

Questions to consider		Evidence / comments
<b>1 Mission of Internal Audit</b>		
Based on your review of conformance with other requirements of the Public Sector Internal Audit Standards (PSIAS) and Local Government Application Note (LGAN), does the internal audit activity aspire to accomplish the Mission of Internal Audit as set out in the PSIAS?		The mission of Internal Audit is clearly documented in the Audit Charter. This is reviewed annually by the Audit Committee, last reviewed March 2022.
<i>To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.</i>		
CONFORMS ✓	PARTIAL	

Questions to consider			Evidence / comments
<b>2 Definition of Internal Auditing</b>			
Based on your review of conformance with other requirements of the PSIAS and LGAN, is the internal audit activity independent and objective?			<p>An Audit Charter is in place that sets out Internal Audit's independence. This is also documented in the Head of Governance and Business Support, the Audit and Risk Manager (CAE) and the Audit, Risk and Performance Lead's job descriptions.</p> <p>Following a restructure in June 2021 the role of the CAE moved away from the Head of Governance and Business Support, therefore removing the need to rely on independent auditors to review functions under her responsibility (business continuity, democratic services, elections and insurance arrangements). Arrangements will be made to ensure that the council's Risk Management arrangements are independently reviewed in 2022/23 given that both the Audit and Risk Manager and the Audit, Risk and Performance Lead have been heavily involved in introducing the new arrangements and rolling out the system.</p> <p>Internal Audit are required from time to time to get involved / give advice on new systems / new controls etc. Owing to the size of the team, it may be that the same auditor will then have to perform the audit. The auditor is, however mindful of their independence and has the option to use independent auditors if necessary.</p> <p>It is a requirement of both IIA and CIPFA for its members to be both independent and objective. Objectivity is one of the four fundamental principles listed in the Internal Audit Charter / Code of Ethics.</p> <p>All the Audit, Risk and Performance Lead's reports are reviewed by the Audit and Risk Manager (CAE) and all the Audit and Risk Manager's reports are reviewed by the Head of Governance and Business Support prior to issue to ensure that the auditor has remained objective and that an overall balanced view is given.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<p>Based on your review of conformance with other requirements of the PSIAS and LGAN, does the internal audit activity use a systematic and disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes within the organisation?</p>			<p>There is a standard methodology in place for determining the ranking of assurance opinions and rankings of findings / recommendations in audit reports.</p>
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>	<p>RISK / Control matrices, risk registers and assurance mapping declarations are used to identify key areas prior to the start of each audit.</p> <p>Key financial systems control matrices have been introduced for 2022/23 to assist with the identification of areas requiring improved control / processes.</p> <p>The council has a risk management policy which is reviewed annually. The council has a risk management system (GRACE) which is in the process of being rolled out corporately (see 1100 Independence and Objectivity for action).</p> <p>The internal audit team use standardised working papers and audit report templates to maintain consistency.</p>

Questions to consider	Evidence / comments
<b>3 Core Principles</b>	
<p>The Core Principles, taken as a whole, articulate internal audit effectiveness, and provide a basis for considering whether the review of conformance with the attribute standards and performance standards reflects full conformance, partial conformance or non-conformance with the PSIAS and the Local Government Application Note. In making this assessment, the assessor should have regard to positive evidence of conformance or non-conformance and the lack of evidence of non-conformance where positive evidence is difficult to obtain.</p>	
<p>Where there are instances of partial conformance or non-conformance in particular areas, you may need to make a judgment having regard to materiality and other factors in order to form a view on whether the internal audit activity conforms with a particular Core Principle. Any such judgments should be highlighted and explained.</p>	
<p><b>Demonstrates integrity.</b></p>	<p>Auditors are bound by their professional and ethical standards and the Code of Ethics within the Internal Audit Charter / Code of Ethics and with their own professional bodies, i.e. CIPFA / IIA.</p>
<p>Having regard to your review of conformance with the Code of Ethics (Integrity, Seven Principles of Public Life), do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating integrity?</p>	<p>Elements such as these are a requirement of the role and, as such, are referred to in job descriptions and are reviewed quarterly via the council's performance appraisal process.</p>
<p>CONFORMS ✓</p>	<p>PARTIAL</p>
<p>NOT CONFORMING</p>	<p>Auditors are required to complete an annual declaration of interests.</p> <p>In addition to being bound by professional and ethical standards and the Code of Ethics within the Internal Audit Charter, internal audit also complies with the Council's Employee Code of Conduct Policy.</p>

Questions to consider			Evidence / comments
<b>Demonstrates competence and due professional care.</b>			<p>Elements such as these are a requirement of the role and are reviewed regularly via the council's performance appraisal process.</p> <p>Auditors complete and regularly update their Continual Professional Development (CPD) records.</p> <p>The Quality Assurance and Improvement Programme; internal assessments ensure auditors can demonstrate competence.</p>
Having regard to your review of conformance with the Code of Ethics (Competence, Confidentiality, Seven Principles of Public Life) and any other evidence from the review of conformance with Standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating competence and due professional care?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Is objective and free from undue influence (independent).</b>			<p>Elements such as these are a requirement of the role and, as such, are referred to in job descriptions and are reviewed regularly via the council's performance appraisal process.</p> <p>Auditors are required to complete an annual declaration of interests.</p> <p>Staff are aware of the requirement to declare any gifts and hospitality. A reminder is issued annually in the weeks prior to Christmas. The last reminder was issued on the 25/11/21. A register of gifts and hospitality is maintained on SharePoint.</p>
Having regard to your review of conformance with the Code of Ethics (Objectivity, Seven Principles of Public Life) and any other evidence from the review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being objective and free from undue influence (independent)?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Aligns with the strategies, objectives, and risks of the organisation.</b>			<p>Following the approval of the Council's Business Plan; Strategic and Operational risk workshops are carried out to ensure that the key risks of the organisation are identified and addressed through the annual audit plan, which if delivered, will assist the council in delivering its Business Plan.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being aligned with the strategies, objectives, and risks of the organisation?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Is appropriately positioned and adequately resourced.</b>			<p>The Audit, Risk and Performance Lead reports to the Audit and Risk Manager (CAE) who reports directly to the Corporate Director Resources (Section 151 Officer) who sits on the Corporate Management Team.</p> <p>Whilst the Internal Audit team is very small; assurance mapping, sound risk management and a fully risk based audit plan means that the team is adequately resourced to deliver the audit plan and deliver an annual audit opinion. A restructure which took place in June 2021 strengthened the skills in the team further and this increased resource negates the need for routine use of external support.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being appropriately positioned and adequately resourced?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<b>Demonstrates quality and continuous improvement.</b>			<p>The annual self-assessment is carried out by the Audit and Risk Manager (CAE), scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to the Audit Committee. Wyre's first external assessment was in March 2018. The External Auditor at the time (KPMG) received the self-assessment and the peer review report as part of the Audit Committee agenda and therefore had the opportunity to challenge the content.</p> <p>The Audit Committee agree that an external self-assessment will be carried out by the Audit and Risk Manager (CAE), scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to the Audit Committee and that every 5 years the review will be independently validated by a peer review. Wyre's next peer review is scheduled for February 2023.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by demonstrating quality and continuous improvement?			
CONFORMS	PARTIAL ✓	NOT CONFORMING	
<b>Communicates effectively.</b>			<p>The Internal Audit Charter sets out how Internal Audit communicates its activity.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by communicating effectively?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Questions to consider</b>			<b>Evidence / comments</b>
<b>Provides risk-based assurance.</b>			<p>The Internal Audit Plan is formulated following a risk-based assessment of the audit universe.</p> <p>At the start of each audit assignment, a full risk assessment is completed by the auditor which identifies and documents the audit areas, key risks and expected controls.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by providing risk-based assurance, based on adequate risk assessment?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<b>Is insightful, proactive, and future-focused.</b>			<p>The Internal Audit Team liaises with all Corporate Directors, Heads of Service and External Audit prior to pulling together the annual audit plan.</p> <p>A number of 'horizon scanning' documents are used to ensure that full coverage is obtained.</p> <p>Strategic and Operational risk workshops and assurance mapping declarations assist the team in ensuring the audit environment is covered. Going forward a set of key financial systems control matrices will also be completed. These documents aim to identify whether there are any significant changes to systems, procedures, staffing/structures, segregation of duties, reconciliations, statutory requirements etc. this information then being used to inform whether a more in depth audit is needed, focusing resources to provide assurances where they are actually needed.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by being insightful, proactive, and future-focused?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Promotes organisational improvement.</b>			<p>All internal audit reports are published on SharePoint.</p> <p>Six monthly progress reports are issued to the Audit Committee. In addition, the Internal Audit Annual Report documents the work and achievements of the team during the year.</p>
Based on your review of conformance with standards, do you consider that the internal audit activity fully conforms with the PSIAS and LGAN by promoting organisational improvement?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<b>4 Code of Ethics</b>			
<b>Integrity</b>			
<p>Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display integrity by:</p> <ul style="list-style-type: none"> <li>■ Performing their work with honesty, diligence and responsibility?</li> <li>■ Observing the law and making disclosures expected by the law and the profession?</li> <li>■ Not knowingly partaking in any illegal activity nor engaging in acts that are discreditable to the profession of internal auditing or to the organisation?</li> <li>■ Respecting and contributing to the legitimate and ethical objectives of the organisation?</li> </ul>			<p>Auditors are bound by their ethical standards both in the internal audit Charter / Code of Ethics and with their own professional bodies, i.e. CIPFA / IIA.</p> <p>Elements such as these are a requirement of the role and, as such, are referred to in job descriptions and are reviewed quarterly via the council's performance appraisal process.</p> <p>Auditors are required to complete an annual declaration of interests.</p> <p>Auditors are bound by their professional and ethical standards and the Code of Ethics within the Internal Audit Charter.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	In addition to being bound by professional and ethical standards and the Code of Ethics within the Internal Audit Charter, internal audit also complies with the Council's Employee Code of Conduct Policy.
<b>Objectivity</b>			
<p>Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display objectivity by:</p> <ul style="list-style-type: none"> <li>■ Not taking part in any activity or relationship that may impair or be presumed to impair their unbiased assessment?</li> <li>■ Not accepting anything that may impair or be presumed to impair their professional judgement?</li> <li>■ Disclosing all material facts known to them that, if not disclosed, may distort the reporting of activities under review?</li> </ul>			<p>Compliance with Audit Charter / Code of Ethics.</p> <p>Completion of annual declarations of interests.</p> <p>Auditors are required from time to time to get involved / give advice on new systems / new controls etc. Owing to the size of the team, the same auditor may also have to perform the audit. The auditor is, however mindful of their independence and has the option to call in independent auditors if necessary. Following a restructure in 2021 a new post (Audit, Risk and Performance Lead) was created and filled, this additional resource within the Audit and Risk Management Team has helped to ensure auditors are able to remain independent and objective.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	



Questions to consider			Evidence / comments
<b>Confidentiality</b>			<p>Compliance with Audit Charter / Code of Conduct and Public Sector Internal Audit Standards.</p> <p>The Audit review process undertaken by the Audit and Risk Manager (CAE) includes a review of the information used for testing and how it was processed.</p> <p>Compliance with audit information asset registers.</p> <p>Understanding of the Data Protection Act 2018 and the enshrined GDPR.</p> <p>Compliance to the Audit Charter / Code of Ethics and the auditor's own professional standards.</p>
<p>Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display due respect and care by:</p> <ul style="list-style-type: none"> <li>■ Acting prudently when using information acquired in the course of their duties and protecting that information?</li> <li>■ Not using information for any personal gain or in any manner that would be contrary to the law or detrimental to the legitimate and ethical objectives of the organisation?</li> </ul>			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

## Competency

Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors display competence by:

- Only carrying out services for which they have the necessary knowledge, skills and experience?
- Performing services in accordance with the PSIAS?
- Continually improving their proficiency and effectiveness and quality of their services, for example through CPD schemes?

CONFORMS

PARTIAL ✓

NOT CONFORMING

From 1 June 2021 the Chief Internal Auditor role was allocated to the Audit and Risk Manager. However whilst the post holder has significant audit experience and has already obtained Certified auditor status, she currently does not hold 'Chartered' status as required by the Public Sector Internal Audit Standards. Succession plans are in place within the Internal Audit Team and given the current Chief Internal Auditor has indicated she may wish to retire in 2023/24, a decision has been made to allow the Audit, Risk and Performance Lead to undertake the relevant 'Chartered' qualifications. Whilst the Audit, Risk and Performance Lead obtains the necessary 'Chartered' status, the Head of Governance and Business Support (who holds the relevant qualifications) will countersign the Internal Audit Effectiveness review and also the Annual Opinion.

The Audit, Risk and Performance Lead has extensive Local Authority Internal Audit Experience and has achieved the IIA Certificate in Audit and Business Risk. It is hoped that she will be able to undertake the 'Chartered by Experience' qualification.

The Audit and Risk Manager and the Audit, Risk and Performance Lead have both been supplied with a copy of Audit Charter / Code of Ethics and the PSIAS and performance is regularly assessed. Work related objectives are agreed in advance as part of the council's performance appraisal scheme.

Staff are encouraged to maintain records of continuing professional development to satisfy their professional membership requirements.

Regular attendance at the CIPFA audit weekend school.

### Action

**Whilst the Audit, Risk and Performance Lead is obtaining the necessary 'Chartered' status, the Head of Governance and Business Support will countersign the Internal Audit Effectiveness review and also the Annual Opinion until they are qualified.**

**The QAIP needs to be updated to reflect this arrangement and the requirement for the Audit, Risk and Performance Lead to undertake the necessary 'Chartered' status.**

<b>Seven Principles of Public Life</b>			A copy of the Internal Audit Charter and the Code of Ethics which refers to the Seven Principles of Public Life, has been provided to all Audit and Risk Management staff. Both documents are also published on the SharePoint system.
Based on your review of conformance with other requirements of the PSIAS and LGAN, do you consider that internal auditors, whether consciously or through conformance with organisational procedures and norms, have due regard to the Committee on Standards of Public Life's <i>Seven Principles of Public Life</i> ?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Questions to consider</b>			<b>Evidence / comments</b>
<b>Standards</b>			
<b>5 Attribute Standards</b>			
<b>5.1 1000 Purpose, Authority and Responsibility</b>			
The questions in this section seek to confirm that the purpose, authority and responsibility of the internal audit activity have been properly defined consistent with the PSIAS, formally approved in an internal audit charter and periodically reviewed.			
Does the internal audit charter conform with the PSIAS by including a formal definition of: <ul style="list-style-type: none"> <li>■ the purpose</li> <li>■ the authority, and</li> <li>■ the responsibility</li> </ul> of the internal audit activity consistent with the Public Sector Internal Audit Standards (PSIAS)?			The Audit Charter includes a definition in accordance with the PSIAS.
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<p>Does the internal audit charter conform with the PSIAS by clearly and appropriately defining the terms 'board' and 'senior management' for the purposes of the internal audit activity?</p> <p>Note that it is expected that the audit committee will fulfil the role of the board in the majority of instances.</p>			<p>The Audit Charter defines the 'board' as the Audit Committee and 'Senior Management' as the Corporate Director Resources (Section 151 Officer).</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Does the internal audit charter also:</p> <ul style="list-style-type: none"> <li>■ Set out the internal audit activity's position within the organisation?</li> <li>■ Establish the chief audit executive's (CAE) functional reporting relationship with the board?</li> <li>■ Establish the accountability, reporting line and relationship between the CAE and those to whom the CAE may report administratively? Where applicable, this will need to encompass shared service or external providers of internal audit, and the role of the contract manager.</li> <li>■ Establish the responsibility of the board and also the role of the statutory officers (such as the CFO, the monitoring officer and the head of paid service) with regards to internal audit?</li> <li>■ Establish internal audit's right of access to all records, assets, personnel and premises and its authority to obtain such information and explanations as it considers necessary to fulfil its responsibilities?</li> <li>■ Define the scope of internal audit activities?</li> <li>■ Recognise that internal audit's remit extends to the entire control environment of the organisation?</li> <li>■ Establish the organisational independence of internal audit?</li> <li>■ Cover the arrangements for appropriate resourcing?</li> <li>■ Define the role of internal audit in any fraud-related work?</li> </ul>			<p>See Audit Charter.</p>

- Set out the existing arrangements within the organisation's anti- fraud and anti-corruption policies, requiring the CAE to be notified of all suspected or detected fraud, corruption or impropriety?
- Include arrangements for avoiding conflicts of interest if internal audit or the CAE undertakes non-audit activities?
- Define the nature of assurance services provided to the organisation, as well as assurances provided to parties external to the organisation?
- Define the nature of consulting services?
- Recognise the mandatory nature of the PSIAS?

CONFORMS ✓

PARTIAL

NOT CONFORMING

Questions to consider			Evidence / comments
Does the CAE periodically review the internal audit charter and present it to senior management and the board for approval?			An annual review of the Audit Charter is undertaken and approved by Audit Committee, last reviewed March 2022.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>5.2 1100 Independence and Objectivity</b>			
The questions in this section seek to confirm that the internal audit activity is independent and internal auditors are objective in performing their work.			
Does the CAE have direct and unrestricted access to senior management and the board?			The Audit and Risk Manager (CAE) reports directly to the Head of Governance and Business Support and attends all but one of the Audit Committee meetings to present reports (they don't routinely attend the closure of accounts meeting). There is also an annual opportunity for the CAE to have a periodic private discussion with the Audit Committee.  Access rights and reporting lines are documented in the Audit Charter. The Chairman of the Audit Committee attends regular pre-meeting briefings in person or via telephone.
Does the CAE have free and unfettered access to, as well as communicate effectively with, the chief executive or equivalent and the chair of the audit committee?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
Does the CAE attend audit committee meetings?			The CAE attends audit committee meetings and contributes to the agendas. See minutes of Audit Committee indicating attendees and contribution.
Does the CAE contribute to audit committee agendas?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<p>Are threats to objectivity identified and managed at the following levels:</p> <ul style="list-style-type: none"> <li>■ Individual auditor?</li> <li>■ Engagement?</li> <li>■ Functional?</li> <li>■ Organisation?</li> </ul>			<p>Audit staff complete a declaration of interests annually.</p> <p>The Audit and Risk Manager (CAE) will consider any threats to objectivity at the start of each audit.</p> <p>Following a restructure in June 2021 the role of the CAE moved away from the Head of Governance and Business Support, therefore removing the need to rely on independent auditors to review functions under her responsibility (business continuity, democratic services, elections and insurance arrangements). Preparations will be made to ensure that the council's Risk Management arrangements are independently reviewed in 2022/23 given that both the Audit and Risk Manager and the Audit, Risk and Performance Lead have been heavily involved in introducing the new arrangements and rolling out the system.</p> <p><b>Action</b>  <b>Arrangements need to be explored with another District Council to carry out a 'peer review' of the council's risk management processes.</b></p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p><b>1110 Organisational Independence</b></p>			
<p>This subsection seeks to confirm that reporting and management arrangements been put in place that preserve the CAE's independence and objectivity.</p> <p>This is of particular importance when the CAE is line-managed by another officer of the authority.</p>			
<p>Does the CAE report to an organisational level equal or higher to the corporate management team?</p>			
<p>Does the CAE report to a level within the organisation that allows the internal audit activity to fulfil its responsibilities?</p>			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<p>Does the CAE's position in the management structure:</p> <ul style="list-style-type: none"> <li>■ Provide the CAE with sufficient status to ensure that audit plans, reports and action plans are discussed effectively with the board?</li> <li>■ Ensure that he or she is sufficiently senior and independent to be able to provide credibly constructive challenge to senior management?</li> </ul>			<p>The audit work programme includes an opportunity for the CAE to meet with the Audit Committee in private.</p> <p>The CAE reports directly to the Corporate Director Resources (Section 151 Officer) who sits on Corporate Management Team.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Does the CAE confirm to the board, at least annually, that the internal audit activity is organisationally independent?</p>			<p>Documented in the Audit Charter which is presented to the Audit Committee annually (March 22).</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	



<p>Is the organisational independence of internal audit realised by functional reporting by the CAE to the board?</p>	<p>The Audit Committee annually approves the Internal Audit Charter, the risk based plan and any adjustments to the plan.</p>	
<p>The 'Interpretation' to PSIAS 1110 provides examples of factors which may indicate that the CAE reports functionally to the Board, which include where the board:</p> <ul style="list-style-type: none"> <li>■ approves the internal audit charter</li> <li>■ approves the risk-based audit plan</li> <li>■ approves the internal audit budget and resource plan</li> <li>■ receives communications from the CAE on the activity's performance (in relation to the plan, for example)</li> <li>■ approves decisions relating to the appointment and removal of the CAE</li> <li>■ approves the remuneration of the CAE</li> <li>■ seeks reassurance from management and the CAE as to whether there are any inappropriate scope or resource limitations.</li> </ul>	<p>The Audit Committee receives six monthly updates on risk management, counter fraud, progress on completion of the audit plan and information governance.</p> <p>The appointment / dismissal of the CAE is not reflected in the Council's Constitution as an elected member responsibility and it falls to the Corporate Director Resources (Section 151 Officer) who is responsible for maintaining an adequate internal audit function. Any decision, however, would be presented to the Audit Committee for noting.</p> <p>The Audit Committee work programme allows an opportunity for a private discussion with the External Auditor which would allow them to comment on the performance of the CAE, if appropriate.</p> <p>The remuneration of the CAE is in accordance with the Council's Pay and Grading Policy.</p>	
<p>The Public Sector Interpretation to PSIAS 1110 notes that board approval of CAE remuneration does not generally happen in the UK public sector, and that the underlying principle is therefore that the independence of the CAE must be safeguarded by ensuring that their remuneration or performance assessment is not inappropriately influenced by those subject to audit.</p> <p>EQA assessors should therefore consider whether adequate steps are taken to safeguard the independence of the CAE by ensuring that remuneration or performance assessment is not inappropriately influenced by those subject to audit. This might for example reflect some involvement of the chief executive in the performance assessment process or feedback from the audit committee chair.</p>	<p>The Audit Committee have the opportunity to question the Audit and Risk Manager (CAE) and the Corporate Director Resources (Section 151 Officer) at the meeting when the audit plan is presented and progress reports are provided.</p> <p>The Head of Governance and Business Support, who sits on the Corporate Management Team has regular 1-2-1's with the Audit and Risk Manager (CAE) and also completes her performance appraisal. Once a year, the Audit Committee will have the opportunity to attend two scheduled private discussions, one with the council's External Auditors and the other with the Audit and Risk Manager (CAE). Following on from these discussions, feedback on the Audit and Risk Manager's performance is provided by the Chairman of the Audit Committee to the Head of Governance and Business Support prior to the Audit and Risk Manager's annual performance appraisal taking place. They would then notify the Corporate Director Resources of any issues should they arise.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p> <p>Feedback on the Audit and Risk Manager's (CAE) performance is provided by the Chairman of the Audit Committee following the March meeting and prior to the annual performance appraisal taking place.</p>

<b>1111 Direct Interaction with the Board</b>			
Does the CAE communicate and interact directly with the board?			The Audit and Risk Manager (CAE) attends a pre-audit meeting with the Chairman of the Audit Committee and also attends all Audit Committee Meetings (apart from closure of accounts).
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Questions to consider</b>			<b>Evidence / comments</b>
<b>1112 Chief Audit Executive Roles Beyond Internal Auditing</b>			
Where the CAE has roles or responsibilities that fall outside of internal auditing, are adequate safeguards in place to limit impairments to independence or objectivity?			There has been no impairment of independence or objectivity.  Following a restructure in June 2021 the role of the CAE moved away from the Head of Governance and Business Support, therefore removing the need to rely on independent auditors to review functions under her responsibility (business continuity, democratic services, elections and insurance arrangements). Preparations will be made to ensure that the council's Risk Management arrangements are independently reviewed in 2022/23 given that both the Audit and Risk Manager and the Audit, Risk and Performance Lead have been heavily involved in introducing the new arrangements and rolling out the system (see 1100 Independence and Objectivity for action).
Does the board periodically review these safeguards?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>1120 Individual Objectivity</b>			
Do internal auditors have an impartial, unbiased attitude?			The Internal Audit Charter / Code of Ethics sets out the expected behaviours of the team including acting impartially in an unbiased way.  Feedback on internal audit reviews have not been completed during 2021/22. The software (Limehouse) used to facilitate the feedback process is no longer in use. A new process has now been agreed for the audit year 2022/23.
CONFORMS	PARTIAL ✓	NOT CONFORMING	
Do internal auditors avoid any conflict of interest, whether apparent or actual?			Auditors will complete an annual declaration of interests.
CONFORMS ✓	PARTIAL	NOT CONFORMING	Compliance with the Internal Audit Charter / Code of Ethics.  Audit Staff are aware that they need to report any potential conflicts of interest if they arise during an audit review. There have been no conflicts of interest recorded to date.

<b>1130 Impairment to Independence or Objectivity</b>			
If there has been any real or apparent impairment of independence or objectivity, has this been disclosed to appropriate parties (depending on the nature of the impairment and the relationship between the CAE and senior management/the board as set out in the internal audit charter)?			There has been no impairment of independence or objectivity.  Following a restructure in June 2021 the role of the CAE moved away from the Head of Governance and Business Support, therefore removing the need to rely on independent auditors to review functions under her responsibility (business continuity, democratic services, elections and insurance arrangements). Preparations will be made to ensure that the council's Risk Management arrangements are independently reviewed in 2022/23 given that both the Audit and Risk Manager and the Audit, Risk and Performance Lead have been heavily involved in introducing the new arrangements and rolling out the system (see 1100 Independence and Objectivity for action).
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
Does review indicate that work allocations have operated so that internal auditors have not assessed specific operations for which they have been responsible within the previous year?			N/A
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
If there have been any assurance engagements in areas over which the CAE also has operational responsibility, have these engagements been overseen by someone outside of the internal audit activity?			Following a restructure in June 2021 the role of the CAE moved away from the Head of Governance and Business Support, therefore removing the need to rely on independent auditors to review functions under her responsibility (business continuity, democratic services, elections and insurance arrangements). Preparations will be made to ensure that the council's Risk Management arrangements are independently reviewed in 2022/23 given that both the Audit and Risk Manager and the Audit, Risk and Performance Lead have been heavily involved in introducing the new arrangements and rolling out the system (see 1100 Independence and Objectivity for action).
CONFORMS ✓	PARTIAL	NOT CONFORMING	
Is the risk of over-familiarity or complacency managed effectively: for example by rotating assignments for ongoing assurance engagements and other audit responsibilities periodically within the internal audit team?			Owing to the size of the audit team this is not always achievable. However, following a restructure in June 2021 which resulted in the appointment of a new Audit, Risk and Performance Lead, this addition to the Audit and Risk Management Team has helped to ensure audit assignments can be rotated periodically.
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Have internal auditors declared interests in accordance with organisational requirements?			The Audit and Risk Management Section all complete an annual declaration of interests.
CONFORMS ✓	PARTIAL	NOT CONFORMING	Staff are provided with the Internal Audit Charter / Code of Ethics. Both documents are also on the intranet.
Where any internal auditor has accepted any gifts, hospitality, inducements or other benefits from employees, clients, suppliers or other third parties (other than as may be allowed by the organisation's own policies), has this been declared and investigated fully?			There have been no declarations of gifts and hospitality received in 2021/22 by internal audit.
CONFORMS ✓	PARTIAL	NOT CONFORMING	Audit staff are reminded annually of the council's procedures in respect of receiving gifts and hospitality. Last reminder 25/11/21.

Questions to consider			Evidence / comments
Does review indicate that no instances have been identified where an internal auditor has used information obtained during the course of duties for personal gain?			There have been no instances where an auditor has used information obtained during the course of duties for personal gain.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
Have internal auditors disclosed all material facts known to them which, if not disclosed, could distort their reports or conceal unlawful practice, subject to any confidentiality agreements?			See declaration of interest.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
If there has been any real or apparent impairment of independence or objectivity relating to a proposed consulting services engagement, was this disclosed to the engagement client before the engagement was accepted?			The council's Internal Audit Team do not undertake any consultancy work.
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
Where there have been significant additional consulting services agreed during the year that were not already included in the audit plan, was approval sought from the board before the engagement was accepted?			The council's Internal Audit Team does not undertake any consultancy work.
CONFORMS N/A	PARTIA N/A	NOT CONFORMING N/A	

5.3 1200 Proficiency and Due Professional Care			
<p>This section seeks to confirm that engagements are performed with proficiency and due professional care, having regard to the skills and qualifications of the CAE and their staff, and how they exercise their capability in practice.</p>			
<b>1210 Proficiency</b>			
<p>Does the CAE hold a professional qualification, such as CMIIA/CCAB or equivalent?</p> <p>Is the CAE suitably experienced?</p>			<p>The newly appointed Audit and Risk Manager (CAE) is not fully qualified to CMIIA level (chartered) however she is professionally qualified to PIIA standard and has 14 years' local government internal audit experience. Consideration is being given to whether the CAE will complete the IIA's Chartered by Experience qualification due to her possible retirement in 2023/24. Succession planning is in place and it is hoped that the Audit, Risk and Performance Lead will take on the role of CIA and undertake the appropriate qualifications.</p> <p>The Head of Governance and Business Support is a fully Certified Chartered Auditor (CIA / CMIIA) and holds a Qualification in Internal Audit Leadership (QIAL). The Head of Governance has 20 years' experience in internal audit including County Council, 2 District Councils, experience in auditing the Police and Fire Authority, schools and residential establishments.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Is the CAE responsible for recruiting appropriate internal audit staff, in accordance with the organisation's human resources processes?</p> <p>Does the CAE ensure that up-to-date job descriptions exist that reflect roles and responsibilities and that person specifications define the required qualifications, competencies, skills, experience and personal attributes?</p>			<p>The Audit and Risk Manager (CAE) has been fully trained on the council's recruitment and selection procedures.</p> <p>Following a restructure in June 2021, the role of the CAE moved away from the Head of Governance and Business Support and was allocated to the new Audit and Risk Manager. A job description was formulated to reflect the required skills, knowledge and qualifications of a CAE in accordance with the PSIAS. In addition, a new Audit, Risk and Performance Lead role has also been appointed.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<p>Having regard to the answers to the other questions in this section and other matters, does the internal audit activity collectively possess or obtain the skills, knowledge and other competencies required to perform its responsibilities?</p> <p>Where the internal audit activity does not possess the skills, knowledge and other competencies required to perform its responsibilities, does the CAE obtain competent advice and assistance?</p>			<p>The Audit and Risk Manager is PIIA qualified and satisfies the required competencies for the role.</p> <p>The Head of Governance and Business Support and the Audit and Risk Manager have the necessary qualifications and skill set to carry out any audit work. However if a piece of work was to be carried out that would require a specialist auditor skill set, an external audit provider would be commissioned e.g. Lancashire County Council / MIIA.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>Questions to consider</b>			<b>Evidence / comments</b>
<p>Do internal auditors have sufficient knowledge to evaluate the risk of fraud and anti-fraud arrangements in the organisation?</p>			<p>The use of TIS online and GRACE risk matrices help assist in evaluating the risk of fraud. The knowledge and expertise of the in-house Compliance Team is available if required.</p> <p>Both the Head of Governance and Business Support and the Audit and Risk Manager (CAE) have attended an external course in respect of conducting internal investigations.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Do internal auditors have sufficient knowledge of key information technology risks and controls?</p>			<p>The council would use the expertise of an external auditor provider where appropriate.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Do internal auditors have sufficient knowledge of the appropriate computer-assisted audit techniques that are available to them to perform their work, including data analysis techniques?</p>			<p>Although the Internal Audit function do not have any CAAT software, if such software was required, arrangements could be made with another Local Authority to utilise the use of this.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

**1220 Due Professional Care**

Do internal auditors exercise due professional care by considering the:

- Extent of work needed to achieve the engagement’s objectives?
- Relative complexity, materiality or significance of matters to which assurance procedures are applied?
- Adequacy and effectiveness of governance, risk management and control processes?
- Probability of significant errors, fraud, or non-compliance?
- Cost of assurance in relation to potential benefits?

In doing the above, internal auditors must also consider how technology-based audit and other data analysis techniques can provide assurance.

Both the Audit and Risk Manager (CAE) and the Audit, Risk and Performance Lead will discuss and agree the scope, objectives and risks at the start of each audit with the client and compile the Audit Brief document which forms part of the audit working papers.

The audit plan considers time, cost, complexity and the assurances it requires from each audit.

Guidance, information and advice is available to the auditor when designing tests to ensure adequacy and effectiveness of governance, risk management and control.

GRACE risk matrices and the TIS online subscription are frequently used to ensure all risk areas are considered and subsequent controls have been identified. Audit staff have access to all CIPFA publications so they can access all up-to-date publications which assist with the consideration of audit, governance and risk. Namely; CIPFA – Delivering Good Governance in Local Government; and the PSIAS – Local Government; Application Note for the UK Public Sector.

At the start of an audit, the auditor will have an initial meeting with the auditee as well as refer to the operational risks within the GRACE risk management system and assurance mapping declarations to identify / discuss potential risks. These are set out in the audit brief. If any further risks, fraud etc. are highlighted during the audit, the scope of the audit brief would be amended to include the work required. The auditor will also be alert to any non-compliance issues raised by officers.

All work is risk based. If additional work is required, the Audit, Risk and Performance Lead will agree this with the Audit and Risk Manager (CAE) subject to a cost/benefit analysis being undertaken.

Consideration will be given to what methods of data analysis / techniques should / could be used at the start of each audit to obtain the necessary assurances.

CONFORMS ✓

PARTIAL

NOT CONFORMING



<p>Do internal auditors exercise due professional care during a consulting engagement by considering the:</p> <ul style="list-style-type: none"> <li>■ Needs and expectations of clients, including the nature, timing and communication of engagement results?</li> <li>■ Relative complexity and extent of work needed to achieve the engagement's objectives?</li> <li>■ Cost of the consulting engagement in relation to potential benefits?</li> </ul>	<p>There are no such engagements undertaken presently.</p>	
<p>CONFORMS N/A</p>	<p>PARTIAL N/A</p>	<p>NOT CONFORMING N/A</p>
<p><b>1230 Continuing Professional Development</b></p>		
<p>Has the CAE defined the skills and competencies for each level of auditor?</p> <p>And</p> <p>Does the CAE periodically assess individual auditors against the predetermined skills and competencies?</p>	<p>The Audit and Risk Management Team consists of the Audit and Risk Manager (CAE), and the Audit, Risk and Performance Lead.</p> <p>Each audit report produced by the Audit, Risk and Performance Lead is reviewed by the Audit and Risk Manager (CAE) and audit reports produced by the Audit and Risk Manger (CAE) are reviewed by the Head of Governance and Business Support to ensure the audit has been conducted in accordance with professional standards and requirements of any auditing publications.</p> <p>The skills and competencies of both the Audit and Risk Manager and the Audit, Risk and Performance Lead are annually reviewed as part of the council's performance appraisal scheme.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p><b>Questions to consider</b></p>		<p><b>Evidence / comments</b></p>
<p><i>Do internal auditors undertake a programme of continuing professional development?</i></p> <p><i>And</i></p> <p><i>Do internal auditors maintain a record of their professional development and training activities?</i></p>	<p>The Head of Governance and Business Support, the Audit and Risk Manager (CAE) and the Audit, Risk and Performance Lead undertake CPD in accordance with their professional qualification requirements.</p> <p>HR maintains a list of all courses that have been attended by Audit staff.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>

5.4 1300 Quality Assurance and Improvement Programme			
<p>The questions in this section seek to confirm that the CAE has developed and maintained a Quality Assurance and Improvement Programme (QAIP) through which conformance with the PSIAS can be and is properly assessed.</p>			
<p>Has the CAE developed a QAIP that covers all aspects of the internal audit activity and enables conformance with all aspects of the PSIAS to be evaluated?</p> <p>Does the QAIP assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement?</p> <p>Does the CAE maintain the QAIP?</p> <p>Are any statutory requirements for review of the internal audit activity satisfied?</p>			<p>A Quality Assurance and Improvement Programme is in place which is submitted to the Audit Committee annually in June. It includes a number of internal and external assessments which ensures that internal audit activity can demonstrate quality and continuous improvement. This has not been updated since 2018 as the last 2 effectiveness updates have not resulted in any actions. However following this effectiveness review an updated action plan will be required to include the following actions highlighted in this self-assessment.</p> <p>The Internal Audit Annual Opinion makes reference to the QAIP; which includes both internal and external assessments.</p> <p>The internal assessments include:</p> <ul style="list-style-type: none"> <li>• An annual self-assessment of the effectiveness of the audit service using the PSIAS;</li> <li>• Feedback on the Audit and Risk Manager (CAE) is sought annually prior to their performance appraisal;</li> <li>• 6 monthly monitoring of the internal audit activity to the Audit Committee; and</li> <li>• Day-to-day monitoring of compliance with the Definition of Internal Auditing and the Code of Ethics documented within the Sections Audit Charter and also in the PSIAS.</li> </ul> <p>External assessments include:</p> <ul style="list-style-type: none"> <li>• A 5 yearly independent assessment of compliance to the PSIAS;</li> <li>• Annual review of the council's Annual Governance Statement as part of the Financial Accounts audit;</li> <li>• Regular attendance at the Audit Committee with the opportunity to meet in private with the Committee; and</li> <li>• External Auditors and Audit Committee Members reviewing and challenging internal audit reports.</li> </ul>
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>	

			<p>All aspects of the programme are routinely monitored. The review is conducted by the Audit and Risk Manager (CAE) and scrutinised by the Head of Governance and Business Support and the Corporate Director Resources (S151 Officer).</p> <p><b>Action</b>  <b>The QAIP needs to be updated with the actions resulting from this self-assessment.</b></p>
<p><b>1310 Requirements of the Quality Assurance and Improvement Programme</b></p>			
<p><i>Does the QAIP include both internal and external assessments?</i></p>			<p>A self-assessment is performed annually. In addition, an external review of the effectiveness of the internal audit function is carried out every 5 years, in accordance with the requirements of the PISIAS. Wyre's last review took place in March 2018. Only three minor areas of recommendation were identified. The next peer review will take place in February 2023.</p> <p>The External Auditor will also review the work of the internal audit service as part of the work they complete in respect of the ISA 260 – Report to those charged with Governance.</p>
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>	

<b>1311 Internal Assessments</b>			
Does the CAE ensure that audit work is allocated to staff with the appropriate skills, experience and competence?			A restructure took place in June 2021 which resulted in the appointment of a new Audit, Risk and Performance Lead. This addition to the Audit and Risk Management Team has helped the Audit and Risk Manager (CAE) to ensure that audit assignments can be allocated by to the appropriate auditor with the relevant skills, experience and competencies.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
Do internal assessments include ongoing monitoring of the internal audit activity, such as:			All audit work is subject to a full review before the report is published. This includes a full review of working papers, evidence found, testing completed and validity of recommendations.  An annual review using the checklist within the Local Government Application Note is undertaken. This is subject to an external assessment every 5 years. Wyre's review took place in March 2018 with the next review due in February 2023.
■ Routine quality monitoring processes?			
■ Periodic assessments for evaluating conformance with the PSIAS?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<p>Does ongoing performance monitoring contribute to quality improvement through the effective use of performance targets?</p> <ul style="list-style-type: none"> <li>■ Is there a set of comprehensive targets which between them encompass all significant internal audit activities?</li> <li>■ Are the performance targets developed in consultation with appropriate parties and included in any service level agreement?</li> <li>■ Does the CAE measure, monitor and report on progress against these targets?</li> <li>■ Does ongoing performance monitoring include obtaining stakeholder feedback?</li> </ul>			<p>The Audit, Risk and Performance Lead is set targets / objectives annually as part of the performance appraisal scheme. Performance against these targets/objectives is monitored regularly.</p> <p>The Audit Committee receives six monthly updates on completion of the audit plan.</p> <p>Reporting timescales are published in the Audit Charter.</p> <p>On-going monitoring of service performance was identified in the last PSIAS peer review as an area that would benefit some improvement; i.e. Performance indicators. However given the size of the team and the number of audits completed, it is thought that performance reporting to the Audit Committee is sufficient enough to demonstrate the valued added to the organisation.</p> <p>The Wyre audit plan is monitored day-to-day with a report being considered by Audit Committee every six months.</p> <p>Feedback on internal audit reviews have not been completed during 2021/22. The software (Limehouse) used to facilitate the feedback process is no longer in use. A new process has been agreed for the audit year 2022/23.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Are the periodic self-assessments or assessments carried out by people external to the internal audit activity undertaken by those with a sufficient knowledge of internal audit practices?</p> <p>Sufficiency would require knowledge of the PSIAS and the wider guidance available such as the Local Government Application Note and/or IIA practice advisories, etc.</p>			<p>The periodic self-assessment is undertaken by the Audit and Risk Manager (CAE) and reviewed by the Corporate Director Resources (Section 151 Officer).</p> <p>In order to comply with PSIAS and the Local Government Application Note; an external assessment must be carried out once every 5 years. Wyre's assessment took place in March 2018. The next review is due to be completed in February 2023.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	



Does the periodic assessment include a review of the activity against the risk-based plan and the achievement of its aims and objectives?			Previous peer reviews used the checklist recommended in CIPFA's Code of Practice. The assessment also included a review of the annual internal audit report which documents the achievement of the audit plan and its wider aims and objectives documented in the Audit Charter.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>1312 External Assessments</b>			
Has an external assessment been carried out, or is one planned to be carried out, at least once every five years?  Has the CAE discussed the alternative approaches to external assessment with the board? This should reflect the relative costs of the different approaches, the potential advantages of an external viewpoint, and whether there are factors which might be considered to warrant a demonstrably independent assessment.			The last external assessment was completed in March 2018 and the next one is scheduled for February 2023.  The proposal from the Lancashire District Chief Auditors group which has been agreed by Audit Committee is to continue with the self-assessment and use peer reviews to obtain the independent external validation.  The annual self-assessment is carried out by the Audit and Risk Manager (CAE), scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to the Audit Committee. Wyre's first external assessment was in March 2018. The External Auditor at the time (KPMG) received the self-assessment and the peer review report as part of the Audit Committee agenda and therefore had the opportunity to challenge the content.  The Audit Committee agree that an external self-assessment will be carried out by the Audit and Risk Manager (CAE), scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to the Audit Committee and that every 5 years the review will be independently validated by a peer review. Wyre's next peer review is scheduled for February 2023. A memorandum of understanding (MoU) and templates are in place which will be used for all external assessments. The report template allows for the assessment team to state their qualifications and independence.
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<p>Has the CAE properly discussed the qualifications and independence of the assessor or assessment team with the board?</p> <p>In doing this, the CAE should consider whether the assessor or assessment team has demonstrated its competence in both the professional practice of internal auditing <i>and</i> the external assessment process. Competence can be demonstrated through both experience and theoretical learning. Experience of similar organisations or sectors is more valuable than less relevant experience. In the case of an assessment team, not all members need to have all the competencies – it is the team as a whole that is qualified.</p> <p>If the capability of the assessor or assessment team is not immediately obvious, the CAE should document how they used professional judgement to decide whether this is sufficient to carry out the external assessment.</p> <p>If the assessor or assessment team has any real or apparent conflicts of interest with the organisation, this should be clearly explained to the board, and safeguards should be put in place to minimise the effect of this on the conduct of the external assessment.</p> <p>Conflict of interest may include, but is not limited to, being a part of or under the control of the organisation to which the internal audit activity belongs.</p>			<p>The qualifications and independence of the assessment team will be documented in the final report. The peer review team will ensure that that the assessment team do not have any real or apparent conflicts of interest with the organisation prior to the work commencing.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	



<p>Has the CAE agreed the scope of the external assessment with an appropriate sponsor, such as the chair of the audit committee, the CFO or the chief executive?</p> <p>The CAE should also agree this scope with the external assessor or assessment team.</p>	<p>These requirements form the basis of the 'Memorandum of Understanding'.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p><b><i>1320 Reporting on the Quality Assurance and Improvement Programme</i></b></p>		
<p>Has the CAE reported the results of the QAIP to senior management and the board?</p> <p>Note that:</p> <ul style="list-style-type: none"> <li>■ the results of both external and periodic internal assessment must be communicated upon completion</li> <li>■ the results of ongoing monitoring must be communicated at least annually</li> <li>■ the results must include the assessor's or assessment team's evaluation with regards to the degree of the internal audit activity's conformance with the PSIAS.</li> </ul>	<p>The Internal Audit Annual Report reports the results of the QAIP to Audit Committee. The results of the internal assessment of the internal audit function are scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to the Audit Committee.</p> <p>The internal assessment is reported to Audit Committee annually and any external assessments will be reported to the Audit Committee following the issue of any report.</p> <p>Both the Internal Audit Annual Report and the Internal Audit Charter refer to the QAIP and its ongoing monitoring.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>Conformance with PSIAS is documented.</p>		

Questions to consider			Evidence / comments
Has the CAE included the results of the QAIP and progress against any improvement plans in the annual report?			See 1300 – Quality Assurance and Improvement Programme.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>1321 Use of ‘Conforms with the International Standards for the Professional Practice of Internal Auditing’</b>			
Has the CAE stated that the internal audit activity conforms with the PSIAS only if the results of the QAIP support this?			The self-assessment is reviewed by the Corporate Director Resources (Section 151 Officer) and reported to the Audit Committee.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>1322 Disclosure of Non-conformance</b>			
Has the CAE reported any instances of non-conformance with the PSIAS to the board?			There are no instances of non-conformance with the PSIAS.
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
If appropriate, has the CAE considered including any significant deviations from the PSIAS in the governance statement and has this been evidenced?			There are no significant deviations that require reporting in the AGS.
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	

Questions to consider			Evidence / comments
<b>6 Performance Standards</b>			
<b>6.1 2000 Managing the Internal Audit Activity</b>			
<p>The questions in this section seek to confirm that the internal audit activity's work achieves the purposes and responsibility of the activity, as set out in the internal audit charter, and that the internal audit activity adds value to the organisation and its stakeholders by:</p> <ul style="list-style-type: none"> <li>■ providing objective and relevant assurance</li> <li>■ contributing to the effectiveness and efficiency of the governance, risk management and internal control processes.</li> </ul>			
<b>2010 Planning</b>			
Has the CAE determined the priorities of the internal audit activity in a risk-based plan and are these priorities consistent with the organisation's goals?			<p>The audit plan is formulated following discussions with Senior Managers, consideration of the Council's Business Plan and strategic and operational risk registers.</p> <p>The audit plan is formulated taking into consideration the areas on which the Audit and Risk Manager (CAE) is required to provide assurance in the annual audit report.</p> <p>The audit plan considers the council's risk registers, business plan, priority projects / objectives and also any emerging threats, opportunities for fraud etc.</p> <p>Documented in the Audit Charter / Code of Ethics.</p> <p>Development of the Internal Audit Service will be identified as part of this self-assessment and also at the 5 year external assessment.</p> <p>Improvements are also discussed and documented in the service plan each year. Progress on meeting these improvements is monitored through the performance appraisal system.</p> <p>The audit plan is formulated after reviewing the council's business</p>
Does the risk-based plan take into account the requirement to produce an annual internal audit opinion?			
Does the risk-based plan incorporate or is it linked to a strategic or high-level statement of:			
■ How the internal audit service will be delivered?			
■ How the internal audit service will be developed in accordance with the internal audit charter?			
■ How the internal audit service links to organisational objectives and priorities?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

			plan which lists the key objectives and actions for the organisation as a whole.
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Questions to consider			Evidence / comments
<p>Does the risk-based plan set out how internal audit's work will identify and address local and national issues and risks?</p> <p>In developing the risk-based plan, has the CAE taken into account the organisation's risk management framework and relative risk maturity of the organisation?</p> <p>If such a risk management framework does not exist, has the CAE used their judgement of risks after input from senior management and the board and evidenced this? N/A</p>			<p>Local and national risks are identified through the following;</p> <ul style="list-style-type: none"> <li>• Strategic / operational risk workshops</li> <li>• Networking and attendance at group auditor meetings;</li> <li>• Meetings with the External Auditor; and</li> <li>• Reading and research.</li> </ul> <p>The Audit Committee are given the opportunity to comment on the work in the plan and discuss emerging risks either locally or nationally.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	<p>The Audit Brief document for each audit will identify and address individual risks, be it locally or nationally.</p> <p>Both strategic and operational risks are considered when developing the audit plan.</p>
<p>Does the risk-based plan set out the:</p> <ul style="list-style-type: none"> <li>■ Audit work to be carried out?</li> <li>■ Respective priorities of those pieces of audit work?</li> <li>■ Estimated resources needed for the work?</li> </ul> <p>Does the risk-based plan differentiate between audit and other types of work?</p> <p>Is the risk-based plan sufficiently flexible to reflect the changing risks and priorities of the organisation?</p>			<p>Owing to the on-going pandemic and the requirement for Internal Audit to be flexible and responsive to key risks, a quarterly audit plan, rather than an annual audit plan has been submitted to the Audit Committee for 2022/23 audit work.</p> <p>Risks and resources will be reviewed continually throughout the year and reported to the Audit Committee.</p> <p>The plan identifies the category, source and rationale for the piece of work and how it links to the council's business plan / risk registers etc.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Does the CAE review the plan on a regular basis and has he or she adjusted the plan when necessary in response to changes in the organisation's business, risks, operations, programmes, systems and controls?	The quarterly plan will be reviewed on a regular basis allowing any new risks or council priorities (new systems etc.) to be addressed accordingly.	
CONFORMS ✓	PARTIAL	NOT CONFORMING
Is the internal audit activity's plan of engagements based on a documented risk assessment?	The process that is undertaken to formulate the audit plan / priorities is an annual risk assessment of the council's universe, followed by regular updates of the council's risk registers and business plan refreshes.	
Is the risk assessment used to develop the plan of engagements undertaken at least annually?		
CONFORMS ✓	PARTIAL	NOT CONFORMING
<p>In developing the risk-based plan, has the CAE also given sufficient consideration to:</p> <ul style="list-style-type: none"> <li>■ Any declarations of interest (for the avoidance for conflicts of interest)?</li> <li>■ The requirement to use specialists, e.g. IT or contract and procurement auditors?</li> <li>■ Allowing contingency time to undertake ad hoc reviews or fraud investigations as necessary?</li> <li>■ The time required to carry out the audit planning process effectively as well as regular reporting to and attendance of the board, the development of the annual report and the CAE opinion?</li> </ul>	<p>Audit staff complete an annual declaration of interest. There have been no conflicts of interest recorded in 2021/22.</p> <p>Both the Audit and Risk Manager (CAE) and the Audit, Risk and Performance Lead have the necessary qualifications and skill set to carry out any audit. However if a piece of work was to be carried out that would require a specialist auditor skill set, an external audit provider would be commissioned or the in-house Compliance Team would be used for any complex fraud investigations.</p> <p>Time to plan each audit is factored into the number of days allocated for each piece of work. Attendance at Audit Committee, development of the annual report and other Audit and Risk Manager (CAE) activities is listed separately on the audit plan.</p>	
CONFORMS ✓	PARTIAL	NOT CONFORMING

Questions to consider			Evidence / comments
<p>In developing the risk-based plan, has the CAE consulted with senior management and the board to obtain an understanding of the organisation's strategies, key business objectives, associated risks and risk management processes?</p> <p>Does the CAE identify and consider the expectations of senior management, the board and other stakeholders for internal audit opinion and any other conclusions?</p>			<p>Senior Management input is requested when drafting the audit plan. It is then submitted to the Audit Committee at which point their input is also requested. There is also an opportunity at this point for the External Auditors to comment on the content.</p> <p>The annual audit report is scrutinised by the Corporate Director Resources (Section 151 Officer) and is also presented to the Audit Committee for consideration. Again, there is also an opportunity at this point for the External Auditors to comment on the content.</p> <p>In regards to audit report opinions, the overall opinions are based on the findings of each audit, which are graded using a set framework. Auditees can challenge the audit opinion and provide reasons in support of why they think the opinion should be changed. This will be done at the draft stage of the reporting process.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Does the CAE take into consideration any proposed consulting engagement's potential to improve the management of risks, to add value and to improve the organisation's operations before accepting them?</p> <p>Are consulting engagements that have been accepted included in the risk-based plan?</p>			<p>There are no proposed consulting engagement arrangements in place.</p>
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	

<b>2020 Communication and Approval</b>			
Has the CAE communicated the internal audit activity's plans and resource requirements to senior management and the board for review and approval?			Audit plan priorities are submitted to the Audit Committee initially in February / March each year for approval. Owing to the on-going pandemic, audit work will be reviewed / prioritised on a quarterly basis.
Has the CAE communicated any significant interim changes to the plan and/or resource requirements to senior management and the board for review and approval, where such changes have arisen?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	Six monthly updates are provided to the Audit Committee which includes any deviations or changes to audit work going forward owing to the identification of any new or emerging risks.
Has the CAE communicated the impact of any resource limitations to senior management and the board?			
CONFORMS ✓	PARTIAL	NOT CONFORMING	Resource limitations would be reported to senior management and the Audit Committee where appropriate as part of the update report.
<b>2030 Resource Management</b>			
Does the risk-based plan explain how internal audit's resource requirements have been assessed?			The internal audit resource requirements are documented in the Audit Charter. The Audit Committee and the External Auditors are aware of the size of the audit section and have the opportunity to challenge the plan if they feel there is insufficient coverage. Assurance mapping, risk registers and the council's business plan helps streamline audit planning and focus audit priorities.
CONFORMS ✓	PARTIAL	NOT CONFORMING	
Has the CAE planned the deployment of resources, especially the timing of engagements, in conjunction with management to minimise disruption to the functions being audited, subject to the requirement to obtain sufficient assurance?			The Lead Auditor will agree timings with each Head of Service prior to the start of each review. This will be documented in the Audit Brief.
CONFORMS ✓	PARTIAL	NOT CONFORMING	



Questions to consider	Evidence / comments	
<p>If the CAE believes that the level of agreed resources will impact adversely on the provision of the internal audit opinion, has he or she brought these consequences to the attention of the board?</p> <p>This may include an imbalance between the work plan and resource availability and/or other significant matters that jeopardise the delivery of the plan or require it to be changed.</p>	<p>There is an opportunity for the Audit and Risk Manager (CAE) to comment on sufficiency of resources where appropriate; although it is considered that the resource available is now sufficient to deliver the audit plan given that a restructure took place in June 2021 and a new Audit, Risk and Performance Lead was appointed, increasing the size of the Audit and Risk Management Team. If further resources were required an external audit provider e.g. Lancashire County Council / MIIA would be utilised.</p>	
CONFORMS ✓	PARTIAL	NOT CONFORMING
<b><i>2040 Policies and Procedures</i></b>		
<p>Has the CAE developed and put into place policies and procedures to guide the internal audit activity?</p> <p>Examples include maintaining an audit manual and/or using electronic management systems to guide staff in performing their duties in a manner that conforms to the PSIAS</p> <p>Are the policies and procedures regularly reviewed and updated to reflect changes in working practices and standards?</p>	<p>Standardised working papers and standard reporting format have been developed. SharePoint is used to store key documents that guide audit activity i.e. Audit Charter / Code of Ethics, Risk Management Policy and other CIPFA guidance. Both the Audit and Risk Manager (CAE) and the Audit, Risk and Performance Lead have been issued with the PSIAS and CIPFA's Application Note.</p> <p>Internal audit policies and procedures are reviewed annually to ensure conformity to PSIAS.</p>	
CONFORMS ✓	PARTIAL	NOT CONFORMING

<b>2050 Coordination</b>			
Does the risk-based plan include an adequately developed approach to using other sources of assurance and any work that may be required to place reliance upon those sources?			<p>An annual assurance mapping exercise is carried out to identify other streams of assurance such as external inspections, that can be considered, e.g. RIPA, Taxi Licensing, Local Government Ombudsman reports and identify any remaining gaps,</p> <p>Meetings are held with External Audit to update them on the work currently being carried out by Internal Audit. Work sometimes overlaps / complements that of transformation / process re-engineering, so regular updates with the individual Heads of Service is important.</p> <p>Both internal and external audit plans are shared and communicated publically at Audit Committee.</p> <p>Pre-pandemic, regular meetings were held with the External Auditor and the Corporate Director Resources (S151 Officer) to discuss the progress made in implementing the audit plan. The CAE attends for part of these meetings. Now that the pandemic activity is reducing, these meetings are being resurrected with the next one in June 2022.</p>
The CAE should generally share information and coordinate activities with other internal and external providers of assurance and consulting services. They may also carry out an assurance mapping exercise, or make use of assurance mapping carried out by other assurance providers.			
They should also meet regularly with the nominated external audit representative to consult on and coordinate their respective audit plans.			
Where key organisational risks relate to work undertaken through partnerships, the auditor may be able to take assurance from work undertaken by others, or by obtaining assurance directly.			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<b>2060 Reporting to Senior Management and the Board</b>			
<p>Does the CAE report periodically to senior management and the board on the internal audit activity's purpose, authority, responsibility and performance relative to its plan?</p> <p>Does the periodic reporting 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?</p> <p>Is the frequency and content of such reporting determined in discussion with senior management and the board and are they dependent on the importance of the information to be communicated and the urgency of the related actions to be taken by senior management or the board?</p>			<p>The Audit and Risk Manager (CAE) will update the Corporate Director Resources (Section 151 Officer) on a regular basis.</p> <p>Six monthly audit and risk management update reports are submitted to the Audit Committee.</p> <p>The Audit Chairman and the External Auditor will receive verbal updates on any frauds / whistleblowing cases.</p> <p>The Audit Committee receives internal audit's Audit Charter / Code of Ethics annually which covers its purpose, authority and responsibility.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	<p>Significant risk exposures are documented via the risk registers. Governance issues are considered along with the annual agreement of the AGS.</p> <p>Gifts and hospitality registers are also reviewed by Audit Committee and the Monitoring Officer.</p> <p>An agreed work programme is in place documenting when reports are submitted to Audit Committee.</p> <p>Where actions are considered to be important or urgent, more regular update reports are requested by Audit Committee and the relevant officer is invited to attend committee.</p>

<b>2070 External Service Provider and Organisational Responsibility for Internal Auditing</b>			
Where an external internal audit service provider acts as the internal audit activity, does that provider ensure that the organisation is aware that the responsibility for maintaining and effective internal audit activity remains with the organisation?			The council in-house team is currently responsible for 100% delivery of audit activity.
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
<b>6.2 2100 Nature of Work</b>			
The questions in this section seek to confirm that the internal audit activity evaluates and contributes to the improvement of the organisation's governance, risk management and internal control processes using a systematic and disciplined approach.			
<b>2110 Governance</b>			
Does the internal audit activity assess and make appropriate recommendations to improve the organisation's governance processes for:			The audit plan is formulated to ensure it contributes to the improvement of the organisation's governance, risk management and internal control processes. Audit reviews will cover the governance and the key risks of the service as well as the key controls.
<ul style="list-style-type: none"> <li>■ Making strategic and operational decisions?</li> <li>■ Overseeing risk management and control?</li> <li>■ Promoting appropriate ethics and values within the organisation?</li> <li>■ Ensuring effective organisational performance management and accountability?</li> <li>■ Communicating risk and control information to appropriate areas of the organisation?</li> <li>■ Coordinating the activities of and communicating information among the board, external and internal auditors and management?</li> </ul>			Standardised working papers and reports are used to maintain a consistent approach.
			All reported concerns are followed up e.g. members exerting undue influence.
			A staff ethical governance survey was conducted in 2019 to promote positive behaviours and values and identify gaps in knowledge and understanding. An equivalent survey for members was conducted in 2021 resulting in an action plan being produced which is currently being implemented.
CONFORMS ✓	PARTIAL	NOT CONFORMING	Managers are held accountable for actions in audit reports and findings from previous audit reports are followed up by the internal audit team.

			<p>The Audit, Risk and Performance Lead monitors the performance of key projects within the business plan and reports quarterly to the Overview and Scrutiny Committee.</p> <p>Regular risk workshops take place with Heads of Service and they have access to their risk registers on the Grace Risk Management System.</p> <p>Audit reports are issued to the staff responsible for the area being audited.</p> <p>The Audit Committee receive regular updates on risk management.</p> <p>A governance assurance meeting is carried out prior to the completion of the Annual Governance Statement. This is attended by key officers of the council.</p> <p>All audit reports are issued to clients and published on SharePoint for all staff / members to view.</p> <p>External Auditor communication is presented to Audit Committee. Regular updates are presented to Full Council on the work of Audit Committee.</p> <p>Governance issues will be reviewed as part of the audit as are risk management, health and safety and performance management.</p>
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Questions to consider			Evidence / comments
<p>Has the internal audit activity evaluated the design, implementation and effectiveness of the organisation's ethics-related objectives, programmes and activities? This is an area where the CAE may be able to use other sources of assurance.</p>			<p>The staff ethical governance survey completed in 2019 tested knowledge and understanding of key policies and procedures and helped identify any gaps allowing targeted future training, for example the location of polices. An equivalent survey for members was conducted in 2021 resulting in an action plan being produced which is currently being implemented.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Has the internal audit activity assessed whether the organisation's information technology governance supports the organisation's strategies and objectives? This is an area where the CAE may be able to use other sources of assurance.</p>			<p>Whilst the CAE does not sit on the Information Governance Group, she would be invited if deemed necessary. This is to ensure she remains independent from any policy changes / approval etc. In addition, the CAE also inputs to The Chief Internal Auditor and Information Governance / Data Protection update which is presented to CMT on a quarterly basis.</p> <p>The CAE and the Audit, Risk and Performance Lead facilitate <u>quarterly ICT risk workshops</u>. Any information technology / governance risks that would prevent the organisation achieving the business plan would be highlighted at these workshops.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>2120 Risk Management</b>			
<p>Has the internal audit activity evaluated the effectiveness of the organisation's risk management processes by determining that:</p> <ul style="list-style-type: none"> <li>■ Organisational objectives support and align with the organisation's mission?</li> <li>■ Significant risks are identified and assessed?</li> <li>■ Appropriate risk responses are selected that align risks with the organisation's risk appetite?</li> <li>■ Relevant risk information is captured and communicated in a timely manner across the organisation, thus enabling the staff, management and the board to carry out their responsibilities?</li> </ul>			<p>Documented in the Business Plan.</p> <p>The Business Plan / service plans / risk registers / assurance mapping declarations are used to identify and assess significant risks that would prevent the organisation from meeting its organisational objectives.</p> <p>Risks above the council's risk appetite are required to have actions to mitigate the risks. Risks below the appetite are regularly monitored.</p> <p>Strategic risks are reviewed by Corporate Management Team every quarter and reported to the Audit Committee every six months.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<p>Has the internal audit activity evaluated the risks relating to the organisation's governance, operations and information systems regarding the:</p> <ul style="list-style-type: none"> <li>■ Achievement of the organisation's strategic objectives?</li> <li>■ Reliability and integrity of financial and operational information?</li> </ul>	<p>Considered at the strategic risk workshop when reviewing the Business Plan.</p> <p>Financial and operational information is tested for reliability and integrity as part of individual audits.</p>	
<ul style="list-style-type: none"> <li>■ Effectiveness and efficiency of operations and programmes?</li> <li>■ Safeguarding of assets?</li> <li>■ Compliance with laws, regulations, policies, procedures and contracts?</li> </ul>	<p>Discussions take place at both strategic and operational risk workshops regarding the effectiveness and efficiency of operations and also considered as part of individual audits.</p>	
CONFORMS ✓	PARTIAL	NOT CONFORMING
<p>Has the internal audit activity evaluated the potential for fraud and also how the organisation itself manages fraud risk?</p> <p>CIPFA has issued a <i>Code of Practice on Managing the Risk of Fraud and Corruption</i>, and strongly recommends that it is used as the basis for assessment of how an authority manages its fraud risk.</p>		
CONFORMS ✓	PARTIAL	<p>NOT CONFORMING</p> <p>Fraud risks are considered during the operational and strategic risk workshops.</p> <p>The council takes part in the NFI annual and biennial exercises.</p> <p>The Audit and Risk Manager (CAE) regularly tests compliance to the council's counter fraud policies.</p> <p>Information concerning potential fraudulent activity is shared (National reports and Lancashire Audit Group).</p> <p>There is a Compliance Team within the contact centre that focus on investigating corporate fraud including fraudulent claims for council tax support, falsely claimed council tax and business rate discounts and exemptions and council tax and business rate avoidance cases.</p> <p>Staff were invited to attend fraud awareness training sessions given by NatWest in the Council Chamber in February 2020. These included guidance on avoiding personal and business fraud.</p>

Questions to consider			Evidence / comments
<p>Do internal auditors address risk during consulting engagements consistently with the objectives of the engagement?</p> <p>Are internal auditors alert to other significant risks when undertaking consulting engagements?</p> <p>Do internal auditors incorporate knowledge of risks gained from consulting engagements into their evaluation of the organisation's risk management processes?</p>			<p>There are no such engagements undertaken presently.</p>
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
<p>Do internal auditors successfully avoid managing risks themselves, which would in effect lead to taking on management responsibility, when assisting management in establishing or improving risk management processes?</p>			<p>The Audit and Risk Management Section only facilitate the process and hold and maintain the risk registers.</p> <p>Risk owners are assigned for each risk identified and they are responsible for ensuring that risk is appropriately managed and considered throughout the year. The Grace Risk Management system provides email prompts to risk and action owners when risks / action plans are due for review.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>2130 Control</b>			
<p>Has the internal audit activity evaluated the adequacy and effectiveness of controls in the organisation's governance, operations and information systems regarding the:</p> <ul style="list-style-type: none"> <li>■ Achievement of the organisation's strategic objectives?</li> <li>■ Reliability and integrity of financial and operational information?</li> <li>■ Effectiveness and efficiency of operations and programmes?</li> <li>■ Safeguarding of assets?</li> <li>■ Compliance with laws, regulations, policies, procedures and contracts?</li> </ul>			<p>These areas are covered as part of the audit planning process.</p> <p>Audits of key financial systems are normally conducted every 2/3 years unless there are any major changes to systems or controls. Position statements may be used when no major changes have occurred. Key financial systems control matrices have been introduced for 2022/23 to assist with the identification of areas requiring improved control / processes.</p> <p>Strategic objectives / projects are currently managed at CMT/Head of Service level.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
			<p>Feedback from the Insurance Officer is used to evaluate adequacy of the safeguarding of council assets.</p> <p>Compliance with laws, regulation, policies, procedures and contracts are considered in each audit review.</p>



Do internal auditors utilise knowledge of controls gained during consulting engagements when evaluating the organisation's control processes?	There are no such engagements undertaken presently.		
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	
<b>6.3 2200 Engagement Planning</b>			
<p>Do internal auditors develop and document a plan for each engagement?</p> <p>Does the engagement plan include the engagements:</p> <ul style="list-style-type: none"> <li>■ Objectives?</li> <li>■ Scope?</li> <li>■ Timing?</li> <li>■ Resource allocations?</li> </ul>	<p>An Audit Brief is developed and agreed for each audit review.</p> <p>Each of these criteria are documented in the Audit Brief.</p>		
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider			Evidence / comments
<p>Do internal auditors consider the following in planning an engagement, and is this documented:</p> <ul style="list-style-type: none"> <li>■ The objectives of the activity being reviewed?</li> <li>■ The means by which the activity controls its performance?</li> <li>■ The significant risks to the activity being audited?</li> <li>■ The activity's resources?</li> <li>■ The activity's operations?</li> <li>■ The means by which the potential impact of risk is kept to an acceptable level?</li> <li>■ The adequacy and effectiveness of the activity's governance, risk management and control processes compared to a relevant framework or model?</li> <li>■ The opportunities for making significant improvements to the activity's governance, risk management and control processes?</li> </ul>			<p>Each of these criteria are either documented in the Audit Brief or the lead schedules.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Where an engagement plan has been drawn up for an audit to a party outside of the organisation, have the internal auditors established a written understanding with that party about the following:</p> <ul style="list-style-type: none"> <li>■ Objectives?</li> <li>■ Scope?</li> <li>■ The respective responsibilities and other expectations of the internal auditors and the outside party (including restrictions on distribution of the results of the engagement and access to engagement records)?</li> </ul>			<p>There are no audits performed for parties outside of the organisation.</p>
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	

<p>For consulting engagements, have internal auditors established an understanding with the engagement clients about the following:</p> <ul style="list-style-type: none"> <li>■ Objectives?</li> <li>■ Scope?</li> <li>■ The respective responsibilities of the internal auditors and the client and other client expectations?</li> </ul> <p>For significant consulting engagements, has this understanding been documented?</p>	<p>There are no such engagements undertaken presently.</p>	
<p>CONFORMS N/A</p>	<p>PARTIAL N/A</p>	<p>NOT CONFORMING N/A</p>

Questions to consider	Evidence / comments
<p><b>2210 Engagement Objectives</b></p>	
<p>Have objectives been agreed for each engagement?</p> <p>Have internal auditors carried out a preliminary risk assessment of the activity under review?</p> <p>Do the engagement objectives reflect the results of the preliminary risk assessment that has been carried out?</p> <p>Have internal auditors considered the probability of the following when developing the engagement objectives:</p> <ul style="list-style-type: none"> <li>■ Significant errors?</li> <li>■ Fraud?</li> <li>■ Non-compliance?</li> <li>■ Any other risks?</li> </ul>	<p>Documented in the audit brief.</p> <p>This is completed whilst formulating the audit brief. Auditors will review previous audits, risk registers and other intelligence before undertaking each review. Risk profiles may also be used to assist in identifying further key risks.</p> <p>The audit brief document identifies the core risk and the objective.</p> <p>The preliminary risk assessment will ensure each of these are covered.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	
<p>Have internal auditors ascertained whether management and/or the board have established adequate criteria to evaluate and determine whether organisational objectives and goals have been accomplished?</p> <p>If the criteria has been deemed adequate, have the internal auditors used the criteria in their evaluation of governance, risk management and controls?</p>	<p>Audit Briefs are agreed with the Service Manager (sponsor) prior to the start of the work. A control matrix (RACE) is then used to evidence that all risks identified have been tested and that adequate controls are in place. This is attached to the final report issued which is issued to the relevant Corporate Director, Service Manager and the Audit Committee.</p>

<p>If the criteria has been deemed inadequate, have the internal auditors worked with management and/or the board to develop appropriate evaluation criteria?</p> <p>If the value for money criteria has been referred to, has the use of all the organisation's main types of resources been considered, including money, people and assets?</p>	<p>There are no instances where the criteria have been deemed inadequate.</p> <p>The 'value for money' aspect of any service / control is considered during each review.</p> <p>If there has been any work on VFM this will be documented within the report.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	
<p>Do the objectives set for consulting engagements address governance, risk management and control processes as agreed with the client?</p> <p>Are the objectives set for consulting engagements consistent with the organisation's own values, strategies and objectives?</p>	<p>There are no current consulting engagements in place.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	
<p><b>2220 Engagement Scope</b></p>	
<p>Is the scope that is established for each engagement generally sufficient to satisfy the engagement's objectives?</p> <p>Does the scope for each engagement include consideration of relevant systems, records, personnel and physical properties?</p> <p>Does this consideration include areas under the control of outside parties, where appropriate?</p>	<p>Agreed at the start of the audit. If during the audit the scope has to be extended to ensure the objectives of the audit are met, this is agreed with the Audit and Risk Manager (CAE) as it is likely to have resource implications.</p> <p>The Audit Brief document identifies the systems, records, premises and personnel the auditor will require assess to.</p> <p>Yes where applicable; i.e. review of YMCA.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	

Questions to consider	Evidence / comments
<p>Where significant consulting opportunities have arisen during an assurance engagement, was a specific written understanding as to the objectives, scope, respective responsibilities and other expectations drawn up?</p> <p>Where significant consulting opportunities have arisen during an assurance engagement, were the results of the subsequent engagement communicated in accordance with the relevant consulting standards?</p>	<p>There have been no such consulting opportunities that have arisen during an assurance engagement.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	
<p>For each consulting engagement, was the scope of the engagement generally sufficient to address any agreed-upon objectives?</p> <p>If the internal auditors developed any reservations about the scope of a consulting engagement while undertaking that engagement, did they discuss those reservations with the client and therefore determine whether or not to continue with the engagement?</p> <p>During consulting engagements, did internal auditors address the controls that are consistent with the objectives of those engagements?</p> <p>During consulting engagements, were internal auditors alert to any significant control issues?</p>	<p>There are no such engagements undertaken presently.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	
<p><b>2230 Engagement Resource Allocation</b></p>	
<p>Have internal auditors decided upon the appropriate and sufficient level of resources required to achieve the objectives of each engagement based on:</p> <p>a) The nature and complexity of the individual engagement?</p> <p>b) Any time constraints?</p> <p>c) The resources available?</p>	<p>This is agreed when formulating the annual audit plan. The Audit and Risk Manager (CAE) is notified of any changes to the nature of the work, time constraints and resources available once the terms of reference have been agreed.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	

<b>2240 Engagement Work Programme</b>		
<p>Have internal auditors developed and documented work programmes that achieve the engagement objectives?</p> <p>Do the engagement work programmes include procedures for:</p> <ul style="list-style-type: none"> <li>■ Identifying information?</li> <li>■ Analysing information?</li> <li>■ Evaluating information?</li> <li>■ Documenting information?</li> </ul> <p>Were work programmes approved prior to implementation for each engagement?</p> <p>Were any adjustments required to work programmes approved promptly?</p>		
<p>The auditor will plan the work required to meet the objectives of the audit. Standard templates are in place for this purpose.</p> <p>The control and testing summary will document the objective, the information required, the testing completed, the findings and the overall conclusions and recommendations.</p> <p>Audit Committee will approve all work programmes. The Audit, Risk and Performance Lead will agree the work programme for each quarter with the Audit and Risk Manager (CAE).</p> <p>Occasionally, work programmes are adjusted to take into consideration urgent work or investigations.</p>		
CONFORMS ✓	PARTIAL	NOT CONFORMING

Questions to consider	Evidence / comments			
<b>6.4 2300 Performing the Engagement</b>				
The questions in this section seek to confirm that internal auditors analyse, evaluate and document sufficient, reliable, relevant and useful information to support engagement results and conclusions.				
<b>2310 Identifying Information</b>				
<p>Do internal auditors generally identify (sufficient, reliable, relevant and useful) information which supports engagement results and conclusions?</p> <p>Sufficient information is factual, adequate and convincing so that a prudent, informed person would reach the same conclusions as the auditor. Reliable information is the best attainable information through the use of appropriate engagement techniques. Relevant information supports engagement observations and recommendations and is consistent with the objectives for the engagement. Useful information helps the organisation meet its goals.</p>	<p>Checks are made during a full audit review by the Audit and Risk Manager (CAE) that the objectives of the audit have been achieved and that there is sufficient evidence to support any findings, conclusions and the overall opinion.</p> <p>Review notes are provided to the Audit, Risk and Performance Lead after each review if further work is required or certain areas require clarification.</p> <p>Review notes will show if further information is required to support findings or if evidence is not relevant or reliable.</p>			
<table border="1"> <tr> <td data-bbox="76 849 327 900">CONFORMS ✓</td> <td data-bbox="331 849 607 900">PARTIAL</td> <td data-bbox="611 849 1050 900">NOT CONFORMING</td> </tr> </table>	CONFORMS ✓	PARTIAL	NOT CONFORMING	
CONFORMS ✓	PARTIAL	NOT CONFORMING		
<b>2320 Analysis and Evaluation</b>				
Have internal auditors generally based their conclusions and engagement results on appropriate analyses and evaluations?	Confirmed by the Audit and Risk Manager (CAE) for each audit performed by the Audit, Risk and Performance Lead.			
<table border="1"> <tr> <td data-bbox="76 1046 327 1098">CONFORMS ✓</td> <td data-bbox="331 1046 607 1098">PARTIAL</td> <td data-bbox="611 1046 1050 1098">NOT CONFORMING</td> </tr> </table>	CONFORMS ✓	PARTIAL	NOT CONFORMING	
CONFORMS ✓	PARTIAL	NOT CONFORMING		
<p>Have internal auditors generally remained alert to the possibility of the following when performing their individual audits, and has this been documented:</p> <ul style="list-style-type: none"> <li>■ Intentional wrongdoing?</li> <li>■ Errors and omissions?</li> <li>■ Poor value for money?</li> <li>■ Failure to comply with management policy?</li> <li>■ Conflicts of interest?</li> </ul>	<p>The key risks around these areas are identified at the start of the audit.</p> <p>The Audit, Risk and Performance Lead is experienced in the areas she is required to audit throughout the council and remains alert to any weaknesses / control failings.</p> <p>Documented in standardised working papers.</p>			
<table border="1"> <tr> <td data-bbox="76 1487 327 1538">CONFORMS ✓</td> <td data-bbox="331 1487 607 1538">PARTIAL</td> <td data-bbox="611 1487 1050 1538">NOT CONFORMING</td> </tr> </table>	CONFORMS ✓	PARTIAL	NOT CONFORMING	
CONFORMS ✓	PARTIAL	NOT CONFORMING		



**2330 Documenting Information**

Have internal auditors documented the relevant information required to support engagement conclusions and results?

Are working papers sufficiently complete and detailed to enable another experienced internal auditor with no previous connection with the audit to ascertain what work was performed, to re-perform it if necessary and to support the conclusions reached?

Standardised reports are used to document conclusions and findings along with a management action plan.

A file review is conducted by the Audit and Risk Manager (CAE) to ensure working papers are referenced correctly and the file contains sufficient evidence to support any findings and the overall opinion.

CONFORMS ✓

PARTIAL

NOT CONFORMING

Questions to consider			Evidence / comments
<p>Does the CAE control access to engagement records?</p> <p>Has the CAE obtained the approval of senior management and/or legal counsel as appropriate before releasing such records to external parties?</p> <p>Has the CAE developed and implemented retention requirements for all types of engagement records?</p>			<p>Access rights are documented in the Audit Charter. The audit reports state that the working papers can be viewed on request.</p> <p>Audit files have not been released to external parties other than the council's External Auditor.</p> <p>Information Asset Registers document the required retention periods for all audit records.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Are the retention requirements for engagement records consistent with the organisation's own guidelines as well as any relevant regulatory or other requirements?</p>			<p>Retention periods are consistent with organisational and regulatory guidelines. At present the majority of audit files are retained for 7 years (6 plus current) in accordance with the Government Classification Scheme.</p>
<b>2340 Engagement Supervision</b>			
<p>Are all engagements properly supervised to ensure that objectives are achieved, quality is assured and that staff are developed?</p> <p>Is appropriate evidence of supervision documented and retained for each engagement?</p>			<p>File reviews, feedback and performance appraisals are used to ensure that training or development issues are highlighted.</p> <p>File reviews and performance appraisal documents are retained evidencing supervision.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>6.5 2400 Communicating Results</b>			
<p>The questions in this section seek to confirm that internal auditors communicate the results of engagements in an appropriate way.</p>			
<b>2410 Criteria for Communicating</b>			
<p>Do the communications of engagement results include the following:</p> <ul style="list-style-type: none"> <li>■ The engagement's objectives?</li> <li>■ The scope of the engagement?</li> <li>■ Applicable conclusions?</li> <li>■ Recommendations and action plans, if appropriate?</li> </ul>			<p>Audit reports are issued as appropriate to Corporate Directors, Heads of Service, key operational staff, Audit Committee and the External Auditor review all audit reports.</p> <p>A standardised report format is used ensuring that each of the criteria is communicated.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

<p>Do internal auditors generally discuss the contents of the draft final reports with the appropriate levels of management to confirm factual accuracy, seek comments and confirm the agreed management actions?</p>	<p>A closure meeting is arranged with the relevant officers to agree factual accuracy, findings and agree actions.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>If recommendations and an action plan have been included, are recommendations prioritised according to risk?</p> <p>If recommendations and an action plan have been included, does the communication also state agreements already reached with management, together with appropriate timescales?</p> <p>If there are any areas of disagreement between the internal auditor and management, which cannot be resolved by discussion, are these recorded in the action plan and the residual risk highlighted?</p>	<p>Wyre recommendations are given a priority risk rating of 1 to 5. Level 1 recommendations require immediate action and level 5 recommendations have no set timescales and include suggestions for improvements / efficiencies in service delivery.</p> <p>The action plan identifies the management response and timescales for action.</p> <p>The management response would only identify areas of disagreement where appropriate.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>

Questions to consider			Evidence / comments
<p>Subject to confidentiality requirements and other limitations on reporting, do communications disclose all material facts known to them in their audit reports which, if not disclosed, could distort their reports or conceal unlawful practice?</p> <p>When an opinion or conclusion is issued, are the expectations of senior management, the board and other stakeholders taken into account?</p>			<p>Evidence is disclosed in support of the audit conclusion subject to confidentiality requirements.</p> <p>The internal auditor's opinion and conclusions are clearly visible.</p> <p>Closure meetings are held with clients and audit reports are scrutinised by the Corporate Director Resources (Section 151 Officer) and reported to the Audit Committee.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Opinions should be supported by sufficient, reliable, relevant and useful information (in line with responses to questions for PSIAS 2300).</p> <p>Where appropriate, do engagement communications acknowledge satisfactory performance of the activity in question?</p>			<p>Confirmed by the Audit and Risk Manager (CAE) who reviews all audit files.</p> <p>Satisfactory performance would be reflected in the overall conclusion issued.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>When engagement results have been released to parties outside of the organisation, does the communication include limitations on the distribution and use of the results?</p>			<p>Whilst the engagement results are not released to parties outside of the organisation other than the council's External Auditors, there is a paragraph within the report regarding the use of the report in respect of third parties.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Where the CAE has been required to provide assurance to other partnership organisations, or arm's length bodies such as trading companies, have the risks of doing so been managed effectively, having regard to the CAE's primary responsibility to the management of the organisation for which they are engaged to provide internal audit services?</p>			<p>Internal Audit have not been asked to provide assurance to any partnership organisations.</p>
CONFORMS N/A	PARTIAL N/A	NOT CONFORMING N/A	

<b>2420 Quality of Communications</b>			
Are internal audit communications generally accurate, objective, clear, concise, constructive, complete and timely?			<p>All documents are reviewed by the Audit and Risk Manager (CAE). Review notes are provided to correct any work that does not meet quality standards.</p> <p>Closure meetings are also used to agree the factual accuracy of the report and findings.</p> <p>Feedback was not sought on internal audit reviews carried out in 2021/22 as the contract for software (Limehouse) used to facilitate the feedback process came to an end. A new process has since been agreed for the audit year 2022/23.</p> <p>The client is provided with an opportunity to challenge whether they consider the report to be constructive as part of the closure meeting and again by attending Audit Committee if appropriate.</p> <p>The timeliness of reports is monitored and reported to Audit Committee.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>2421 Errors and Omissions</b>			
If a final communication has contained a significant error or omission, did the CAE communicate the corrected information to all parties who received the original communication?			<p>The closure meeting is designed to identify and resolve any significant errors or omissions, however the report would be re-issued where necessary.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<b>2430 Use of 'Conducted in Conformance with the International Standards for the Professional Practice of Internal Auditing'</b>			
Do internal auditors report that engagements are 'conducted in conformance with the PSIAS' only if the results of the QAIP support such a statement?			<p>Reported in each audit report and as part of the Annual Internal Audit Report.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Questions to consider	Evidence / comments
<b>2431 Engagement Disclosure of Non-conformance</b>	
<p>Where any non-conformance with the PSIAS has impacted on a specific engagement, do the communication of the results disclose the following:</p> <ul style="list-style-type: none"> <li>■ The principle or rule of conduct of the <i>Code of Ethics</i> or <i>Standard(s)</i> with which full conformance was not achieved?</li> <li>■ The reason(s) for non-conformance?</li> <li>■ The impact of non-conformance on the engagement and the engagement results?</li> </ul>	<p>No specific engagements have been impacted on by non-compliance with the PSIAS.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	
<b>2440 Disseminating Results</b>	
<p>Has the CAE determined the circulation of audit reports within the organisation, bearing in mind confidentiality and legislative requirements?</p>	<p>Reporting arrangements are documented within the Audit Charter.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	
<p>Has the CAE communicated engagement results to all appropriate parties?</p>	<p>Audit reports are issued as appropriate to Corporate Directors, Heads of Service, key operational staff with the Audit Committee and the External Auditor receiving all audit reports.</p>
<p>CONFORMS ✓    PARTIAL    NOT CONFORMING</p>	
<p>Before releasing engagement results to parties outside the organisation, did the CAE:</p> <ul style="list-style-type: none"> <li>■ Assess the potential risk to the organisation?</li> <li>■ Consult with senior management and/or legal counsel as appropriate?</li> <li>■ Control dissemination by restricting the use of the results?</li> </ul>	<p>Engagement results have not been released to parties outside the organisation other than the council's External Auditors.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	
<p>Where any significant governance, risk management and control issues were identified during consulting engagements, were these communicated to senior management and the board?</p>	<p>There are no such engagements undertaken presently.</p>
<p>CONFORMS N/A    PARTIAL N/A    NOT CONFORMING N/A</p>	

Questions to consider			Evidence / comments
<b>2450 Overall Opinion</b>			
<p>Has the CAE delivered an annual internal audit opinion?</p> <p>Does the annual internal audit opinion conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control?</p> <p>Does the annual internal audit opinion take into account the expectations of senior management, the board and other stakeholders?</p> <p>Is the annual internal audit opinion supported by sufficient, reliable, relevant and useful information (having regard to the answers to questions on PSIAS 2300)?</p>			<p>The CAE presents an annual audit opinion to the Audit Committee prior to the Annual Governance Statement. The annual opinion concludes on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control.</p> <p>The annual audit report is scrutinised by the Corporate Director Resources (Section 151 Officer) and presented to Audit Committee for consideration.</p> <p>The Audit Opinion is then subject to scrutiny by the Audit Committee and the External Auditors.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	
<p>Does the communication identify the following:</p> <ul style="list-style-type: none"> <li>■ The scope of the opinion, including the time period to which the opinion relates?</li> <li>■ Any scope limitations?</li> <li>■ The consideration of all related projects including the reliance on other assurance providers?</li> <li>■ The risk or control framework or other criteria used as a basis for the overall opinion?</li> </ul> <p>Where a qualified or unfavourable annual internal audit opinion is given, are the reasons for that opinion stated?</p> <p>Has the CAE delivered an annual report that can be used by the organisation to inform its governance statement?</p>			<p>All areas documented in the Annual Audit report.</p> <p>In providing an overall opinion on the council's system of internal control, it should be noted that assurance can never be absolute. Internal audit can only provide reasonable assurance that there are no major weaknesses in the areas reviewed.</p> <p>Where a qualified or unfavourable opinion is given this would be fully explained in the annual audit report.</p> <p>See annual governance statement and section entitled 'review of effectiveness'.</p>
CONFORMS ✓	PARTIAL	NOT CONFORMING	

Does the annual report incorporate the following:

- The annual internal audit opinion?
- A summary of the work that supports the opinion?
- A disclosure of any qualifications to the opinion?
- The reasons for any qualifications to the opinion?
- A disclosure of any impairments or restriction in scope?
- A comparison or work actually carried out with the work planned?
- A statement on conformance with the PSIAS?
- The results of the QAIP?
- Progress against any improvement plans resulting from the QAIP?
- A summary of the performance of the internal audit activity against its performance measures and targets?
- Any other issues that the CAE judges is relevant to the preparation of the governance statement?

See Annual report for conformance.

CONFORMS ✓

PARTIAL

NOT CONFORMING



Questions to consider	Evidence / comments	
<b>6.6 2500 Monitoring Progress</b>		
<p>The questions in this section seek to confirm that a system is in place to monitor effectiveness of audit communications results to management, including appropriate follow up when no action is taken by management.</p> <p>Has the CAE established a process to monitor and follow up management actions to ensure that agreed actions have been effectively implemented or that senior management have accepted the risk of not taking action?</p>		
<p>Where issues have arisen during the follow-up process (for example, where agreed actions have not been implemented), has the CAE considered revising the internal audit opinion?</p> <p>Do the results of monitoring management actions inform the risk- based planning of future audit work?</p>	<p>Starting from the 1 April 2021 all level 1 and 2 recommendations are followed up within three months of the recommendation being made. Overall opinions will be amended accordingly if improvements have been made. If there has been little progress made in implementing recommendations, further follow-up work will continue until the audit area has improved.</p>	
<p>CONFORMS ✓</p>	<p>PARTIAL</p>	<p>NOT CONFORMING</p>
<p>Does the internal audit activity monitor the results of consulting engagements as agreed with the client?</p>	<p>There are no such engagements undertaken presently.</p>	
<p>CONFORMS N/A</p>	<p>PARTIAL N/A</p>	<p>NOT CONFORMING N/A</p>

6.7 2600 Communicating the Acceptance of Risks			
<p>This section considers the arrangements which apply if the CAE has concluded that management has accepted a level of risk that may be unacceptable to the organisation.</p> <p>Situations of this kind are expected to be rare. PSIAS 2600 sets out communication requirements for the CAE. It is not the responsibility of the CAE to resolve the risk.</p>			
<p>If the CAE has concluded that management has accepted a level of risk that may be unacceptable to the organisation, has he or she discussed the matter with senior management?</p>			<p>The Audit and Risk Manager (CAE) has not concluded this to date but would refer the matter to the Corporate Director Resources (Section 151 Officer).</p>
<p>If, after discussion with senior management, the CAE continues to conclude that the level of risk may be unacceptable to the organisation, has he or she communicated the situation to the board?</p>			
CONFORMS ✓	PARTIAL	NOT CONFORMING	

