Audit Review Title	Audit Opinion	Prospect for Improvement	Scope of Audit and Findings
	Adequate	N/A	The TMBC Risk Management Strategy makes clear the Council's approach to risk management, its commitment to aligning risk management with the objectives and strategies of the Council and its commitment to embedding risk management throughout the organisation, making it a part of everyday service delivery and decision making. Accompanying Risk Management Guidance is available to support Members and Officers with fulfilling their responsibilities, whilst this document does expand on how various activities should be undertaken, there are some areas where the guidance lacks sufficient detail and could be enhanced.
			Officers across the Council understand their role in relation to risk management and were able to accurately describe their responsibilities in line with those detailed in the TMBC Risk Management guidance. Officers were able to demonstrate a good understanding of risk management activities that should be undertaken and were able to provide explanation and examples of how those activities were completed within their areas. Some differences were however noted in relation to how some activities are carried out in different service areas, particularly in the identification of risks (Horizon Scanning) and the use of standard design risk registers to record risks. Differences were also noted on some risk registers in relation to the scoring criteria used when assessing risks. It was also noted that there is not always sufficient evidence to confirm review of risk registers or specific risks, controls, and mitigating actions within.
Risk Management			Internal Audit's overall Audit Opinion of Adequate is based on the following Key Strengths and Areas for Development:
			 Key Strengths The Risk Management strategy and accompanying risk management guidance is reviewed internally with appropriate frequency (annually) and is subject to approval through Audit Committee, Cabinet and finally Council. The Risk Management strategy clearly defines roles and responsibilities within the council with regards to risk. The accompanying guidance provides additional information regarding how risks at different levels should be allocated to service managers, service management teams and the senior management team. Risk registers are produced for all service areas together with a strategic risk register. The strategic risk register is being reviewed with appropriate frequency and there is evidence of these reviews taking place. The strategic risk register has recently been updated to include a direction of travel indicator to provide an "at a glance" view of whether risk scores have increased or decreased since the previous review. The service risks identified document provides a regular update for Audit Committee and Members regarding the management of ongoing risks. TMBC risk management guidance is clear regarding the requirements to communicate and escalate risks, officers interviewed correctly identified the procedures for escalating risks based on their risk rating.

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		-	 Audit were advised that risk management is a standing agenda item for team meetings and service team meetings. Areas for Development The Risk Management strategy has not been subject to external or peer review or compared against the strategies of other similar local authorities since it was developed. Although both the Risk Management strategy and the accompanying guidance are subject to annual internal review, there is no version control or document ownership information on the risk management guidance document. There are some areas where the risk management guidance lacks sufficient detail and could be enhanced. Risk assessment training has been provided by Zurich to some staff working in various teams although this has not extended to most of the Heads of Service or Service Managers interviewed. A standard TMBC risk assessment template is available as part of the risk management guidance document however there is little evidence to confirm that this is being used when assessing risks and determining appropriate controls/mitigating actions. This has resulted in a small number of risks appearing on risk registers with no controls or mitigating actions detailed 				
			 Review of the service risk registers identified several instances where the risk scoring method used was different to that detailed in TMBC risk management guidance. Risk registers take several different formats, not all the service risk registers record all information that is suggested as required in the template risk register included in the TMBC risk management guidance. Whilst discussions with heads of service and service managers confirmed that there are some good examples of proactive actions being taken in identifying new or emerging risks, horizon scanning activity to identify new or emerging risks is not consistently being undertaken across all areas of the Council. There is currently no place on the standard risk registers to record when and where a risk was escalated. It was also noted that, meeting minutes, (if available) do not consistently specifically detail agreement to add new risks to risk registers. Summary of management responses Number of issues Management Action Risk accepted and 				
			High Risk	raised 0	Plan developed N/A	no action proposed	
			Medium Risk 3 3 N/A				
			Low Risk	3	3	N/A	
			LOW IVION	3	3	IN/A	

Audit Review Title	Audit Opinion	Prospect for Improvement		Scope of	Audit and Findings		
Fire Safety	Substantial	•	Internal Audit have id could also be improve their fire risk assessments assessments. Internal Audit's overall Development: Key Strengths The risk asses TMBC are concequirement of a There is an uposition of the staff on StaffNote. There are good assessments alegislation. TMBC are coldepreventative fires are KPIston on the are suffered for Developments. Reports on the are suffered for Developments. Mandatory training no adequate monits. Summary of manage. High Risk Medium Risk	ed in the set-up of a new ent. I Audit Opinion of Substantial Sub	ses, with the monitoring third-party contractor for antial is based on the following followed and complete sessments every 6 money in place, as well as a sing their policy on a year nee (QA) processes in pland recorded in accordance occupants of the Gibso monitored and evaluated tents are being issued on the event of a fire. In a line of the Gibso monitored and evaluated tents are being issued on the event of a fire. In a line of the Gibso monitored and evaluated tents are being issued on the event of a fire. In a line of the Gibso monitored and evaluated tents are being issued on the event of a fire. In a line of the Gibso monitored and evaluated tents are being issued on the event of a fire. In a line of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are being issued on the first policy of the Gibso monitored and evaluated tents are the first policy of the Gibso monitored and evaluated tents are the first policy of the Gibso monitored and evaluated tents are the first policy of the Gibso monitored and evaluated tents are the first policy of the Gibso monitored and evaluated tents are the first policy of the Gibso monitored and evaluated tents are the first policy of the first policy of t	and oversight of training. The external quality assurbly the external quality and the external quality and the external quality are enough at least a biannual basis are enough Fire Warden are enough Fire Warden and the external quality assurbly the external quality assurbly as a complete and no action proposed Risk accepted and no action proposed N/A Complete	Areas for Areas for regulatory re for the lible to all lire safety ance and hold their
			Low Risk	N/A	N/A	N/A	1

Audit Review Title	Audit Opinion	Prospect for Improvement		S	cope of	Audit and Findings			
	Substantial	N/A	Castle planning docu two groups set up an and methodology doc	ment outlining the distribution of the dindustribution of the distribution of the distribution of the dist	ne purpos or variou his has n	ses of the project, scope is elements of the project of been updated as stage	s been developed, this in of the group, governanc at and also a Progress Da a 1 of the project has prog	e via the ashboard	
			Project updates are be	eing provided to	members	3			
			operation of Tonbridg place, and to propose	ge Castle and ge how TMBC utili evenue streams	rounds, uses the st	understand the different trategic asset of Tonbridg	to evaluate the current co activities that are current ge Castle and grounds to as possible significantly	tly taking generate	
Customer Services Review –			Risks and Issues - Each of the five concepts identified from the consultation exercise are now being evaluated using a model template to further review the feasibility of each option. Each evaluation includes a SWOT analysis relevant to the concept being explored as each option will have a different risk profile. Each evaluation will also include a Value proposition, KPI measures that would be in place and scoring criteria. Members will then be asked to identify which options they wish officers to consider further and each of those options will then be subject to a detailed risk assessment prior to any final decision being taken.						
Tonbridge Castle			The weaknesses and threats identified have not been developed into a project risk register.						
			Project Plans and Priorities - Project phases and timescales have been clearly defined.						
			Communications - There has been engagement with identified stakeholders in the form of the public consultation, the results of which have been published. Meeting minutes for Community and Environme Scrutiny Select Committee in October 2022 and Cabinet on 8th November where the most recent decision were made are published on the TMBC website.						
			There is not currently a Communication Strategy or Plan to cover the lifetime of the Project.						
			Summary of manage						
				Number of raised	issues	Management Action Plan developed	Risk accepted and no action proposed		
			High Risk	0		0	0		
			Medium Risk	1		1	0		
			Low Risk	1		1	0		

Audit Review Title	Audit Opinion	Prospect for Improvement	Scope of Audit and Findings
Estates Management			
Savings plan / Transformation			
IT Development			
Local Plan			
S106/CIL Governance			
Business Continuity Planning			
Parking Follow- Up			
Agile Board			
Castle Project			
Accounts Payable			