Appendix 1







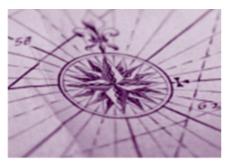
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### **External Quality Assessment**

Internal Audit Shared Services

**Executive report – January 2023** 









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### **External Quality Assessment**

Tamworth BC and Lichfield DC Shared Internal Audit Service



### Opinion: The Internal Audit Shared Service is delivering to a standard that **generally conforms** with the Public Sector Internal Audit Standards.

#### Key matters arising from the review:

- Increasing integration of the use by internal audit of risk-based techniques with the risk appetite of each Council particularly
  in terms of planning at a strategic and engagement level would be mutually beneficial,
- Ensuring clear logic regarding the use of inherent and residual risk assessments in the form of 'Control Risk' through working papers for each assignment in order to focus on agreed management objectives, significant risks and relevant key controls would better support the content of the assurance provided.

  Consideration should be given to expressing internal audit recommendations and opinions in line with the risk appetite of
  - Consideration should be given to expressing internal audit recommendations and opinions in line with the risk appetite of each Council as stated within the Risk Management Policy as this would enhance transparency and communication with clients.
  - Where high risk recommendations are identified ensure these support a negative audit opinion which is appropriately reflected in strategic and operational risk registers,,
  - Review the narrative used within the Annual Opinion in the Head of Internal Audit Annual Report to reflect the strategic
    planning process and therefore the cumulative knowledge of both significant risks and other sources of assurance that are
    available and upon which reliance has been placed.

#### Good Practice identified during the review

- An Internal Audit Charter setting out the role and responsibilities of Internal Audit within the Councils guides delivery and establishes the basis for delivery of Internal Audit.
- Shortfalls in resources are supplemented with external support,
- The service has developed a documented internal audit methodology and supporting templates that delivers a consistent risk-based service.
- Self-assessment and the Quality Assurance Improvement Programme identifies areas in which future development will be beneficial.
- Routine reporting informs clients and the Audit Committee regarding progress regarding completion of the internal audit plan, findings and the follow up of recommendations, and
- Appropriate statements regarding confidentiality and limitation of liability are included in internal audit reporting.

### **Executive summary**



Internal Audit Services are delivered by a shared service in-house team and supported by externally contracted support services for both IT (ETEC) and general audit work (BDO). Services are managed by Andrew Wood as Audit Manager, who assumes the role of Chief Audit Executive (CAE) for the purposes of this review. Andrew is supported by Alison Swift as Principal Auditor. The service has been carrying two vacant positions since May 2021 which has been covered through use of the external support under contract.

The service has responded to the changes of focus in professional standards by developing a risk based approach with regard to planning and the completion of assignment work; the Internal Audit Manual has been updated in 2022 to reflect the requirements of the Public Sector Internal Audit Standards (PSIAS) although this might now be better revised to recognise current internal practice as this would aid training as the vacant posts are recruited to.

From an internal audit perspective, considerable advantage is to be gained from increasing development and recognition of the each client's Risk Management processes, which reflect a 'Three lines of Defence approach' and therefore provide a basis of risk-based internal audit as required by the standards. The approach can be used to reformat the Audit Universe of potential audits and therefore fully reflect the risk appetite of each Council. If fully embedded within audit engagement planning as recognition of Management's Objectives, this will align with current practice to identify significant risks and provide a basis for an assurance opinion in relation to risk management, governance and control. Clear alignment will enable internal audit plans and assignments to focus on the value of 'Control Risk' and thereby increasingly focus its attention on recognised key controls and the assurances available to mitigate risk. Continuing to develop this thread will enhance both the efficiency and effectiveness of internal audit as well as its benefit to each Council.

Consequently, with a constantly changing risk environment, particularly as the service responds to the changing needs of the Councils, there is a need and opportunity for the internal audit service to continue to enhance delivery through acting as a catalyst to ensure that robust risk management systems are operational, increasing its awareness of the assessment of risk and as a consequence informing its own approach. This will help ensure that internal audit focuses on the most appropriate areas and can demonstrate that it continues to provide a service that effectively contributes towards the achievement of the Council's stated objectives, through the provision of independent assurance.

Current services are assessed to 'generally conform' with the PSIAS standards with the service demonstrating a high standard of delivery which is well regarded by stakeholders. A series of specific recommendations are made in the report that follows which reflect building on the existing strengths in relation to resources, competency and delivery in order to enhance future services and as a result enhance the benefit of the service to clients.



### Overall assessment

1 P <sub>2</sub>	RESOURCES	Excelling – Processes in this area are embedded within every-day practices and mostly reflect best practice that is consistent with PSIAS expectations.
Page 17	COMPETENCY	Established – Processes in this area are generally compliant with the PSIAS and embedded within every-day practices; the EQA has identified a number of areas where further development would be beneficial.
3	DELIVERY	Established – Processes in this area are generally compliant with the PSIAS and embedded within every-day practices; the EQA has identified a number of areas where a more consistent approach and further development would be beneficial.

# Summary of good practice identified within EQA



Standard	Good practice identified	Observation
1000	An Internal Audit Charter has been established and agreed with management and the Audit and Governance (TBC) and Audit and Member Standards (LDC) Committees (AC).	The combination of the Charter, supported by the Internal Audit Protocol and Manual is comprehensive and establishes an appropriate framework against which internal audit services can be delivered in accordance with the PSIAS.
1100 Pag (4)311	Independence and objectivity	A process is in place regarding the identification and management of potential conflicts and/or declarations of interest, although further clarity regarding the IA role regarding risk management would be beneficial.
© 311 ∞	The service has conducted internal assessment exercises regarding its performance in accordance with a Quality Assurance Improvement Programme.	Performance review is embedded within quality control procedures and identifies and supports performance development needs.
2020	Active engagement at Member and management levels.	Represents the establishment of a good understanding of key issues through routine interaction with Officers and Members.
2030	The need for appropriate internal audit resources is supported by support from appropriate other external sources.	This represents a firm basis for the successful delivery of the internal audit plan and the use of support, if required.
2040	A recognised process for delivery of internal audit services has been established.	Provides for a consistent methodology, within which the service is delivered through a series of templates.
2060	Reports are produced using a standard template which is consistently applied.	Demonstration of a consistent approach to communication which is well received by management and the AC's – effective follow-up ensures that issues are not lost.
2300	Internal auditors must identify, analyse, evaluate, and document sufficient information to achieve the engagement's objectives.	Effective supervision and review of progress ensures a consistent approach and delivery of the approved methodology.

### Part one



# Public Sector Internal Audit Standards



### Resources

Business Vision and Mission, Governance arrangements, Recognition of standards, Charter, Guidance, Procedures and Supervision, Terms of Engagement, Ethics and business conduct.

	Issue identified	Recommended action
1. Page	Internal Audit Charter (IAC) The IAC is comprehensive regarding engagement reports however does not contain details of the requirement for the CAE to deliver an Annual Report including an opinion in relation to risk management, governance and control.	Include an appropriate statement in the Internal Charter with regard to the provision of an Annual Report and align this with regard to the benefit of aligning the internal audit planning process with a continuous assessment of the risk environment faced by each client, in order to support the provision of the annual opinion regarding risk management, governance and control.  PSIAS 1000
220	Performance appraisal The self-assessment identified that the CAE's appraisal which is undertaken by the Chief Executive at TBC has not taken place.  A new OKR process is to be introduced at LDC.	Ensure that a robust performance appraisal process is in place within the Internal Audit Team  With regard to the Audit Manager consider Inviting observations from both Chairs of AC in advance of the performance appraisal, as this would provide valuable client feedback and reflect best practice.  PSIAS 1110
3.	Declarations of interest  Each Council has adopted different practices regarding the protocol for declarations or conflicts of interest.  Due to the independent nature of internal audit work it would be beneficial for internal audit staff and any contractors to confirm the position on an annual basis.	The CAE should obtain confirmation regarding potential conflicts of interest on 1 April each year and on appointment of any further staff or contractors undertaking internal audit engagements at the Councils.  PSIAS 1100



### Competency

Internal Audit Manual, Planning and Allocation of staffing, Recruitment (Numbers and skills),
Training (Professional and Technical), Appraisal and Development

	Issue identified	Recommended action	
1. Page 21	Audit Universe The current internal audit planning model reflects use of a "standard audit universe' to which a cyclical approach to reviewing areas of activity is applied in consultation with management. This is provided for in circumstances where the client risk management system cannot be relied upon.  Internal Audits of risk management have provided positive opinions in relation to their application and as a result it would be beneficia therefore to increasing align the focus of strategic and engagement planning with each clients risk environment as this would enhance internal audits' ability to demonstrate a commitment to helping each Council achieve its objectives.  It may be beneficial to consider the content of each clients risk management process as the Audit Universe in future.	The development of a comprehensive internal audit plan that reflects the significant risks that are recorded within each Councils risk management system represents an essential feature of both strategic and operational internal audit planning as it acts as a basis for both ensuring attention on significant risks on a priority basis as well as providing an indication of the resources required to provide continuous independent assurance.  Internal Audit works with each client manager at the time of an engagement to identify significant risks; it would be opportune to increasingly recognise and promote the value of 'Control Risk' at an operational level and transparently integrate this within the planning process, identifying sources of assurance as a matter of routine.  It would be beneficial therefore to increasingly align development of the internal audit planning system with each Councils risk management processes in order to ensure that resources are consistently focused on areas where assurance is required regarding the operation of policies, procedures and controls that mitigate the significant risks to which the Council is exposed at an inherent level.  It may be that such an approach would also help embed effective risk management within each clients governance processes.	
		PSIAS 2000/2010	



### **Competency continued**

	Issue identified	Recommended action
ğ	Purpose of the system subject to review  Audit Planning Memorandum currently contains a statement which reflects the 'Management Objective' of the area subject to review. Whilst the terminology is correct statements tend to focus on a generic statement regarding the internal control environment rather than focusing on what management are aiming to achieve, in accordance with PSIAS requirements, which recognise the value of focusing on operational management objectives.	The inclusion of a Management Objective is regarded as good practice however it may be beneficial to increasingly capture the specific aims of management in each review to which can be aligned the significant risks being faced within the area under review.  This will assist with the discussions with client managers and specifically the identification of the significant risks which may impact upon achievement of the established objectives and upon which the assurance opinion should be based.  The significant risks may be all or some of those identified with the risk management process as well as others recognised at the time of audit.
3.	Recognition of identified key controls  The current risk management methodologies require identification of the primary controls which exist as well as the further mitigating controls which are to be developed.  These are likely to represent the key controls upon which the audit should be based, as they represent 'Control Risk' and the implications should a failure of controls occur.	It would be beneficial to increasingly focus on what is regarded as a 'significant risk' within each Councils risk management processes and the associated primary controls as this would increase efficiency through allocating appropriate resources to those areas of most concern  There is limited feedback from the client survey which indicates that the Shared Service might provide increased focus on significant risk and introducing advice best practice within the audit approach and these may be areas where increased understanding of risk throughout the process may produce results which are regarded as adding value by clients.  PSIAS 2010



### **Competency continued**

Issue identified	Recommended action
5. Consideration of Fraud  The Team maintain a Fraud Risk Register demonstrating compliance with the standards regarding the recognition of potential fraud, however this is not directly considered when scoping engagements.	Ensure that the areas reviewed within an engagement include those where potentially significant fraud risks exist.  PSIAS 2030
6. The service has introduced a Quality Improvement Assurance Policy in accordance with the requirements of the standards.  The policy focuses on consistent internal review of engagements, an annual assessment against the standards and the EQA review on a five year cycle.  The Head of Internal Audit's Annual report confirms that aspects of the policy have been completed in a diagrammatic presentation.  Industry best practice now reflects an extension of the quality review process to include consideration of wider performance in the form of KPI's, resources, skills and training requirements.	It would be beneficial to update the policy in line with best practice and as required confirm annually that all measures have operated during the year as well as summarise any outcomes influencing future development of the service within the Head of Internal audit's Annual Report.  PSIAS 1300



### **Delivery**

Client engagement and relationship, Directed led service, Terms of Engagement (Audit/Assignment Brief), Discussion of assurance and advisory opinions, Reporting at assignment and strategic levels

	Issue identified	Recommended action
1. Page 2	Governance The standards require the CAE to provide an annual opinion regarding the effectiveness of governance arrangements.  Current planning includes various aspects of the governance process including Ethics, Conflicts of Interests and Members expenses.	In Local Government, each Council establishes a Code of Governance in accordance with CIPFA SOLACE – it would be beneficial to map internal audit activity to the content of the Code in order to provide assurance at a level which contributes directly to the Annual Governance Statement through the Head of Internal Audit Annual Report.  PSIAS 2110
242	Risk Management Internal Audit last reviewed risk management as an assignment in TBC (March 2021) and LDC (March 2022) providing a 'Reasonable' assurance opinion.	The standards require an annual opinion to be made in the Head of Internal Audit's Annual Report regarding the adequacy and effectiveness of each Councils risk management processes. It would therefore be beneficial to support the opinion with evidence of how this has been reached through a combination of the assurances gained at both a strategic level and at an operational level within engagements.  It would be beneficial to document in this approach how any potential conflict of interest with regard to the Audit Manager and Principal Auditor's roles relating to risk management is managed.
		PSIAS 2120



### **Delivery continued**

	Issue identified	Recommended action
ാ. Page 25	Head of Internal Audit Annual Opinion The current statement is largely based upon the work completed in the current financial year.  Best practice reflects using a wider basis for the opinion reflecting the full knowledge of the CAE including significant risks which each client is facing and information from other assurance sources.	In practice, the opinion is actually based upon the continuous thread or trend of assurance work completed in recent years as a result of the focus of internal audit plans, the wider knowledge of significant risks and the various sources of assurance that exist, including the risk management processes.  Future opinions should state the full basis upon which the opinion has been reached.  PSIAS 2450
<b>4</b> .	Internal Audit Risk Based Strategy The teams approach to assessment of the perceived risk at inherent and residual levels within an engagement is reflected in the grading of recommendations and opinions which are then used in reporting.	Consider reviewing the wording of definitions that support the grading of recommendations and opinions to better reflect risk appetite of each client. Particular attention should be given to the use of wording such as Fundamental and Significant.
	Audit Engagement Plans and Reports contain an explanation of how the Internal Audit Team relate the level of risk evaluation to the conduct of the audit.	Within engagement reports this would then link to alignment of assurance opinions where fundamental or a series of significant recommendations automatically generated a 'Limited Assurance' opinion.
	It would be beneficial to ensure that the wording used is consistent with risk management terminology used by each client.	Consider whether maintained a fourth level of assurance (being no assurance) is necessary.
	PSIAS guidance emphasises that the focus of internal audit should be on 'significant' risk.	PSIAS 2420

### Part two



### Suggested enhancements for consideration

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# Suggested Enhancements for consideration

	Issue identified	Recommended action
1.	Job descriptions Current job descriptions are in a consistent form abut are not routinely reviewed as part of the PDR process	Best practice reflects regular update of job descriptions, it may be beneficial to review all job descriptions at the same time to ensure that any inter-dependencies are fully reflected, particularly as the two currently vacant posts are advertised  PSIAS 1210
Page 27	Client surveys Progress has been made in obtaining feedback from auditees following each audit through discussions with client managers and within the annual planning process.  Current completion reflects 66% TBC and 82% LDC.  This provides informal confirmation from clients regarding the Teams ability to deliver upon its responsibilities and particularly add value.	Internal Audit may find it useful to utilise Survey Monkey or similar technology for collecting feedback, and capture similar feedback in relation to each contractors performance, as this can prove to be an efficient means of gathering an early response.  Feedback should be included as part of the QAIP process.  PSIAS 2000
3.	Contract support A contract is in place with each contractor which states that delivery of services should comply with the PSIAS.	In order to evidence that the Shared Service is compliant in overall terms it would be helpful if each contractor were requested to provide evidence that their work had been independently assessed in accordance with the PSIAS.  PSIAS 1312



# Suggested Enhancements for consideration

	Issue identified	Recommended action
э. Page 28	Key Performance Indicators Completion of the Internal Audit Plan is regarded as the current focus of performance monitoring, although other indicators based on recommendations and opinions made in the year are recorded in the Head of Internal Audit's Annual Report.  Good practice elsewhere utilises a range of quantitative and qualitative measures to demonstrate performance against the Internal Audit Charter.	Consideration could be given to devising a more comprehensive list of indicators and a summary of client feedback received. This may include:  Reports issued to agreed timescales Recommendations accepted/not accepted by risk rating Recommendations acted upon in a timely manner Client satisfaction Staffing levels and qualifications Planned training completed  PSIAS 1310
4.	Training The Internal Audit Team has developed a comprehensive training and skills matrix which includes reference to mandatory requirements although this has not been maintained.  As the internal audit planning process devises a forward looking three year plan it would be beneficial to consider the future training needs of internal audit staff and include these in future resource	Consider the benefits of using the priorities included in internal audit plans to identify potential courses or seminars which may provide increased understanding of the risk environment that will be reviewed.  Ensure that training records are maintained and used to inform the QAIP.
	planning.	PSIAS 1210



# Suggested Enhancements for consideration

	Issue identified	Recommended action
6. Page 2	Internal Audit Manual The Team has compiled an Internal Audit Manual which was last reviewed in December 2022.	Following completion of the EQA, consider revising the Manual to fully reflect current practice rather than generic example as this will assist when training new staff.  It may be useful to include the Internal Audit Protocol document within the Manual as this represents an excellent way of explaining the internal audit process to all stakeholders.  PSIAS 2030
Ö		

### Part three

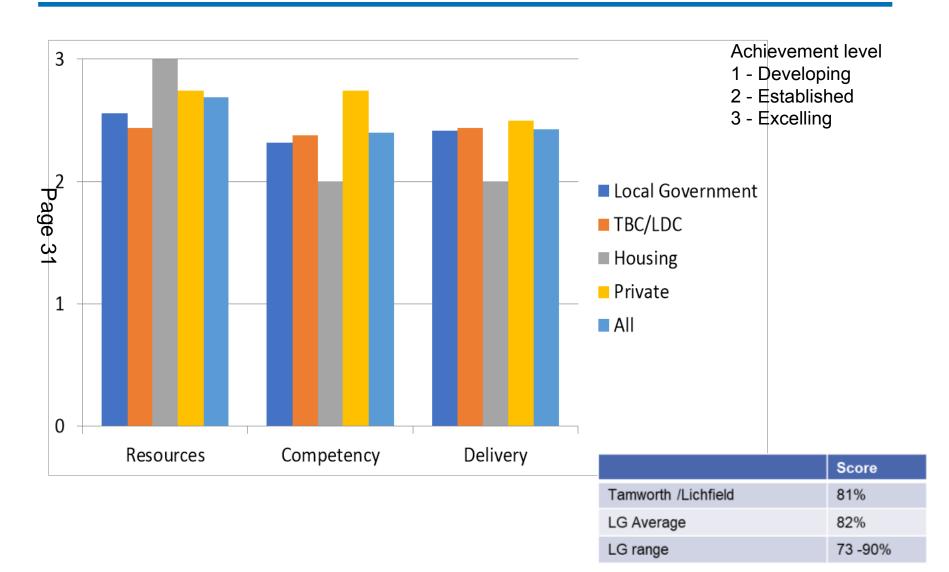


### Benchmarking

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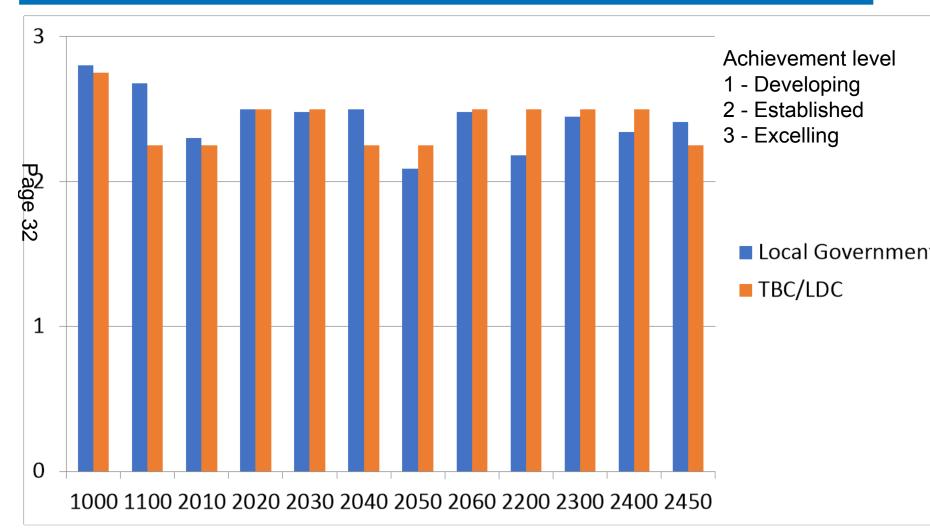


# Benchmarking - Sector analysis





# Benchmarking - Industry analysis



### **Appendix**



- 1. Summary of client feedback
- 2. Key IPPF/PSIAS standards assessed
- ୍ଥ୍ୟ. Grading of rece **Grading of recommendations**



### Summary stakeholder feedback

Question	Positive (%)	Negative (%)
I understand Internal Audit's role in the organisation and its purpose.	100	
Internal Audit is customer focused and understands what the organisation is trying to achieve.	100	
Internal Audit considers the viewpoints of the organisation when planning and undertaking reviews and aims to provide a good balance between assurance and good practice with opportunities for improvement.	100	
Onternal audit has a presence in the organisation which is visible and approachable.	100	
He Internal Audit team provides a flexible and reliable service which adds value through the assurance audits and additional work it undertakes.	100	
Internal Audit makes you aware of any significant issues that occur during an audit on a timely basis and you have the opportunity to respond or provide additional information.	100	
Internal audit has the skills to provide appropriate assurance and advice to meet our needs?	100	
Good practice and ideas from other organisations are shared through audits, day to day contact, meetings or other engagement methods.	75	25
Average	97	3

#### **Conclusion:**

Feedback from stakeholders confirms that the Internal Audit Shared Service is considered to provide a good quality internal audit service whose brief is clearly understood and the assurance and advice that is provided is well regarded. A small number of respondents were less positive regarding the emphasis placed on significant risk and the increasing need to add value through provision of advice regarding new ideas and best practice elsewhere.



### Key PSIAS Standards assessed

(for benchmarking purposes)

Stan dard		Focus
1000	Purpose, Authority and Responsibility	The purpose, authority, and responsibility of the internal audit activity must be formally defined in an internal audit charter, consistent with the Definition of Internal Auditing, the Code of Ethics, and the <i>Standards</i> . The chief audit executive must periodically review the internal audit charter and present it to senior management and the board for approval.
1100	Independence and Objectivity	The internal audit activity must be independent, and internal auditors must be objective in performing their work.
2010	Planning	The chief audit executive must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals.
P <sub>020</sub> age	Communication and approval	The chief audit executive must communicate the internal audit activity's plans and resource requirements, including significant interim changes, to senior management and the board for review and approval. The chief audit executive must also communicate the impact of resource limitations.
ယ္အာ <sub>30</sub>	Resource Management	The chief audit executive must ensure that internal audit resources are appropriate, sufficient, and effectively deployed to achieve the approved plan.
2040	Policies	The chief audit executive must establish policies and procedures to guide the internal audit activity.
2050	Co-ordination	The chief audit executive should share information and coordinate activities with other internal and external providers of assurance and consulting services to ensure proper coverage and minimize duplication of efforts.
2060	Reporting	The chief audit executive must report periodically to senior management and the board on the internal audit activity's purpose, authority, responsibility, and performance relative to its plan. Reporting must also include significant risk exposures and control issues, including fraud risks, governance issues, and other matters needed or requested by senior management and the board.
2200	Engagement planning	Internal auditors must develop and document a plan for each engagement, including the engagement's objectives, scope, timing, and resource allocations.
2300	Work programme	Internal auditors must identify, analyse, evaluate, and document sufficient information to achieve the engagement's objectives.
2400	Communicating results	Internal auditors must communicate the results of engagements
2450	Overall opinions	When an overall opinion is issued, it must take into account the expectations of senior management, the board, and other stakeholders and must be supported by sufficient, reliable, relevant, and useful information.

### BUSINESS RISK SOLUTIONS

### Basis for EQA

#### **Compliance with IPPF/PSIAS**

#### Resources

Business Vision and Mission, Governance arrangements, Recognition of standards, Guidance, Procedures and Supervision, Terms of Engagement, Ethics and business conduct.

#### Competency

Charter, Internal Audit Manual, Planning and Allocation of staffing, Recruitment (Numbers and skills), Training (Professional and Technical), Appraisal and Development

#### Delivery

Client engagement and relationship, Directed led service, Terms of Engagement (Audit/Assignment Brief), Discussion of assurance and advisory opinions, Reporting at assignment and strategic levels



### Grading of recommendations

 The grading of recommendations is intended to reflect the relative importance to the relevant standard within the Public Sector Internal Audit Standards (PSIAS).

Recommendation grading	Explanation
Enhance	The internal audit service must enhance its practice in order to demonstrate transparent alignment with the relevant PSIAS standards in order to demonstrate a contribution to the achievement of the organisations' objectives in relation to risk management, governance and control.
Review	The Internal audit service should review its approach in this area to better reflect the application of the PSIAS.
Consider	The internal audit service should consider whether revision of its approach merits attention in order to improve the efficiency and effectiveness of the delivery of services

• In grading our recommendations, we have considered the wider environment in terms of both the degree of transformation that is currently taking place as well as our assessment of the level of risk maturity that currently exists, as these will have a consequence for the conduct of internal audit planning as well as subsequent communication.

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