



Borough of Telford and Wrekin

Audit Committee

Wednesday 31 May 2023

Annual Internal Audit Update 2022/23, Audit Committee Annual Report 2022/23 & 2023/24 Audit Plan

Cabinet Member:	Cllr Nathan England - Cabinet Member: Finance, Customer Services and Governance	
Lead Director:	Anthea Lowe - Director: Policy & Governance	
Service Area:	Policy & Governance	
Report Author:	Tracey Drummond - Principal Auditor, Robert Montgomery - Audit & Governance Lead Manager	
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Wards Affected:	All Wards	
Key Decision:	Not Key Decision	
Forward Plan:	Not Applicable	
Report considered by:	Senior Management Team - 16 May 2023 Audit Committee – 31 May 2023	

1.0 Recommendations for decision/noting:

That the Audit Committee:

- 1.1 Notes the Internal Audit Annual Report for 2022/23;
- 1.2 Approves the Internal Audit Plan 2023/24 attached as Appendix B; and
- 1.3 Notes the operations of the Audit Committee for 2022/23 attached at Appendix C.

2.0 Purpose of Report

- 2.1 To present the 2022/23 Internal Audit Annual Report.
- 2.2 To present the operation of the Audit Committee for 2022/23.
- 2.3 To present the 2023/24 Annual Audit Plan for approval.

3.0 Background

3.1 The terms of reference of the Audit Committee include:

1. *“The approval (but not direction) of and monitoring of progress against, the Internal Audit Charter and Plan.....”*

...

9. *‘Consider the effectiveness of the Council’s governance processes and their compliance with legislation and best practice.....’*

This report presents information to meet the requirements of these sections of the terms of reference and to continue to demonstrate good governance and support the Annual Governance Statement (AGS).

The Public Sector Internal Audit Standards are deemed as proper practice under the Accounts and Audit Regulations 2015 for Local Government in England. The standards state:

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.

Public sector requirement

The chief audit executive must deliver an annual internal audit opinion and report that can be used by the organisation to inform its governance statement.

The annual internal audit opinion must conclude on the overall adequacy and effectiveness of the organisation’s framework of governance, risk management and control.

The annual report must incorporate:

- the opinion;
- a summary of the work that supports the opinion; and
- a statement on conformance with the Public Sector Internal Audit Standards and the results of the quality assurance and improvement programme.

This report meets these requirements

- 3.2 The Audit Committee is part of the Council's governance and assurance arrangements. The key benefits of the Audit Committee are:
- ✓ raising awareness on the need for and benefits arising from good governance (including risk management) and internal control including the implementation of both internal and external audit recommendations.
 - ✓ demonstrating the objectivity and fairness of financial and other reporting.
 - ✓ reinforcing the importance and independence of internal and external audit.
 - ✓ providing additional assurance through a process of independent and objective review by a cross party group of elected Members who can, and do, challenge Cabinet Members and Senior Officers.

As the key assurance Committee of the Council, it is best practice that an annual report is presented to the Council at the May meeting, on the operations of the Committee during the preceding year, in this case 2022-23. The structure of the report is based on the terms of reference and includes a summary of the business conducted by the Committee during this period (attached as **Appendix C**).

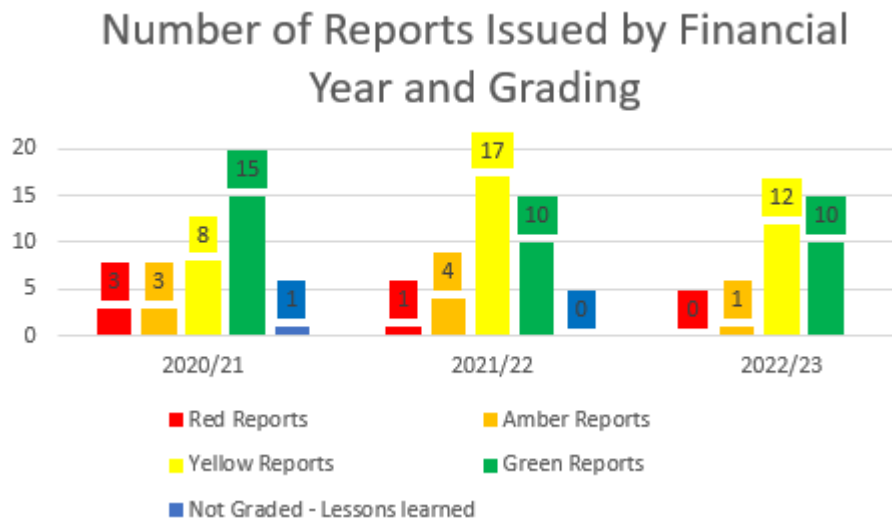
4.0 2022/23 Internal Audit Annual Report

4.1 Assurance and Opinion

- 4.1.1 The Council's Section 151 Officer's statutory obligation under the Accounts and Audit Regulations 2015 to review the effectiveness of the system of internal control is informed by the work of Internal Audit. The assurance derived from this work forms part of the Council's assurance framework.
- 4.1.2 The system of internal control helps the Council to manage and control the risks which could affect the achievement of its priorities and objectives rather than eliminate them completely. Internal Audit and the other assurance processes therefore provide reasonable and not absolute assurance of the adequacy and effectiveness of the Council's framework of governance, risk management and internal control which is included within the Annual Governance Statement.
- 4.1.3 The planned Internal Audit resources for 2022/23 was 629 days which included 49 days specialist ICT audit provision provided by Lighthouse Consultancy. The team achieved 82% of the planned work, see 4.1.8, with some items being rescheduled into the 2023/24 plan. In 2022/23 there have also been a number of unplanned audit assignments.
- 4.1.4 Based on the work undertaken during the year (areas attached as **Appendix A**), the implementation by management of the agreed recommendations and assurance obtained from other work/sources, **Internal Audit's annual opinion provides reasonable assurance in respect to the adequacy and effectiveness of the Council's framework of governance, risk management and internal control** within the areas of the Council reviewed during the year. See paragraph 5.6 in the Annual Governance Statement for the reasoning for giving this opinion.

4.1.5 As in previous years Senior Management have provided information or updates to the Audit Committee where requested to explain as to why progress on the implementation of recommendations was not as agreed.

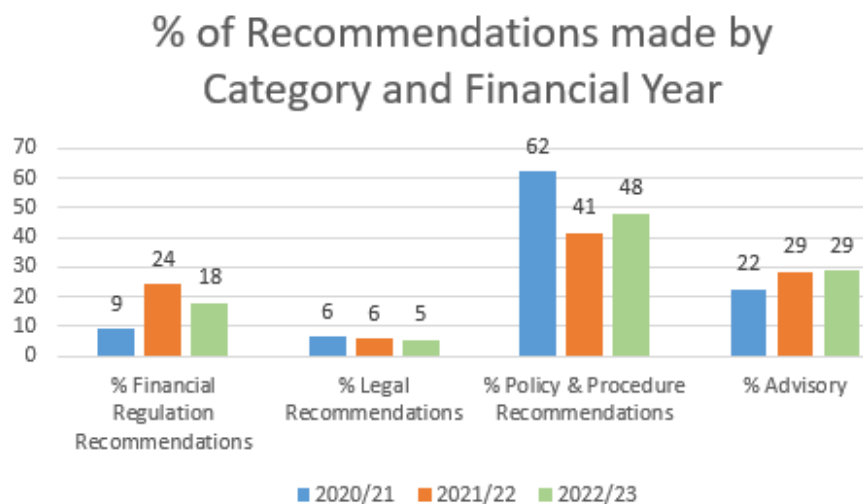
4.1.6 This Annual Report includes information in respect to the number of reports issued and their grading. This information is shown below for 2022/23 with comparisons with 2021/22 and 2020/21



(Grading's - Green = good; Yellow = reasonable; Amber = limited; Red = poor)

The above graph shows that the number of green and amber reports issued have remained comparable over 3 years, whilst the number of yellow and red reports have decreased from 2021/22. This information is broken down further in paragraph 4.1.6.

4.1.7 Further analysis shows the types and percentage of recommendations made in audit reports, and this is detailed in the graph below:



Annual Internal Audit Update 2022/23, Audit Committee Annual Report 2022/23 & 2023/24 Audit Plan

In 2022/23 23% of audit recommendations made related to Legal & Financial Regulations, this is a decrease of 7% (from 30%) from 2021/22 and an increase of 8% (15%) from 2020/21. In 2022/23 48% of the recommendations were Policy and Procedure related compared to 41% in 2021/22 and 62% in 2020/21.

The category of recommendations are comparable over the three year period.

Internal Audit continue to work with management in respect to reducing the number of Legal/Financial Regulation related improvements required.

- 4.1.8 Internal Audit reports show advisory points, these are low risk findings which managers may find useful to consider but are not of any significant risk to necessitate making a recommendation.
- 4.1.9 The Internal Audit Team has faced temporary resource challenges due to medium-term sickness related absence during the year but has still managed to complete 82% of the annual audit plan. The Internal Audit Team continue to work with services to ensure risks are appropriately managed and adequate systems of internal control are in place.
- 4.1.10 It can be confirmed that in 2022/23, there has been no impairment to the independence and objectivity of the Audit & Governance Lead Manager and/or the Internal Audit Service.

4.2 Public Sector Internal Audit Standards (PSIAS) and External Assessment

- 4.2.1 The Public Sector Internal Audit Standards (defined proper practice under the Accounts and Audit Regulations 2015) were effective from 1st April 2013. In April-May 2022 there was an external assessment undertaken of Internal Audit against these standards. This is a requirement that must occur every 5 years. The external assessment, completed by CIPFA, reported that the Council's Internal Audit Team fully met the requirement of the standards. The report did outline six advisory points (to enhance the service and not for compliance purposes) that have been accepted and implemented in full.
- 4.2.2 The Quality Assurance & Improvement Programme (QA&IP) was followed during the year. The Audit & Governance Lead Manager undertakes monthly spot checks of completed internal audit work against PSIAS requirements. Any actions/areas for development have been fed back to the Internal Audit team and in year lessons learnt from the QAIP are fed into regular reviews of Internal Audit processes and procedures.
- 4.2.3 Improvements to audit processes and procedures are continually being reviewed and updated to ensure compliance with the standards.

4.3 Performance reviewed by External Audit

4.3.1 Grant Thornton (UK) LLP were appointed, for a 5 year period, as External Auditor for the Council from 2018/19 and continue with their own external reviews.

4.3.2 The PSAA confirmed in December 2022, that from 2023/24 the Council will have new External Auditors, KPMG. KPMG have been appointed for a 5 year period.

4.4 Improvement Activity

4.4.1 During the year, to improve the team's efficiency, effectiveness and productivity, team meetings and development sessions have taken place. Internal Audit have looked to make changes to improve their adherence to the PSIAS and have investigated and implemented new/alternative ways of service delivery. Audit share best practice with other local authorities and regularly attend local network groups.

4.4.2 The Audit & Governance Lead Manager and Principal Auditor regularly attend the Local Authority Chief Auditors Network (LACAN). Other members of the team also attend the regional West Midlands Fraud Group (when relevant) which assists in identifying best practice and different approaches to audit work and information exchange.

4.4.3 The Internal Audit Team monitor their performance through the key performance indicators detailed in the table below. Results for 2022/23 exceed targets set with the exception of the '% of the annual audit plan complete'. This was the first year that performance indicators have been used.

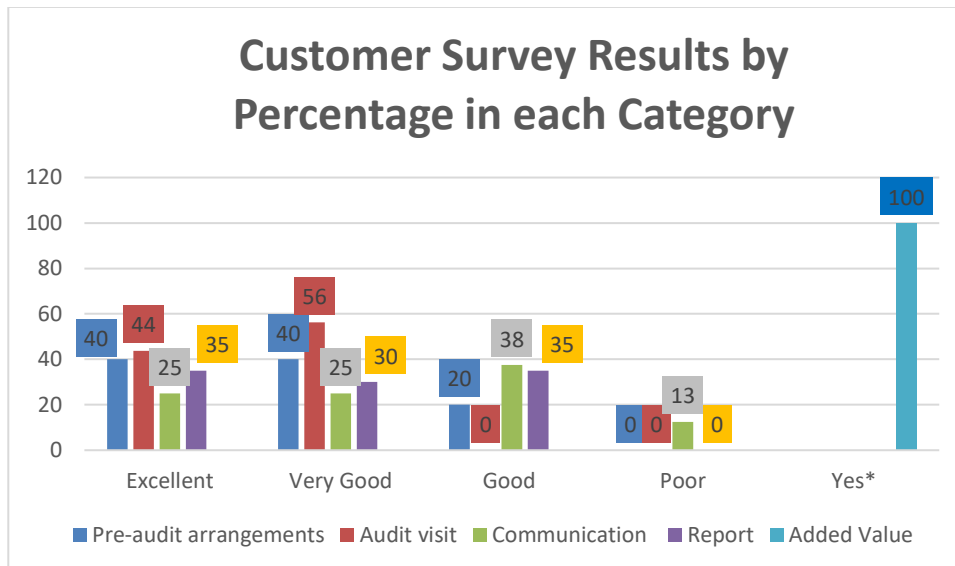
KPI Definition	Proposed Target	2022/23 Results
% completion of the annual audit plan.	90%	82%.
% of draft audit reports issued within 15 working days from completion of audit fieldwork	90%	93.75%
% of auditees either satisfied or very satisfied with audit work undertaken	90%	100%
% of recommendations accepted at draft stage	95%	99.32%

4.5 Customer Feedback

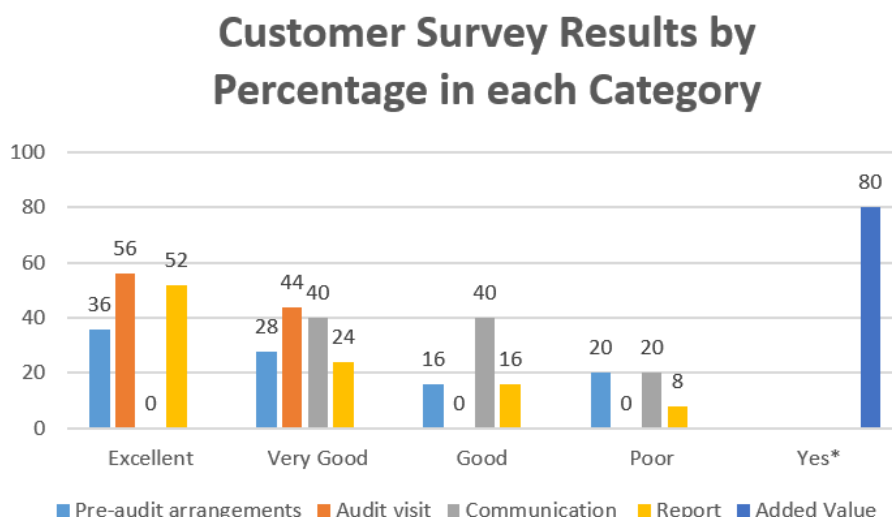
4.5.1 Internal Audit receives customer feedback in several ways:-

- a) Informal feedback from auditees during the audit
- b) Seeking feedback from auditees at draft report discussion meetings
- c) Completion of a post audit electronic questionnaire

4.5.2 Customer surveys are issued electronically with every completed audit report, the results for 2022/23 are shown in the graph below.



The graph below shows the results for 2021/22, as a comparison against 2022/23 figures shown above



The customer feedback form is broken down into different categories (parts of the audit process) and has a number of questions in each section. These sections ask for comments in the following areas: Pre-audit arrangements, audit visit,

communication, the reporting process and whether the auditee thinks Internal Audit adds value to their service area.

The above graphs demonstrates that the team's customer performance has remained extremely high within all areas included in the customer feedback form. During 2022/23, 100% of our customers think we are a positive support and add value to their service area.

Improvement have been made regarding communication during the audit process,

- 25% of responses show that communication was excellent during 2022/23, whereas in 2021/22 communication was only 'good' or 'very good'.
- 13% thought communication was poor during 2022/23 compared to 20% during 2021/22,

The team look to reivew their processes on an ongoing basis.

4.6 Conclusion for 2022/23

4.6.1 Internal Audit have performed well and have made a positive contribution to the governance arrangements within the Council. During 2022/23, completion of the audit plan increased from the previous year despite the Council experiencing temporay resource challenges. However, improvement is needed in this area and the Internal Audit Team have reviewed some of the planning process to ensure it reflects the Council's risk landscape.

4.6.2 The statutory responsibilities of the Council's Chief Financial Officer (Section 151 Officer) in respect to internal audit and internal control have been met and the work of the Internal Audit Team and other assurance activity has provided reasonable assurance to the Council on the adequacy of operation of the Council's internal controls, governance and risk management processes.

4.6.3 The Internal Audit Team have also continued to provide adhoc advice and guidance on governance, procedures, controls, information security and risk management. However, there are changes occurring both within and outside the Council during 2023/24 and beyond which could affect the team's future activities including:

- a) The continued pressure on the Council's budget strategy
- b) Further service restructures and re-engineering across the Council, revised governance arrangements and reduced supervisory levels;
- c) Compliance with changing statutory and legislative requirements.
- d) Changes to Internal Audit team personnel

5.0 AUDIT COMMITTEE ANNUAL REPORT

5.1 Internal Audit

- 5.1.1 The Internal Audit Team has continued to provide the Committee with reports on work undertaken as outlined in the Public Sector Internal Audit Standards (PSIAS - effective from April 2013) and Constitution, highlighting any areas requiring attention by Members.
- 5.1.2 The Internal Audit Plan for 2022/23 was approved by the Committee at the May 2022 meeting and the Internal Audit Charter for 2022/23 was approved by the Committee at the January 2023 meeting.
- 5.1.3 The Audit Annual Update Report was provided to the Committee in May 2022.

5.2 External Audit

- 5.2.1 The External Auditors, Grant Thornton have produced/presented their reports to the Committee as required by legislation, accounting standards and the external audit code of practice.

5.3 Governance

- 5.3.1 The Annual Governance Statement 2021/22 was approved at the May 2022 Audit Committee meeting. An update on the Annual Governance Statement action plan was presented to the committee in January 2023.
- 5.3.2 The July 2022 and January 2023 meeting reviewed the Council's Strategic Risk Register.
- 5.3.3 The 2021/22 Information Governance Annual Report was presented to the Committee in May 2022.

5.4 Treasury Management

- 5.4.1 The Committee received the 2021/22 outturn and in year updates for 2022/23. The Treasury Management Strategy 2023/24 was reviewed prior to approval by Cabinet.

5.5 Statement of Accounts 2021/22

- 5.5.1 The Statement of Accounts was approved by the Committee following external audit at the September 2022 meeting. As in previous years the approval meeting was preceded by a training session with key Finance staff who explained the statements and the changes that had occurred.

5.6 Anti-Fraud & Corruption

5.6.1 The 2021/22 Anti-Fraud & Corruption Annual Report and 2021/22 updated policy was received in May 2022.

5.7 General

5.7.1 The Committee reviewed its Terms of Reference at its first meeting of the municipal year as set out in the Constitution. The Committee also received and agreed a report to extend the responsibilities of the committee at the January 2022 meeting.

5.8 Conclusions for 2022/23 and the future 2023/24

5.8.1 The Committee has considered comprehensive agendas in order to provide assurance for Members and the community on the audit, governance (including information governance), risk management, financial statements, treasury management, complaints and anti-fraud and corruption arrangements of the Council.

5.8.2 The Committee recognises that the Council is continuing to experience some significant challenges and that it must continue to seek and provide appropriate assurance during 2022/23. Most notable are the impact of organisational changes, continued significant reductions in resources and the more commercial approach being adopted by the Council.

5.8.3 As detailed in paragraph 7.7.1 above the terms of reference for the Audit Committee have been extended to include areas such as partnership working and climate change. Therefore reports have been presented on these additional areas during 2022/23.

6.0 Internal Audit Plan 2023/24

6.1 Internal Audit has a statutory obligation under legislation to provide assurance to the Council as part of the Council's corporate governance framework and the effective management of risks. It also strives to provide a quality, added value and up to date service for the Council.

6.2 Internal Audit work, in addition to obtaining assurance on key areas, risk management and controls for the Council, aims to challenge where controls are not required, question value for money and make suggestions for adjustments to existing controls to make processes more efficient. This will assist managers and their teams to achieve their objectives, identify further savings and contribute to the achievement of the Council's priorities.

6.3 Internal Audit resources are limited. To ensure Internal Audit can provide reasonable assurance to managers, Members and the Council an annual Audit

Plan is developed. Professional Internal Audit standards¹ and good practice set out that Internal Audit planning should be directly linked to the Council's objectives and priorities and be directed by the Audit Charter agreed by the Audit Committee in January 2023. The plan is informed and influenced by previous Internal Audit work, areas highlighted during previous audits, areas identified by management teams, External Audit requirements, the strategic and IDT risk registers, external assessments and local, regional and national networking intelligence.

- 6.4 The plan is attached as Appendix B, it has, has been drawn up based on the internal and external resources available for 2023/24 (see 6.5 below), the factors in paragraph 6.3 above and discussions with the SMT and management. The resultant plan should provide a reasonable level of assurance for 2023/24 but limited to the areas reviewed.
- 6.5 The planned available audit days for 2023/24 are 773 days which includes 41 days specialist ICT audit work. The audit plan is dynamic/scalable as it's based on risk and can change where new risks are identified. Audit therefore intend to continually review the plan and meet with Managers to discuss the audits required to be completed in order to provide a reasonable level of assurance at the end of 2023/24. Audit Committee members will be updated throughout the year with any changes to the 2023/24 plan.
- 6.6 The plan includes approximate 2% contingency to meet any unexpected work requirements, any changes identified during the year or changes to resources during the year. Due to the nature of the plan and its link to risks, during delivery there will be regular dialogue with the Chief Executive, SMT and Managers to ensure that the appropriate risks and controls are being reviewed by the resources available. Any significant changes will be agreed with the Chief Executive and the appropriate Director/Executive Director and will be reported for information to the Senior Management Team and this Committee.
- 6.7 The External Auditor undertakes their own planning process and presents their plan to the Audit Committee. Internal Audit and Senior Management liaise with them to ensure that duplication is avoided, that the key risks are reviewed and that the external audit fee is minimised. Similar liaison takes place with Scrutiny to avoid duplication or to ensure work is complementary

7.0 Summary of main proposals

- 7.1 It is proposed that members note the information contained in this report and approve the 2023/24 internal audit plan.

8.0 Alternative Options

- 8.1 Amendments can be made to the internal audit plan, as required by committee members, however the proposed version is based on risks identified by audit and the wider management teams in each service area.

¹ Public Sector Internal Audit Standards

9.0 Key Risks

- 9.1 Audit will be unable to provide assurance on key risks faced by the Authority if the audit plan is not approved.

10.0 Council Priorities

- 10.1 A community-focussed, innovative council providing efficient, effective and quality services.

11.0 Financial Implications

- 11.1 The planned work undertaken by the Internal Audit Team as outlined in this report is funded through the Council's base budget and approved as part of the Medium Term Financial Strategy. Income generated by Internal Audit from commercial contracts is used to offset the overall costs of the Internal Audit Team therefore reducing the amount of base budget required.
- 11.2 In circumstances where Audit findings result in changes to service delivery or controls etc. the financial consequences are managed as part of the implementation of such changes. There are no financial implications as a result of accepting the recommendations of this report.

12.0 Legal and HR Implications

- 12.1 The Accounts and Audit Regulations 2015 set out the detailed requirements for local authorities in relation to keeping adequate accounting records and control systems, preparing, approving and publishing a statement of accounts, and making various documents available for public inspection and objection and questioning by local electors (note The Local Audit (Public Access to Documents) Act 2017 extends public inspection rights to journalists).
- 12.2 Under Regulation 3, the authority "must ensure" that it has (and reviews) a "sound system of internal control" whilst Regulation 5 states that it "must undertake an effective internal audit". There is a requirement to prepare and publish a "narrative statement", commenting on the authority's financial performance and economy, efficiency and effectiveness in the use of resources over the year. The information set out in this report illustrates the work that has been undertaken to meet the appropriate statutory requirements.
- 12.3 The Public Sector Internal Audit Standards (PSIAS) is mandatory across the whole of the public sector. The purpose of the PSIAS is defined as follows:
- define the nature of internal auditing within the UK Public Sector;
 - set basic principles for carrying out Internal Audit in the UK Public Sector;
 - establish a framework for providing internal audit services in respect of organisational processes and operations;
 - facilitate the development of an effective Quality Assurance and Improvement Programme and;

- define a mandatory Code of Ethics.

12.4 Undertaking the audits as set out in the report, and providing updates and an Annual Report to this Committee contributes towards meeting these requirements. Further reference to legal requirements and the implementation of those legal requirements in accordance with CIPFA guidance are contained within the main body of the report. In the event that an audit reveals an issue which requires a recommendation concerning a legal matter this can also be referred to the Council's Legal Services Team for further advice and assistance.

13.0 Ward Implications

13.1 The work of the Audit team encompasses all the Council's activities across the Borough and therefore it operates within all Council Wards detailed in the Parish Charter.

14.0 Health, Social and Economic Implications

14.1 There are no health, social or economic implications directly arising from this report.

15.0 Equality and Diversity Implications

15.1 Transparency supports equalities and demonstrates the Council's commitment to be open and fair.

16.0 Climate Change and Environmental Implications

16.1 There are no direct climate change and environmental implications arising from this report.

17.0 Background Papers

- 1 Previous Audit Committee – 26 May 2022, 27 May 2021 & 14 July 2020
- 2 Public Sector Internal Audit Standards – Applying the IIA International Standards to the UK Public Sector 2013 and updated January 2017

18.0 Appendices

- A The work of Internal Audit 2022/23
- B Internal Audit Plan 2023/24
- C Audit Committee activity 2022/23

19.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Finance	10/05/2023	11/05/2023	AEM
Legal	10/05/2023	22/05/2023	RP