Agenda Item No.7

INTERNAL AUDIT PROGRESS REPORT

To: Audit & Accounts Committee

Date: 24th September 2019

From: Duncan Wilkinson, LGSS Chief Internal Auditor

1. PURPOSE

1.1 To report on the main areas of audit coverage for the period to 31st August 2019 and the key control issues arising since the last update provided to the Audit & Accounts Committee on 29th July.

2. BACKGROUND

- 2.1 The role of Internal Audit is to provide the Audit Committee and Management independent assurance on the effectiveness of the controls in place to ensure that the Council's objectives are achieved. Internal Audit coverage is planned so that the focus is upon those areas and risks which will most impact upon the Council's ability to achieve these objectives.
- 2.2 Committee members are requested to note and comment on the report.

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Background papers: None





LGSS Internal Audit & Risk Management

Cambridgeshire County Council

Update report

As at 31st August 2019





1. FINALISED ASSIGNMENTS

1.1 Since the previous Progress Report in July 2019, the following audit assignments have reached completion, as set out below in Table 1.

Table 1: Finalised Assignments

No.	Directorate	Assignment	Compliance Assurance	Systems Assurance	Organisational impact
1.	Place & Economy	Local Transport Capital Block Funding	Grant certification provided		
2.	Place & Economy	Safer Roads Funding	Grant certification provided		
2.	Place & Economy	Pothole Action Fund	Grant certification provided		
2.	Place & Economy	Cycle City II	Grant certification provided		

- 1.2 Summaries of the finalised reports with satisfactory or less assurance are provided in Section 4.
- 1.3 The following audit assignments have reached draft report stage, as set out below in table 2:

Table 2: Draft Reports

No.	Directorate Assignment		
1.	People & Communities	Direct Payments Compliance	
2.	Resources	Fire Safety Checks	
3.	Place & Economy	Cost Recovery in Place & Economy	

1.4 Further information on work planned and in progress may be found in the Audit Plan, attached as Annex A.





2. FRAUD AND CORRUPTION UPDATE

2.1 CURRENT INTERNAL AUDIT INVESTIGATIONS:

A summary of the current investigative caseload of the Internal Audit team is provided below at Table 3. This includes investigations relating to suspected theft, fraud or misuse of funds, which are led by Internal Audit.

Table 3: Internal Audit Investigations Caseload

Case Category	Description of activity or risk example	No.	Outcomes
	FACT Investigation	1	Ongoing support to post- report process.
	Whistleblowing concerns	5	Closed, either no concerns or advice provided.
		1	Investigation in progress.
Investigations	Allegations regarding misuse of a Direct Payment		Investigation in progress.
	Manor Farm Tenancy Review	1	Draft report stage.
	Cash thefts	3	Referred to police.
	Suspected bank mandate fraud at a school	2	Advice provided.
Totals		14	

2.2 WHISTLEBLOWING REFERRALS:

A high level of whistleblowing referrals have been received by Internal Audit to date in 2019/20, with 10 new referrals received in this financial year to the end of August. This compares to 4 received during the same period in 2018/19. The referrals cover a range of issues from thefts to actual or attempted bank mandate fraud, and concerns raised regarding governance or potential safeguarding risk.

The high level of referrals received is seen to be a positive indicator of the success of Internal Audit's continued promotion of the Council's whistleblowing policy, as





part of an effective governance framework across the Council. However, the high level of referrals does not appear to indicate an increase in serious concerns

- In 4 instances, no concerns were identified after initial review of the whistleblowing content and brief preliminary investigation. In all instances, Audit responded to the whistleblower either to confirm that no concerns were identified or to inform them that their concern was being passported to the correct internal process (e.g. the complaints process).
- In a further 4 cases, Internal Audit has provided or continues to provide advice and guidance to the affected service, but there is no cause for a full Internal Audit investigation.
- In 2 cases, Internal Audit is undertaking or providing support to an internal investigation.

2.3 NATIONAL ANTI-FRAUD NETWORK:(NAFN)

Audit & Accounts Committee previously requested information on the National Anti-Fraud Network sometimes used by LGSS Internal Audit's Counter Fraud team.

Cambridgeshire County Council subscribes to NAFN, primarily for the use of the Trading Standards service. The Council does not own social housing and to date the Counter Fraud team have not been requested to investigate any potential NRPF cases at Cambridgeshire, and therefore the Cambridgeshire subscription has not been used to date by Internal Audit for the purpose of investigations, although access is available. The team does benefit from NAFN's information-sharing network, and any fraud alerts are shared with members of the Cambridgeshire Internal Audit team.





3 IMPLEMENTATION OF MANAGEMENT ACTIONS

- 3.1 The outstanding management actions as at the end of July 2019 are summarised in Table 4 below, which includes a comparison with the percentage implementation from the previous report (bracketed figures).
- 3.2 There are currently 15 management actions outstanding. Positive progress has been made from the previous report to Committee, with a decrease in the percentage of unimplemented actions, particularly in those due for over three months. Further detail on all outstanding actions is provided at Annex B.

	Cate 'Esse recomme	ntial'	Category 'Important' recommendations		Total	
	Number	% of total	Number	% of total	Number	% of total
Implemented	1	2% (0%)	32	67% (48%)	33	69% (48%)
Actions due within last 3 months, but not implemented	0	0% (0%)	11	23% (27%)	11	23% (27%)
Actions due over 3 months ago, but not implemented	0	0% (0%)	4	8% (24%)	4	8% (24%)
Totals	1		47		48	

Table 4: Outstanding Management Actions (Year To Date)

3.3 At present, 15 actions remain due but unimplemented. For these actions, Internal Audit is aware of progress being made to implement actions, and delays relate primarily to circumstances outside the service's control, such as a need to seek legal advice, or difficulties in accessing reporting. Detail of progress with all actions is reported at Annex B for information.





4. SUMMARIES OF COMPLETED AUDITS WITH SATISFACTORY OR LESS ASSURANCE

No such reviews have been issued since the previous Internal Audit Progress Report.





5. OTHER AUDIT ACTIVITY

5.1 UPDATES TO THE INTERNAL AUDIT PLAN 2019/20

In each Progress Report, Internal Audit outlines any proposed changes or updates to the annual Audit Plan in light of additional pressures and/or the evolving risk profile of the Council. In simple terms, where additional priority jobs are added into the Plan or where time allocations are insufficient, Joint Management Team (JMT) and Committee will determine where to flex planned audit coverage in the financial year based on their current assessment of priority and risk.

5.1.1 Pressures on the Internal Audit Plan:

The following audits represent areas of pressure on the Internal Audit Plan. Proposals to address this pressure are under development and will be reported to the November meeting of the Committee:

- Manor Farm Tenancy Investigation and associated work: The complexity of the Manor Farm Tenancy investigation has proved greater than initially expected. Additionally, as a result of findings made during the review it has been necessary to undertake an additional, separate audit of the County Farms service as a whole.
- **Rental Income:** Findings made during the course of this audit have resulted in a requirement to undertake additional work, and the audit fieldwork as a whole has been complicated and extended as a result of the current record-keeping systems within the service.
- **Contract Management Policy and Guidance:** Internal Audit has proposed to slightly extend the planned time budget for this review, in order to undertake unplanned additional value-added work which falls within the scope of the review and will provide new guidance and support to staff on the crucial area of contract management.
- Highways Contract Open Book Review: Internal Audit continue to undertake work on the Highways Contract. The complexity of undertaking an open-book review requires significant audit time, and this has been further complicated by the record-keeping systems in place. In addition to undertaking work on the review itself, Audit have been required to provide





substantial support to the development of new systems and processes around the administration and oversight of the contract and charges.

• LGSS Law: Additional time has been required to complete this review due to the difficulties experienced in obtaining expected documentation (in part due to staff turnover both within CCC and LGSS) and the need to complete additional work.





ANNEX A

CCC INTERNAL AUDIT PLAN 2019/20

Summary of Progress:

Total Completed Audits from 2019/20 Audit Plan	4
Total Audits at Draft Report Stage	3
Total "Ongoing" Work (i.e. which does not have a specific end date, but will close at the end of the financial year)	10
Total Open Audits	22
Total Not Yet Opened Audits	37

Full Audit Plan:

Audit	Status	Quarter Opened	Quarter Closed
VAT	NOT OPENED		
Unannounced Visits	OPEN	Q2	
Development of Project Assurance Framework	ONGOING	Q1	N/A
Project Assurance of High Risk Projects	NOT OPENED		
Business Continuity	OPEN	Q1	
Financial Planning, Demand Management and Control	NOT OPENED		
Financial Regulations Monitoring & Compliance, including Delegated Authorities	NOT OPENED		
Capital Project Variations and Overspends	NOT OPENED		
Contract Management - Cambridgeshire Energy Performance Contracting Project	CANCELLED	N/A	N/A
Contract Management - Eastern Highways Alliance	OPEN	Q2	
Contract Management - Provision of Community Equipment Services	NOT OPENED		





Contract Management - Home and Community Support Service Framework	OPEN	Q2	
Contract Management – Supported Living Services for Adults with a Learning Disability	NOT OPENED		
Contract Management - Integrated Drug and Alcohol Treatment System	NOT OPENED		
Contract Management - Cambridgeshire Lifestyle Services	OPEN	Q1	
High Value Supplier Contract Management Reviews	NOT OPENED		
Business Continuity for Key Contracts	NOT OPENED		
Contract Management Policy and Guidance	OPEN		
Transformation Fund Benefits Realisation	OPEN	Q2	
Fees and Charges Policy & Compliance	NOT OPENED		
Annual Key Policies & Procedures Review	NOT OPENED		
Key Performance Indicators	CANCELLED	N/A	N/A
Corporate Key Performance Indicator Framework	NOT OPENED		
Procurement Governance	NOT OPENED		
Procurement Compliance	OPEN	Q2	
Procurement Waivers for Procurement Outside Contract Procedure Rules	NOT OPENED		
Consultancy Policy Compliance	NOT OPENED		
LGSS Law Ltd	OPEN	Q1	
Regulation of Investigatory Powers Act Policy Compliance	OPEN	Q2	
Property Asset Disposals & Acquisitions Policy Compliance	NOT OPENED		
County Farms Process & Practice	OPEN	Q1	
Fire Safety Checks	OPEN	Q1	
Most Economically Advantageous Tenders	CANCELLED	N/A	N/A
Rental Income	OPEN	Q1	
This Land Limited	OPEN	Q1	
Annual Whistleblowing Policy Report and Awareness	NOT OPENED		
Direct Payments - Prepayment Cards	NOT OPENED		
Troubled Families Grant	ONGOING	Q1	N/A
Schools Payroll and Safe Recruitment	NOT OPENED		
Disabled Facilities Grant	OPEN	Q1	
Special Educational Needs Placements	NOT OPENED		
Annual Safeguarding Assurance	OPEN	Q2	
Key Inspection Action Plans	CANCELLED	N/A	N/A
Provision of Section 17 Financial Assistance	OPEN	Q1	
Strategic Approach to Schools Charging	CANCELLED	N/A	N/A
Adult Social Care Finance			
	NOT OPENED		





Other People & Communities Risk Based Audits	CANCELLED	N/A	N/A
Safeguarding Clients' Personal Assets - Compliance	NOT OPENED		
Highways Contract Open Book Review	OPEN	Q1	
Highways Commercial Group	ONGOING	Q1	N/A
Street Lighting PFI Open Book Review	NOT OPENED		
Waste PFI Renegotiation of Contract	ONGOING	Q1	N/A
Local Transport Capital Block Funding	CLOSED	Q1	Q2
Bus Service Operators	CLOSED	Q1	Q1
Pothole Action Fund	CLOSED	Q1	Q2
Cycle City Phase II	CLOSED	Q1	Q2
National Productivity Fund	CANCELLED	N/A	N/A
Safer Roads Funding	CLOSED	Q1	Q2
Chisholm Trail 19 - 20	OPEN	Q2	
SWIM Grant	CANCELLED	N/A	N/A
Cambridgeshire Challenge Fund	CANCELLED	N/A	N/A
Flood Resilience Fund	CANCELLED	N/A	N/A
Coroners Service	OPEN	Q1	
Additional Highways Maintenance Grant	CLOSED	Q1	Q1
Broadband Grant	CANCELLED	N/A	N/A
Complaints Process	NOT OPENED		
Accounts Receivable	NOT OPENED		
Purchase to Pay	NOT OPENED		
CHAPS Payments Review	OPEN	Q1	
Payroll	NOT OPENED		
General Ledger	NOT OPENED		
Bank Reconciliation	NOT OPENED		
Treasury Management	NOT OPENED		
Annual Assurance on Risk Management	NOT OPENED		
Debt Recovery	OPEN	Q1	
Pensions	NOT OPENED	-	
Risk Management			
Annual Governance Statement/Code of Corporate Governance	NOT OPENED		
General Data Protection Regulations Implementation	NOT OPENED		
Information Technology Audit Plan	NOT OPENED		
Financial Systems IT General Controls	NOT OPENED		
Fraud Referrals			
Fraud Investigations			
Community Transport Investigation 2019 - 20	ONGOING	Q1	N/A
Manor Farm Tenancy Review	OPEN	Q1	





Concessionary Travel Investigations (ad hoc)			
National Fraud Initiative			
Advice & Guidance	ONGOING	Q1	N/A
Freedom of Information Requests	ONGOING	Q1	N/A
Follow-Ups of Agreed Actions	ONGOING	Q1	N/A
Audit Plan	ONGOING	Q1	N/A
Committee Reporting	ONGOING	Q1	N/A
Management Reporting	ONGOING	Q1	N/A
Information Management Board			
Schools Causing Concern			





ANNEX B

Summary of Outstanding Recommendations – under 3 months

(Recommendations as at the end July 2019).

Audit	Risk level	Summary of Recommendation	Target Date	Status
Fostering Contract Management	1	Overpayments to Level 6 Carers: Review the payments to this couple to establish whether they are reasonable and in line with policy, and whether placements with the couple represent value for money in terms of the costs paid per child. Update the file and inform the Business Systems teams of any decisions regarding this couple, ensuring that any decision to continue with varying the usual terms of the foster carer scheme for this couple, if it is confirmed as being value for money, are fully documented with a clear approval from the Head of Service.	31/05/19	The Interim Residential and Placements Manager reported that this is partially complete, mainly due to the historical nature of this agreement and time it has taken to locate the agreement. The agreements have been located and reviewed and shared with Legal services for a view, with advice expected to be received. Following this, payment can be challenged although further specialist advice may need to be commissioned. Revised target date: 30 th September 2019
Fostering Contract Management		Lack of clarity over use of basic allowance for in- house placements: Conduct a review to ensure that all carers have a signed agreement on file. Review the process by which mileage expenses are claimed and approved for in-house carers.	01/06/19	The Interim Residential and Placements Manager reported that the foster carer agreement document has been reviewed and updated to ensure it is compliant with Foster Care National Minimum Standards, but is still in draft phase. The aim is to have it in place for use by carers by September and as at the end of August the action is on track. Revised target date: 30th September 2019
Fostering Contract	I	No control process to identify errors in in-house payments:	01/07/19	The Interim Residential and Placements Manager reported that there is currently a new draft





Management		Create a payment policy document that clearly sets out the different scenarios that occur and how they are paid for, such as: respite breaks, children going to university, level 6 carers with a staying put placement etc. Include details about IFA carers transferring to in-house, and the fee agreements relating to children already in place.		payment policy document and a draft pocket money policy document being created by the Finance Officer and newly-appointed Senior Business Officer. Agreement has been given for a new Fostering
Fostering Contract Management	I	Inequality in pocket money and savings: Review in-house pocket money and savings policy and bring it in line with IFA policy with explicit guidelines.	31/07/19	Finance Officer post and the implementation of this action is delayed until the recruitment to this post. Revised target date: 30 th October 2019
Fostering Contract Management		Understanding of In-House vs IFA Costs: The service should work with Finance to agree an estimate for the true cost of in-house placements. Linked to this, the service's policy and guidance should be updated to include a charging policy for external children placed with in-house carers. It is recommended that this should include the £200 weekly charge for the Council's overheads for maintaining these placements (or an alternative overhead cost if agreed with Finance) and quarterly invoicing for all such placements.	30/06/19	The first stage of completion is to understand the actual costs of Independent Fostering Agency (IFA) placements. This has now been completed as the retender of the Fostering Framework Agreement has been carried out. The next stage is to complete the review of CCC costs and benchmark these against the IFA costs, which is currently underway and will inform the review of CCC Foster Carer Payments scheme including the charging policy.
Annual Assurance on Risk Management	1	Directorate Risk Registers are not up to date: As a minimum, The C&CS Directorate Risk Registers should be brought up to date and then reviewed on a quarterly basis. The C&CS (now the C&DS) Risk Register will be reviewed by the end of May by the C&DS Management Team	31/05/19	The Risk Register has been reviewed by C&DS Directorate Management Team on 19 th August and significant changes proposed. This is now in the process of being formally revised and updated. Revised target date: 30th September 2019
Annual Assurance on	I	Directorate Risk Register is not in place The Directorates should consider if their risks are included	18/06/19	This recommendation has been complied with and the decision taken to produce a Directorate





Risk Management		in the Corporate Risk Register and if there is a need for a Directorate Risk Register. If this is not the case this will need to be formally approved by SMT. Business Improvement and Development DMT to discuss if there is a need to have a risk register		Risk Register for the Business Development & Improvement Directorate. Whilst this has yet to be completed, a Risk Workshop to do this has been arranged for October. Revised target date: 31 st October 2019
Transport Contract Management	1	 Monitoring Schedule: The monitoring procedure should be reviewed and updated. This should include a procedure to ensure that suppliers who are found to have breached the Terms and Conditions of the contract are re-monitored sometime in the next two months, ideally with multiple supplier routes monitored after a breach. A process should also be introduced to ensure that all suppliers are monitored at least once per year. The service should consider introducing reporting to senior management a summary of breaches at the end of each term, with serious breaches and terminations reported immediately at management discretion. The breaches record spreadsheet and monitoring history spreadsheet should be amalgamated into a single document. 	31/05/19	A draft proposed process has been produced by the Social & Education Transport Team and provided to Internal Audit. Audit review identified that while positive progress has been made, the document as proposed does not currently fully address the risks identified by the audit review. In particular, the process needs to be developed further to demonstrate how the team will ensure re-monitoring of suppliers who have breached their contracts, and to ensure centralised oversight is possible. Revised target date: 30th September 2019
Transport Contract Management	1	Length of Call For Tenders: Minimum tender times of at least one week should be established for all regular tenders, and the service should aim to allow more time than this in most cases.	31/05/19	A draft process has been developed and provided to Internal Audit. Audit review identified that while positive progress has been made, the document as proposed does not currently fully address the risks identified by the audit review. In particular, the process does not fully enforce minimum tender times to ensure best value is obtained from contracts.





				Revised target date: 30 th September 2019
Transport Contract Management	1	Financial processes: A full financial processes review should be conducted by the SETT in conjunction with the Professional Finance team. This should include immediately ensuring that payments made via interface spreadsheet are linked to a SWIFT ID or other relevant identifier. The review should also ensure that interface payments are being used in the most efficient manner, reducing the amount of duplicate entry required and the risk of human error occurring in the payments. The service should also develop a new commitment record spreadsheet for adults and LAC transport, which contains all journeys and client information.	31/07/19	The Finance Business Partner reported that this action hasn't yet been completed, but work is ongoing. In order to get to a point where any of this can be undertaken a data cleanse is required, and this is taking longer than anticipated. The risk therefore remains that the service does not have a comprehensive commitment record on which they can base their forecasts of expenditure and to ensure that all expenditure can be traced back to the relevant service user. Revised target date: 31 st December 2019
Agency Staff Compliance 18/19	1	Non-compliance with Agency Worker Policy remaining unchallenged A quarterly report to be issued to the appropriate director and relevant senior managers, listing all instances of non- compliance with CCC Agency Worker Policy, where managers have not completed and provided the required documentation (Approval to Engage an Agency Worker Form, Extension of Booking Form, Health & Safety Form, Role Description).	31/07/19	The service has recently responded to audit outlining difficulties in providing this info. Internal Audit has scheduled a follow up meeting with the service for October to discuss a proportionate solution. Revised target date: 31 st October 2019





Summary of Outstanding Recommendations – over 3 months

(Recommendations as at the end July 2019).

Audit	Risk level	Summary of Recommendation	Target Date	Status	
3rd Party Assurance	1	Contracts do not have third party assurance requirements: Officers responsible for commissioning high-value contracts with suppliers, who are likely to hold or process large volumes of personal data, should consider including in their specifications that the Council must be provided with appropriate third party assurance over the security of systems. IT and Procurement officers should be aware of the possibility of including these requirements in specifications, and provide advice and guidance to officers commissioning such contracts.	31/05/18	The Business Intelligence Manager confirmed work is progressing on this recommendation but that it is proving more resource-intensive and taking longer than originally anticipated. The Data Protection Officer said they have been contacting all relevant contract managers to advise them that they need to update their contract with the GDPR amendments, and they have received acknowledgments back from the services that they have done this. Internal Audit received a copy of the contract register and there are instances where the services still needs to reply. Revised target date: 31st October 2019	
Direct Payments Compliance	I	 Monitoring done by Direct Payment Support Services: The role of the Direct Payment Support Services in relation to the type and frequency of monitoring they carry out on accounts must be clarified. Direct Payment Monitoring Officers should monitor a sample of trackers with the relevant invoices to ensure Purple/Penderels are paying out money in accordance with the service user's Care and Support plan. 	30/04/18	The Internal Audit team are now reviewing the direct payments contract processes as part of the 2018/19 Direct Payments audit review. This audit is expected to be completed within the next few weeks. Emerging findings are subject to change as audit work continues but currently it anticipated that this outstanding action will be incorporated into more up to date recommendations in this latest audit.	





Use of ConsultantsISuccession Planning: Several instances were identified by the review of interims remaining in post for significant time periods. A review should be undertaken of all posts currently occupied by interims and plans developed to transition these into permanent arrangements through development of existing staff, external recruitment processes etc. Long-term succession plans should be developed for these posts.31/01/19Internal Audit has discussed with the Service Director of Business Improvement and Development and received an initial update: A review has been undertaken covering consultants remaining in post, which is repo quarterly to JMT and A&A Committee.When a repeat exemption to contract procedure rules is approved for appointments of consultants or interims, the Procurement team should follow-up with the service to ensure an appropriate long-term solution is being put in place. Repeat exemptions where Procurement team to senior management at the Council.31/01/19Internal Audit has discussed with the Service Director of Business Improvement and Development and received an initial update: A review has been undertaken covering consultants remaining in post, which is repo quarterly to JMT and A&A Committee.The Procurement team should follow-up with the service to ensure an appropriate long-term solution is being put in place. Repeat exemptions where Procurement team to senior management at the Council.31/01/19Internal Audit has discussed with the Service Director of Business Improvement and Development on repeat exemptions. The B reviews and then escalates to JMT as appropriate.An 'Approval to Recruit' process has been in place since January 2019 where all new or extended recruitments (whether employee, interim or contractor)
Several instances were identified by the review of interims remaining in post for significant time periods. A review should be undertaken of all posts currently occupied by interims and plans developed to transition these into permanent arrangements through development of existing staff, external recruitment processes etc. Long-term succession plans should be developed for these posts. When a repeat exemption to contract procedure rules is approved for appointments of consultants or interims, the Procurement team should follow-up with the service to ensure an appropriate long-term solution is being put in place. Repeat exemptions where Procurement advice is not being taken should be flagged by the Procurement team to senior management at the Council. Succession plans are easing to the service to ensure an appropriate long-term solution is being put in place. Repeat exemptions where Procurement team to senior management at the Council. Succession management at the Council. Succession plans are easing to the service to ensure an appropriate long-term solution is being put in place are peat exemptions where Procurement team to senior management at the Council. Succession management at the Council. Succession plane are peat exemptions where all new or extended recruitments (whether employee, interim or contractor) are signed off by a Dim and reported to JMT on a weekly basis.
PCC - including consultants and interims – v carried out in May 2019 and reviewed by the Shared Services core group on 05/05/2019. Follow up actions to terminate agency and in contracts and/or document procurement pro have been completed. Internal Audit has reminded the Head of Bus Improvement and Development that this act covered the entire organisation, not just sha





Information Governance Policies	M	Asset management policies and procedures: A complete physical asset register, listing the council staff member responsible for the asset should be created If assets are not managed or lost there is a risk of data breaches occurring (and not identified) leading to reputational or financial damage.	30/09/17	Manager by initiating this issue. The Gate (was submitted to the office on 21 st August be able to provide a r	e and Business Intelligence a specific project to address D proposal (project initiation) LGSS project management 2019. The service will not evised implementation date proved and fully scoped.