.

We met with the Audit Manager and Prosecution Officer to obtain an understanding of the processes and review controls in place for the whistle-blowing process.

In addition, we surveyed a cross section of 100 staff to evaluate their awareness and confidence in reporting a whistle-blowing event.

Other Relevant Information

This Substantial assurance opinion has been given on the basis that the majority of key controls have been assessed as being in place and operating effectively. We are satisfied that there are clear procedures and guidance for reporting whistle-blowing events, with appropriate mechanisms to protect whistle-blowers. Referrals are investigated appropriately and recorded on a central system. Monitoring and reporting is provided to management in a timely manner.



Appendix 1

Findings & Action Plan

Finding	Action	
The Whistle-blowing Procedure is undated and lacks version control.	We recommend that the Whistle-blowing Procedure should be formally approved and subject to version control.	
	Priority	3
	Responsible Officer	Chief Internal Auditor
	Timescale	30 June 2021
Finding	Action	
More could be done to raise awareness of the Whistle-blowing Procedure and outcomes. For example, there is no formal process to ensure that volunteer workers are made aware of the Whistle-blowing Procedure. Additionally, the organisation does not publicise effective instances of prosecuted fraud within external organisations to raise awareness of successful whistle-blowing cases.	We recommend that a documented procedure is created to provide guidance and awareness of the Whistle-blowing process for all volunteer workers and publicises successful external prosecutions to increase awareness within the organisation.	
	Priority	3
	Responsible Officer	Chief Internal Auditor
	Timescale	31 March 2021
Finding	Action	
Reports are provided to Audit Committee which detail the quantity of whistle-blowing claims, status of investigations and progressing cases, however, exclude summary outcomes. Internal Audit have been responsible for whistle-blowing since April 2020 and have confirmed their intention to report fraud investigation outcomes as part of the Annual Fraud report to Audit Committee annually in July.	We recommend that outcomes are summarised within the reports, which will enable thematic areas or trends to be identified.	
	Priority	3
	Responsible Officer	Chief Internal Auditor
	Timescale	31 July 2021



As part of this audit, we surveyed a cross section of 100 staff (80 staff and 20 agency workers) to evaluate their awareness and confidence in reporting a whistle-blowing event. We received an overall response of 21 surveys which we have summarised below.

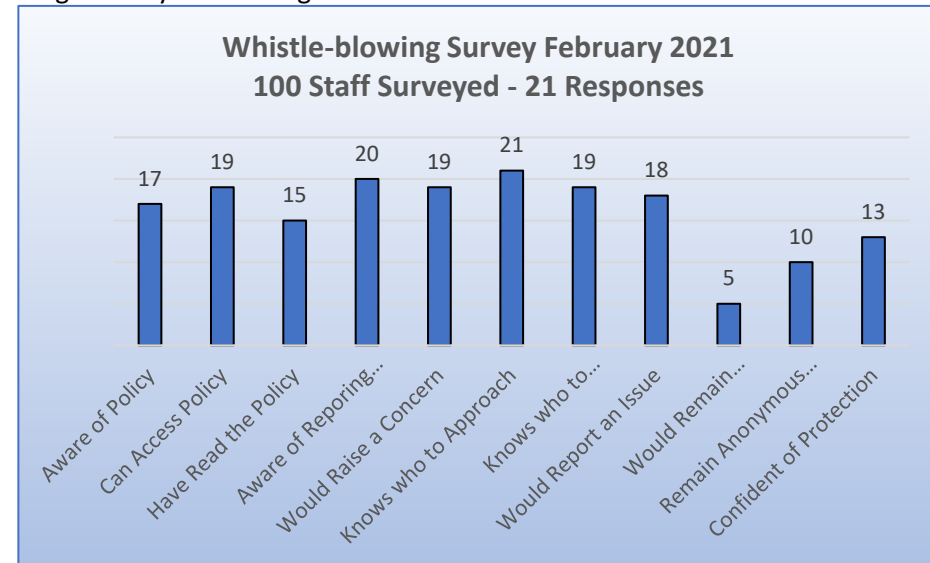
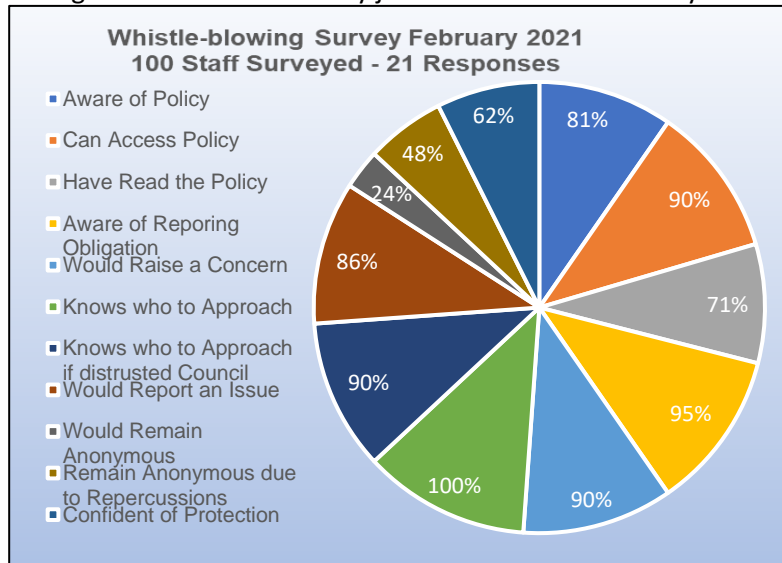
- Awareness of the Council's Whistleblowing Policy – 17 staff aware, 2 staff vaguely aware, 1 staff aware but has not read it and 1 staff unaware.
- Awareness of where to access the Policy – 19 staff aware and 2 staff unaware.
- Staff who have read the Policy - 15 staff have read the Policy, 5 staff have not read the Policy and 1 staff was unsure.
- Aware of the obligation to raise a concern under the Policy - 20 staff aware and 1 staff unaware.
- Staff who would raise a concern under the Policy - 19 staff would raise a concern and 2 staff were unsure.
- Staff knew who to approach to raise a concern - all staff confirmed either their line manager, HR, Internal Audit or the hotline.
- Who to report to if they distrusted the Council – 19 staff knew who to report to and 2 staff were unsure.
- Of the 21 staff surveyed, 3 staff were unsure if they would report a matter as it would depend on the issue.
- Reporting anonymously - 5 staff would report a concern anonymously, with 16 staff stating that it would depend on the circumstances. 10 staff felt they may report a concern anonymously due to repercussions or affecting their working relationships.
- Confidence that the Council would offer protection - 13 staff felt confident that the Council would offer protection when reporting a whistleblowing concern, 5 staff were unsure and 3 staff were not confident. Of those who were unsure or not confident, 2 staff felt this was due to a lack of accountability and the Council not keeping promises over the years.

Other comments:

"I think reminders about the importance of whistleblowing could be helpful and would reinforce a positive whistleblowing culture within the council."

"If any data on whistleblowing could be made available, then this would reassure people that the process was robust and secure."

"The training session when I recently joined the council was very informative and a good way of ensuring new staff are informed."





Audit Framework and Definitions

Assurance Definitions	
No	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.
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.
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.
Substantial	A sound system of governance, risk management and controls exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

Corporate Risk Assessment Definitions	
Risk	Reporting Implications
High	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.
Medium	Issues which should be addressed by management in their areas of responsibility.
Low	Issues of a minor nature or best practice where some improvement can be made.

Categorisation of Actions	
In addition to the corporate risk assessment, it is important that management know how important the recommendation is to their service. Each action has been given a priority rating at service level with the following definitions:	
Priority 1	Findings that are fundamental to the integrity of the service's business processes and require the immediate attention of management.
Priority 2	Important findings that need to be resolved by management.
Priority 3	Finding that requires attention.