TEWKESBURY BOROUGH COUNCIL

Report to:	Audit Committee	
Date of Meeting:	25 September 2013	
Subject:	Internal Audit Plan Monitoring Report	
Report of:	Graeme Simpson, Policy and Performance Group Manager	
Corporate Lead:	Mike Dawson, Chief Executive	
Lead Member:	Councillor Mrs J M Perez	
Number of Appendices:	2	

Executive Summary:

This report summarises the work undertaken by the Internal Audit team for the period April 2013 – August 2013.

Recommendation:

To CONSIDER the audit work undertaken, and the assurance given on the adequacy of internal controls operating in the systems audited.

Reasons for Recommendation:

Internal Audit Work should comply with the Public Sector Internal Audit Standards (PSIAS). These standards state that the Chief Audit Executive (CAE) must report functionally to the 'board' (Audit Committee). This includes reporting on Internal Audit's activity relative to its Plan.

Resource I	mplications:
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None.

Legal Implications:

None.

Risk Management Implications:

If the CAE does not report functionally to the Board then this does not comply with the PSIAS.

If there are delays in response to the acceptance/implementation of essential audit recommendations then this potentially increases the risk of fraud or error occurring.

Performance Management Follow-up:

All recommendations made by Internal Audit are followed-up within appropriate timescales to give assurance they have been implemented. The outcome of the follow-up audit is formally reported to the Audit Committee.

Outstanding recommendations made by Internal Audit that are categorised as essential will be proactively monitored through the recommendation template detailed in Appendix B.

Environmental Implications:

None.

1.0 INTRODUCTION/BACKGROUND

1.1 The 2013/14 Internal Audit Plan was approved at Audit Committee on 20 March 2013. . This is the first monitoring report for the year and summarises Internal Audit work undertaken for the period April 2013 – August 2013. It is a requirement of the Public Sector Internal Audit Standards (PSIAS) that the Chief Audit Executive (Group Manager Policy and Performance) reports formally to the 'board' (Audit Committee).

2.0 INTERNAL AUDIT WORK FOR THE PERIOD

- As at 31 August 2013, good progress is being made towards completion of the annual Audit Plan. The work undertaken in the period is detailed in Appendix 1. This provides a summary of the activity audited, the control objectives for each activity and the audit opinion for each control objective. Also included is the outcome of any follow-up audits undertaken in the period and whether the audit recommendations have been implemented.
- When reporting, a 'split' opinion is given. This means individual opinions are given for different parts of the system being audited. This approach enables Internal Audit to identify to management specific areas of control that are operating or not. Assurance opinions are categorised as 'good', 'satisfactory', 'limited' and 'unsatisfactory'. It is pleasing to report that of the systems audited there are no audit opinions of a 'limited' or 'unsatisfactory' nature.
- 2.3 The Committee also receive information on 'essential' audit recommendations that have not been implemented. These have been identified through the undertaking of follow-up audits. Essential recommendations that remain outstanding as a result of follow-up work are detailed in Appendix 2. Additional comments relating to the progress of implementing the recommendations have been obtained from the appropriate Manager(s) and are included in the table. Changes from the previously reported position are shown in bold type.

3.0 CORPORATE IMPROVEMENT WORK

3.1 Included within the 2013/14 Internal Audit plan is a pot of days to undertake corporate improvement work. As reported previously to the Committee, the Policy and Performance Team can collectively identify corporate type activities that may have 'stagnated' or need resolving. Corporate Leadership Team and Group Managers are aware of this allocation of days and have been encouraged to put forward suggestions where the team may help. Work undertaken during the period can be found in Appendix 1.

4.0		ODTIONS	CONSIDERE	٦
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- **4.1** None.
- 5.0 CONSULTATION
- 5.1 All Managers are consulted prior to the commencement of the audit to agree the scope and each Manager has the opportunity to complete a client survey at the end of the audit.
- 6.0 RELEVANT COUNCIL POLICIES/STRATEGIES
- 6.1 Internal Audit Charter and Internal Audit Annual Plan.
- 7.0 RELEVANT GOVERNMENT POLICIES
- **7.1** None.
- 8.0 RESOURCE IMPLICATIONS (Human/Property)
- **8.1** None.
- 9.0 SUSTAINABILITY IMPLICATIONS (Social/Community Safety/Cultural/ Economic/ Environment)
- **9.1** None.
- 10.0 IMPACT UPON (Value For Money/Equalities/E-Government/Human Rights/Health And Safety)
- **10.1** Internal Audit contributes to VFM through its improvement work.
- 11.0 RELATED DECISIONS AND ANY OTHER RELEVANT FACTS
- 11.1 None.

Background Papers: None

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Appendices: Appendix 1 – Audit work undertaken April – August 2013

Appendix 2 – Outstanding audit recommendations categorised as

'essential'