Southern Internal Audit Partnership

Assurance through excellence and innovation

New Forest District Council

Internal Audit Report

Review of outstanding management actions

16 June 2025

Prepared by: Laura Hutchison

FINAL REPORT



1. Introduction

- 1.1. Management actions are the corrective, or improvement measures that management agrees to implement based on the results of an internal audit. These actions are documented in the audit report and tracked until completion.
- 1.2. As reported to EMT and the Audit Committee within the February 2025 internal audit progress report, there are some long standing management actions which have needed to be reconsidered within the current context facing the Council. As time has progressed, on occasion, the actions and timescales originally agreed have become less relevant and outdated and it has therefore become increasingly difficult to track the actions through to completion. We have worked with the Council to re-assess, where relevant, if the originally agreed actions: -
 - are still relevant and if so, the expected timescales for completion,
 - have become superseded due to alternative action(s) taken which has addressed the risks identified,
 - will be taken forward within wider corporate initiatives and if so, how best to monitor the progress and completion, or
 - whether action(s) will no longer be taken, and any residual risk is accepted (if applicable).
- 1.3. We are grateful to Donna Langfield, Josie West and Paul Whittles for their assistance during the course of the work.

2. Circulation List

- 2.1. This document has been circulated to the following:
 - Alan Bethune Strategic Director Corporate Resources & Transformation
 - James Carpenter Strategic Director Place, Operations and Sustainability
 - Richard Knott Strategic Director Housing & Communities
 - Paul Whittles Assistant Director Finance
 - Donna Langfield Strategic Support Manager
 - Josie West Strategic Procurement Manager



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3. Summary Findings

The table below summarises the current position where: -

- 3/24 actions have been completed.
- 11/24 actions are still relevant with new target dates agreed and will continue to be tracked through to completion.
- 10/24 actions will not be taken forward as originally agreed and will therefore not be tracked through to completion.

Section 4 of the report details the original agreed action, the responsible officer update and rationale for why the action will not be taken forward as originally stated.

Management Actions							
Completed 3							
Continue tracking	11						
Stop tracking	10						
Total	24						



4. Detailed Findings

Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
AUDIT: Fleet management (follow-up phase 2)		
MA: 2.1 There is a monthly report that has been	Through finance meetings and reporting to capital board plus 1-2-1	No.
compiled to include budgets, sickness absence,	meetings with Transport Managers, Line Managers can manage	
replacements programme and progress on targets.	budget, sickness etc. There are our capital boards meetings annually,	Alternative
Required resource is not yet in place to complete this	fleet replacement is reported at these and against the Capital	action taken
regularly. A review of resource levels is needed. In	programme.	which has
addition, this relates directly with the current plan, that		addressed the
runs alongside the Fleet modernisation programme (Fleet	Alternative governance and reporting are in place to mitigate this risk.	risks identified.
Review), that is yet be agreed.		
Target Date: 30/9/23 Priority: Medium		Stop tracking.
Responsible Officer: Liz Mockeridge, Service Manager –		
Waste and Transport		
MA: 6.1 The fuel usage is the responsibility of two areas.	A new supplier has been appointed for fuel cards. The resources and	No.
Bunkered fuel is managed by Housing and Fuel cards by	processes have still to be agreed.	
Transport (administered by the Administration team).		Still relevant
The Fuel card data be uploaded into the Bunkered fuel		with new target
data and reports run, such as MPG analysis. MPG analysis		date agreed
should record the vehicle type to aid with identification		30/11/25.
of issues. A standard monthly report could be run -		
usage, MPG, and CO2 emissions.		Continue
Consideration will be given to all elements of fuel being		tracking.
run by one department, which would require appropriate		
budget and resources allocated.		
Target Date: 31/3/24		
Priority: Medium		
Responsible Officer: Liz Mockeridge, Service Manager –		
Waste and Transport.		



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)	
AUDIT: Engineering Works 2022/23			
MA: 1.1 The issue of a single asset inspection officer has previously been raised at a senior management level through a report to EMT in June 2022 to seek additional resource. This was not approved. A review of the asset inspection process has been requested. Target Date: 31/3/24 Priority: High Responsible Officer: Steve Cook, Service Manager - Coastal	The Transformation Team is now progressing the review of asset inspections including resource, frequency and software as part of a larger piece of work. The risk of the reliance on a single asset inspection officer and the Business Continuity element will be developed through the new approach to Emergency Planning and Business Continuity (re the Business Continuity 2023/24 update below). A full review of Engineering works is also planned as part of the 2025/26 audit plan.	No. To be reassessed within the 2025/26 Transformation Programme Audit and Business Continuity Audit. Stop tracking.	
MA: 4.1 To explore options of developing an improved electronic filing system through the use of SharePoint. Now that this has been introduced into the council there is the opportunity to explore this. However, consideration will need to be given as to how operatives may utilise any such electronic filing system. Target Date: 31/3/24 Priority: Medium Responsible Officer: Steve Cook, Service Manager - Coastal	There is a new Job System in place this is live & running - Engineering works audit is included in the 2025/26 audit plan which will re-assess risks within the new processes and system.	Yes Original action complete	
MA: 6.1 This will be addressed in consideration of action 3.1 to discuss the consideration to improve the job log system. Target Date: 31/3/24 Priority: Low Responsible Officer: Steve Cook, Service Manager - Coastal	There is a new Job System in place this is live & running - Engineering works audit is included in the 2025/26 audit plan which will re-assess risks within the new processes and system.	Yes Original action complete	



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
AUDIT: Commercial Activities – Appletree Holdings 2023/24		
MA: 1.1 Lettings contract to be reviewed, to ensure it remains in line with CSOs. Target Date: 31/12/23 Priority: Medium Responsible Officer: Paul Whittles, Assistant Director – Finance.	The contract with New Forest Lettings was reviewed by the Estates & Valuation Manager. The contract has now expired. Expenditure with New Forest Lettings since 01/04/2022 is £12,750 which is within CSO limits therefore this action is no longer required. Any future requirements will be identified within BAU procurement processes.	No. Superseded – Action no longer required. Stop tracking.
AUDIT: Open spaces and playground safety checks 2022/23		Stop trucking.
MA: 1.1 Critically review assets and inspection timescales based on 'Risk and Likelihood' and formalise site and play equipment inspection schedule. (to be appended to policy, as set out in Action 1.2) Target Date: 31/3/24 Priority: High Responsible Officer: Roxanne King, Service Manager – Public Realm and Sustainability.	An EMT report has been submitted for June 2025, this will be reporting on all the outstanding actions from this audit and the way to move these forwards. A new Playground policy is being produced and require the Overview & Scrutiny to sign off therefore the delivery requires a revised date to 31 October 2025.	No Still relevant with new target date agreed 30/10/25 Continue tracking.
MA: 1.2 Open Spaces to draft a Playgrounds and Play Equipment Policy covering the sites and equipment where compliance responsibility rests with Open Spaces. The policy will set out the purpose, legal requirements, responsibilities, methodology, arrangements, and process, set out a review period frequency and append a schedule of sites and equipment. The policy is to be presented to EMT and consulted through safety panels.	Remaining actions still to be completed as detailed above.	No Still relevant with new target date agreed 30/10/25 Continue



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
Target Date: 31/3/24 Priority: High Responsible Officer: Roxanne King, Service Manager – Public Realm and Sustainability.		
MA: 2.1 The Assistant Director for Place and Operations to assign a lead Place and Operations Officer to undertake a fundamental review of the cross service arrangements where responsibility rests with Place and Operations. The review to consider compliance activities, roles, responsibilities, efficiencies, reporting and data collection, budgets, and compliance monitoring. The data gathered from the review will inform Observation 1, 1.2 and 1.2 Investigate Revisions options regarding current Asset Inspection Criterion and IT Systems to track actions. Target Date: 31/5/24 Priority: Medium Responsible Officer: Chris Noble, Assistant Director, Place & Operations.	A Lead Officer is in place. Remaining actions still to be completed as detailed above.	No Still relevant with new target date agreed 30/10/25. Continue tracking.
MA: 3.1 Introduce Annual Reviews of Open Space Play Parks and Play Equipment Risk Assessments. Target Date: 31/3/24 Priority: Medium Responsible Officer: Roxanne King, Service Manager – Public Realm and Sustainability & Heleana Aylett, Service Manager – Human Resources	This item is to be included in the New Playground Policy once all the outstanding actions have been reviewed by EMT (as detailed above).	No Still relevant with new target date agreed 30/10/25. Continue tracking.
MA: 5.1 Place and Operations to review the governance arrangements for health and safety compliance activities to provide oversight and assurance.	This item is to be included in the New Playground Policy once all the outstanding actions have been reviewed by EMT (as detailed above).	No



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
Target Date: 31/5/24		Still relevant
Priority: Medium		with new target
Responsible Officer: Roxanne King, Service Manager –		date agreed
Public Realm and Sustainability.		30/10/25.
		Continue
		tracking.
AUDIT: Housing - Electrical Safety Checks 2023/24		
MA: 4.3 The Housing Landlord Services Maintenance and Repairs Policy was introduced in November 2019. The	The policy has been to EMT and Overview & Scrutiny and has been signed off.	No
policy is on the review schedule to be undertaken during	It is still due to go TIG meetings panels in the summer, but meetings	Still relevant
2023/24.	are full, so the team is splitting over several meetings. The Portfolio	with new target
Target Date: 30/4/24	Holder will then be required to complete the sign off.	date 01/10/25.
Priority: Low		
Responsible Officer: Sophie Tuffin, Service Manager -		Continue
Housing Maintenance Programmes and Servicing.		tracking.
MA: 4.4 The Housing Landlord Services Void and Mutual	For Voids/Mutal Exchange, the Team has reviewed processes and	No
Exchange Policy was introduced in April 2020. The policy	minimising time properties are void. They are drafting a Policy and	
is on the review schedule to be undertaken during	EMT, O&S have signed this off.	Still relevant
2023/24.		with new target
Target Date: 30/4/24	It is still due to go TIG meetings panels in the summer, but meetings	date 01/10/25.
Priority: Low	are full, so the team is splitting over several meetings. The Portfolio	
Responsible Officer: Sophie Tuffin, Service Manager -	Holder will then be required to complete the sign off.	Continue
Housing Maintenance Programmes and Servicing		tracking.



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
AUDIT: Business Continuity 2023/24		
MA: 1.1 Ensure that critical activity response plans are in place for all relevant areas. Target Date: 31/12/24 Priority: Medium Responsible Officer: Joanne McClay, Service Manager - Environmental and Regulation	An SLA is now in place between New Forest District Council, Southampton (SCC) and Portsmouth City Councils, which started in April 2025. The Work programme has been drawn up and is now being reviewed. The Work Programme will be in place for Business Continuity (BC) and Emergency Planning and is looking at how BC is delivered across the whole Council. The Emergency Planning Officer is starting on the 23rd of June 2025 and will work with SCC.	No. To be reassessed as part of the 2025/26 Business Continuity audit.
	There are BC plans in place, but work programme will review if these plans are fit for purpose as the Risk Assessment methodology changed and work is now being completed with service areas in relation to their risk levels and focusing on the relevant high-risk areas. Training and roll out is coming and the Overall policy have been reviewed. Business Continuity and Emergency Planning Audits are due as part of 2025/26 Audit Plan.	Stop tracking.
MA: 2.1 Ensure that critical activity response plans are regularly reviewed and up to date. Target Date: 31/12/24 Priority: Medium Responsible Officer: Joanne McClay, Service Manager - Environmental and Regulation	As above	No. To be reassessed as part of the 2025/26 Business Continuity audit. Stop tracking.



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
AUDIT: Transformation Programme 2023/24		
MA: 1.1 All spend, and financial benefits realised will be tracked at project, workstream and programme level as	When the original audit was completed, there was no team in place. This team is now in place and the Manager joined September 2024.	No.
part of the benefits tracker that will be in place at the outset of implementation when the programme team is established.	Original agreed dates were unrealistic for delivery upon reflection by the Team.	To be reassessed within 2025/26 Transformation
Target Date: 31/7/24 Priority: Medium Responsible Officer: Rebecca Drummond, Assistant	The mobilisation phase is now coming to an end. Foundation pieces have been delivered, but benefit pieces are not there yet. A Benefits tracker is in place.	Programme Audit.
Director - Transformation	In light of LGR and subsequent impact upon the Transformation Programme, the original financial benefits will not be delivered, and this was communicated to Members. A Revised strategy and business case is to be presented. These measures are valid but need to be re-aligned to current expectations and priorities. Transformation is in the Audit plan for 2025/26.	Stop tracking.
MA: 2.1 Reporting framework including success measures and associated KPIs will be established, with each project having clearly articulated objectives, benefits and success measures captured at its inception. To be established by programme team. Target Date: 31/7/24 Priority: Medium Responsible Officer: Rebecca Drummond, Assistant	As above	No. To be reassessed within 2025/26 Transformation Programme Audit.
Director - Transformation		Stop tracking.



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
MA: 3.1 Lessons learnt to be established as part of project and programme governance and regularly	As above	No.
reviewed to ensure mitigation or alternative actions can		To be reassessed
be taken to deliver desired outcomes. To be established		within 2025/26
by programme team.		Transformation
Target Date: 31/7/24		Programme
Priority: Medium		Audit.
Responsible Officer: Rebecca Drummond, Assistant		
Director - Transformation		Stop tracking.
AUDIT: Accounts Payable 2023/24		
MA: 1.3 Review user guide and training procedures for	The accountant has been on maternity leave and this action was not	No.
purchase coordinators.	picked up in her absence. This is to be added back into the workplan	
Target Date: 31/3/25	but with a revised date of 31/03/2026.	Still relevant
Priority: Medium		with new target
Responsible Officer: Paul Whittles, Assistant Director –		date agreed
Finance.		31/03/26
		Continue
		tracking.
AUDIT: Animal Welfare Licensing 2023/24		g.
MA: 1.2 Determine the approval route for the policy and	The Policy has been reviewed, and minor amendments completed. A	No.
take appropriate steps to progress	decision record to be completed by the Portfolio Holder is still	Still relevant
this for sign off.	outstanding. This is identified as a Low-risk action as all procedure	with new target
Target Date: 31/12/24	notes follows DEFRA set guidelines, but the teams' resource hasn't	date agreed
Priority: Low	allowed for completion of the Officer Decision Notice as reactive	30/09/25.
Responsible Officer: Joanne McClay, Service Manager -	works within this area are always a priority.	
Environmental and Regulation		Continue
		tracking.



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
AUDIT: Housing Rents Reconciliation 2023/24		
MA: 3.2 Supplier is working on void reporting functionality and other reporting per the initial scoping document. A number of reports are in testing environment and this project is being actively managed to ensure reporting is appropriate and functions as expected, to include reporting that should replicate and replace some parts of the process in 3.1 Target Date: 30/9/24 Priority: High Responsible Officer: Sophie Tuffin, Service Manager - Housing Maintenance Programmes and Servicing	There have been issues with the suppliers, but a potential work around has been created. It would be better for the team if all information came from one report, but the suggested work around should enable two reports to be produced and complete this action. The team's focus is on this project and they are confident this will be completed by revised date.	No Still relevant with new target date agreed 30/06/25. Continue tracking.
AUDIT: Risk Management 2022/23		
M.A 5.2 An opportunity for a system log to be implemented within the Council's Learning Management System Target Date: 31/3/25 Priority: Medium Responsible Officer: James Clarke, Insurance and Risk Officer	Discussions with HR team have determined that a system log within the Council's learning system is achievable, which was the requirement of the management action. Further investigation showed that as this is only one-off training completed by new joiners and not an annually completed training requirement there is no value in moving this forward.	Yes Original action complete
MA: 3.1 The Policy does not mention inherent and residual risk and how these are to be defined. The revised Risk Management Policy to be taken to Audit Committee in January 2025. Target Date: 1/4/25 Priority: Medium Responsible Officer: Paul Whittles, Assistant Director – Finance.	This action is no longer applicable due to the implementation of the new Principal Risk Register and revised Risk Management Policy.	No. Superseded – Action no longer required. Stop tracking.



Management Action	Follow Up Position – NFDC Officer Update	Implemented (Y/N)
MA: 4.2 For Service Risk Registers format to align with the Strategic Risk Registers.	This action is no longer applicable due to the implementation of the new Principal Risk Register and revised Risk Management Policy.	No.
Target Date: 1/4/25 Priority: High		Superseded – Action no longer
Responsible Officer: Paul Whittles, Assistant Director – Finance.		required. Stop tracking.

5. Next steps

EMT have considered and agreed that:-

- the original, outstanding actions in relation to Engineering Works, Business Continuity and Transformation Programme Governance arrangements are written off, will no-longer be tracked through to completion as they currently stand, and will be re-evaluated and agreed within the corresponding 2025/26 Audits.
- where the original actions are still relevant and revised timescales have been provided, these will continue to be tracked through to completion.
- no further action is required in relation to Appletree Holdings and any future requirements will be identified within BAU procurement processes.
- no further action is required in relation to Risk Management due to the change in approach following the implementation of the principal risk register in line with the revised Risk Management Policy.



Audit Review	Report Date	Audit Sponsor	Assurance Opinion	Total Management Action(s)	Not Yet Due	Complete	Overdue		Revised target date / comment	
							L	M	Н	
Fleet Management (follow-up phase 2)	May 23	SM (W&T)	Reasonable	9	0	8		1		30/11/2025
Engineering Works	Aug 23	SM (C)	Limited	10	0	9				Stop tracking 1 action
Commercial Activities – Appletree Holdings	Oct 23	SM (E&V)	Substantial	1	0	0				Stop tracking 1 action
Open Spaces and Playground Safety Checks	Dec 23	G&SM	Limited	12	0	7		5		30/10/2025
Housing Asset Management – Electrical Safety Checks	Feb 24	SM (HM)	Reasonable	8	0	6		2		01/10/2025
Business Continuity	Mar 24	SM (E&R)	Reasonable	2	0	0				Stop tracking 2 actions
Transformation Programme – Governance Arrangements	May 24	ADT	Reasonable	3	0	0				Stop tracking 3 actions
Accounts Payable	Jun 24	FIN	Reasonable	5	0	4		1		31/03/2026
Animal Welfare Licencing	Jun 24	SM (E&R)	Reasonable	6	0	5	1			30/09/2025
Housing Rent Reconciliations	Jul 24	SM (HO)	Reasonable	5	0	4			1	30/06/2025
Pick Managament	Dec 24	ADFIN	Limited	14	0	12				Stop tracking 2
Risk Management	Dec 24	AUFIN	Limited	14	0	12				actions
Total							1	9	1	



Appendix 1 – Definitions of Assurance Opinions and Management Actions Priority Rating

Assurance Opinion	Framework of governance, risk management and management control
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	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.

Management Action	Current risk
High Priority	An immediate risk of failure to achieve objectives; system breakdown; or loss. Such risk could lead to an adverse
	impact on the organisation or exposure to criticism.
Medium Priority	Although not immediate, there is risk of failure to achieve objectives; system breakdown; or loss.
Low Priority	Areas that individually have no immediate risk impact, but where management would benefit from enhanced
	process/control or efficiencies.