

Subject:	Internal Audit Annual Audit Plan 2022/23	Status:	For Publication
Report to:	Audit and Accounts Committee	Date:	9 March 2022
Report of:	Head of Internal Audit (Internal Audit Service)	Portfolio Holder:	Resources
Key Decision:	<input type="checkbox"/> Forward Plan <input type="checkbox"/>	General Exception <input type="checkbox"/>	Special Urgency <input type="checkbox"/>
Equality Impact Assessment:	Required:	No	Attached: No
Biodiversity Impact Assessment	Required:	No	Attached: No
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1.	RECOMMENDATION
1.1	The Committee are asked to consider and approve the annual internal audit plan for 2022/23.

2. PURPOSE OF REPORT

2.1 The Audit and Accounts Committee's terms of reference require it to advise the council on the planned activity and results of internal audit.

3. BACKGROUND AND OPTIONS

3.1 Definition of internal auditing

"Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."

"The provision of assurance services is the primary role for internal audit in the UK public sector. This role requires the chief audit executive to provide an annual internal audit opinion based on an objective assessment of the framework of governance, risk management and control." The Institute of Internal Auditors,

Public Sector Internal Audit Standards, 2015

Relevant regulations

Internal audit: "A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance." Regulation 5. (1)

Review of internal control system: "A relevant authority must, each financial year (a) conduct a review of the effectiveness of the system of internal control ... and (b) prepare an annual governance statement." Regulation 6. (1)

Accounts and Audit Regulations 2015

4. RISK

4.1 All the issues raised and the recommendation(s) in this report involve risk considerations as set out below:

- The responsibility for implementing, maintaining and reviewing the system of internal control rests with the council, but the process by which the effectiveness of its system of internal control is reviewed and the governance statement is made includes obtaining assurances on the effectiveness of key controls. In practice,

these assurances will be substantially drawn from the work of internal audit. The audit plan is therefore focused on providing these assurances to the chief executive and leader of the council who are jointly required to sign the annual governance statement

5. FINANCE

5.1 Any financial implications are commented upon in the report.

6. LEGAL

6.1 Any legal implications are commented upon in the report.

7. POLICY AND EQUALITIES IMPLICATIONS

7.1 Reported findings have been discussed and agreed, including management responses to the recommendations, with respective service managers and heads of service prior to reporting.

8. CONCLUSION

8.1 The plan is focused on an assessment of the risks to the achievement of the council's objectives, and the provision of assurance that the actions planned to mitigate these risks are adequate and effective

No background papers

Rossendale Borough Council
Internal Audit Service
Internal Audit Annual Plan 2022/23



1. Introduction

- 1.1. This report sets out the emergent internal audit plan for 2022/23. The Audit and Accounts Committee is asked to consider and approve it under its terms of reference. The plan is supported by an Internal Audit Strategy setting out statutory and professional requirements, planning principles and audit approach, and by a service Charter defining our purpose, authority, scope and responsibility, our position within the organisation, and rights of access to records, personnel and physical properties.
- 1.2. The Internal Audit Service (the Service) applies the core principles set by the Chartered Institute of Internal Auditors, reiterated in Public Sector Internal Audit Standards, including integrity, competence and due professional care and independence.

2. The purpose of the internal audit plan

- 2.1. The council is responsible for a wide range of services across the borough, and its members and senior managers should be aware of the risks to achieving their service objectives and inherent in their work. These should be managed by controls to reduce the risk to a corporately acceptable level. The chief executive, Audit and Accounts Committee and the council need assurance that these controls are adequately designed and operate effectively. At the end of the financial year the chief executive and leader of the council will jointly sign the annual governance statement (AGS) published with the council's financial statements.
- 2.2. The head of internal audit is required by professional standards to give an annual assurance opinion on governance, risk management and control, over the adequacy and effectiveness of the management of risks to council objectives. The Audit and Accounts Committee's terms of reference require it to consider this annual opinion, and review and approve the AGS. The Committee should therefore consider and approve an internal audit plan which provides the assurance the council, committee, leader and chief executive need. We have discussed this plan with the council's senior management team.
- 2.3. The overall opinion covers twelve months and supporting evidence must relate to controls operating in that period, so the plan addresses work for one year but may make projections into future audit needs. The work will rarely be fully complete at the end of the year but will be sufficiently complete and reported by the time the council prepares its AGS shortly after the year end.

3. Obtaining the evidence to support an overall opinion for 2020/21

- 3.1. Our internal audit plan is designed to provide the evidence necessary to support an opinion on governance, risk management and control and covers:
 - Key components of each part of the opinion: aspects of the council's governance, risk management and control framework.
 - Sufficient controls across the council's operations, so that a fair assessment may be made across the organisation.
 - Controls that mitigate the most significant risks to an acceptable level, particularly those that operate most widely.
 - The actions being taken to develop improved controls in the areas of greatest unmitigated risk.
- 3.2. It will therefore be necessary to audit aspects of governance, risk management and control processes. Information from less formal sources may also inform the overall opinion. The diagram below shows a control framework for risk management,

governance and control and the internal audit plan covers the assurances required, addressing areas of overall opinion, control and service delivery. The plan also includes follow up of actions agreed by managers from audits in the previous year.

A framework for governance, risk management and control				
Governance and democratic oversight				
Corporate governance framework			Democratic processes	
Business effectiveness				
Risk management	Performance monitoring and management		Organisational design	Working in partnership
Service delivery				
Customer services		Operations and environmental health		Business
Benefits administration	Revenue collection	Refuse collection and recycling	Parks and open spaces	Housing Regeneration
Leisure services		Street sweeping	Planning	Licensing
Service support				
Contract monitoring and management			Public interface	
Business processes				
Financial processes		ICT	Facilities management	Human resources
Investment	Payroll	Procurement		Business continuity

4. The context of the audit work for the year

- 4.1. Planned audit work in 2022/23 is sufficient to provide assurance over the council's frameworks of governance, risk management and control, delivering 200 days of audits and supporting activity across governance, operations, services, systems and processes. This includes further work by Mersey Internal Audit Agency of information and technology risks. We will inform the committee of any significant changes in planned work as we report progress during the year.

6. Deployment of audit resources

6.1. This audit plan is based on estimated days and is a best estimate of audit resources. We will deploy resources as effectively as possible, focussing on key areas of risk to achieve maximum benefit. The council uses the County Council's contract with Mersey Internal Audit Agency (MIAA) for delivery of specialist IT audits. While the plan enables managers and members to see the scope and value of the audit work, we will spend some time completing a small number of audits that are being worked on into the following year. Additional work may be needed in-year at the expense of planned work, but the plan is sufficiently flexible to accommodate such changes. We will continually reassess resources against council priorities, amending the plan as required.

7. The assurance we will provide

7.1. The assurance we will provide falls into four categories: substantial, moderate, limited and no assurance.

- Substantial assurance: the framework of control is adequately designed and/ or effectively operated.
- Moderate assurance: the framework of control is adequately designed and/ or effectively operated overall, but some action is required to enhance aspects of it and/ or ensure that it is effectively operated throughout the service, system or process.
- Limited assurance: there are some significant weaknesses in the design and/ or operation of the framework of control that put the achievement of the service, system or process' objectives at risk.
- No assurance: there are some fundamental weaknesses in the design and/ or operation of the framework of control that could result in failure to achieve the service, system or process' objectives.

8. The Internal Audit Service's responsibilities in relation to fraud and investigations

8.1. In addition to our audit work, the Internal Audit Service provides some support to the council in managing fraud risk, specifically through the provision of advice in respect of instances of suspected fraud or impropriety and supporting the council's response to the National Fraud Initiative.

9. Proposed audit programme for 2021/22

This table overleaf lists the audits we are planning to carry out in 2021/22, including the relevant corporate risk register reference, the resource allocated and the type of audit we will carry out: '1' - phase one/ consultancy work; '2' - phase two/ compliance testing; '1+2' - full risk and control evaluation; 'F' - follow-up on implementation of previously agreed actions.

Controls assurance	Audit scope	Corp Risk	Audit Type	Days	Total Days
Governance and democratic oversight					
Delegated decision making by officers	Arrangement for ensuring officer decisions are taken in accordance with delegated powers, and are approved, recorded and reported.	All	1+2	12	26
Leisure Trust	Council engagement and oversight of the Trust's management of council owned leisure assets.	13	1+2	12	
Performance management	Audit of the adequacy and effectiveness of controls to ensure council performance is managed effectively, including data quality.	All	F	1	
GDPR/ information security policies	Audit of service compliance with GDPR and/ or information security policies following audit report on policy in January 2019.	10	F	1	
Business effectiveness					
Financial sustainability	Progress with delivery of savings reported by services including accuracy and completeness of data.	4	1+2	12	43
IT critical application review of payroll (MIIA)	Audit of technical controls in place to manage payroll through the Complete Human Resource Information System (CHRIS21).	1, 4	1+2	12	
IT threat and vulnerability management (MIIA)	Assess how the council responds to cyber security threats and how they are managed and mitigated.	9	1+2	15	
Procurement	Follow up of audit of procurement policy and processes, including review and follow up of implementation of 2019/20 audit actions.	4	F	1	
IT Critical application review of Civica (MIAA)	Follow up of audit of the technical controls in place to ensure effective operation of an application critical to business delivery.	10	F	1	
IT Homeworking arrangements (MIIA)	Follow up of audit of arrangements for managing homeworking arrangements including access, resilience and security.	10	F	1	
IT Service Continuity (MIAA)	Follow up of audit of the controls to ensure continuity of IT services.	2, 10	F	1	
Service delivery					
Corporate project delivery	Arrangements for managing delivery of corporate projects, including initiation, ownership, delivery, reporting and oversight.	11	1+2	12	14
Planning controls	Follow up of audit of planning application controls including applicant support, consultation/ appeals and decision making.	6, 7	F	1	

Rossendale Borough Council - Internal audit plan 2022/23

Controls assurance	Audit scope	Corp Risk	Audit Type	Days	Total Days
Commercial rents	Follow up of audit of income from commercial properties including review of the rents process and debt collection.	6, 7	F	1	
Service support					
Health and Safety [deferred from 2021/22]	The adequacy and effectiveness of corporate arrangements to ensure compliance with H&S legislation and good practice.	3	1+2	15	27
Sickness absence	Policy and processes for reporting, recording and monitoring sickness absence.	8	1+2	12	
Business processes (follow up and compliance)					
Accounts payable	Annual compliance audits, testing established controls and follow-up of actions from previous year to support the annual audit opinion.	1	2	8	64
Accounts receivable		1	2	8	
General ledger, budget setting and monitoring		4	2	8	
Income collection/ banking		1	2	8	
Payroll		1	2	8	
Council tax		1	2	8	
Business rates/ NNDR		1	2	8	
Housing benefits		1	2	8	
Counter fraud and investigations					
Operation of the National Fraud Initiative			N/A	4	6
Support to the council's whistleblowing and counter fraud work			N/A	2	
Other work					
Internal Audit management including planning, managing delivery, liaison with management team, committee reporting and scheduling resources.			N/A	15	20
Contingency			N/A	5	
Total resource for the council					200