

FINAL

Review of

Tewkesbury Borough Council's Internal Audit Team

01 March 2018

Elizabeth Humphrey CPFA

Review of Tewkesbury Borough Council's Internal Audit Team (November 2017)

Internal audit within the public sector in the United Kingdom is governed by the Public Sector Internal Audit Standards (PSIAS) which have been in place since 1 April 2013, were revised on 1 April 2016 and have been further revised on 1 April 2017. The standards require periodic selfassessments and an assessment by an external person every five years. Now that Tewkesbury Borough Council's audit team has been operating under the standards for over four years, this was deemed a good time for the first external review. The review also included checking compliance with the Local Government Advisory Note (LGAN) where this has requirements in addition to those in the PSIAS.

The review was carried out through a process of interview and document review. A list of interviewees is included at appendix 2. I should like to thank all those who took the time to talk to me for their help. I reviewed seven audits and one corporate improvement assignment carried out during the 2016/17 and 2017/18 financial years and I examined key documents including the Charter and reports to the Audit Committee.

I identified no areas of non-compliance with the standards that would affect the overall scope or operation of the internal audit activity and I commend the team for their structured and focussed approach and the speed with which they perform assignments. However, the approach taken to audit planning, both annually and for individual audit assignments, needs revising to increase the focus on council objectives and risks, thus increasing the support that internal audit can give to Tewkesbury in achieving the Council Plan. I have made some practical and pragmatic medium priority recommendations (R) and lower priority suggestions (S) to support this. The Head of Corporate Services (referred to as the CAE below) will need to take action to implement them and an action plan is included as appendix I.

| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|---|-----------------------|--|---------------------------------------|-----------|
| Mission | Complies | The audit manual includes the newly developed internal audit mission | Include the mission in the Charter | SI |
| Core principles of internal audit | Partial compliance | No problems were identified in addressing the majority of the Core Principles, other than those relating to planning, both annually and for individual audits. The planned revision of the approach to risk management will enable audit to consider council-wide risks in audit planning, supporting achievement of council plans and objectives. Addressing | See R3, R7, R14 | |

Summary findings and recommendations



| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|--|-----------------------|--|--|-----------|
| | | some of the matters highlighted below will also support the Principles further | | |
| Code of Ethics | Complies | All interviewees stressed the emphasis placed on ethics by the audit team and their independence and objectivity | | |
| Attribute stand | | | | 1 |
| 1000 Purpose, authority and responsibility | Complies | The recently developed Charter is one of the most approachable that I have seen Standard 1010 | | |
| | | There is no reference to the Core Principles in the Charter See also Standard 1112 | Include information about the Core Principles in the Charter, including how audit delivers against them | RI |
| | - | regarding safeguards to be included in the Charter for non-audit work | | R2 |
| I 100 Independence and objectivity | Partial compliance | Standards 1112 and 1130.A2 Several different activities come under the leadership of the CAE. These activities can, potentially, compromise audit's independence and objectivity and the audit team should only undertake audit activities in these areas if safeguards have been put in place to manage this. There are informal arrangements, but no formal safeguards | Safeguards, including independent audit arrangements and/or alternative reporting arrangements (for example, to another member of the management team), should be put in place to manage audit's independence and objectivity where they carry out non-audit activities. These should be discussed with and approved by the Audit Committee and included in the Audit Charter | R2 |
| 1200 Proficiency and due professional care | Partial compliance | Standards 1210.A2, 1220.A1 and 1220.A3 Audits are planned on a risk basis, but the risks considered are often operational and general in nature rather than specific to that audit | Improve audit planning and expand the audit assignment brief to consider more strategic risks and risks that specifically relate to the area being audited, including fraud risks | R3 |



| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|----------------|------------|--|--|-----------|
| 1300 | Partial | Standards 1311 and | | |
| Quality | compliance | LGAN p13 | | |
| assurance and | | The service has not | Undertake internal reviews | R4 |
| improvement | | carried out any reviews | against the PSIAS | |
| programme | | against the PSIAS | periodically, ideally annually | |
| (QAIP) | | although periodic | Occasionally involve others | S2 |
| | | internal reviews are | from within the Council | |
| | | required. They have, | who have sufficient | |
| | | however, carried out | knowledge of audit | |
| | | more general reviews | practices, for example | |
| | | | members of the Audit | |
| | | Standard 1220 | Committee and finance staff | |
| | | Standard 1320 | in audit quality reviews | R5 |
| | | Action plans from the | Report the results of all | КЭ |
| | | general reviews of the service are reported to | reviews against the PSIAS to the audit committee. | |
| | | the Chief Executive but | including an action plan to | |
| | | not to the Audit | enable progress monitoring. | |
| | | Committee, nor are they | Ensure that the results of | |
| | | referenced in the Annual | the review are included in | |
| | | Report | the Annual Report | |
| | | LGAN pl3 | | |
| | | Performance indicators | Ensure that performance | R6 |
| | | are now in place for the | indicators reported in the | |
| | | service and have been | Annual Audit Report show | |
| | | reported. They should | trends over time | |
| | | be reported over time, | | |
| | | showing trends | | |
| Performance s | | | | |
| 2000 | Partial | Standards 2010 and | | |
| Managing the | compliance | 2010.AI | | 57 |
| internal audit | | Annual audit planning is | Undertake annual audit | R7 |
| activity | | carried out using a | planning in consideration of | |
| | | structured methodology but the focus is on audit | the Council's plans, objectives, priorities and | |
| | | risk rather than on | associated risks | |
| | | council-wide risk | Refer to the Charter and | R8 |
| | | The annual plan report | internal audit delivery and | |
| | | does not refer to a | development in the annual | |
| | | number of the required | plan | |
| | | points | F | |
| | | Standards 2040 and | | |
| | | LGAN p12 | | |
| | | The current audit | Ensure completion of the | R9 |
| | | manual is in draft and | audit manual | |
| | | contains reference to | | |
| | | links and appendices that | | |
| | | have not been included | | |
| | | LGAN 7.1.2 | | |
| | | Neither the Charter nor | Include information in the | RI0 |
| | | the audit plan set out | Charter and/or the Annual | |
| | | audit's objectives and | Plan regarding: | |



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| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|-------------------------------|-----------------------|---|--|-----------|
| | | outcomes, the way in which the CAE will form and evidence his opinion on governance and risk management arrangements and the control environment nor how audit's work will identify and address local and national issues and risks LGAN p15 The annual audit plan does not prioritise assignments, making it difficult for the audit committee and senior management to comment usefully about what has been included in the plan | Audit's objectives and outcomes The way in which the CAE will form and evidence his opinion on governance and risk management arrangements and the control environment How audit's work will identify and address local and national issues and risks Prioritise audits in the plan, for example by including the risk scoring or H/M/L ranking | RH |
| 2100 Nature of work | Partial compliance | Standards 2110, 2120.A1 and 2130.A1 The operational nature of the audit plan means that audit does not examine governance activities in relation to strategic decision making, nor does it consider performance management and accountability | Ensure audit planning includes consideration of strategic matters and decision making Consider organisational performance management and accountability in any relevant audit | R7 R3 |
| | | Standard 2110.A1 Some limited work has been undertaken on the implementation and effectiveness of ethics- related activities but this is not a routine part of audit's work | Include ethical aspects more routinely in audits and audit planning, bringing this work together at the year end to form an opinion on ethical activities | R12 |
| | | Standard 2110.A2 The lack of IT audit expertise in the section means that auditors are reliant on ICT staff being honest about IT governance arrangements | Once the IT audit risk assessment is complete, make occasional use of specialist IT auditors for more in-depth reviews | RI3 |



| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|---------------------------------------|-----------------------|--|---|-----------|
| | | Standards 2120 and 2120 C2 There have been no recent audits of risk management arrangements | Once the risk management arrangements have been reviewed and improvements implemented, an audit of the framework is needed as a priority | RI4 |
| 2200 Engagement planning | Partial compliance | Standards 2201, 2210, 2220 and LGAN p19 The audit assignment brief and audit programme do not always cover: Strategies and objectives of the activity being reviewed How the activity controls its performance How the activity contributes to the Council Plan The significant risks to the activity to manage its governance, risk and control processes and criteria against which to judge these The objective of the assignment The probability of errors and non-compliance The systems, records, personnel and physical property to be considered Opportunities to add value | Expand the audit terms of reference as indicated | R3 |





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| Standard | Compliance | Findings | Recommendations and suggestions | Rec no |
|---|-----------------------------------|--|--|-----------|
| 2300 Performing the engagement 2400 Communicating | Complies Partial compliance | The review showed that audits are well- performed and clearly documented. The speed with which audits are turned around and the number of assignments performed are impressive Standard 2410.A1 All auditees are familiar | | |
| the results | | with the opinions used on audits, as are audit committee members and senior management. The form of the opinion is currently being debated, which is good practice. I have made some suggestions for possible alternative forms Standards 2440.AI and CI Reports do not include the name of the CAE and may not be sent out | As a minimum, include the CAE's name on audit reports | RI5 |
| | | by him Standard 2450 The annual internal audit opinion does not take into account the Council Plan and associated risks to conclude on the overall adequacy and effectiveness of the Council's governance, risk and control arrangements. The current form of the annual opinion, stating the number of different levels of opinion given during the year does not enable the reader to reach such a conclusion. There is no statement on conformance with the PSIAS and the results of the QAIP. | Revise the annual report to include: An opinion that refers to the governance, risk and internal control framework The link must be made to the strategies, risks and objectives of the council Reference to the level of compliance with the PSIAS Details of activities as a consequence of the QAIP | RI6 |



| Standard | Compliance | Findings | Recommendations and | Rec no |
|--|------------|---|--|-----------|
| | | LGAN pl9 | suggestions | 110 |
| | | The circulation for reports is included on the audit assignment briefs and the email that accompanies the report but not on the report itself so circulation would be unclear if the report is detached from the email | Include details of report circulation within the report itself | S3 |
| 2500 Monitoring progress | Complies | The follow-up process complies with the standards and all those interviewed understood the process | | |
| 2600 Communicating the acceptance of risks | Complies | There was no evidence that risks have been left unmitigated following an audit, highlighting the importance placed by the officers at the Council on audit findings | | |

The Head of Corporate Services has details of the findings, standard by standard.

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Appendix 1: action plan

Recommendations

| No | Recommendation | Response | Responsible officer | Action date |
|----|---|---|-------------------------------|----------------|
| RI | Include information about the Core Principles in the Charter, including how audit delivers against them | Charter will be updated and presented at Audit Committee for approval. | Head of Corporate Services | July 2018 |
| R2 | Safeguards, including independent audit arrangements and/or alternative reporting arrangements (for example, to another member of the management team), should be put in place to manage audit's independence and objectivity where they carry out non-audit activities. These should be discussed with and approved by the Audit Committee and included in the Audit Charter | Independence of CAE will be discussed at Corporate Governance Group and appropriate arrangements put in place. Charter will be updated accordingly. | Head of Corporate Services | July 2018 |
| R3 | Improve audit planning and expand the audit assignment brief to consider: Strategies and objectives of the activity being reviewed, making a clear link between the Council Plan, organisational objectives, audits and audit plans The objective of the assignment The strategic risks and risks that specifically relate to the area being audited Organisational performance management (including how the activity controls its performance) and accountability The framework used by the activity to manage its governance, risk and control processes Examination of ethical arrangements, where relevant | The internal audit team often reviews its supporting documentation to ensure it remains relevant, complies with standards and is customer focused. The internal audit assignment brief will be reviewed to take into account the points made. Examples of other internal audit team's assignment briefs have been obtained for comparison. | Head of Corporate Services | March 2019 |



| No | Recommendation | Response | Responsible officer | Action date |
|----|--|---|---|------------------|
| | Examination of fraud risks specific to that activity, ruling them out explicitly if they are not relevant to a planned audit The probability of errors and non-compliance The systems, records, personnel and physical property to be considered Opportunities to add value | | | |
| R4 | Undertake internal reviews against the PSIAS periodically, ideally annually | Self-assessment to be undertaken and reported to Corporate Governance for review. | Head of Corporate Services/Corporate Governance Group | July 2019 |
| R5 | Report the results of all reviews against the PSIAS to the audit committee, including an action plan to enable progress monitoring. Ensure that the results of the review are included in the Annual Report | Outcome of the review will be reported to Audit Committee on an annual basis. Any actions arising will be added to the internal audit improvement plan. The improvement plan is monitored by the Audit Committee. | Head of Corporate Services | July 2019 |
| R6 | Ensure that performance indicators reported in the Annual Audit Report show trends over time | Performance indicators are included within the QAIP which was approved at Audit Committee on 21 September 2017. These will be reported annually which will inevitably lead to trend analysis. | Head of Corporate Services | July 2018 |
| R7 | Undertake annual audit planning in consideration of the Council's decision making, plans, objectives, priorities and associated risks | The new corporate risk register will help inform audit planning. It should be noted however that the current audit plan and previous audit plans include activities that are likely to feature within a risk register e.g PSC refurbishment, GDPR, Ubico, ICT security etc | Head of Corporate Services | March 2019 |
| R8 | Refer to the Charter and internal audit delivery and development in the annual plan | The annual plan will reference the key aspects of the charter. | Head of Corporate Services | March 2019 |
| R9 | Ensure completion of the audit manual | Audit manual will be reviewed when capacity allows but this is seen as a low priority. Procedure notes, in lieu of a manual will also be considered. | Head of Corporate Services | December 2019 |



| No | Recommendation | Response | Responsible officer | Action date |
|-----|---|---|-------------------------------|-------------------|
| R10 | Include information in the Charter and/or the Annual Plan regarding: Audit's objectives and outcomes The way in which the CAE will form and evidence his opinion on governance and risk management arrangement and internal control How audit's work will identify and address local and national issues and risks | These are referenced within the charter but will be updated to strengthen the points made. | Head of Corporate Services | July 2018 |
| RII | Prioritise audits in the plan, for example by including the risk scoring or H/M/L ranking | Audits included within the plan have been initially risk assessed. This risk assessment will be made clearer in the audit planning report. | Head of Corporate Services | March 2019 |
| R12 | Include ethical aspects more routinely in audits and audit planning, bringing this work together at the year end to form an opinion on ethical activities | Internal audit work does include ethical perspectives where relevant. For example, audit work undertaken on absence management, health & safety, complaints etc all have ethical aspects. The audit assignment brief will be updated to make it more explicit as to what the ethical aspects are. This will allow the ethical related work to be brought together for the overall year end opinion. | Head of Corporate Services | July 2018 |
| RI3 | Once the IT audit risk assessment is complete, make occasional use of specialist IT auditors for more in- depth reviews | This is already acknowledged. The completion of the risk assessment will prioritise internal audit work and whether the expertise of an ICT auditor is required to undertake some of this work. | Head of Corporate Services | September 2018 |
| RI4 | Once the risk management arrangements have been reviewed and improvements implemented, an audit of the framework is needed as a priority | A new corporate risk register is under development. Once approved and embedded, its integrity will be audited, together with an audit of the new risk management strategy. | Head of Corporate Services | March 2019 |
| R15 | As a minimum, include the CAE's name on audit reports | Report format to be reviewed. | Head of Corporate Services | July 2018 |



| No | Recommendation | Response | Responsible officer | Action date |
|-----|--|---|-------------------------------|----------------|
| RI6 | Revise the annual report to include: An opinion that refers to the governance, risk and internal control framework The link must be made to the strategies, risks and objectives of the council Reference to the level of compliance with the PSIAS Details of activities as a consequence of the QAIP | Annual report to be revised with effect for 2019/20 audit plan. | Head of Corporate Services | July 2019 |



Suggestions

| No | Suggestion | Response | Responsible officer | Action date |
|----|---|--|----------------------------------|----------------|
| SI | Include the mission in the Charter | Charter to be updated. | Head of Corporate Services | July 2018 |
| S2 | Occasionally involve others from within the Council who have sufficient knowledge of audit practices, for example members of the Audit Committee and finance staff in audit quality reviews | Covered in response to R4 (Corporate Governance Group and happy to accommodate Audit Committee where appropriate) | Head of Corporate Services | July 2018 |
| S3 | Include details of report circulation within the report itself | Covered in response to R15. | Head of Corporate Services | July 2018 |



Appendix 2: interviewees

| Person | Position |
|--------------------|--------------------------------------|
| Amy Adams | Corporate Services Officer |
| Emma Cathcart | Counter Fraud Unit Manager |
| Lisa Chapman | Member Services Officer |
| Mike Dawson | Chief Executive |
| Simon Dix | Head of Finance and Asset Management |
| Sam Dudfield | Internal Auditor |
| Claire Evans | Corporate Services Manager |
| Sara Freckleton | Borough Solicitor |
| Emma Harley | Finance Manager |
| Martha Mundy | Community Funding Officer |
| Andy Noble | Asset Manager |
| Lin O'Brien | Group Manager, Democratic Services |
| Matt Reeve | Operations Manager |
| Andy Sanders | Economic and Development Manager |
| Graeme Simpson | Head of Corporate Services (CAE) |
| Cllr Vernon Smith | Chair, Audit Committee |
| Diane Vince | Senior Auditor |
| Dave Waters | Leader of the Council |
| Georgina Whitehead | Internal Auditor |



