



Wiltshire Council

Proposed Q2 Internal Audit Plan 2021/22 And Revised Internal Audit Charter

Internal Audit = Risk = Special Investigations = Consultancy

Unrestricted

The work of internal audit should align strategically with the aims and objectives of the organisation, taking into account key risks, operations and changes.

In order to do this Internal Audit needs to be flexible in adapting audit plans to handle rapidly changing risks, priorities and challenges.

It is the responsibility of the Senior Leadership Team, and the Audit & Governance Committee to ensure that the audit work scheduled and completed throughout the year contains sufficient and appropriate coverage of key risks.

Approach to Internal Audit Planning 2021/22

Background

Over the past year, as a result of the COVID pandemic, SWAP, like Wiltshire Council, has had to adapt, re-prioritise, and shift focus. Whilst 2020/21 was an exceptional year, it has demonstrated the need for a fully flexible and responsive approach to audit planning. Although 2021/22 is likely to offer more stability in operations, we are looking to build on our new planning approach, ensuring that we are supporting the Council by collaboratively aligning our work to its aims, objectives and key risks. This should ensure that we are auditing the right things, at the right time; enabling us to provide insight and value when and where it is required.

Approach to Internal Audit Planning 2021/22

Our approach to internal audit planning throughout 2021/22 will be a continuous risk assessment and rolling plan approach. Rather than present a proposed annual plan at the start of the year, which is subject to a high level of uncertainty and change, we will build our plan in conjunction with management as the year progresses, presenting a quarterly plan at each meeting of this Committee.

A quarterly planning process will provide the same assurances as an annual plan but should better reflect the changing risk landscape.

Audit planning meetings will be held with relevant officers and the plan for each quarter will be agreed with the Corporate Director Resources and the Corporate Leadership Team (CLT) prior to presenting to this Committee for formal approval. The quarter 2 plan was presented to and discussed with CLT on 8th July 2021.

For the remaining quarters of the plan, meetings will be held with management to discuss the audit plan. These meetings will lead to a 12 month 'rolling wave plan' place-marking key areas of coverage to support the annual opinion. This is then underpinned by quarterly risk-based work plans which draw from meetings with management and the 'rolling wave plan' throughout the financial year to ensure we are auditing the right areas, with the correct scope, at the right time and reported through our quarterly progress updates.

The resulting programme will be a combination of requested audit work aligned to service priorities, combined with audit work recommended by SWAP driven by our continuous risk assessment. This risk assessment will be based on the live status of both the Council's strategic and service risk registers. Overlaid onto this assessment



will be SWAP's sector-wide top 10 risk areas, and consideration of the eight strands of our 'Healthy Organisation' framework. The results of our risk assessments will be shared with senior management to obtain their view on the value of internal audit involvement. In developing risk assessments, we will also take account of other sources of assurance, where relevant.

It should be noted that Internal Audit is only one source of assurance, and the outcomes of internal audit reviews should be considered alongside other sources, as part of the 'three lines' assurance model. Key findings from our internal audit work should also be considered in conjunction with completion of the Authority's Annual Governance Statement.

It is the responsibility of the Authority's CLT and the Audit and Governance Committee, to determine that the audit coverage contained within the proposed audit plan is sufficient and appropriate in providing independent assurance against the key risks faced by the organisation.

When reviewing the proposed Quarter 2 audit plan (as set out below), key questions to consider include:

- Are the areas selected for coverage appropriate?
- Does the internal audit plan cover the organisation's key risks as they are recognised by CLT and the Audit and Governance Committee?
- Is sufficient assurance being received within the plan to monitor the organisation's risk profile effectively?

Internal audit coverage can never be absolute and responsibility for risk management, governance and internal control arrangements will always remain fully with management. As such, Internal Audit cannot provide complete assurance over any area, and equally cannot provide any guarantee against material errors, loss or fraud.

Delivery of an internal audit programme of work that provides sufficient and appropriate coverage of key risks, will enable us to satisfy our requirement to provide a well-informed and comprehensive year-end annual internal audit opinion. Our audit work is governed by our Internal Audit Charter, attached at Appendix 1.



SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

The Internal Audit Plan: Coverage

This page highlights any key risk areas where we believe Internal Audit coverage is currently missing.

The risk coverage will be assessed for each individual quarter and an overall assessment of coverage will be provided within the Annual Opinion.

Risk Coverage in 2021/22 Quarter 2 Internal Audit Plan

Following our SWAP risk assessment and the preparation of the proposed 2021/22 quarter 1 audit plan, we have set out below coverage of corporate risks as defined by the Council.

Coverage of audits in the 2021/22 audit plan against the Strategic Risk Register

| Corporate Risk | Inherent Risk Rating | Residual Risk Rating | Q1 Coverage | Q2 Planned Coverage |
|---|----------------------------|----------------------------|----------------|---------------------------|
| CRR.01 – Safeguarding Children | 12 | 8 | | |
| CRR.02 – Safeguarding Adults | 8 | 8 | | |
| CRR.03 – Salisbury's Economy | 6 | 6 | | |
| CRR.04 – Interest Rates Changes | 6 | 4 | | |
| CRR.05 – Cyber Resilience | 16 | 8 | | |
| CRR.06 – Staff Capacity | 6 | 6 | | |
| CRR.07 – Budget Management | 16 | 16 | | |
| CRR.08 – Contract Management | 12 | 12 | | |
| CRR.09 – Income Collection | 9 | 6 | | |
| CRR.10 – Corporate Health, Safety & Wellbeing | 4 | 4 | | |
| CRR.11 – Information Governance | 6 | 6 | | |

| Coverage Key | | | |
|--------------|---|--|--|
| | Good internal audit coverage | | |
| | Adequate internal audit coverage | | |
| | Some aspects of internal audit coverage | | |
| | No internal audit coverage to date | | |



The Internal Audit Plan: Approach

SWAP Internal Audit Services is a public sector, not-for-profit partnership, owned by the public sector partners that it serves. The SWAP Partnership now includes 25 public sector partners, crossing eight Counties, but also providing services throughout the UK.

As a company, SWAP has adopted the following values, which we ask our clients to assess us against following every piece of work that we do:

- Candid
- Relevant
- Inclusive
- Innovative
- Dedicated

Your Internal Audit Service

Audit Resources

The 2021/22 Internal Audit programme of work will be equivalent to 1800 days. The current Internal Audit resources available represent a sufficient and appropriate mix of seniority and skill to be effectively deployed to deliver the planned work. The key contacts in respect of your Internal Audit service for Wiltshire Council are:

Charlotte Wilson, Assistant Director – <u>Charlotte.Wilson@SWAPAudit.co.uk</u>, Tel: 07732 688505 Becky Brook, Principal Auditor – <u>Becky.Brook@SWAPAudit.co.uk</u>, Tel: 020 8142 5030

External Quality Assurance

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors (IPPF).

Every three years, SWAP is subject to an External Quality Assessment of Internal Audit Activity. The last of these was carried out in February 2020 which confirmed general conformance with the IPPF.

Conflicts of Interest

We are not aware of any conflicts of interest within Wiltshire Council that would present an impairment to our independence or objectivity. Furthermore, we are satisfied that we will conform with our IIA Code of Ethics in relation to Integrity, Objectivity, Confidentiality, & Competency.

Consultancy Engagements

As part of our Internal Audit service, we may accept proposed consultancy engagements, based on the engagement's potential to improve management of risk, add value and improve the organisation's operations. Consultancy work that is accepted, will contribute to our annual opinion and will be included in our plan of work.

Approach to Fraud

Internal Audit may assess the adequacy of the arrangements to prevent and detect irregularities, fraud and corruption and have included some focused proactive fraud work in the plan. We have a dedicated Counter Fraud Team available to undertake specific investigations if required. However, the primary responsibility for preventing and detecting corruption, fraud and irregularities rests with management who should institute adequate systems of internal control, including clear objectives, segregation of duties and proper authorisation procedures.



SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Wiltshire Council Proposed Quarter 2 Internal Audit Plan 2021/22

It should be noted that the audit titles and high-level scopes included below are only indicative at this stage for planning our resources. At the start of each audit, an initial discussion will be held to agree the specific terms of reference for the piece of work, which includes the objective and scope for the review.

| Link to Corporate Priorities/ Corporate Risk Register | Areas of Coverage | Brief Description | Requested/Agreed by or Rationale for audit |
|---|---|---|--|
| | C | orporate and Resources (including ICT) | |
| An Innovative and Effective Council | Key Financial Controls Main Accounting Accounts Payable | All key financial systems are subject to cyclical audits to review key controls as a minimum and to provide assurance on effectiveness of | Review of the Authority's fundamental business processes and key services. |
| CRR.04 CRR.07 CRR.08 CRR.09 | Accounts Receivable Payroll Council Tax Business Rates Housing Benefit and Council Tax Support Housing Rents Treasury Management | controls. The Key Financial Control reviews will be undertaken via quarterly continuous assurance work throughout the year. | |
| | Procurement Exemptions | Review of the use of and controls in place for procurement exemptions. | Agreed with Corporate Director Resources. |
| | Various COVID Grants | Grant Certification – Full list to be confirmed and agreed. | Agreed with Corporate Director Resources. |
| | Pension Fund Investment Transfer and Cost Savings | This audit is to conduct a review of the Fund's pension transfer arrangements to Brunel Pension Partnership during 2020/21 to ensure the project remains on track delivering the expected cost savings. | Requested by the Pension Fund Committee. |
| An Innovative and Effective Council CRR.06 CRR.11 | Mental Health and Wellbeing | Assess the controls in place to identify the mental health and wellbeing of employees following the COVID lockdowns. | Agreed with Director HR & OD. |



Wiltshire Council Proposed Quarter 1 Internal Audit Plan 2021/22

| Link to Corporate Priorities/ Corporate Risk Register | Areas of Coverage | Brief Description | Requested/Agreed by or Rationale for audit | |
|---|--|---|---|--|
| Linked to all risks | Risk Maturity Assessment | An assessment against the Risk Management Maturity Model. | Agreed with Corporate Director Resources. | |
| An Innovative and Effective Council | ICT Access Controls | Review to look at the controls in place for the Active Directory and access controls for network folders. | Agreed with the Corporate Director Resources. | |
| CRR.05 CRR.12 | ICT Reviews | Various ICT reviews identified within the Cyber Security Framework Review and the IT Governance Review. | | |
| | • | People | | |
| Protecting the Vulnerable CRR.01 CRR.02 CRR.07 | Designated Officer for Allegations (DOfA) | A review of the process to ensure adequately controlled and in line with relevant legislation. Objectives were set as part of a business case a check will be performed to ensure these objectives are being delivered. | Agreed with Director Families and Children. | |
| CRR.08 | Education, Health and Care Plans (EHCP) | To assess whether adequate processes and procedures are in place to ensure that Education, Health and Care Plans are being successfully implemented in line with statutory requirements and sufficient resources are available to continue to deliver the service. | Agreed with Director Education and Skills. | |
| | Care Home Alliance | Review of the new platform to provide residential and nursing care home bed services in Wiltshire. | Agreed with Director Commissioning. | |
| | Multi-Agency Safeguarding Hub - Adults (MASH) | An audit to assess the extent to which the Safeguarding Adults Board is delivering its statutory responsibilities and is operating as an effective multi-agency partnership, in line with nationally recognised standards. | Agreed with Director Access and Reablement. | |



Wiltshire Council Proposed Quarter 1 Internal Audit Plan 2021/22

| Link to Corporate Priorities/ Corporate Risk Register | Areas of Coverage | Brief Description | Requested/Agreed by or Rationale for audit |
|---|---------------------------------|--|---|
| Strong Communities | Supporting Families – Quarter 2 | MHCLG requirement for audit of claims | Agreed with Director Families and Children. |
| | | submitted reviewed a representative sample of | |
| CRR.01 | | families and achievement of outcomes. | |
| CRR.07 | | | |
| | | Place and Environment | |
| Strong Communities | Waste Collection Service | This is a review of the collection service and | Agreed with Director Waste and Environment. |
| CDD 07 | | new ways of working to ensure it is running | |
| CRR.07 | | efficiently following the changes implemented in March 2020. | |
| Growing the Economy | Climate Change Strategy | This audit will review the Council's Climate | Agreed with Corporate Director Place. |
| Growing the Economy | Chinate Change Strategy | Change plans including strategy and processes | Agreed with corporate Director Flace. |
| CRR.03 | | in place to achieve carbon neutral status by | |
| CRR.07 | | 2030. | |
| | Peer Networks Certification | Grant certification for the 2020/21 financial | Requested by the Corporate Director Resources |
| | | year. | |
| | F | ollow Up Work and Support Activities | |
| Follow Up Work | Follow Up Contingency | Follow up of audits awarded Partial or No | Inclusion of audit follow up work incorporating |
| | | Assurance opinions. The work will assess | any prior year weaknesses identified. |
| | | responses to previous audit coverage and any | |
| | | changes to the control environment. | |
| Counter Fraud and | Proactive Fraud Work | Linked to risks in Protecting the Public Purse. | |
| Corruption | Reactive Fraud Work | To undertake ad-hoc unplanned investigations | |
| | | as agreed. | |
| | National Fraud Initiative | To assist the Council in monitoring and | |
| | | investigation of matches. | |
| Support Activities | Corporate Advice | Includes meetings and direct liaison with the | |
| | | Director Finance and Procurement, ongoing | |
| | | support relating to delivery of the Internal Audit | |
| | | plan to ensure satisfactory progress and | |



Wiltshire Council Proposed Quarter 1 Internal Audit Plan 2021/22

| | compliance with the Public Sector Internal Audit Standards. | |
|----------------|---|--|
| External Audit | Ongoing liaison with External Audit. | |



INTERNAL AUDIT CHARTER

Purpose

The purpose of this Charter is to set out the nature, role, responsibility, status and authority of internal auditing within Wiltshire Council, and to outline the scope of internal audit work.

Approval

This Charter was approved by the Audit and Governance Committee on 29th April 2020 and is reviewed each year to confirm it remains accurate and up to date. It is presented to the Audit and Governance Committee today 28th July 2021 to ensure it remains accurate and up to date.

Provision of Internal Audit Services

The internal audit service is provided by SWAP Internal Audit Services (SWAP). *This charter should be read in conjunction with the Service Agreement, which forms part of the legal agreement between the SWAP partners* and other key documents including the Data Sharing Protocol.

The budget for the provision of the internal audit service is determined by Wiltshire Council, in conjunction with the Members Meeting. The general financial provisions are laid down in the legal agreement, including the level of financial contribution by the organisation, and may only be amended by unanimous agreement of the Members Meeting. The budget is based on an audit needs assessment which is reviewed each year by the S151 Officer in consultation with the Chief Executive of SWAP.

Role of Internal Audit

The Accounts and Audit (England) Regulations, state that: "A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account the public sector internal auditing standards or guidance."

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

Responsibilities of Management, INSERT COMMITTEE NAME and Internal Audit

Management¹

Management is responsible for ensuring SWAP has:

- The support of management and the organisation;
- Direct access and freedom to report to senior management, including the Chief Executive and the Audit and Governance Committee; and
- Notification of suspected or detected fraud, corruption or impropriety.

Management is responsible for establishing (including the tracking and implementation of Internal Audit recommendations) and maintaining internal controls, including proper accounting records and other management information and is also responsible for the appropriate and effective management of risk.

¹ In this instance Management refers to the Senior Management Team and Statutory Officers.

Audit and Governance Committee²

The Audit and Governance Committee is responsible for approving the scope of internal audit work, receiving communications from the SWAP Assistant Director (as Head of Internal Audit³) on the progress of work undertaken, reviewing the independence, objectivity, performance, professionalism and effectiveness of the Internal Audit function, and obtaining reassurance from the SWAP Assistant Director as to whether there are any limitations on scope or resources.

Internal Audit

The SWAP Assistant Director is responsible for determining the scope, except where specified by statute, of internal audit work and for recommending the action to be taken on the outcome of, or findings from, their work designed to provide assurance and add value.

Internal audit is responsible for operating under the policies established by management in line with good practice. A range of SWAP policies exist to underpin staff and service development, including to seek out and implement new innovative audit techniques and increase technological solutions to ensure provision of an efficient and effective service and consolidate the role of Trusted Advisor.

Internal audit is responsible for conducting its work in accordance with the mandatory elements of the Code of Ethics and Standards for the Professional Practice of Internal Auditing as set by the Institute of Internal Auditors and further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note. SWAP has been independently assessed and found to conform with the Standards.

Internal audit is not responsible for any of the activities which it audits. SWAP staff will not assume responsibility for the design, installation, operation or control of any procedures. SWAP staff who have previously worked for the organisation will not be asked to review any aspects of their previous department's work until a minimum of one year has elapsed.

Relationship with the External Auditors/Other Regulatory Bodies

Internal Audit will co-ordinate its work with others wherever this is beneficial to the organisation.

Status of Internal Audit in the Organisation

*The Chief Executive of SWAP is responsible to the SWAP Board of Directors and the Members Meeting. Appointment or removal of the Chief Executive of SWAP is the sole responsibility of the Members Meeting.

The Chief Executive for SWAP and Assistant Director also report to the Section 151 Officer, and report to the Audit Committee as set out below.

The Assistant Director will be the first and primary point of contact for the organisation for all matters relating to the Audit and Governance Committee, including the provision of periodic reports, as per company policy. The Assistant Director is also responsible for the design, development and delivery of audit plans, subject to the agreement of Wiltshire Council.

² In this instance the Audit and Governance Committee relates to "The Board" referred to in the PSIAS.

³ PSIAS refers to the 'chief audit executive'.

Scope and Authority of Internal Audit work

There are no restrictions placed upon the scope of internal audit's work. SWAP staff engaged on internal audit work are entitled to receive and have access to whatever information or explanations they consider necessary to fulfil their responsibilities to senior management. In this regard, internal audit may have access to any records, personnel or physical property of the organisation.

Internal audit work will normally include, but is not restricted to:

- Reviewing the reliability and integrity of financial and operating information used for operational and strategic decision making, and the means used to identify, measure, classify and report such information;
- Evaluating and appraising the risks associated with areas under review and make proposals for improving the management and communication of risks;
- Appraise the effectiveness and reliability of the enterprise risk management framework and recommend improvements where necessary;
- Assist management and Members to identify risks and controls with regard to the objectives of the organisation and its services;
- Reviewing the systems established by management to ensure compliance with those policies, plans, procedures, laws and regulations which could have a significant impact on operations and reports, and determining whether the organisation is in compliance;
- Reviewing the means of safeguarding assets and, as appropriate, verifying the existence of assets;
- Appraising the economy, efficiency and effectiveness with which resources are employed;
- Reviewing operations or programmes to ascertain whether results are consistent with established objectives and goals and whether the operations or programmes are being carried out as planned, with performance and accountabilities established.
- Reviewing the operations of the organisation in support of their anti-fraud and corruption policy, ethical expectations and corporate values (and investigating where necessary) ethical expectations and corporate, social and environmental values and responsibilities; and.
- At the specific request of management, internal audit may provide consultancy services (including e.g. data analytics, benchmarking, strategic/project reviews/investigations etc) provided:
 - the internal auditor's independence is not compromised;
 - the internal audit service has the necessary skills to conduct the assignment, or can obtain such skills without undue cost or delay;
 - the scope of the consultancy assignment is clearly defined and management can resource the work; and
 - management understand that the work being undertaken is not internal audit work although the outcomes may contribute to the annual opinion.



Planning and Reporting

SWAP will submit an internal audit plan to Management and the Audit Committee for approval, setting out the recommended scope of work and which will be developed with reference to current and emerging risks. The plan will be reviewed on a quarterly basis to ensure it remains relevant and adequately resourced.

SWAP will carry out the work as agreed, report the outcomes and findings both during and on completion of reviews, and make recommendations on action to be taken to the appropriate officers and copied to the S151 Officer. SWAP will present a regular summary of their work to Management and the Audit Committee, including assessing the organisation's implementation of previous recommendations along with any significant, persistent and outstanding issues.

Internal audit reporting will normally comprise a brief presentation to relevant officers and accompanied by an appropriately detailed written report, with the format tailored as necessary to the nature of the work. The detailed report will also be copied to the Section 151 Officer and to other relevant line management.

The Assistant Director will submit an annual report to the Audit and Governance Committee providing an overall opinion of the status of risk and internal control within Wiltshire Council, based upon, and limited to, internal audit activity conducted during the previous year.

In addition to the reporting lines outlined above, the Chief Executive of SWAP and SWAP Directors and Assistant Directors have the unreserved right to report directly to the Leader of the Council, the Chairman of the Audit Committee, the organisation's Chief Executive Officer or the External Audit Manager.

Revised May 2021

