

Title of report	Audit and Assurance Committee report to Council
Public	Public
Summary/purpose of report	To make recommendations from the Audit and Assurance Committee
Recommendations	<p>The Committee recommends that:</p> <ol style="list-style-type: none"> 1. the Council accepts that the assurance report presents a true and fair view of the SSSCs performance towards achievement of strategic objectives, financial management and risk identification and management. In particular that <ol style="list-style-type: none"> a. operational performance as measured by strategic key performance indicators give confidence that the SSSC is delivering as forecasted to meet strategic objectives agreed with the Sponsor Department b. financial performance is consistent with forecasted spend and this does not present concern relating to year-end outturn of approved budget c. operational delivery and financial expenditure are consistent 2. the Council approves <ol style="list-style-type: none"> a. the Committee's Annual Report to Council at Appendix 4 to this report 3. the Council notes <ol style="list-style-type: none"> a. the Committee approved extensions to the time allowed for completion of three audit recommendations b. the Committee approved the draft external audit planning report for 2023/24 c. the Committee approved the revised Financial Regulations and Debt Management Policy d. the Committee approved the Draft Annual Governance Statement for

	inclusion in the Annual Report and Accounts for 2023/24.
Author	Alan Baird, Chair, Audit and Assurance Committee
Link to Strategic Plan	<p>The information in this report links to:</p> <p>Outcome 1: Trusted People who use services are protected by a workforce that is fit to practise.</p> <p>Outcome 2: Skilled Our work supports the workforce to deliver high standards of professional practice.</p> <p>Outcome 3: Confident Our work enhances the confidence, competence and wellbeing of the workforce.</p> <p>Outcome 4: Valued The social work, social care and children and young people workforce is valued for the difference it makes to people's lives.</p>
Link to Risk Register	Risk 3: We fail to meet corporate governance, external scrutiny and legal obligations.
Impact Assessments	An Impact Assessment (IA) was not required.
Documents attached	<p>Apx 1 - Assurance report at 31 March 2024</p> <p>Apx 2 - Risk Register</p> <p>Apx 3 - Assurance Map</p> <p>Apx 4 - Audit and Assurance Committee Annual Report to Council</p>
Background papers	Draft minutes of meeting on 30 April 2024

INTRODUCTION

1. As set out in the Executive Framework Document and Scheme of Delegation, accountability for strategic oversight remains with the SSSC Council. The Council has delegated responsibility for oversight and scrutiny of achievement of operational key performance indicators, monitoring of Financial Performance and Strategic Risk Management to the Audit and Assurance Committee.
2. This report records the recommendations of the Audit and Assurance Committee to SSSC Council following the Committee's meeting on 30 April 2024.

ASSURANCE REPORT

3. The Committee reviewed the assurance report as of 31 March 2024 relating to the activities of the SSSC. Appendix 1 to this report is the assurance report considered by the Committee.

Finance

4. The Committee was advised that since the last meeting, the budget deficit has reduced from £3.3 million to £3.1 million.
5. Maree Allison advised Committee on the changes to the general reserve since the last meeting. These appeared later in the year due the staff pay award, once it was actually applied, costing less than expected; panel members' fees were less than budgeted for. This is not a predictable amount as it is based on the numbers and types of Fitness to Practice (FtP) cases being referred and heard by FtP panels; we received greater than expected income from registration fees. This should become more accurately estimated once the Future Proofing Programme is in place; the digital budget did not go into overspend as anticipated but stayed on track.

Strategic Performance Indicators

6. Committee discussed risks including any risks relating to numbers of unqualified workers. It was noted that a deep dive on risks is being included into one of this year's development sessions, with the date to be confirmed.
7. Members were assured that the number of open FtP case numbers is now sitting at a good level, at approximately 1800 open cases. Committee was advised that this is a realistic target level.

HR data

8. Committee noted that the staff absence figures are continuing to improve.

Risk Register

9. Committee noted there were no proposed changes to the Risk Register by Executive Management Team at this time.

Assurance Map

10. Members noted the Assurance Map.

AUDIT REPORTS

11. The Committee was presented with the following audit reports from Henderson Loggie:
Partnership Working (external)
Annual report for 2023/24
Follow-up review report 2023/24.
12. The Partnership Working (external) report provided a good level of assurance with only one recommendation which was accepted by management, that an annual partnership review be published.
13. The annual report for 2023/24 gave an overview of the work carried out by the internal auditors and reports submitted to Committee over the year. The report also provided a summary of the findings from each audit carried out.
14. The follow-up review report for 2023/24 presented the Committee with detail on progress on recommendations from the audit reports. Committee noted that where progress had been partially implemented this continued to be reviewed until completion. Progress from audits in the previous year's follow up report was also included.
15. Committee reviewed the internal/external audit tracker and approved revised completion dates for three recommendations.
16. The Committee took assurances from the auditor's reports and management's updated responses. These show that action is being taken where there are recommendations from the auditors and that appropriate processes are followed where completion dates are requested to be extended.

EXTERNAL AUDIT PLANNING REPORT 2023/24

17. Committee was presented with the draft external audit planning report for 2023/24. Committee noted that there is a timeline for the process in place and there are no delays anticipated.

FINANCIAL REGULATIONS AND DEBT MANAGEMENT POLICY

18. The Financial Regulations and Debt Management Policy are reviewed annually. The Committee approved the revised editions presented. Committee took assurance from the process for annual review to ensure these are kept up to date and relevant.

DRAFT ANNUAL GOVERNANCE STATEMENT

19. Committee reviewed and approved the draft Annual Governance Statement from the Interim Chief Executive along with the Certificates of Assurance from each directorate as part of the process for the Annual Report and Accounts. Committee noted there were no significant issues to report. Committee was given assurance that Business Continuity processes and documents were in place and scenario testing was imminent. Any issues would be reported and, if required, the risk register updated.

DRAFT ANNUAL COMMITTEE REPORT TO COUNCIL

20. Committee approved the draft annual report to Council which summarised the work of the Committee over the year. It forms part of the process for the annual report and accounts and Committee recommended that the report be submitted to Council for approval.
21. The Annual Report is appended to this report at Appendix 4, for Council approval.

ANNUAL FRAUD, BRIBERY AND CORRUPTION ASSURANCE REPORT

22. Committee reviewed the annual assurance report on fraud, bribery and corruption. Members noted the termination of the contract between the Counter Fraud Service and the SSSC, however noted also that the Head of Legal and Corporate Governance, who is the Fraud Liaison Officer (FLO) will draft a revised Counter Fraud Framework tailored to the SSSC. Committee also noted that the FLO will be undergoing training in this area to support her in this role.
23. The Committee took assurances from the report that there were no incidences of fraud, bribery or corruption detected in the year 2023/24

and that a new Counter Fraud Framework is being put in place following the end of the arrangements with the Counter Fraud Service.

CONSULTATION

24. No specific stakeholder engagement was necessary in the preparation of this report as this forms a summary of the matters discussed at the Audit and Assurance Committee earlier in the meetings cycle.

RISKS

25. We have an averse risk appetite to governance matters. This report gives assurances to Council that the Committee is carrying out its remit.

IMPLICATIONS

Resourcing

26. There are no resource implications arising from this report.

Compliance

27. There are no compliance implications arising from this report.

IMPACT ASSESSMENT (IA)

28. An IA was not necessary as this report relates to internal governance matters.

CONCLUSION

29. This report, appendices and background minutes give assurances to Council that the Audit and Assurance Committee is carrying out its remit in accordance with the terms of reference contained in the Code of Corporate Governance, including approval of its Annual Report.
30. The Committee requests that Council takes assurance, following consideration of the documents, that the Committee has been presented with a fair view of the operational and financial performance and risk facing the SSSC.