



Date: Thursday, 27 November 2025

Time: 10.00 am

Venue: The Council Chamber, The Guildhall, Frankwell Quay, Shrewsbury, SY3 8HQ

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AUDIT & GOVERNANCE COMMITTEE

TO FOLLOW REPORT (S)

8 First Line Assurance: ASC Outturn Update (Period 13) APPENDIX 1

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Appendix 1 – Recommendations and Management Action Plan

Fundamental	Significant	Requires Attention	Best Practice
Immediate action required to address a major control weakness which, if not addressed, could lead to material loss.	A recommendation to address a significant control weakness where the system may be working but errors may go undetected.	A recommendation aimed at improving the existing control environment.	Suggested action which aims to improve best value, quality or efficiency.

Rec No.	Recommendation	Rec Rating	Agreed Management Action	Position as @ 13 November 2025
1.	Implementing an interim corporate level review to compare actuals to forecasts to identify any significant variances that require explanation. Consideration should be given as to whether corporate level reporting (including budget monitoring reports to Cabinet) should also include actuals to provide transparency and support in scrutiny and challenge.	Fundamental	Action: Reporting of actuals based on gross expenditure will be in place for Period 6/Quarter 2 and will form part of the Cabinet Reporting. Responsible Officer: James Walton Target Implementation Date: End of September for P6 reporting	Reporting commenced from period 6 as planned, this recommendation has been implemented and is reflected in the Quarter 2 Financial Monitoring Report being presented to Cabinet on 19 th November.
2.	Ensuring there are clear records for decision making in relation to significant forecasts that differ significantly to actuals. The forecasts on 10122 differed significantly to the actuals throughout the year whilst the budget holder is ultimately responsible, a record that supports who was involved in undertaking the decision, why and when should be maintained to provide clarity.	Significant	Action: A review of spend areas will identify the highest risk areas that need addressing. These areas will be a combination of high value, high volatility and high risk. Where individual or combined cost centres are identified, these will form part of a regular, risk assessment process that will form part of the monthly monitoring process. A confirmation email following the budget meeting of the decisions and risks reviewed made will be shared by Finance. Any changes made to budgets outside of these meetings to be clearly confirmed to the budget holder. Any areas of risk identified will be escalated to leadership board. Responsible Officer: Cheryl Sedgley Target Implementation Date: Process identified October 2025, implemented fully across Council by December 2025.	High risk areas within the budget and key assumptions that have been taken within Finance to inform the high risk projections within the monitoring position will be summarised and documented in the monthly finance update for Leadership Board. This will be included for the first time in the P7 finance update.
3.	There should be a clear and documented process that details how savings should be reported on both the savings tracker and monitored within the general ledger and monthly budget monitoring reports.	Significant	Action: Training is available and has been rolled out. This will be documented and risk assessed. Outstanding higher risk areas will be targeted immediately. Formal documentation of processes will be a follow up process to provide a longer term and less intensive solution. Confirmation of requirements will be picked up as part of comprehensive BOSS/P6 Meetings in mid October 2025. Responsible Officer: Molly Sullivan Target Implementation Date: Requirements for training to be identified through BOSS meetings by mid October 2025, process documentation by December 2025. Training timetable to be set based on need.	Work is ongoing within Finance to verify savings that are being detailed in the service savings trackers for 2025/26, before confirming the figures within the corporate trackers and the ledger. This is a cumbersome process however given the changes to care that happen within the service, therefore a full review is needed to establish a more streamlined process for documenting and checking savings within the service. Work to review this process will be carried out through the remainder of this financial year to implement a revised and documented process from 2026/27 that all parties are aware of.
4.	Ensure there is sufficient knowledge management arrangements. Ensure detailed notes are held on high-risk/volatile budgets and how	Significant	Action: Develop procedure notes between Finance and budget holders on how budgets are put together, how risks are identified and monitored throughout the year.	Work has not yet commenced on this yet, but it is planned that this subject will be discussed and taken forward at the Finance Business Partner Collaboration Day in December to produce

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	they are monitored as well as how savings are identified, reviewed and reported.		Reporting to be developed to simplify oversight of budgets with identification of high risk areas to support oversight arrangements. Simplification of cost codes and formal accountability for these within service areas will help quantify and mitigate the risk. Responsible Officer: Natalie McFall/Finance Business Partners Target Implementation Date: Procedure notes to be in place from end of quarter 3 in line with reporting.	initial procedure notes. Then these will be reviewed during quarter 4 to ensure that the offer is consistent within finance across different services.
5.	Ensure there is a process to properly document, investigate and respond to any challenges raised regarding the robustness of estimates used within budget monitoring process. When identified, financial reporting errors should be properly discussed between Finance and the Service to reach an understanding on the causes and risk assessed as to whether it needs to be escalated.	Significant	Action: It is important to establish a culture enabling freedom to challenge within strong governance processes. Budget Holder and FBP processes must ensure that all areas are reviewed at least one a quarter will help manage this risk. This can be achieved through assessing the percentage budget holder review each period and flagging any budget holders that have not completed a review to their manager and/or Service Director for action. This addresses the risk, escalates where necessary and provides a safety net to alert when something does not look correct. Link to previous rec on escalation to leadership board. Responsible Officer: Molly Sullivan on behalf of FBPs Target Implementation Date: Period 6/October 2025	Monitoring has been developed to track the last date that the budget monitoring has taken place each month by the budget holder deadline. This highlights any areas where budgets are not being reviewed. This will be included in the monthly finance update for Leadership Board. This will be included for the first time in the P7 finance update.
6.	There should be a review on the volume of cost centres in ERP to reduce unnecessary coding and simplify reports. The structure within ERP should be reviewed to ensure it reflects corporate reporting and provides the information in a meaningful structure.	Requires Attention	Action: Reviewing cost centres will be looked at however would require significant resource to review, reduce and implement. The earliest this could be achieved would be from the next financial year. Interim arrangements will be put in place to look at improvements to reporting to produce meaningful information to improve budget oversight. Service to provide input on requirements for Finance to develop, Responsible Officer: Cheryl Sedgley/Natalie McFall Target Implementation Date: April 2026 for ERP, end of Q3 for reporting.	Discussions will be taking place in November to understand the short term improvement opportunities with the aim of implementing interim arrangements at the end of Q3.