


Agenda Item No:	8	
Committee:	Audit and Risk Management	
Date:	25/03/2024	
Report Title:	Risk Based Internal Audit Plan 2024/25	

1 Purpose / Summary

In accordance with the Public Sector Internal Audit Standards (PSIAS) the Interim Internal Audit Manager has prepared the attached Internal Audit Plan (“the Plan”). It considers the areas for audit review and the availability of Internal Audit resources.

2 Key Issues

- The Council’s Internal Audit Plan is produced on an annual basis. It is an estimate of the work that can be performed over the financial year. Potential areas of the Council for audit are prioritised based on a risk assessment, enabling the use of Internal Audit resources to be targeted at areas of emerging corporate importance and risk.
- The format of the Plan reflects the PSIAS, which were introduced in April 2013, were revised and came into effect in April 2017. It also incorporates the governance and strategic management arrangements of Internal Audit resources.
- Following on from the External Assessment completed in December 2022, recommendations will be considered, implemented and reviewed. However, some recommendations require resource dedication which is difficult to allocate currently with temporary staff.
- There are a total of 333 budgeted productive days for 2024/25.
 - 298 days are allocated to operational audit work. This resource is used to calculate the risk-based audit plan. This work contributes to the annual opinion on the effectiveness of the system of internal control, which is reported to the Committee.
 - 35 days are allocated for other productive assurance work. This includes proactive anti-fraud and error work such as the National Fraud Initiative, a contingency for responsive work and regular following up of previous recommendations.
- The main change of note is the number of days allocated per audit. Previously, Audit Plans were based on a range of 4 to 15-day audits with the majority around 6 to 8 days. To ensure that Audit assurance work is thorough, it is appropriate that the minimum number of days per audit start at 15 days depending on the complexity of the audit. Follow up reviews of “limited” assurance-rated audits will be 5 days.
- The risk-based Plan assumes that the team comprises 1.6 FTE and 0.6 for the Interim Internal Audit Manager, although much of the Manager’s time will not be spent on operational audit work. Hence, the level of capacity to deliver the

2023/24 Plan is dependent on the current staff levels, including replacements for the interim staff. Also, this resourcing level should be kept under constant review to ensure coverage of all key control systems over a 3 to 5-year cycle.

- This Plan will continue to be flexible to support ongoing and emerging risks that may arise throughout the year.
 - The Audit Plan for 2024/25 is attached at Appendix A.
 - The Assurance rating classification is included at Appendix B.
 - The ‘fundamental systems’ audit reviews over the next 5 years are included at Appendix C.

- The Council has 9 key financial systems, known as ‘Fundamental’ systems, due to their significance and materiality. Detailed testing provides assurance to the Council’s External Auditors in preparation for final accounts compliance. Following repeated years of positive assurance, the Committee and the External Auditors agreed an approach that would maximise assurance with the most effective use of resources. This approach will continue to be discussed with the External Auditors, reflecting any changes to the level of risk for these systems.

- This is illustrated in Appendix C which shows that the auditing arrangements with ARP, the Council Tax, Business Rates and Housing Benefits are reviewed annually. The remaining Finance systems will be audited over a three-year cycle.

3 Recommendations

The Committee is asked to acknowledge the Internal Audit resources and to consider and note the attached draft Internal Audit Plan for 2024/25.

Wards Affected	All
Forward Plan Reference	N/A
Portfolio Holder(s)	Cllr Chris Boden Leader and Finance Portfolio holder
Report Originator(s)	David Thacker – Interim Internal Audit Manager
Contact Officer(s)	Peter Catchpole – Corporate Director & Chief Finance Officer Amy Brown - Assistant Director
Background Paper(s)	Accounts and Audit Regulations 2015 Public Sector Internal Audit Standards 2016 CIPFA Local Government Application Note 2019 Fenland District Council Corporate Plan Internal Audit Charter

Risk-Based Internal Audit Plan
2024/25



1 Introduction

- 1.1 This document sets out the annual Internal Audit risk-based plan (“the Plan”). It is intended to demonstrate how Internal Audit will support the overall aims and objectives of the Council by:
- providing the Chief Executive, Section 151 Officer and Audit and Risk Management Committee with an overall opinion each year on the Council’s control environment to support the Annual Governance Statement (AGS) requirements.
 - preparing Audit plans that give suitable priority to the Council’s priorities and key risks and concentrate resources on areas that have been identified as being the most vulnerable.
 - providing suggested actions to line management at the conclusion of each piece of audit work that will assist in continuous service improvement and reduce the risks identified.
 - identifying the Internal Audit resources required to deliver an Audit service that meets required professional standards; and
 - complying with professional standards.
- 1.2 The Plan is risk-based and covers the Council’s existing operations, while adding value by responding to emerging risks and promoting good governance.
- 1.3 The Plan will be reviewed at least annually to ensure its continued relevance, both in terms of supporting the council’s aims and corporate objectives, and in achieving a professional, modern audit service.
- 1.4 The strategic aims for Internal Audit in 2024/25 are to:
- prepare, maintain and deliver the risk-based Internal Audit Plan.
 - proactively promote understanding of risk and control.
 - recommend actions that help systems meet at least adequate levels of control. This aims to align to the goals of the Transformation Programme (TA2).
 - facilitate provision of assurance for the AGS.
- 1.5 The Plan is supported by the teams Service Plan, which is aligned to the Council’s Corporate Priorities, and is agreed with the Internal Audit team through the Council’s Springboard process.

2 Role of Internal Audit

- 2.1 All local authorities must make proper provision for Internal Audit in line with the 1972 Local Government Act (S151) and the Accounts and Audit Regulations 2015. The latter states that authorities 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.
- 2.2 Fenland District Council has responsibility for ensuring that statutory internal audit arrangements are in place to the Corporate Director & Chief Finance Officer. These arrangements form a key element of the District Council’s framework for corporate governance.
- 2.3 The Interim Internal Audit Manager will oversee Internal Audit provision to the District Council on behalf of the Corporate Director & Chief Finance Officer.
- 2.4 The objectives, scope and definitions of Internal Audit are detailed in the Internal Audit Charter.

3 Risk Assessment

3.1 The Council's Audit Plan is based on a risk assessment of all the Council's major systems and other auditable areas. This allows us to prioritise those areas and systems to be included within the plan. Key risk assessment factors include:

<u>Factor</u>	<u>Description</u>
Materiality – Value	The value of annual direct income / expenditure associated with the system / activities
Materiality – Volume	An estimate of the number of transactions processed by the systems / activities per annum
Significance / Profile	The significance of the system to the activities of the Council.
Complexity	The complexity of the systems / activities in terms of their operation and auditability
Change	Recent changes to the system or the likelihood of change to the systems in the audit period planned including reference to TA2.
Regulatory / Contractual	Extent to which the system / activity is subject to regulation or contractual obligation
External Monitoring	The extent to which a service / activity is monitored or audited by an external body
Prior Audits	Overall rating of last audit and result of follow up.
Susceptibility to fraud and corruption	Opportunity within the system / activity for fraud and corruption to occur.
Staff Turnover	The turnover of staff, especially with key skills.

3.2 The risk assessment, and update of the annual Plan, is informed by consultation with key stakeholders, including:

- the Corporate Director & Chief Finance Officer.
- the Corporate Director & Monitoring Officer.
- the Corporate Management Team.
- the Council's Assistant Directors and Heads of Service.
- the Council's external auditors.
- the Audit and Risk Management Committee.

3.3 Consultation helps ensure that stakeholder's views and risks are reasonably identified and reflected within the Plan. Where possible External Audit will place reliance on the work of internal audit, and other external providers of assurance will be referred to help formulate the annual audit opinion. This helps ensure that resources are used to the best effect, and duplication is avoided.

3.4 The Plan is also informed by key corporate documents such as:

- The Business Plan.
- The Medium-Term Financial Strategy (MTFS); and
- The Council's Corporate and Service risk registers.

4 Key Themes

The key themes, which have driven our assessment of risk and strategic aims are:

Area	Comment
Financial excellence	There is a continued need to ensure value for money is achieved, including financial resilience and the ability to prioritise resources within increasing financial constraints and a changing control environment.
Corporate Governance arrangements	The Internal Audit Manager will independently review and give an opinion on the Council's arrangements for both corporate governance and risk management, to support the production of an annual governance statement to accompany the statement of accounts. The team will maintain an awareness of emerging risks to help provide advice on effective internal controls.
Assurance mapping	Where other well-developed assurance processes exist (e.g., documented Control Risk Self-Assessment reviews, quality management audits, the work of other review or inspection teams) the internal audit team will quality assure these processes and consider how they can deliver a significant contribution to the overall audit opinion of internal control.
Improving information governance	As part of the planned audits the team will help to promote good information and data management practice throughout the organisation.
Risk management	Internal Audit will continue to assist teams identify business risks as part of audits. This will engage our customers in the management and maintenance of their risks and controls at an operational level and help identify and escalate concerns to the corporate risk register.
Minimising fraud and error	<p>The Internal Audit team will ensure that the Anti-Fraud & Corruption Policy & Internal Audit Strategy reflects best practice and will appraise fraud risks during audits.</p> <p>Internal controls will continue to be tested for effectiveness and the team will participate in data matching exercises, as provided by the National Fraud Initiative, to proactively identify fraud and error.</p>
Corporate priorities	The Corporate Plan, and the Council priorities, informs the Internal Audit Strategy. The Plan is based on the risk profile of activities supporting the Corporate Plan and will continuously be revised to reflect any emerging changes to corporate risk.

5 Audit Needs and Resources

- 5.1 The risk assessment process identifies auditable systems and helps to prioritise the Audit Plan in consultation with key stakeholders.
- 5.2 Systems assessed as below adequate assurance, during the previous financial year, which are not subject to a planned audit will be considered for a follow up review to assess the effective implementation by management of agreed audit recommendations.
- 5.3 Where common areas of risk are identified across several teams then the use of corporate themed reviews is considered to ensure an approach which is both consistent and makes effective use of resources.

- 5.4 Both the resources and capacity of the Internal Audit Team is considered annually whilst setting the annual plan. The Internal Audit Team currently has 1.6 full time equivalent auditors and a part-time Interim Internal Audit Manager (0.6 FTE).
- 5.5 Unproductive days, such as training and annual leave, are deducted from the total resource to calculate the total number of planned productive days.
- 5.6 Internal Audit team resources will enable all services of the Council to receive audit coverage over a three-year period, although realistically some may be considered of such low priority in relation to other areas that they may only be covered in five years.
- 5.7 This Internal Audit Plan is produced and provides details for a 12-month period. The (Interim) Internal Audit Manager will review and adjust the Plan, as necessary, in response to changes in the organisation's business, risks, operations, programs, systems, and controls, as well as the impact of TA2. Where work in progress occurs, it will be carried forward for completion within resources available in the next year.

6 Audit Delivery

- 6.1 The approach of Internal Audit is to use risk-based reviews, supplemented in some areas using system-based audits and themed reviews. All audits have regard to management's arrangements for:
- securing the proper, economic, efficient and effective use of resources.
 - achieving key performance indicators, where appropriate.
 - preventing fraud and irregularity.
- 6.2 The internal control system contains 9 key systems known as 'Fundamental' audits. A compliance approach is applied, as there is pre-existing confidence that controls are well designed, but the effective operation of the controls is a material concern. Testing for the effective operation of these controls is completed over a planned three-year cycle, although can be audited more frequently if assurance is required. The ARP auditing arrangements have allowed us to gain assurances on an annual basis for Council Tax, Business rates and Housing Benefits. A continuous auditing approach is adopted that spreads the testing throughout the year. This helps to ensure that the work is delivered and reduces the burden on the customer.
- 6.3 The remainder of the systems are prioritised by their risk-based assessment. The approach to each audit is agreed, with the auditee, during the planning stage of the audit.
- 6.4 In addition to these planned audits the team will complete other assurance work which adds value to the organisation. Examples include proactive anti-fraud and error work such as fraud risk education and data matching, project-based assurance, contingency for responsive work, and following up previous audit recommendations.
- 6.5 The PSIAS states that the Internal Audit Manager should consider accepting consulting engagements based on the potential to improve management of risks, add value and improve the organisation's operations. The team will participate in corporate projects that add value by improving governance and controls throughout the Council, as well as being part of the Corporate Risk Group that reviews the key risks facing the Council and also being part of the newly formed Corporate Governance Group.
- 6.6 Requests for unplanned work will be considered against capacity to ensure Internal Audit's independence, and the resource required to provide the Annual Audit Opinion, is not compromised. Any significant additional consulting activities, which impact delivery of the Plan, will be communicated to the Committee.
- 6.7 The output of audits completed during the year will inform the Annual Audit Opinion, which will conclude on the overall adequacy and effectiveness of the organisation's

framework of governance, risk management and control. This will be reported through the annual Internal Audit Outturn report which is a key source of assurance for the AGS.

7 Quality and Performance

- 7.1 Internal Audit maintains a manual, which sets out the standards to which all audit assignments are completed. It is reviewed and updated to reflect the best practice and professional standards.
- 7.2 The performance of Internal Audit is measured against targets and objectives set out in the Team Service Plan.
- 7.3 At a detailed level each audit assignment is monitored, and customer feedback sought.
- 7.4 There is ongoing performance appraisal and supervision for all Internal Audit staff during the year to support them in achieving their personal targets.
- 7.5 The Corporate Director & Chief Finance Officer shall in accordance with the Accounts and Audit regulations 2015 arrange for an assessment of quality independently of the Internal Audit service. Additionally, an external review of the Internal Audit Service is completed by external assessors every 5 years.
- 7.6 This was assessed in December 2022, where the team received the highest rating of Generally Conforms in all areas.
- 7.7 Internal Audit will continue to liaise closely with other internal audit services through the Cambridgeshire Audit Group, the Chartered Institute of Public Finance Accountants, the Institute of Internal Auditors and the ARP shared audit partnership to share knowledge of best practice.

Appendix A: Internal Audit Plan 2024/25

Audit Title	Risk Rating	Last Audit	Last Audit results	2024/25 days
2023/24 brought forward				
Contract Monitoring - Highways	Medium	2017/18	Substantial	15
Subtotal brought forward from 2023/24				15
Communities				
Contract Monitoring – Leisure Services	Medium	2019/20	Adequate	20
Subtotal Communities				20
Economy				
Economic Development – Grant Funding	Medium	2022/23	Substantial	15
Subtotal Economy				15
Environment				
Licences - Taxis	Medium	2021/22	Adequate	15
Materials Recycling Facilities (MRF) – Limited Scope	Medium	2017/18	Limited	5
Subtotal Environment				20
Quality Organisation				
ARP Enforcement	Medium	2023/24	Substantial	15
Council Tax (Fundamental)	Medium	2023/24	Adequate	1*
Housing Benefits (Fundamental)	Medium	2023/24	Adequate	1*
Business Rates (Fundamental)	Medium	2023/24	Adequate	1*
Corporate Projects Governance	High		Ongoing	10
Corporate Finance – Management Accounting System (MAS)	Medium	2021/22	Substantial	15
Creditors (Accounts Payable)	High	2022/23	Substantial	20
Insurance	High	2017/18	Substantial	20
Workforce Planning	High	2018/19	Substantial	20
Legal Services	Medium	2021/22	Limited**	20
HR - New Payroll System (Post-Implementation Review)	Medium	NEW		15
Corporate Assurance – Performance Management	Medium	2018/19	Adequate	15
Corporate Governance - Constitution	Medium	NEW		20
Procurement	High	2021/22	Adequate	20
Transformation (TA1) – Value for Money	Medium	NEW		20
Debtors & Collection Agency – Follow Up	High	2023/24	Limited	5
Port Berthings – Follow Up	High	2023/24	Limited	5
Housing Options – Follow Up	High	2023/24	Adequate	5
Subtotal Quality Organisation				228
Total Risk Based Audits				298

External Audits and Other Work				
Local Authority Trading Company	High	2021/22	Ongoing	10
Fraud Work – Investigations and NFI				5
Contingency				20
Subtotal External and Other Work				35
Grand Total				333

* These audits are conducted by our ARP partner authorities, which will be reviewed by the (Interim) Internal Audit Manager of FDC before final reports are issued.

** This report was not finalised.

Appendix B: Assurance Ratings:

An assurance rating is applied, when a system or process is reviewed, which reflects the effectiveness of the control environment. The text below is an indication of the different assurance ratings used:

Assurance Opinion	Definition
Full Assurance	In our opinion, there is a sound system of internal control that is likely to achieve the system objectives, and which is operating effectively in practice.
Substantial Assurance	In our opinion, there is a sound system of internal control operating, but there are a few minor weaknesses which could put the achievement of system objectives at risk.
Adequate Assurance	In our opinion, there is a sound system of internal control operating, but there are some weaknesses which could put the achievement of system objectives at risk.
Limited Assurance	In our opinion, there is a system of internal control with a number of weaknesses likely to undermine achievement of system objectives, and which is vulnerable to abuse or error.
No Assurance	In our opinion, there is a fundamentally flawed system of internal control that is unlikely to achieve system objectives and is vulnerable to serious abuse or error.

Appendix C: Fundamental Audit Plan

This is the proposed plan for internal audit reviews of controls considered fundamental to the Council:

System Name	2023/24	2024/25	2025/26	2026/27	2027/28	Current Overall assurance rating
Housing Benefits *	✓	✓	✓	✓	✓	Adequate
Council Tax *	✓	✓	✓	✓	✓	Adequate
Business Rates *	✓	✓	✓	✓	✓	Adequate
Capital Finance Planning & Asset Register	✓			✓		Substantial
Debtors & Collection Agency	✓	✓		✓		Limited (Follow Up in 2024/25)
Creditors		✓			✓	Substantial
Corporate Finance - Budgetary Control			✓			Substantial
Cash & Treasury Management	✓			✓		Substantial
Corporate Finance - Management Accounting System (MAS)		✓			✓	Substantial

* ARP Auditing arrangements in place allow for an audit to be undertaken every year on these services by our ARP Partner authorities.