

<b>REPORT TO:</b>		<b>AUDIT COMMITTEE</b>	
<b>DATE:</b>		16 February 2026	
<b>PORTFOLIO:</b>		<b>Councillor Vanessa Alexander - Resources and Council Operations</b>	
<b>REPORT AUTHOR:</b>		Mark Beard – Head of Audit & Investigations	
<b>TITLE OF REPORT:</b>		<b>AUDIT REPORTS &amp; KEY ISSUES – PROGRESS REPORT FOR THE PERIOD DECEMBER 2025 – JANUARY 2026</b>	
<b>EXEMPT REPORT (Local Government Act 1972, Schedule 12A)</b>	<b>No</b>	Not applicable	
<b>KEY DECISION:</b>			
	<b>No</b>	If yes, date of publication:	

### 1. **Purpose of Report**

1.1 To inform members of the Audit Reports issued during the period December 2025 to January 2026 and bring to the attention of the Committee what the key issues were.

### 2. **Recommendations**

2.1 I recommend that Audit Committee:  
 ➤ note the content of this report for informational purposes.

### 3. **Reasons for Recommendations and Background**

3.1 This report covers the period of December 2025 to January 2026. The audit areas and any key issues detailed at Appendix 1.

3.2 Members should be aware that the number of audit reports that are issued between each Committee meeting is subject to variation dependent on the size of the audit and any non-routine audit work, such as investigations, that the Team may be involved in. Therefore, for the purpose of reporting, only the audit reports fully completed, issued and agreed will be included.

3.3 Any investigations that may be carried out will not be included as a matter of routine in this report, particularly if they relate to a specific individual or individuals.

3.4 There is a target of 98% of the audit plan to be completed by the end of the current financial year in terms of audit days completed. As the audit team complete timesheets which then feed into the audit plan, it is possible to state the progress to date and the projected end of year position if that data is extrapolated. Therefore:-

Position as at end of January 2026 = 80.53% of the plan completed  
 Projected out-turn position for 2025/26 = 96.63% of the plan completed

3.5 The position at the end of January 2026 can be broken down as follows:-

Month	% of the Plan Completed that Month
April 2025	7.35%
May 2025	6.57%
June 2025	5.40%
July 2025	8.06%
August 2025	8.19%
September 2025	12.15%
October 2025	8.47%
November 2025	7.97%
December 2025	7.23%
January 2026	9.14%

**4. Alternative Options considered and Reasons for Rejection**

4.1 Not applicable as the report is for informational purposes only.

**5. Consultations**

5.1 No consultations required as this report is based on data and information held by the audit team based on the work completed.

**6. Implications**

<b>Financial implications (including any future financial commitments for the Council)</b>	There are no financial implications arising from this report
<b>Legal and human rights implications</b>	There are no legal or human rights implications arising from this report.
<b>Assessment of risk</b>	Risks are taken into consideration during the audit process itself; there is no direct risk implication from this report.
<b>Equality and diversity implications</b>	This report is produced for information awareness of the progress of the Audit Team

A [Customer First Analysis](#) should be completed in relation to policy decisions and should be attached as an appendix to the report.

against the annual Internal Audit Plan. The Audit Planning process has had an equality impact assessment which remains valid, and it is not necessary to update this with a Customer First Analysis currently. The individual audit assignments may, in some cases, feed into the needs of equality and diversity issues within individual service areas of the Council

7. **Local Government (Access to Information) Act 1985:**  
**List of Background Papers**

7.1 No background papers were necessary for the preparation of this report.

## **APPENDIX 1**

### **AUDIT COMMITTEE – 16 February 2026**

#### **Summary of the main issues arising from audits carried out December 2026 – January 2026**

##### **Leasing Arrangements:-**

###### **Audit Assurance Opinion Issued:- Substantial assurance**

*The work undertaken showed there is generally a sound system of internal control designed to meet service objectives, and controls are generally being applied consistently. However, some weaknesses in the design and / or inconsistent application of controls put the achievement of particular objectives at risk.*

- The audit found that whilst there were good overall records kept of the process, there had been 6 disposals of vehicles where the Asset Register had not been updated to reflect the disposal. It was agreed with Management that the Asset Register would be updated to reflect the disposals that had not been removed and steps taken to ensure it is regularly updated in future.

##### **Facilities Team:-**

###### **Audit Assurance Opinion Issued:- Substantial assurance**

*The work undertaken showed there is generally a sound system of internal control designed to meet service objectives, and controls are generally being applied consistently. However, some weaknesses in the design and / or inconsistent application of controls put the achievement of particular objectives at risk.*

- The audit highlighted clarification was needed as to which service is responsible for repairs to damaged fences and playgrounds within Parks. Additional clarity was required in relation to the Levelling Up acquisitions in determining who is responsible for repairs and maintenance e.g. Market Chambers and Burtons Chambers due to capacity issues within the Facilities Team. It must be noted that Management has already agreed to 2 Agency Staff to create some temporary additional capacity within the Facilities Team and at the time of writing this report, both of the Agency Staff were in post..

##### **Accrington and Great Harwood Town Centre Greening:-**

###### **Audit Assurance Opinion Issued:- Substantial assurance**

*The work undertaken showed there is generally a sound system of internal control designed to meet service objectives, and controls are generally being applied consistently. However, some weaknesses in the design and / or inconsistent application of controls put the achievement of particular objectives at risk.*

- Whilst no recommendations were issued by Internal Audit, this review did not get the highest level of assurance due to a risk which was present at the time of the audit engagement.
- At the time of the audit engagement, the Authority was spending UKSPF monies at risk as the grant funding agreement had not been signed with Lancashire County Council as Accountable Body for the funding, however, all other Lancashire Districts were in the same position. At the time of the audit, the agreement was due to be signed very soon.

### **ICT Security Policy:-**

#### **Audit Assurance Opinion Issued:- Comprehensive assurance**

*The work carried out within this audit assignment is in conformance with the Global Internal Audit Standards. The work undertaken showed a sound system of internal control which is designed to meet the service objectives, in addition the work carried out showed controls are consistently being applied.*

- No issues arising.