



Audit and Governance Committee Westfields Middlewich Road Sandbach CW11 1HZ

Dear Audit and Governance Committee Members

2023/24 Audit Completion Report

We are pleased to attach our Audit Completion Report which replaces the interim report presented at the February 2025 meeting of the Audit and Governance Committee. This report summarises the status of our audit for the forthcoming meeting of the Audit and Governance Committee. We will update the Audit and Governance Committee at its meeting scheduled for 4 December 2025 on further progress to that date and explain the remaining steps to the issue of our final opinion.

The audit is designed to express an opinion on the 2023/24 financial statements and address current statutory and regulatory requirements. This report contains our findings related to the areas of audit emphasis, our views on Cheshire East Council (the Council) accounting policies and judgements and material internal control findings.

This report considers the impact of Government proposals, which have now been enacted through secondary legislation, to clear the backlog in local audit and put the local audit system on a sustainable footing. The proposals recognise that timely, high-quality financial reporting and audit of local bodies is a vital part of our democratic system. Not only does it support good decision making by local bodies, by enabling them to plan effectively, make informed decisions and manage their services, it ensures transparency and accountability to local taxpayers. All stakeholders have a critical role to play in addressing the audit backlog.

The Audit and Governance Committee, as the (Council's) body charged with governance, has an essential role in ensuring that it has assurance over both the quality of the draft financial statements prepared by management and the Council's wider arrangements to support the delivery of a timely and efficient audit. We will consider and report on the adequacy of the Council's external financial reporting arrangements and the effectiveness of the committee in fulfilling its role in those arrangements as part of our assessment of Value for Money arrangements and consider the use of other statutory reporting powers to draw attention to weaknesses in those arrangements where we consider it necessary to do so.

We reported in our interim report, issued in February 2025, that Statutory Instrument 2024/907 "The Accounts and Audit (Amendment) Regulations 2024 ("SI 2024/907"), imposed a backstop date of 28 February 2025 by which date we were required to issue our opinion on the financial statements and that we considered whether the time constraints imposed by the backstop date meant that we could not complete all necessary procedures to obtain sufficient, appropriate audit evidence to support the opinion and fulfil all the objectives of all relevant ISAs (UK).

We have also taken into account SI 2024/907 and Local Authority Reset and Recovery Implementation Guidance Notes issued by the National Audit Office and endorsed by the Financial Reporting Council, together with the requirements of the Local Audit and Accountability Act 2014, the National Audit Office's 2020 Code of Audit Practice, the Statement of Responsibilities issued by Public Sector Audit Appointments (PSAA) Ltd, auditing standards and other professional requirements.

We reported at the meeting of the Audit and Governance Committee on the 5 December 2024 that although we commenced with planning of the audit ahead of the 2023/24 backstop date, as a result of:

- the 2022/23 audit not having been concluded (at the date of the meeting of the Audit and Governance Committee):
- the appointment of EY by the PSAA Ltd being late in the appointment process and that our 2023/24 audit could not subsequently start until October 2024; and
- that due to other operational commitments on the finance team there have been delays in the provision of supporting information.

We were therefore not in a position to obtain sufficient evidence to be able to conclude that the financial statements of the Council are free from material and pervasive misstatement before the 28 February backstop date and therefore anticipated issuing a disclaimed 2023/24 audit opinion. We brought to the attention of the committee in February 2025 that we had received, and accepted, four objections, from a local elector, on the 2023/24 financial statements and that until those objections had been considered we would not be in a position to issue a disclaimed opinion. Our consideration of the matters raised in the objection are now complete and we are now in a position to issue our opinion.

We draw the attention of Audit and Governance Committee members and officers to the Public Sector Audit Appointment Limited's Statement of Responsibilities (paragraphs 26-28) which clearly set out what is expected of audited bodies in preparing their financial statements (see Appendix B).

This report is intended solely for the information and use of the Audit and Governance Committee, and management, and is not intended to be and should not be used by anyone other than these specified parties.

Yours faithfully

Hassan Rohimun

Partner

For and on behalf of Ernst & Young LLP

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Public Sector Audit Appointments Ltd (PSAA) issued the "Statement of responsibilities of auditors and audited bodies". It is available from the PSAA website (https://www.psaa.co.uk/managing-audit-guality/statement-of-responsibilities-of-auditors-and-audited-bodies-from-2023-24-audits). The Statement of responsibilities serves as the formal terms of engagement between appointed auditors and audited bodies. It summarises where the different responsibilities of auditors and audited bodies begin and end, and what is to be expected of the audited body in certain areas.

The "Terms of Appointment and further guidance (updated July 2021)" issued by the PSAA sets out additional requirements that auditors must comply with, over and above those set out in the National Audit Office Code of Audit Practice (the Code), and in legislation, and covers matters of practice and procedure which are of a recurring nature.

This report is made solely to the Audit and Governance Committee and management of Cheshire East Council in accordance with the statement of responsibilities. Our work has been undertaken so that we might state to the Audit and Governance Committee and management of Cheshire East Council those matters we are required to state to them in this report and for no other purpose. To the fullest extent permitted by law we do not accept or assume responsibility to anyone other than the Audit and Governance Committee and management of Cheshire East Council for this report or for the opinions we have formed. It should not be provided to any third-party without our prior written consent.



Executive Summary - Context for the audit and Scope update

Context for the audit - Department for Levelling-up, Housing and Communities (DLUHC) and Financial Reporting Council (FRC) measures to address local audit delays

Timely, high-quality financial reporting and audit of local bodies is a vital part of our democratic system. It supports good decision making by local bodies and ensures transparency and accountability to local taxpayers. There is general agreement that the backlog in the publication of audited financial statements by local bodies has grown to an unacceptable level and there is a clear recognition that all stakeholders in the sector need to work together to address this. Reasons for the backlog across the system have been widely reported and include:

- > Lack of capacity within the local authority financial accounting profession
- > Increased complexity of reporting requirements within the sector

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- > Lack of capacity within audit firms with public sector experience
- > Increased regulatory pressure on auditors, which in turn has increased the scope and extent of audit procedures performed.

MHCLG (formerly DLUHC) has worked collaboratively with the FRC, as incoming shadow system leader, and other system partners, to develop and implement measures to clear the backlog. SI 2024/907, together with the updated National Audit Office Code of Audit Practice 2024 and the Local Authority Reset and Recovery Implementation Guidance, have all been developed to ensure auditor compliance with International Standards on Auditing (UK) (ISAs (UK)). The approach to addressing the backlog consists of three phases:

- > Phase 1: Reset involving clearing the backlog of historic audit opinions up to and including financial year 2022/23 by 13 December 2024.
- > Phase 2: Recovery from Phase 1, starting from 2023/24, in a way that does not cause a recurrence of the backlog by using backstop dates to allow assurance to be rebuilt over multiple audit cycles. The backstop date for audit of the 2023/24 financial statements is 28 February 2025.
- > Phase 3: Reform involving addressing systemic challenges in the system and embedding timely financial reporting and audit.

Appendix C of this report sets out the level of assurance we have been able to gain from the procedures that we have completed. Taken together, the lack of assurance over the movements and balances in the financial statements means we are unable to conclude that the 2023/24 financial statements are free from material and pervasive misstatement of the financial statements. We are therefore issuing a disclaimed 2023/24 audit opinion. This is in line with the Government's legislative arrangements set out above and specifically the 'Recovery phase' of those arrangements and with guidance issued by the FRC within their 'Accessible Guide' which sets out a minimum 3-year timeline to re-build audit assurances to gain full assurance over opening, closing balances and in year movements.

We will reflect on the impact of the areas where we did not gain our planned assurances in 2023/24, through our 2024/25 audit planning and set out our timeline for rebuilding audit assurance within our Audit Plan

Executive Summary - Context for the audit and Scope update

Context for the audit - Department for Levelling-up, Housing and Communities (DLUHC) and Financial Reporting Council (FRC) measures to address local audit delays

Scope update

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We reported at the meeting of the Audit and Governance Committee on the 5 December 2024 that although we commenced with planning of the audit ahead of the 2023/24 backstop date, as a result of:

- > the 2022/23 audit not having been concluded (at the date of the meeting of the Audit and Governance Committee);
- > the appointment of EY by the PSAA Ltd being late in the appointment process and that our 2023/24 audit could not subsequently start until October 2024; and
- > other operational commitments on the finance team there have been delays in the provision of supporting information;

we were not in a position to complete our planned procedures and obtain sufficient evidence to enable us to conclude our financial statements audit of the Council before the 28 February 2025 backstop date and as a result we anticipated issuing a disclaimed audit opinion. We brought to the attention of the committee in February 2025 that we had received, and accepted, four objections, from a local elector, on the 2023/24 financial statements and that until those objections had been considered we would not be in a position to issue a disclaimed opinion. Our consideration of the matters raised in the objections are now complete and we are now in a position to issue our opinion.



02 Work Plan

DARDROOM Work Plan - Audit Scope



Audit scope

This report covers the work that we performed in relation to:

- Our audit opinion on whether the financial statements of the Council give a true and fair view of the financial position as at 31 March 2024 and of the income and expenditure for the year then ended: and
- Our commentary on your arrangements to secure value for money in your use of resources for the relevant period. We include further details on VFM in Section 4

We will also review and report to the National Audit Office (NAO), to the extent and in the form required by them, on the Council's Whole of Government Accounts

Our audit will also include the mandatory procedures that we are required to perform in accordance with applicable laws and auditing standards.

When planning the audit we take into account several key inputs:

- Strategic, operational and financial risks relevant to the financial statements:
- Developments in financial reporting and auditing standards;
- The quality of systems and processes:
- Changes in the business and regulatory environment; and.
- Management's views on all of the above.

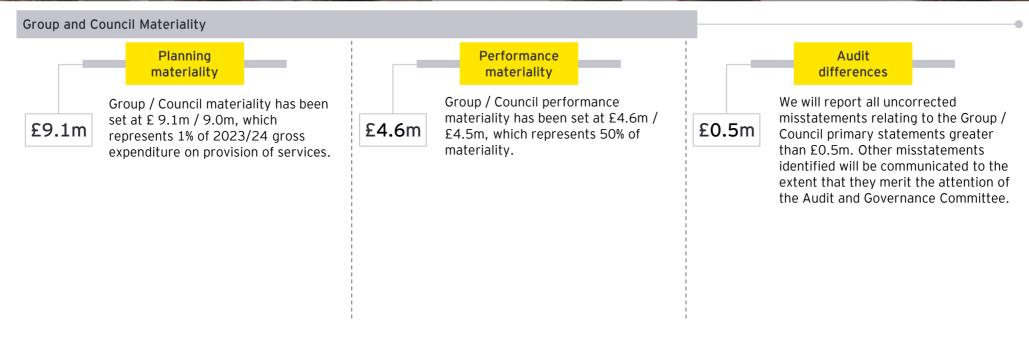
Given that SI 2024/907 imposes a backstop date of 28 February 2025 by which date we are required to issue our opinion on the financial statements, we have considered whether the time constraints imposed by the backstop date mean that we cannot complete all necessary procedures to obtain sufficient, appropriate audit evidence to support the opinion and fulfil all the objectives of all relevant ISAs (UK).

This decision is in line with ISA 200: Failure to Achieve an Objective 24.

If an objective in a relevant ISA (UK) cannot be achieved, the auditor shall evaluate whether this prevents the auditor from achieving the overall objectives of the auditor and thereby requires the auditor, in accordance with the ISAs (UK), to modify the auditor's opinion or withdraw from the engagement (where withdrawal is possible under applicable law or regulation). Failure to achieve an objective represents a significant matter requiring documentation in accordance with ISA (UK) 230 (Revised June 2016).4 (Ref: Para. A77&A78)

Taking the above into account, for the year ended 31 March 2024 we have determined that we cannot meet the objectives of the ISAs(UK) and we anticipate issuing a disclaimed audit report.

Work Plan - Materiality



To ascertain the significance of issues in the draft financial statements we have set materiality based on the 2023/24 draft statements of accounts. We have considered updating this materiality for any key changes or known factors from that year. We determined that our audit procedures would be performed using a materiality of £9.1m. This level of materiality remains appropriate for the actual results for the financial year.



The following 'dashboard' summarises the significant accounting and auditing matters identified as part of our planning work. It seeks to provide Those Charged with Governance with an overview of our initial risk identification for the year.

Audit risks and areas of focus

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Risk/area of focus	Risk identified	Details
Management Override: Misstatement due to fraud or error	Fraud risk	There is a risk that the financial statements as a whole are not free from material misstatement whether caused by fraud or error. We perform mandatory procedures regardless of specifically identified fraud risks.
Overstatement of Fees, Charges and Other Service Income	Fraud risk	Under ISA 240 there is a presumed risk that revenue may be misstated due to improper revenue recognition. We consider the risk to be relevant to those significant revenue streams other than taxation receipts and grant income, where management has more opportunity to manipulate the period in which the income is reported. Specifically, our risk is focused on the occurrence of other income (including fees and charges, rentals and other income), where management may have overstated income in the current financial year. This is likely to occur around the end of the financial year (i.e. bringing forward income from the subsequent year) and would also lead to an overstatement of Debtors (excluding collection fund debtors), therefore we associate this risk to that balance too.
Understatement of other operating expenditure and associated accrual balances	Fraud risk	Under ISA 240 there is a presumed risk that revenue may be misstated due to improper revenue recognition. In the public sector, this requirement is modified by Practice Note 10 issued by the Financial Reporting Council, which states that auditors should also consider the risk that material misstatements may occur by the manipulation of expenditure recognition. We assess that this risk manifests itself in the understatement of expenditure (completeness of expenditure and associated accruals balances) in order to manage the Council's financial position. We consider this risk does not apply to payroll. This could also extend to non-recognition of required provisions.
Inappropriate allocation of revenue expenditure to unusable reserves	Fraud risk	Under ISA 240 there is a presumed risk that revenue may be misstated due to improper revenue recognition. In the public sector, this requirement is modified by Practice Note 10 issued by the Financial Reporting Council, which states that auditors should also consider the risk that material misstatements may occur by the manipulation of expenditure recognition. We have assessed that the most likely ways this risk may manifest is through the inappropriate capitalisation of revenue expenditure, or through inappropriate reallocation of expenditure to either the Capital Adjustment Account or Dedicated Schools Grant Reserve.
Valuation of Land and Buildings including Investment Property	Significant risk	Land and buildings represent significant balances in the Council's financial statements and are subject to valuation on a periodic basis. Management is required to make material judgemental inputs and apply estimation techniques to calculate the year end balances recorded in the balance sheet. We will specifically focus on assets where a higher degree of estimation uncertainty exists: > Depreciated Replacement Cost (specialised operational assets for which an active market does not exist); > Fair Value (surplus assets valued at the price that would be received to sell an asset); and > Existing Use Value (operational assets for which there is an active market to provide comparable evidence). The Council engages external property valuation specialists to determine asset valuations and small changes in assumptions when valuing these assets can have a material impact on the financial statements.

Work Plan - Significant, inherent and other risk areas

Audit risks and areas of focus

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Risk/area of focus	Risk identified	Details
Valuation for Pension assets / liabilities and disclosures	Significant risk	The Local Authority Accounting Code of Practice and IAS19 require the Council to make disclosures within its financial statements regarding its membership of the Local Government Pension Scheme. Accounting for this scheme involves significant estimation and judgement and therefore management engages an actuary to undertake the calculations on their behalf. ISAs (UK) 500 and 540 require us to undertake procedures on the use of management experts and the assumptions underlying fair value estimates.
IFRS 16 Preparedness	Higher Inherent risk	Local authority code board CIPFA LASAAC has confirmed that local authorities will need to implement IFRS 16 Leases from 1 April 2024. For the 2023/24 financial statements, the Council is required to assess the financial impact of these expected changes and disclose them in the financial statements.
Minimum revenue provision	Higher Inherent risk	Local authorities are required to charge a Minimum Revenue Provision (MRP) to the General Fund in each financial year. The calculation of this charge is based on the Capital Financing Requirement. Local authorities have flexibility in how they calculate MRP but need to ensure the calculation is 'prudent'. With significant capital investment at the Council, there is a risk that provision has not been calculated in line with CIPFA guidance and does not consider or include all relevant balances.
Preparation of Group Financial Statements	Higher Inherent risk	The Council has a controlling interest in several organisations, the most significant being Ansa Environmental Services and Alliance Environmental Services. The Local Authority Accounting Code of Practice requires the Council to prepare group financial statements to consolidate the Council's interests, unless these interests are considered not material. The Council conducts an annual review to consider its group boundary and whether its interest in private companies are material; and consequently, whether group financial statements are required.
Private Finance Initiative	Higher Inherent risk	The Council has a Private Finance Initiative (PFI) arrangement jointly with Cheshire West and Chester Council in respect of Extra Care Housing, the FY24 year-end liability in respect of this is £33m. This leads to complex, material transactions and there is a risk that the PFI model is incorrect and therefore the associated accounting treatment and disclosures are not correctly reflected in the financial statements.
Going concern	Higher Inherent risk	The Council exceeded budget by £6m in 2022/23 and £8.5m in 2023/24 with general fund balances reducing from £81.1m at the 31 March 2023 to £43.2m at the 31 March 2024. The financial position of the Council remains challenging, and the Council will need to undertake a going concern assessment covering a period up to 12 months from the expected date of final authorisation of the accounts. It will also need to make an appropriate disclosure in the financial statements of the going concern assessment which has been undertaken
Infrastructure assets	Area of focus	In 2022, CIPFA issued an adaptation to the Code of Practice on Local Authority Accounting and DLUHC issued a Statutory Instrument (The Local Authorities (Capital Finance and Accounting) (England) (Amendment) Regulations 2022) to temporarily address the issue of accounting for Infrastructure Assets. Given the temporary measures introduced local authorities should consider their processes and records concerning infrastructure assets in preparation for the end of the measures. We will assess the work the Council has undertaken to prepare for the expiration of the statutory override instrument.

Work Plan - Independence

The FRC Ethical Standard 2019 and ISA (UK) 260 'Communication of audit matters with those charged with governance', requires us to communicate with you on a timely basis on all significant facts and matters that bear upon our integrity, objectivity and independence. The Ethical Standard, as revised in December 2019, requires that we communicate formally both at the planning stage and at the conclusion of the audit, as well as during the course of the audit if appropriate. The aim of these communications is to ensure full and fair disclosure by us to those charged with your governance on matters in which you have an interest.

Required communications

Planning stage

- The principal threats, if any, to objectivity and independence identified by Ernst & Young (EY) including consideration of all relationships between you, your affiliates and directors and us;
- > The safeguards adopted and the reasons why they are considered to be effective, including any Engagement Quality review;
- > The overall assessment of threats and safeguards;
- Information about the general policies and process within EY to maintain objectivity and independence

The IESBA Code requires EY to provide an independence assessment of any proposed non-audit service (NAS) to the PIE audit client and will need to obtain and document pre-concurrence from those charged with governance for the provision of all NAS prior to the commencement of the service (i.e., similar to obtaining a "pre-approval" to provide the service).

All proposed NAS for PIE audit clients will be subject to a determination of whether the service might create a self-review threat (SRT), with no allowance for services related to amounts tha are immaterial to the audited financial statements.

Final stage

- > In order for you to assess the integrity, objectivity and independence of the firm and each covered person, we are required to provide a written disclosure of relationships (including the provision of non-audit services) that may bear on our integrity, objectivity and independence. This is required to have regard to relationships with the entity, its directors and senior management, its affiliates, and its connected parties and the threats to integrity or objectivity, including those that could compromise independence that these create. We are also required to disclose any safeguards that we have put in place and why they address such threats, together with any other information necessary to enable our objectivity and independence to be assessed;
- > Details of non-audit/additional services provided and the fees charged in relation thereto;
- > Written confirmation that the firm and each covered person is independent and, if applicable, that any non-EY firms used in the group audit or external experts used have confirmed their independence to us:
- > Details of any non-audit/additional services to a UK PIE audit client where there are differences of professional opinion concerning the engagement between the Ethics Partner and Engagement Partner and where the final conclusion differs from the professional opinion of the Ethics Partner
- > Details of any inconsistencies between FRC Ethical Standard and your policy for the supply of non-audit services by EY and any apparent breach of that policy;
- threat (SRT), with no allowance for services related to amounts that > Details of all breaches of the IESBA Code of Ethics, the FRC Ethical Standard and professional standards, are immaterial to the audited financial statements. Details of all breaches of the IESBA Code of Ethics, the FRC Ethical Standard and professional standards, and of any safeguards applied and actions taken by EY to address any threats to independence; and
 - > An opportunity to discuss auditor independence issues.

In addition, during the course of the audit, we are required to communicate with you whenever any significant judgements are made about threats to objectivity and independence and the appropriateness of safeguards put in place, for example, when accepting an engagement to provide non-audit services.

We ensure that the total amount of fees that EY and our network firms have charged to you and your affiliates for the provision of services during the reporting period, analysed in appropriate categories, are disclosed.

Work Plan - Independence

We highlight the following significant facts and matters that may be reasonably considered to bear upon our objectivity and independence, including the principal threats, if any, We have adopted the safeguards noted below to mitigate these threats along with the reasons why they are considered to be effective. However we will only perform non-audit services if the service has been pre-approved in accordance with your policy.

Overall Assessment

Overall, we consider that the safeguards that have been adopted appropriately mitigate the principal threats identified and we therefore confirm that EY is independent and the objectivity and independence of Hassan Rohimun, your Audit Engagement Partner, and the audit engagement team have not been compromised.

Self interest threats

A self interest threat arises when EY has financial or other interests in your company. Examples include where we have an investment in your company; where we receive significant fees in respect of non-audit services; where we need to recover long outstanding fees; or where we enter into a business relationship with you. At the time of writing, there are no long outstanding fees.

We believe that it is appropriate for us to undertake those permitted non-audit/additional services set out in Section 5.40 of the FRC Ethical Standard 2019 (FRC ES), and we will comply with the policies that you have approved.

None of the services are prohibited under the FRC's ES and the services have been approved in accordance with your policy on pre-approval. In addition, when the ratio of non-audit fees to audit fees exceeds 1:1, we are required to discuss this with our Ethics Partner, as set out by the FRC ES, and if necessary agree additional safeguards or not accept the nonaudit engagement. We will also discuss this with you.

At the time of writing, the current ratio of non-audit fees to audit fees is approximately nil:nil. No additional safeguards are required.

Self review threats

A self-interest threat may also arise if members of our audit engagement team have objectives or are rewarded in relation to sales of non-audit services to you. We confirm that no member of our audit engagement team, including those from other service lines, has objectives or is rewarded in relation to sales to you, in compliance with Ethical Standard part 4. There are no other self-interest threats at the date of this report.

Management threats

Partners and employees of EY are prohibited from taking decisions on behalf of management of your company. Management threats may also arise during the provision of a non-audit service in relation to which management is required to make judgements or decision based on that work.

There are no management threats at the date of this report.

Other threats

Other threats, such as advocacy, familiarity or intimidation, may arise.

There are no other threats at the date of this report.



Provisional Results and findings

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Status of the audit

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The following items relating to the completion of our audit procedures were outstanding at the date of this report.

- > Completion of subsequent events procedures; and
- > Receipt of a signed management representation letter.

Given that the audit process is still ongoing, we will continue to consider existing and new information which could influence our final audit opinion.

Other powers and duties

We have a duty under the Local Audit and Accountability Act 2014 to consider whether to report on any matter that comes to our attention in the course of the audit, either for the Council to consider it or to bring it to the attention of the public (i.e. "a report in the public interest"). Since the meeting of the Audit and Governance Committee on 5 December 2024 we accepted, four objections from a local elector. Following the consideration of the matters raised by the objector we concluded that in our judgement a public interest report was not a proportionate response to the issues raised by the objector as the significant weaknesses in the Council's governance arrangements are already in the public domain and the Council have established action plans to respond to the identified weaknesses.

Value for Money

The position of our value for money (VFM) work undertaken to date is reported in Section 4 of this report. We had identified risks of significant weaknesses in arrangements and having updated and completed the planned procedures in these areas we did identify significant weaknesses.

Audit differences

We have not identified any audit differences, either adjusted or unadjusted to bring to your attention.

The Council should ensure that in approving the Statement of Accounts, all prior year comparative figures agree to the final set of prior year Statement of Accounts, or explanations for prior year adjustments have been set out by the Section 151 officer.

Other Reporting Issues

We have reviewed the information presented in the Annual Governance Statement for consistency with our knowledge of the Council we noted that the Annual Governance Statement omitted a conclusion as required by the regulation, which has since been added by management.

On 17 July 2025, the NAO certified the 2023/24 Whole of Government Accounts (WGA), therefore we are no longer required to perform any procedures in relation to this. As such we can issue our certificate at the same time as our audit opinion.

Control observations

During the audit, we have noted that Internal Audit have issued a limited assurance opinion following their planned work for 2023/24 and that the Council have identified in the Annual Governance Statement areas where improvements in control are required. We have identified 3 control recommendations that we have set out in Section 05 of this report. Until the audit is complete, we may identify other control observations; if we do, we will include in any further reports.

DARDROOM Results and findings

Areas of audit focus

In our Audit Plan we identified a number of key areas of focus for our audit of the financial report of Cheshire East Council. We concluded we would disclaim the audit and therefore have not completed detailed audit testing on these areas but instead have reported any matters that came to light from the work we did complete.

We request that you review these and other matters set out in this report to ensure:

- > There are no further considerations or matters that could impact these issues
- You concur with the resolution of the issue
- > There are no further significant issues you are aware of to be considered before the financial report is finalised

There are no matters, other than those reported by management or disclosed in this report, which we believe should be brought to the attention of the Audit and Governance Committee

Independence

Further to our review of independence in section 2 of this report we have not identified any issues to bring to your attention.

Other matters

As required by ISA (UK&I) 260 and other ISAs specifying communication requirements, we must tell you significant findings from the audit and other matters if they are significant to your oversight of the Councils financial reporting process. They include the following:

- > Significant qualitative aspects of accounting practices including accounting policies, accounting estimates and financial statement disclosures;
- Any significant difficulties encountered during the audit;
- Any significant matters arising from the audit that were discussed with management;
- Written representations we have requested;
- Expected modifications to the audit report:
- Any other matters significant to overseeing the financial reporting process;
- Findings and issues around the opening balance on initial audits (if applicable);
- Related parties:
- External confirmations;
- Going concern;
- Consideration of laws and regulations; and
- > Group audits.

We have no other matters to report.

Audit Report Section of ARR

Expected modifications to our audit report

As set out within this report we have also not been able to complete our planned programme of work to obtain sufficient evidence to have reasonable assurance over closing balances and in-year transactions.

Taken together with the requirement to conclude our work by the 2023/24 back stop date, the lack of evidence over these movements and balances mean we are unable to conclude that the 2023/24 financial statements are free from material and pervasive misstatement of the financial statements.

We therefore anticipate issuing a disclaimed 2023/24 audit opinion.

The form and content of the Audit Report is detailed in the following pages.

Expected modifications to our audit report

Our opinion on the financial statements

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF CHESHIRE EAST COUNCIL

Disclaimer of Opinion

We were engaged to audit the financial statements of Cheshire East Council('the Council') and its subsidiaries (the 'Group') for the year ended 31 March 2024. The financial statements comprise the:

- Council and Group Movement in Reserves Statement
- Council and Group Comprehensive Income and Expenditure Statement,
- Council and Group Balance Sheet as at 31 March 2024
- Council and Group Cash Flow Statement as at 31 March 2024
- the related notes 1 to 41 including material accounting policy information and including the Expenditure and Funding Analysis from pages 63 to 67
- Collection Fund Statement 2023/24 and the related notes 1 to 7

The financial reporting framework that has been applied in their preparation is applicable law and the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2023/24.

We do not express an opinion on the accompanying financial statements of the Council. Because of the significance of the matter described in the basis for disclaimer of opinion section of our report, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

Basis for disclaimer of opinion

Due to the delay in completing the prior year audit, our late appointment as auditors of the Council for the financial year ending 31 March 2024 and delays in receiving evidence we were not in a position to complete the detailed audit procedures that would be needed to obtain sufficient appropriate audit evidence to issue an unmodified audit report on the Council's financial statements for the year ended 31 March 2024.

Due to the delay in completing the prior year audit, our late appointment as auditors of the Council for the financial year ending 31 March 2024 and delays in receiving

evidence we were not in a position to complete the detailed audit procedures that would be needed to obtain sufficient appropriate audit evidence to issue an unmodified audit report on the Council's financial statements for the year ended 31 March 2024.

Therefore, we are disclaiming our opinion on the financial statements.

Matters on which we report by exception

Notwithstanding our disclaimer of opinion on the financial statements, we have nothing to report in respect of whether the annual governance statement is misleading or inconsistent with other information forthcoming from the audit, performed subject to the pervasive limitation described above, or our knowledge of the Group and the Council.

We report to you if:

- we issue a report in the public interest under section 24 of the Local Audit and Accountability Act 2014 (as amended)
- we make written recommendations to the audited body under Section 24 of the Local Audit and Accountability Act 2014 (as amended)
- we make an application to the court for a declaration that an item of account is contrary to law under Section 28 of the Local Audit and Accountability Act 2014 (as amended)
- we issue an advisory notice under Section 29 of the Local Audit and Accountability Act 2014 (as amended)
- we make an application for judicial review under Section 31 of the Local Audit and Accountability Act 2014 (as amended)

We have nothing to report in these respects.

In respect of the following, we have matters to report by exception:

We report to you if we are not satisfied that the Group and the Council has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2024.

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Expected modifications to our audit report

Our opinion on the financial statements

On the basis of our work, having regard to the Code of Audit Practice 2024, and the guidance issued by the Comptroller and Auditor General in November 2024, we have identified the following significant weaknesses in the Council's arrangements for the year ended 31 March 2024.

Significant weakness in arrangements: Financial sustainability

Our judgement on the nature of the weakness identified

For 2023/24 the Council reported a financial outturn representing an overall revenue budget overspend of £8.5m. To achieve this position the Council reduced its General Fund Balances from £81.1m at 31 March 2023 (comprising General Fund: £14.1m. Earmarked Reserves: £61.6m. Schools: £5.4m) to £43.2m at 31 March 2024 (General Fund: £5.6m, Earmarked: £32.3m, Schools: £5.4m). In February 2024, the Section 151 officer noted, during the 2024/25 budget setting, that ongoing reliance on reserves was not sustainable in the medium term and that net spending should align with the estimated expenditure outlined in the budget. In February 2025, the Interim Executive Director of Resources (section 151 officer) indicated that the forecasted overspend of £18.3m for 2024/25 presents a significant financial challenge, as current reserve levels are insufficient to cover the projected revenue outturn without further measures. As of 1 April 2024, Earmarked Reserves stood at £37.6m (Including Schools: £5.4m) and the General Fund at £5.6m. More than £22m (70.5%) of the total earmarked reserves is allocated to support the 2024/25 revenue budget. The Medium-Term Financial Strategy 2024-28 highlighted that the level of reserves was insufficient to cover the current forecast revenue outturn for the year without further action.

On 20 February 2025, the Government named the Council among 30 councils receiving Exceptional Financial Support, agreeing in-principle to £17.6m for 2024/25 and £25.3m for 2025/26, both expected to be fully utilised. Ongoing use of reserves and one-off financial measures is unsustainable and provides evidence of a significant weakness in financial management arrangements for 2023/24.

On 8 May 2025, the Council received a Best Value Notice from the Ministry of Housing, Communities and Local Government due to financial sustainability concerns. Key reports, including the LGA peer challenge and CIPFA review, highlighted issues with leadership capacity, governance, scrutiny, and organisational culture.

The use of one-off mitigations and reliance on the use of earmarked reserves as well as Exceptional Financial Support (Capitalisation Direction) in successive years to manage the financial position is not sustainable and represents a significant weakness in the arrangements for 2023/24.

The evidence on which our view is based

- Financial performance- outturn reports for 2023/24 and 2024/25
- Medium Term Financial Strategy 2024-28 and 2025-2029
- the corporate peer challenge (CPC) completed by the LGA in March 2024
- the assurance review undertaken by CIPFA in August 2024, published 13 March 2025
- Best Value Notice issued 8 May 2025
- 2023/24 Annual governance statement

The impact on Cheshire East Council

Without sustainable solutions to manage the financial position of the Council, there is a risk that there will be an adverse impact on the quantum and or quality of services which the Council can deliver.

The action the Council needs to take to address the weakness

The Council should plan and manage its resources to ensure it can deliver its services in accordance with agreed budgets. To ensure there is a sustainable financial position the Council will need to establish realistic and achievable saving plans, ensure there are robust arrangements for monitoring the delivery of agreed actions and arrangements in place to identify mitigating actions in the event that agreed savings are not delivered.

The precarious financial position of the Council highlights a significant weakness in how the Council plans finances to support the sustainable delivery of services in accordance with strategic and statutory priorities.

Significant weakness in arrangements: Children's Services

Our judgement on the nature of the weakness identified

The 2024 Ofsted report rated the Council's children's services as inadequate, calling for stronger senior leader oversight, better support for care leavers, improved

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Expected modifications to our audit report

Our opinion on the financial statements

management supervision, more effective child-focused planning, consistent visits, increased placement availability, and greater impact from child protection chairs and independent reviewing officers.

On 24 July 2024, the Secretary of State issued an improvement notice to the Council after Ofsted's 16 May 2024 inspection report raised significant concerns about Children's Social Care Services.

The evidence on which our view is based

- Inspection report published by Ofsted on 24 July 2024
- Children's Social Care Improvement Plans for October 2024 and November 2024
- Improvement Plan Highlight report January 2025

The impact on Cheshire East Council

The reports by Ofsted identified deficiencies in the arrangements of Cheshire East Council Children's services that prevented the Council from delivering Children Services that are efficient and effective to address the needs of children.

The action the Council needs to take to address the weakness

The Council has established an improvement plan to address the findings of Ofsted. The Council needs to cooperate with the independent improvement advisor appointed by the Secretary of State to deliver the improvement plan which includes the establishment of actions to respond to the findings of Ofsted.

The findings of Ofsted and the improvement notice issued by the Secretary of State are evidence of significant weaknesses in arrangements for how the Council ensures that it makes informed decisions and properly manages risks, and how it uses information about its costs and performance to improve the way it manages and delivers its services.

Significant weakness in arrangements: Culture

Our judgement on the nature of the weakness identified

The Council should plan and manage its resources to ensure it can deliver its services in accordance with agreed budgets. To ensure there is a sustainable financial position the Council will need to establish realistic and achievable saving plans, ensure there are

robust arrangements for monitoring the delivery of agreed actions and arrangements in place to identify mitigating actions in the event that agreed savings are not delivered.

The evidence on which our view is based

- 2023/24 Annual governance statement
- Corporate Peer Challenge-final-issued
- Corporate Peer Challenge Action Plan August 2024
- Corporate Peer Challenge Action Plans Progress Update November 2024

The impact on Cheshire East Council

Poor working relationships across services challenge service delivery and communication, leading to non-compliance with corporate requests. This leads to information gaps and delays, weakening the Council's assurance framework and its capacity for effective internal scrutiny and challenge.

The action the Council needs to take to address the weakness

Following the peer review the Council has established an action plan, comprising 73 actions, across the areas of:

- Financial Sustainability
- Transformation
- Leadership and Culture
- Strategic Purpose and Performance
- Good Governance
- Service Improvement

The Council should ensure that all identified improvement actions from the Peer Corporate Challenge are implemented through ongoing changes that support progress in Leadership, Governance, Corporate Planning, and Service Delivery.

The findings above are evidence of significant weaknesses in the Council's for governance and Improving economy, efficiency and effectiveness, specifically in relation to arrangements for monitoring progress on agreed governance actions and holding management to account for implementing those actions.

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Significant weakness in arrangements: Council's framework of risk management, governance and internal control

Our judgement on the nature of the weakness identified

The Council has not maintained an effective control environment, as reported in the findings from a number of internal and external evaluation sources, where significant and pervasive weaknesses in the application of internal controls across the organisation have been identified.

The evidence on which our view is based

Through the review of the following:

- Corporate Peer Challenge-final-issued
- Corporate Peer Challenge Action Plan August 2024
- 2023/24 Annual Governance statement
- 2023/24 Head of Internal Audit Opinion report
- Internal Audit reports

As noted in the programme of Internal Audit reviews undertaken during the year; of 184 actions raised, 38% related to a failure to apply existing controls, with a further 13% identifying an absence of an expected or actual control. In the year, there was an opinion of "No Assurance" awarded in relation to Section 106 arrangements.

The Council's Strategic Risk Register contains a number of critically rated risks which have been present for considerable periods of time

The impact on Cheshire East Council

The Council does not have adequate arrangements for governance, risk management and internal control; posing risks that threaten the achievement of strategic objectives including the delivery of the transformation plan that is critical for the sustainability of the Council.

The action the Council needs to take to address the weakness

The Council should, on a timely basis, implement improvement actions identified by Internal Audit and deliver the actions developed in response to the Corporate Peer Challenge report.

Significant weakness in arrangements: Partnership Working

Our judgement on the nature of the weakness identified

As noted in the Council's 2023/24 Annual Governance Statement, the Council does not have appropriate arrangements in place to ensure that, through working with partners, corporate and strategic objectives are being delivered for the benefit of Cheshire East residents.

The evidence on which our view is based

Through the review of the 2023/24 Annual Governance statement.

The impact on Cheshire East Council

Weaknesses in the arrangements for the governance of the Council's partnership working can result in the Council committing scarce resources to programmes which are inconsistent with the Council's strategic priorities and fail to deliver the desired outcomes for local residents.

The action the Council needs to take to address the weakness.

The Council should ensure all formal partnership arrangements are identified, that governance arrangements are reviewed and that the activities of the partnership are delivering the expected outcomes for residents.

Responsibility of the Chief Finance Officer - Section 151 Officer

As explained more fully in the Statement of the Chief Finance Officer - Section 151 Officer's Responsibilities set out on page 169, the Chief Finance Officer - Section 151 Officer is responsible for the preparation of the Council's Statement of Accounts, in accordance with proper practices as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom, 2023/24 ('the Code of Practice') and the update to the Code and Specifications for Future Codes for Infrastructure Assets published in November 2022, is required to present a true and fair position of the Council at the accounting date and its income and expenditure for the year ended 31st March 2024.

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Our opinion on the financial statements

In preparing the financial statements, the Chief Finance Officer - Section 151 Officer is responsible for assessing the Group and the Council's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Group and the Council either intends to cease operations, or has no realistic alternative but to do so.

The Council is responsible for putting in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources, to ensure proper stewardship and governance, and to review regularly the adequacy and effectiveness of these arrangements

Auditor's responsibilities for the audit of the financial statements

Our responsibility is to conduct an audit of the Group and the Council's financial statements in accordance with International Standards on Auditing (UK) and to issue an auditor's report.

However, because of the matter described in the basis for disclaimer of opinion section of our report, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

We are independent of the Group and the Council in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and the Code of Audit Practice 2024 and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Scope of the review of arrangements for securing economy, efficiency and effectiveness in the use of resources

We have undertaken our review in accordance with the Code of Audit Practice 2024, having regard to the guidance on the specified reporting criteria issued by the Comptroller and Auditor General in November 2024, as to whether the Cheshire East Council had proper arrangements for financial sustainability, governance and improving economy, efficiency and effectiveness. The Comptroller and Auditor General determined these criteria as those necessary for us to consider under the Code of Audit Practice in satisfying ourselves whether the Cheshire East Council put in place proper arrangements for securing economy, efficiency and effectiveness in its use of

resources for the year ended 31 March 2024.

We planned our work in accordance with the Code of Audit Practice. Based on our risk assessment, we undertook such work as we considered necessary to form a view on whether the Cheshire East Council had put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources.

We are required under Section 20(1)(c) of the Local Audit and Accountability Act 2014 (as amended) to satisfy ourselves that the Authority has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources.

We are not required to consider, nor have we considered, whether all aspects of the Authority's arrangements for securing economy, efficiency and effectiveness in its use of resources are operating effectively.

Certificate

We certify that we have completed the audit of the accounts of Cheshire East Council in accordance with the requirements of the Local Audit and Accountability Act 2014 (as amended) and the Code of Audit Practice issued by the National Audit Office.

Use of our report

This report is made solely to the members of Cheshire East Council, as a body, in accordance with Part 5 of the Local Audit and Accountability Act 2014 (as amended) and for no other purpose, as set out in paragraph 85 of the Statement of Responsibilities of Auditors and Audited Bodies published by Public Sector Audit Appointments Limited. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Group and the Group members as a body, for our audit work, for this report, or for the opinions we have formed.

Hassan Rohimun (Key Audit Partner) Ernst & Young LLP (Local Auditor) Manchester December 2025

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VFM - Purpose and Risks of Significant Weakness

Purpose

DARDROOM

Auditors are required to be satisfied that the Council has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources. We do not issue a 'conclusion' or 'opinion', but where significant weaknesses are identified we will report by exception in the auditor's opinion on the financial statements. In addition, auditors provide an annual commentary on arrangements published as part of the Auditor's Annual Report. In doing so, we comply with the requirements of the 2020 Code of Audit Practice (the Code) and Auditor Guidance Note 3 (AGN 03). The purpose of this commentary is to explain the work we have undertaken during the period 1 April 2023 to 31 March 2024 and highlight any significant weaknesses identified along with recommendations for improvement. The commentary covers our findings for audit year 2023/24.

This report sets out the following areas which have been assessed up to the point of issuing this report:

- > Any identified risks of significant weakness, having regard to the three specified reporting criteria;
- > An explanation of the planned responsive audit procedures to the significant risks identified; and
- > Findings to date from our planned procedures.

We have accepted four objections, from a local elector, on the 2023/24 financial statements once these objections have been considered and concluded we will consider if there are any matters requiring a report or whether there are any further issues relating to our value for money audit responsibilities.

Risks of Significant Weakness

In undertaking our procedures to understand the body's arrangements against the specified reporting criteria, we identify whether there are risks of significant weakness which require us to complete additional risk-based procedures. AGN 03 sets out considerations for auditors in completing and documenting their work and includes consideration of:

- > our cumulative audit knowledge and experience as your auditor;
- > reports from internal audit which may provide an indication of arrangements that are not operating effectively;
- our review of Council committee reports;
- > meetings with the interim Executive Director Resources (S151 Officer) and acting Director of Finance (Deputy S151 Officer);
- > information from external sources; and
- > evaluation of associated documentation through our regular engagement with Council management and the finance team.

We completed our risk assessment procedures identified risks of significant weaknesses in the Council's VFM arrangements.



Reporting

In accordance with the NAO's 2020 Code, we are required to report a commentary against the three specified reporting criteria this will be reported to the Audit and Governance Committee once our work on value for money is complete.

The table below sets out the three reporting criteria, where we identified a risk of significant weakness from our planning procedures or the work undertaken to date, and whether, at the time of this interim report, we have concluded that there is a significant weakness in the body's arrangements.

Reporting Criteria

Actual significant weaknesses in arrangements identified?

Financial sustainability: How the Council plans and manages its resources to ensure it can continue to deliver its services

Medium Term Financial Strategy

Despite increases in the net budget of £16.6m in 2022/23 and £25.4m in 2023/24 the Council exceeded budget by £6m in 2022/23 and £8.5m in 2023/24 with general fund balances reducing from £81.1m at the 31 March 2023 to £43.2m at the 31 March 2024. The 28 November 2024 "2nd Financial Review Report" outlines that the 2024/25 budget was based on the planned £22m use of reserves and the achievement of £30m of savings; as at November 2024 forecast revenue outturn is an adverse variance of £20.1m.

Risks of significant weaknesses in arrangements identified?

At the 6 February 2025 meeting of the Corporate Policy Committee, the section 151 officer reported that the forecasted overspend of £18.3m for 2024/25 remains a significant financial challenge for the Council. The Council's level of reserves are insufficient to cover the current forecast revenue outturn for the year without further action. On 1 April 2024, Earmarked Reserves totalled £32.3m and the General Fund Reserves £5.6m. Of the total earmarked reserves, more than £22m (70.5%) will be spent supporting the revenue budget for 2024/25

The Council's Medium Term Financial Strategy 2024-28 is not sustainable without central Government support and the Council is at risk of issuing a S114 notice in the future.

Significant weakness in arrangements for 2023/24.

Conclusion and Recommendation

Without sustainable solutions to manage the financial position of the Council, there is a risk that there will be an adverse impact on the quantum and or quality of services which the Council can deliver. The challenged financial position of the Council highlights a significant weakness in how the Council plans finances to support the sustainable delivery of services in accordance with strategic and statutory priorities.

Recommendation: The Council should plan and manage its resources to ensure it can deliver its services in accordance with agreed budgets. To ensure there is a sustainable financial position the Council will need to establish realistic and achievable saving plans, ensure there are robust arrangements for monitoring the delivery of agreed actions and arrangements in place to identify mitigating actions in the event that agreed savings are not delivered.



Reporting

Reporting Criteria

DARDROOM

Governance: How the Council ensures that it makes informed decisions and properly manages its risks

Improving economy, efficiency and effectiveness: How the Council uses information about its costs and performance to improve the way it manages and delivers its services

Risks of significant weaknesses in arrangements identified?

Ofsted Report

The May 2024 OFSTED report on the Council's children's services rated the service overall as inadequate and outlined that the Council needs to improve:

- Senior leaders' oversight of performance to ensure that there is a coherent approach to continuous improvement.
- The quality, consistency and responsiveness of support, advice and guidance for care leavers, including those who are homeless, with additional vulnerabilities, and those who are over 21 years of age.
- The quality of management oversight and supervision to ensure that consistent, good social work practice is in place.
- The quality of plans for children to ensure that they are more childfocused and drive forward positive change in a timely way.
- The quality and frequency of visits to children so that the visits are purposeful and in line with assessed needs.
- The sufficiency of suitable placements that can meet children and young people's assessed needs.
- The effectiveness of child protection chairs and independent reviewing officers (IROs) to escalate, challenge and scrutinise plans for children

Actual significant weaknesses in arrangements identified?

On the 24 July 2024 the Secretary of State issued an improvement notice to the Council following the significant concerns highlighted by the publication of OFSTED's inspection report of the Council's Children's Social Care Services on 16 May 2024. The Secretary of State chose to retain the support of an Improvement Adviser in Cheshire East, to provide advice to the Department for Education and the Council. The Council were required to work with the Adviser and establish an improvement plan, that will deliver appropriate and sustainable improvement, to cover the areas identified in the OFSTED report as well as recommendations made by the appointed Improvement Adviser.

The findings of OFSTED and the improvement notice issued by the Secretary of State is evidence of significant weaknesses in arrangements for:

- How the Council ensures that it makes informed decisions and properly manages risks.
- How the Council uses information about its costs and performance to improve the way it manages and delivers its services.

Significant weaknesses in arrangements for 2023/24.

Conclusion and Recommendation

The findings of Ofsted and the improvement notice issued by the Secretary of State are evidence of significant weaknesses in arrangements for how the Council ensures that it makes informed decisions and properly manages risks, and how it uses information about its costs and performance to improve the way it manages and delivers its services. The reports by Ofsted identified deficiencies in the arrangements of Cheshire East Council Children's services that prevented the Council from delivering Children Services that are efficient and effective to address the needs of children.

Recommendation: The Council has established an improvement plan to address the findings of Ofsted. The Council needs to cooperate with the independent improvement advisor appointed by the Secretary of State to deliver the improvement plan which includes the establishment of actions to respond to the findings of Ofsted.



Reporting

Reporting Criteria

DARDROOM

Risks of significant weaknesses in arrangements identified?

Financial sustainability: How the Council plans and manages its resources to ensure it can continue to deliver its services Peer Review

In March 2024 Cheshire East Council invited the Local Government Association to undertake a corporate peer challenge. The report identified that the Council needs to address a number of significant issues, the most immediate being the organisation's financial sustainability which is in jeopardy. The team outlined that this would require concentrated and coordinated activity to resolve challenges of capacity, governance, and organisational culture as well as the need to develop long-term transformation and improvement plans.

Governance: How the Council ensures that it makes informed decisions and properly manages its risks The peer review team identified three cultural challenges facing the Council:

- > Firstly, the siloed nature of the Council with poor joint working across (and within) departments contributing towards challenges of service delivery and communication.
- > Secondly, where there have been poor working relationships across services, this has resulted in a lack of compliance with corporate requests and direction.
- > Thirdly, the lack of compliance has resulted in gaps in information and delays in action which have weakened the Council's assurance framework undermining the organisation's ability to provide internal scrutiny, challenge, and assurance as a consequence.

Improving economy, efficiency and effectiveness: How the Council uses information about its costs and performance to improve the way it manages and delivers its services

The team identified the need for the Council to establish refreshed Council Plan that sets out the vision, priorities, and behaviours which the organisation will deliver against and recommend a new Council Plan is developed to 2028 incorporating political priorities, necessary improvement, and longer-term transformation reflecting the Council's financial context. The plan would need to:

- > facilitate increased understanding with staff regarding prioritisation of resources and the alignment of their work and responsibilities to the organisation's goals;
- ▶ be accompanied by an appropriate performance management framework, appraisal process, and medium-term financial strategy; and
- ➤ Align to a wider review of policy and procedures such as Workforce Strategy, Communications Strategy, and the Council's approach to Equality, Diversity, and Inclusion.

Actual significant weaknesses in arrangements identified?

Following the peer review the Council has established an action plan, comprising 73 actions, across the areas of:

- > Financial Sustainability
- > Transformation
- Leadership and Culture
- > Strategic Purpose and Performance
- ➢ Good Governance
- > Service Improvement

As at November 2024 the Council were reporting that of the 73 actions: 33 had been completed; 10 were rated green and on track for completion; 12 were rated amber being on track for completion with minor issues; 7 were rated red not being on track for completion; and 11 were actions which had not yet been scheduled.

Whilst the Council is responding positively to the issues identified the findings of the peer review represents significant weaknesses in arrangements for 2023/24.

VFM - Reporting (continued)

Reporting

Conclusion and Recommendation

The identified issues in the peer review report, including poor working relationships across services, challenge service delivery and communication, leading to non-compliance with corporate requests and non delivery of corporate and operational objectives. The information gaps and delays in taking forward agreed actions, weakens the Council's assurance framework and its capacity for effective internal scrutiny and challenge.

Following the peer review the Council has established an action plan, comprising 73 actions, across the areas of:

- Financial Sustainability
- Transformation
- Leadership and Culture
- Strategic Purpose and Performance
- Good Governance
- Service Improvement

Recommendation: The Council should ensure that all identified improvement actions from the Peer Corporate Challenge are implemented through ongoing changes that support progress in Leadership, Governance, Corporate Planning, and Service Delivery.

VFM - Reporting (continued)



Reporting

Reporting Criteria

DARDROOM

Risks of significant weaknesses in arrangements identified?

<u>Insourcing</u>

Improving economy, efficiency and effectiveness: How the Council uses information about its costs and performance to improve the way it manages and delivers its services

The Council announced it is redesigning the way in which it delivers its waste, recycling, and bereavement services. This has involved a review of two of its wholly owned companies, Ansa Environmental Services and Orbitas Bereavement Services Ltd. Following the latest stage of that review, and a decision made by the Council's finance sub-committee on 25 June 2024, the services provided by Ansa and Orbitas are to be brought back-in house and delivered directly by Cheshire East Council. This includes bin collections, street cleansing, maintenance of green spaces, fleet, social transport, bereavement services and the handyperson service

Actual significant weaknesses in arrangements identified?

As the decision to bring the services back in house was taken during 2024/25 and as the process is ongoing, we have concluded that this issue does not form a risk for our 2023/24 audit and that we will revisit the position as part of our 2024/25 audit.

Governance: How the Council ensures that it makes informed decisions and properly manages its risks

Head of Internal Audit Opinion

During 2023/24, Internal Audit produced 23 assurance reports with 13 "Limited Assurance" opinions and 1 "No Assurance" opinion. The "Limited Assurance" reports included: Purchase Cards; Use of Agency Workers; Sundry Debt Management and Recovery; Adult Social Care Debt Management and Recovery; Starter, and Contractual Changes and Leavers. The "No Assurance" opinion related to Section 106.

Internal Audit also reported that during 2023/24 only 48% of agreed recommendations were implemented with the agreed timescale.

For 2023/24 Internal Audit concluded that the overall opinion on the Council's framework of risk management, governance and internal control was "Limited", with the opinion for Risk Management, Governance and Internal Control being "Adequate". "Limited" and "Limited" respectively.

The findings and conclusions of Internal Audit is evidence of significant weaknesses in arrangements for 2023/24.

Conclusion and Recommendation

The Council does not have adequate arrangements for governance, risk management and internal control; posing risks that threaten the achievement of strategic objectives including the delivery of the transformation plan that is critical for the sustainability of the Council.

Recommendation: The Council should, on a timely basis, implement improvement actions identified by Internal Audit and deliver the actions developed in response to the Corporate Peer Challenge report.

VFM - Reporting (continued)



Reporting

Reporting Criteria

Governance: How the Council ensures that it makes informed decisions and properly manages its risks

DARDROOM

Improving economy, efficiency and effectiveness: How the Council uses information about its costs and performance to improve the way it manages and delivers its services

Risks of significant weaknesses in arrangements identified?

Annual Governance Statement

The Draft 2023/24 Annual Governance Statement (AGS) identified the following significant governance issues for 2023/24:

- > Children Services responses to OFSTED inspection
- > Governance and Internal Control, reflecting the findings of Internal Audit and the Peer Review.
- ➤ Partnership Working the need to ensure the Council's governance arrangements for partnership working are robust, transparent and appropriately led with sufficient scrutiny and over-sight.

In addition to the above Council funding which was a prior year governance issues was restated for 2023/24.

Actual significant weaknesses in arrangements identified?

The AGS demonstrates that there are arrangements in place for the Council to identify governance issues and to establish plans to address relevant areas.

However, the AGS identifies weaknesses in arrangements for 2023/24 in respect of partnership working which is represents a significant weakness.

Conclusion and Recommendation

Weaknesses in the arrangements for the governance of the Council's partnership working can result in the Council committing scarce resources to programmes which are inconsistent with the Council's strategic priorities and fail to deliver the desired outcomes for local residents.

Recommendation: The Council should ensure all formal partnership arrangements are identified, that governance arrangements are reviewed and that the activities of the partnership are delivering the expected outcomes for residents.



Assessment of Control Environment

Financial controls

As part of our audit of the financial statements, we obtained an understanding of internal control sufficient to plan our audit and determine the nature, timing and extent of testing performed. Although our audit was not designed to express an opinion on the effectiveness of internal control, we are required to communicate to you significant deficiencies in internal control including group-wide or at components.

The matters reported in this section are limited to those that we identified during the audit and that we concluded are of sufficient importance to merit being reported to you.

The table below provides an overview of the 'high' 'moderate' and 'low' rated observations we have from the 2023/24 audit (including IT controls).

	High	Moderate	Low	Total
Total points identified	3	0	0	3

Kev:



A weakness which does not seriously detract from the internal control framework. If required, action should be taken within 6-12 months.



Matters and/or issues are considered to be of major importance to maintenance of internal control, good corporate governance or best practice for processes. Action should be taken within six months.



Matters and/or issues are considered to be fundamental to the mitigation of material risk, maintenance of internal control or good corporate governance. Action should be taken either immediately or within three months.

Control observations 2023/24

Financial Statements Area	R/A/G Rating	Observation	Impact / Recommendation	Management Comment
Audit preparedness	•	Audit evidence was not readily available at the start of the audit.	Due to other operational commitments on the finance team there were delays in the provision of supporting information. A project plan will need to be agreed to support the 2024/25 audit and in doing so management should ensure there are sufficient resources available to provide timely and accurate supporting information and working papers.	The 2024/25 closure timeline was set with the aim of achieving the 30 June 2025 deadline date for the production of the Draft Financial Statements. However, delays in completing the Accounts were mainly as a consequence of the implementation of IFRS16 (PPE/PFI) and engagement of external advisors, a significant volume of fixed asset valuations (5 yr cycle) and resources through the closure period. The Draft 2024/25 Statement of Accounts were completed in August 2025. For the 2024/25 audit of Accounts, a Timetable and a Finance Team Responsibility plan has been prepared for the production of the Statement of Accounts and shared with External Auditors. The team are working with EY as part of this year's audit and the team are having twice weekly meetings with EY throughout.

Assessment of Control Environment

Control observations 2023/24

Financial Statements Area	R/A/G Rating	Observation	Impact / Recommendation	Management Comment
Audit preparedness		System reports to facilitate sample selection were not available.	System reports for account balances were not available in a format to enable the identification of the true population making up the balance and facilitate our sample selection. The year end balance reports for Debtors and Creditors included full year transactions and adjustments without isolating the year end population. Management should review the system reporting functions to ensure year end reports readily identify the actual population of transactions that support the reported balances.	For 2024/25, the proposal for Debtors and Creditors is to is to use the following approach: (i) Unit4 system reports to support system debtors and creditor balances (these have been run and saved as at 31.03.25), (ii) Support manual accruals for debtors and creditors from the Year End Accrual Logs (reconciled to Trial Balance codes), (iii) Other Debtor/Creditor balances supported by individual working papers to identify the population. There has been good progress with ensuring that information is ready for the Main 24/25 audit to start in earnest, with working papers now prepared and it is envisaged that all documents will be ready in time for the audit work commencing in November.
Bank reconciliation		Bank reconciliation was not prepared on a regular basis.	As a result of changes in the finance team and capacity issues during the year the bank reconciliation was not undertaken on a monthly basis. We noted that the year end 31 March 2024 bank reconciliation was not completed until October 2024. The bank reconciliation is a fundamental control and management should ensure there are at least up to date monthly reconciliations undertaken during the year.	The 2024/25 Bank Reconciliation process in terms of which reports and the timing of running those reports has been reviewed. Bank Reconciliations are being finalised for March 2025 as part of Closure of Accounts and monthly reconciliations are to be performed for 2025/26. There are 3 separate accounts to the Bank Reconciliations which are now being done each month. There is an ongoing requirement to ensure that there are sufficient resources to complete the reconciliations in line with the agreed timescales. It is acknowledged that there is ongoing work to progress in this area which is being addressed.



Appendix A - Non-Compliance with Laws and Regulations (NOCLAR)

Non-Compliance with Laws and Regulations includes:

Any act or suspected act of omission or commission (intentional or otherwise) by the entity (including any third parties under the control of the entity such as subsidiaries, those charged with governance or management or an employee acting on behalf of the company), either intentional or unintentional, which are contrary to the prevailing laws or regulations

Management Responsibilities:

"It is the responsibility of management, with the oversight of those charged with governance, to ensure that the entity's operations are conducted in accordance with the provisions of laws and regulations, including compliance with the provisions of laws and regulations that determine the reported amounts and disclosures in an entity's financial statements."

to the effect that... so far as the director is aware, there is no relevant audit information of which the company's auditor is unaware, and he has taken all the steps that he ought to have taken as a director in order to make himself aware of any relevant audit information and to establish that the company's auditor is aware of that information."

"The directors' report must contain a statement

"Management is responsible for communicating to us on a timely basis, to the extent that management or those charged with governance are aware, all instances of identified or suspected non-compliance with laws and regulations ..."

Audit Engagement Letter

Management's responsibilities are also set out in the International Ethics Standard Board of Accountants' International Code of Ethics (IESBA Code) Para 360.08

Auditor Responsibilities

The International Ethics Standard Board of Accountants' International Code of Ethics (IESBA Code) section 360 sets out the scope and procedures in relation to responding to actual or suspected non-compliance with laws and regulations.

Professional accountancy organisations who are members of the International Federation of Accountants (IFAC), such as the Institute of Chartered Accountants in England and Wales (ICAEW) are required to adopt the IESBA Code of Ethics.

We as your auditor are required to comply with the Code by virtue of our registration with ICAFW.

"If the auditor becomes aware of information concerning an instance of non-compliance or suspected non-compliance with laws and regulations, the auditor shall obtain:

An understanding of the nature of the act and the circumstances in which it has occurred; and Further information to evaluate the possible effect on the financial statements

The auditor shall evaluate the implications of the identified or suspected non-compliance in relation to other aspects of the audit, including the auditor's risk assessment and the reliability of written representations, and take appropriate action."

ISA 250A, paras 19 and 22

Examples of Non-Compliance with Laws and Regulations (NOCLAR)

Matter

- Suspected or known fraud or bribery
- ► Health and Safety incident
- ► Payment of an unlawful dividend
- ► Loss of personal data
- ► Allegation of discrimination in dismissal
- ► HMRC or other regulatory investigation
- ▶ Deliberate journal mis-posting or allegations of financial impropriety
- Transacting business with sanctioned individuals

Implication

- ▶ Potential fraud/breach of anti-bribery legislation
- Potential breach of section 2 of the Health and Safety at Work Act 1974
- ► Potential breach of Companies Act 2006
- Potential GDPR breach
- ▶ Potential non-compliance with employment laws
- Suspicion of non-compliance with laws/regulations
- Potential fraud / breach of Companies Act 2006
- Potential breach of sanctions regulations

Appendix A - Non-Compliance with Laws and Regulations (NOCLAR) (cont'd)

What are the implications of NOCLAR matters arising?

Depending on the nature and significance of the NOCLAR matter the following steps are likely to be required, involving additional input from both management and audit.

This can have an impact on overall achievability of audit timeline and fees.

Across our portfolio of audits we have seen a steady increase in NOCLAR matters that need to be addressed as part of the audit over the past 3 years



Management response:

Timely communication of the matter to auditors (within a couple of days)

Determine who will carry out any investigation into the matter - in-house or external specialists or mix of both

Scope the investigation, in discussion with the auditors

Evaluate findings and agree next steps

Determine effect on financial statements including disclosures

Prepare a paper, summarising the outcome of the investigation and management's conclusions

Communicate the outcome to Those Charged With Governance (TCWG) and to us as your auditors. Report to regulators where required.

Key Reminders:

- Make sure that all areas of the business are aware of what constitutes actual or potential non-compliance and associated requirements
- Communicate with us as your auditors on a timely basis - do not wait for scheduled audit catch-ups
- Engage external specialists where needed
- Ensure that your investigation assesses any wider potential impacts arising from the matter, not just the matter itself.
- Plan upfront and consider any impact on overall accounts preparation and audit timeline - discuss the implications with us as your auditor

Audit response:

Initial assessment of the NOCLAR matter and its potential impact

Initial consultation with risk team to determine responsive procedures and the involvement of specialists

Understand and agree scope of management's investigation with support from specialists as needed

Evaluate findings and undertake appropriate audit procedures

Determine audit related impact including accounting and disclosure and audit opinion implications

Document and consult on the outcome of our procedures

Communicate the outcome with management, TCWG and where necessary other auditors within the group or regulators

Appendix B - PSAA Statement of Responsibilities

As set out on the next page our fee is based on the assumption that the Council complies with PSAA's Statement of Responsibilities of auditors and audited bodies. In particular the Council should have regard to paragraphs 26-28 of the Statement of Responsibilities which clearly set out what is expected of audited bodies in preparing their financial statements. We set out these paragraphs in full below:

Preparation of the statement of accounts

26. Audited bodies are expected to follow Good Industry Practice and applicable recommendations and guidance from CIPFA and, as applicable, other relevant organisations as to proper accounting procedures and controls, including in the preparation and review of working papers and financial statements.

27. In preparing their statement of accounts, audited bodies are expected to:

- prepare realistic plans that include clear targets and achievable timetables for the production of the financial statements:
- ensure that finance staff have access to appropriate resources to enable compliance with the requirements of the applicable financial framework, including having access to the current copy of the CIPFA/LASAAC Code, applicable disclosure checklists, and any other relevant CIPFA Codes.
- assign responsibilities clearly to staff with the appropriate expertise and experience:
- provide necessary resources to enable delivery of the plan:
- maintain adequate documentation in support of the financial statements and, at the start of the audit, providing a complete set of working papers that provide an adequate explanation of the entries in those financial statements including the appropriateness of the accounting policies used and the judgements and estimates made by management;
- ensure that senior management monitors, supervises and reviews work to meet agreed standards and deadlines;
- ensure that a senior individual at top management level personally reviews and approves the financial statements before presentation to the auditor; and
- during the course of the audit provide responses to auditor queries on a timely basis.

28. If draft financial statements and supporting working papers of appropriate quality are not available at the agreed start date of the audit, the auditor may be unable to meet the planned audit timetable and the start date of the audit will be delayed.

Appendix C - Summary of assurances

Summary of Assurances

As we have set out in Section 3 and the Executive Summary of this report, that we anticipate issuing a disclaimer of opinion on the 2023/24 financial statements. Due to a number of issues experienced in the provision of timely and suitable audit evidence, we have not been able to obtain assurance over the majority of balances and disclosures in the financial statements. We have set out below the assurance level we have been able to obtain in each area below.

We do not provide a separate opinion on these matters as the assurance we have gained is in the context of our audit of the financial statements as a whole, and our disclaimer of opinion on those financial statements.

Account area	Assurance rating	Summary of work performed
Journals	None	We have faced challenges in completing the data required for Data Analytics. Though we were able to map out the balances of the 2023/24 Accounts, mapping for the 2022/23 accounts was different therefore the data was not comparable. We have not reached a resolution to the mapping issues during the audit period.
Property, Plant and Equipment ('PPE')	None	 We have: Reconciled balances between the general ledger and the FAR Selected samples for PPE additions and disposals in year to agree underlying evidence. Due to delays in provision of accurate listings to sample transactions from, and exacerbated by the volume of queries for a large sample, testing was not completed during the audit period. Performed a review of the existence of PPE at the Balance Sheet date. Due to issues in the quality of evidence provided, testing was not completed during the audit period Judgementally selected a sample of assets valued in year, agreeing to underlying evidence, including independently challenging key assumptions used and checking that journals for the revaluation movements had been accurately posted. We were not provided all of the requested supporting evidence and were therefore unable to complete the full set of procedures during the audit period
Investment Property	None	We have: ➤ Reconciled balances disclosed in the financial statements to the trial balance as at YE. ➤ We have agreed the disclosures to the Council's Investment Property Register. Samples were selected to test for existence. 5 out of 6 samples were tested with no exceptions noted. 1 sample was still under query when audit work has ceased. ➤ We have not completed our planned procedures under the valuations area although samples were selected. Management were not able to provide sufficient evidence to support the balance.
Intangible Assets	None	We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Long Term and Short Term Investments	None	 We have: Agreed the Long and short Term investments figures from the financial statement notes to the schedules provided. The balances were then reconciled to the trial balance as at YE for both long and short term investments separately. We connected each external counterparty and obtained confirmations of all long term investments and short term investments / cash equivalents. We have tested the details of the confirmations against the details which were present within underlying schedules. From the testing performed, we have completed our testing for 12 out of 19 investment balances amounting to £39.3m. 2 confirmations are yet to be received, with the rest with open queries when the audit work has ceased.
Long Term Debtors	None	We have agreed the balance of Long Term Debtors to the schedule provided and noted that majority of the balance pertains to leases, given that we have not completed our procedures related to leases, we have not obtained assurance over the closing balance at 31 March 2024 for the account.

Appendix C - Summary of assurances

Summary of Assurances

Account area	Assurance rating	Summary of work performed
Short Term Debtors	None	 We raised queries in relation to Debtors listings from the commencement of work in this area, however management have been unable to resolve and provide the requested reports to enable us to appropriately test the balance. We identified queries in relation to the bad debt provision, however we did not receive a response on this prior to the cessation of our work. We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Cash and Cash equivalents	None	We experienced difficulties and delays in providing supporting reconciliations and explanations in order for us to complete our procedures, with the majority of detail not provided until the decision was made to cease work on the audit. We have therefore not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Creditors (short and long term)	None	 We raised queries in relation to Creditors listings from the commencement of work in this area, however management have been unable to resolve and provide the requested reports to enable us to appropriately test the balance. Work to test cut-off and post-year-end payments have commenced but due to the number of queries that arose, work was not completed. We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Borrowings (short and long term)	None	 We have: Agreed the Long and short Term Borrowings figures from the financial statement notes, to underlying schedules. We have then agreed this to the trial balance. Approached each external counterparty and obtained confirmations of all long term borrowings and short term borrowings and tested the balance based on the confirmation responses. From the testing performed, we have tested 66 out of 70 loans with the total balance of £311.9 mil.
Provisions (short and long term)	None	We have completed our planned audit procedures in respect of existence and valuation of provisions, however due to issues in other areas of our testing we are unable to obtain assurance in respect of the completeness of provisions at 31 March 2024.
Grants received in advance	None	We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Local Government Pension Scheme Liability	None	We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Reserves	None	We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Comprehensive Income and Expenditure Statement (including staff costs)	None	We have not completed our planned audit procedures in this area and have not obtained assurance over the closing balance at 31 March 2024.
Group financial statements and consolidation		Due to the number of areas feeding into the consolidated statements that were not subject to full audit procedures, it was determined to reduce the priority of reviewing group disclosures, as such this area has not been audited.

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Appendix C - Summary of assurances

Summary of Assurances

ating	Summary of work performed
None	Given the extent of assurance gained across the financial statements, we would not be able to provide assurance over the cash flow statement.
Partial	We have completed our planned audit procedures for this area which are subject to executive review.
None	We have reviewed the PFI model. However, we were unable to agree the underlying agreements and tie back the model to the disclosures on the financial statements before during the audit period due to delays experienced in the requested documents.
None	Given the extent of assurance gained across the financial statements, we would not be able tor provide assurance on all other significant notes to the accounts.
None	We have reviewed the Minimum Revenue Provision Disclosure and Policy and have raised related queries linked to the calculation method. Differences to the disclosure and the calculation was identified. We requested reports to support calculations, however, we did not receive the responses needed to complete the audit of the account.
Substantial	 We reviewed the collection fund statement for 23/24 and obtained the Council's workings behind each balance within the statement. We reviewed the workpapers to confirm how the balances were reached, and then obtained the transactions for Council tax and NNDR for the year. We agreed the transactions to supporting evidences provided. No issues were noted.
Substantial	We have: ➤ Reviewed Note 22 of the financial statements, which discloses remuneration bandings for officers, including school and other officers, for 2023/24. Detailed remuneration listings for both groups were obtained, and 25 samples from each group were randomly selected and tested against their payslips and other supporting documents as appropriate. ➤ Reviewed Note 23 of the financial statements, which discloses senior employees' remuneration for 2023/24. All senior employees' remuneration was tested by verifying year-to-date pay figures against their final month's payslips and the R2R216 Report, which provided a detailed breakdown of their annual pay.
Partial	We have: Checked Note 33 for consistency with CIPFA code, knowledge of the Council and internal clerical consistency and have made reference to other parts of the audit file where relevant. Obtained a listing of the members that constitute for inclusion within the related parties testing and ensured the total amounts tested reconciles to the disclosed amount per note 33. Obtained declaration forms where each of these members stated their related parties and tested these declarations against the schedule provided and publicly published information from Companies House to determine if all interests have been disclosed. Performed procedures to address completeness documented within our group boundary assessment Performed board minutes review to confirm existence of RPTs that have not already been identified or disclosed to us by management from the minutes inspected. However, we were not able to perform our procedures related to journal entry testing to check for completeness of disclosed related party transactions.
	Partial None None None ubstantial

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