London Borough Of Havering

# Internal Audit Charter

2024

London Borough Of Havering

# **Document Control**

Include document details, version history, approval history, and equality analysis record.

# **Document details**

Name	Internal Audit Charter
Version number	V1
Author	Maria Denton, Deputy Head of Internal Audit & Risk
Lead Officer	Jeremy Welburn, Head of Assurance
Approved by	Audit Committee
Scheduled review date	March 2027

# **Version history**

Version	Change	Date	Dissemination
V0.1			
V0.2			

# Equality & Health Impact Assessment record

1	Title of activity	Internal Audit Charter		
2	Type of activity	Charter		
3	Scope of activity	- To define Internal Audit's purpose, authority and responsibility in accordance with the UK Public Sector Internal Audit Standards (PSIAS).		
4a	Are you changing, introducing a new, or removing a service, policy, strategy or function?	No		
4b	Does this activity have the potential to impact (either positively or negatively) upon people (9 protected characteristics)?	No	If the answer to <u>any</u> of these questions is <b>'YES'</b> , please continue to	If the answer to <u>all</u> of the questions (4a, 4b & 4c) is ' <b>NO'</b> , please go to question <b>6</b> .
4c	Does the activity have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?	No	question <b>5</b> .	
5	If you answered YES:	Please complete the EqHIA in Section 2 of this document. Please see Appendix 1 for Guidance.		
6	<b>If you answered NO: (</b> <i>Please</i> <i>provide a clear and robust</i> <i>explanation on why your activity</i> <i>does not require an EqHIA. This is</i> <i>essential in case the activity is</i> <i>challenged under the Equality Act</i> 2010.)	This Charter establishes internal audit's position within the Council and reporting lines; authorises access to records, personnel and physical property relevant to the performance of audit work; and, defines the scope of internal audit activities. There is no impact on protected characteristics.		
	Please keep this checklist for your audit trail.			

Date	Completed by	Review date
11 <sup>th</sup> March 2024	Maria Denton, Deputy Head of Internal Audit & Risk	March 2027

# Contents

Document Control	1
Equality Health Impact Assessment	2
Introduction	4
Roles & Responsibilities	5
Scope of Internal Audit	8

# Introduction

The purpose of this Internal Audit Charter is to define internal audit's purpose, authority and responsibility, in accordance with the UK Public Sector Internal Audit Standards (PSIAS). It establishes internal audit's position within the Council and reporting lines; authorises access to records, personnel and physical property relevant to the performance of audit work; and, defines the scope of internal audit activities.

This Charter also covers the role of the Head of Assurance and internal audit staff, and identifies the nature of professionalism, skills and experience required.

#### **Statutory requirements for an Internal Audit function**

The role of internal audit is underpinned by the statutory requirement. This is set out in the Accounts and Audit Regulations, which states that every local authority "must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance".

The statutory requirement is also within Section 151 of the Local Government Act 1972. This states that every authority in England and Wales should "make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs" in that it should include "compliance with statutory requirement for accounting and audit".

The CIPFA statement on the Role of the Chief Financial Officer in Local Government states that the chief financial officer (CFO) must:

- Ensure that an effective internal audit function is resourced and maintained;
- Ensure that the authority has put in place effective arrangements for internal audit of the control environment;
- Support the authority's internal audit arrangements; and
- Ensure that the Audit Committee receives the necessary advice and information, so that the Committee can operate effectively.

In a local authority, internal audit provides independent and objective assurance to the Council, its Members, the Corporate Leadership/Management Team and in particular to the CFO, thereby assisting the CFO in discharging his/her responsibilities under S151 of the Local Government Act 1972, relating to the proper administration of the Councils' financial affairs.

#### **Board and Senior Management**

The Public Sector Internal Audit Standards (PSIAS) require that the Internal Audit Charter defines the terms 'board' and 'senior management' in relation to the work of internal audit. For the purposes of internal audit work, the 'board' refers to the Council's Audit Committee, which oversees the work of internal audit. Senior management is defined as the Executive Leadership/Management Team.

# **Mission of Internal Audit**

To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

# **Definition of Internal Audit**

Internal audit is defined by the Chartered Institute of Internal Auditors' International Professional Practices Framework as "an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."

#### **Applicable Standards**

The internal audit function is required to comply with Public Sector Internal Audit Standards (PSIAS) and the associated Local Government Application Note (LGAN). The Relevant Internal Audit Standard Setters (RIASS), which include the Chartered Institute of Public Finance and Accountancy (CIPFA) in respect of local government, originally adopted PSIAS from 1 April 2013. PSIAS was subsequently revised and updated in 2017. The Standards encompass the mandatory elements of the Chartered Institute of Internal Auditors (CIIA) International Professional Practices Framework (IPPF). The LGAN was developed by CIPFA and sets out requirements for local government internal audit to inform application of PSIAS. The LGAN was revised and updated in 2019.

Compliance with these Standards is subject to a quality assurance and improvement programme in line with PSIAS.

The PSIAS incorporate the Core Principles for the professional practice of internal auditing and a code of ethics. For an internal audit function to be considered effective, all Principles should be present and operating effectively. The purpose of the Code of Ethics is to promote an ethical culture in the profession of internal auditing. Auditors are required to comply with this code, as well as any code of ethics from other professional bodies they belong to and any code of ethics required by the Council.

# **Roles and Responsibilities**

# **Responsibility of Internal Audit**

The Head of Assurance must deliver an annual internal audit opinion and a report that can be used to inform the Council's annual governance statement. The annual internal audit opinion must conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control. This is the 'assurance role' for internal audit. In order to achieve this, the internal audit function has the following objectives:

- To provide a quality, independent and objective risk-based audit service that effectively meets the Councils' needs, adds value, improves operations and helps protect public resources.
- To provide assurance to management that the Councils' operations are being conducted in accordance with external regulations, legislation, internal policies and procedures.
- To provide a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, internal control and governance processes.
- To provide advice and support to management to enable an effective control environment to be maintained.
- To promote an anti-fraud, anti-bribery and anti-corruption culture within the Council, to aid the prevention and detection of fraud, with fraud risks being considered as part of the scope for audit assignments

The individual topics of work undertaken by the internal audit service include:

- Audit planning
- Risk-based audit reviews
- By exception, compliance reviews
- Auditing grant claims
- Follow up audit reviews
- Consultancy advice on controls and system development

Each individual audit assignment is governed by specific terms of reference for that piece of work, detailing the scope of the audit and elements that will be covered, and if appropriate, the resources to be applied and the timeframe.

There are separate terms of engagement covering counter fraud work, setting out in detail the respective responsibilities of the counter fraud team and managers, such as:

- Independent investigation function
- · Investigating issues and concerns raised by services
- Advice around whether it is a fraud issue
- Fraud awareness.

This is supplemented by Council Policies which include:

- 1. Financial Regulations
- 2. The Anti-Fraud and Corruption Strategy
- 3. The Anti-Money Laundering Policies
- 4. Anti-Bribery Policies

These provide detailed guidance on what to do if a manager discovers fraud, corruption, money laundering or has an allegation reported to them.

#### **Responsibility of the Council**

The Council is responsible for ensuring that internal audit is provided with all necessary assistance and support to ensure that it meets the required standards.

The Councils' Financial Regulations are specific about the role of the Chief Financial Officer in relation to internal audit, setting out access rights, independence and support for resources sufficient to provide an opinion and support managers to prevent and detect fraud.

Financial Regulations specify the responsibilities of the Directors in terms of access, explanations, reporting of allegations of fraud and engaging with the audit process. The respective roles of managers in relation to internal audit are also set out in Financial Regulations.

#### **Three Lines of Defence**

In addition, there is a straightforward assurance framework, which assists in understanding the role of internal audit in the overall risk management and internal control processes in the Council. This framework is commonly referred to as the 'three lines of defence' model.

Operational management is responsible for ensuring that systems of internal control are in place, good business practices are implemented and followed in all areas, compliance is maintained, risks, including fraud risks, are identified and mitigated, and effective governance is established. This is the 'first line' of defence.

The second line of defence is performed by those responsible for oversight functions, generally the policy/system owners. They set boundaries by drafting and implementing policies and procedures. They are also responsible for guidance and directions for implementing their policies and for monitoring their proper execution. They therefore provide oversight over business processes and risks.

The Council's third line of defence includes internal audit, which should provide independent assurance to senior management and the Audit Committee on how effectively the first and second lines of defence have been operating.

An independent internal audit function will, through its risk-based approach to work, provide assurance to the Council's Audit Committee and senior management on the higher risk and more complex areas of the Council's business, allowing management to focus on providing coverage of routine operations.

Notwithstanding the above, the internal audit service may, on occasion, be required to undertake a range of reviews which, through volume testing, identify and examine the levels of organisational compliance with council policies, procedures, financial regulations and legislation. As a result of these reviews, an assessment can be provided on the degree of compliance across the council and can help services to improve their systems to facilitate greater compliance in the future.

#### **Head of Assurance**

The Head of Assurance is the Chief Audit Executive as referred to in the Public Sector Internal Audit Standards (PSIAS). They will have sufficient skill, experience and competencies to work with the leadership team and the Audit Committee, influencing risk management, governance and the internal control environment of the Council. The Head of Assurance will hold a full, professional qualification, defined as CCAB, CMIIA or equivalent professional membership, and adhere to professional values and the Code of Ethics.

The Head of Assurance is responsible for ensuring that there is access to the full range of knowledge, skills, qualifications and experience to deliver the audit plan and meet the requirements of the PSIAS. In addition to internal audit skills, the Head of Assurance will specify any other professional skills that may be needed by the internal audit team.

#### Head of Assurance - Relationships and Independence

The Head of Assurance reports directly to the S151 Officer of the Council.

The Head of Assurance has direct access to the Head of Paid Service (Chief Executive or equivalent), all levels of management and elected members, as set out in the Council's financial regulations.

The Head of Assurance can meet separately with the Chair of the Audit Committee, if required.

The Head of Assurance, or an appropriate representative of the internal audit team, attends meetings of the Audit Committee.

The Head of Assurance, or an appropriate representative, attends meetings of the Council's senior management teams to discuss the audit plan, following consultation over the proposals with Directors.

The Head of Assurance is, in addition to Internal Audit, also responsible for Counter Fraud, Risk Management and Insurance. These additional roles outside of internal auditing could potentially, or be perceived to, impair independence and objectivity, with regard to the principles contained within the Code of Ethics. Safeguards are therefore in place to limit possible impairments, e.g. where appropriate, another senior manager will agree Terms of Reference and sign off audit paperwork and reports.

#### **Independence of Internal Audit**

Managers and staff within internal audit are required to make annual declarations of interest in accordance with the Council's declaration's policy. Everyone is reminded of the need to make annual declarations of interest. Declarations made are reviewed by management and, if required, appropriate control measures are put in place to prevent conflicts of interest.

Where appropriate, internal audit may provide advice and support, regarding risk and controls, during the design and implementation of new systems. In such cases, independence is preserved by ensuring that the person providing this support takes no part in any subsequent audit.

Audit assignments are distributed in such a way as to ensure that independence is maintained and objective opinions can be given. Auditors work on a wide range of assignments and do not focus on any particular area of the Council's business.

When auditors are recruited from within the Council, they cannot audit the area where they previously worked for at least six months, to preserve the auditor's independence.

# **Scope of Internal Audit**

#### Responsibility

Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud. Internal audit procedures are designed to focus on areas identified by the organisation as being of greatest risk and significance and rely on management to provide full access to accounting records and transactions for the purposes of audit work and to ensure the authenticity of these documents.

#### **Due Professional Care**

The internal audit function is bound by the following standards:

- UK Public Sector Internal Audit Standards (PSIAS)
- PSIAS Code of Ethics
- Local Government Application Note (LGAN)
- Seven Principles of Public Life (Nolan Principles)
- All Council policies and procedures
- All relevant legislation
- Any code of ethics prescribed by an accounting or audit body to which an auditor is a member of.

Internal audit is subject to a Quality Assurance and Improvement Programme that covers all aspects of internal audit activity. This consists of an annual self-assessment of the service and its compliance with the UK Public Sector Internal Audit Standards, ongoing performance monitoring and an external assessment at least once every five years by a suitably qualified, independent assessor.

#### **Opinion work – Internal Audit Process**

The PSIAS state that the Head of Assurance is responsible for developing a risk-based plan. This takes into account the organisation's risk management framework, including using risk appetite levels set by management for the different activities or parts of the organisation. If a framework does not exist, the Head of Assurance uses his/her own judgment of risks, after consideration of input from senior management and the board. The Head of Assurance must review and adjust the plan, as necessary, in response to changes in the organisation's business, risks, operations, programs, systems, and controls.

The risk-based plan must take into account the requirement to produce an annual internal audit opinion on the assurance framework. It must incorporate or be linked to a strategic or high-level statement of how the internal audit service will be delivered and developed in accordance with the Internal Audit Charter and how it links to the organisational objectives and priorities.

For each audit assignment, terms of reference are developed and agreed with the client setting out the objectives and scope of the audit. A risk evaluation form is prepared, breaking down the risks and expected controls of the system to be reviewed. These documents are reviewed and agreed by Audit Management prior to the commencement of the audit.

The completed risk evaluation form and other audit working papers contain the evidence to support the audit findings and the conclusion reached. At the completion of the audit, a written report is produced detailing the findings and recommendations. The report will also provide an audit opinion on the control environment in place. As part of the ongoing quality assurance process, the working papers and report are reviewed by the Audit Management before the draft report is issued to the client.

The risk based plan is a live document and subject to reviews in year to take account of changes in the risk environment and internal factors within the Council.

Outcomes from audit reports are submitted to the Audit Committee for information and discussion.

#### Non-opinion work including Consulting Services

From time to time, the internal audit service will undertake work which does not necessarily contribute explicitly to the overall audit opinion. These will be probity or regularity audits in response to investigations, certification of grant claims or consultancy exercises in the form of support for new systems being developed.

Where such work is undertaken, this is set out as part of the Head of Assurance's annual report. The risk, for which the work is providing assurance, is also specified.

Consulting services are advisory in nature and are generally performed following the receipt of a specific request, with the aim of improving governance, risk management and control. Prior to accepting any consultancy work, due consideration is given to its potential impact on the independence of internal audit and the impact on the ability of the section to provide sufficient assurance to provide an opinion on the Council's overall control framework.

## **Counter Fraud**

Managing the risk of fraud is the responsibility of line management; however the Section 151 Officer retains specific responsibilities in relation to the detection and investigation of fraud.

The wider internal audit service supports the Counter Fraud Team to provide a counter fraud function to support the Section 151 officer in the discharge of his/her responsibilities.

Fraud risks are also considered as part of the scope for audit assignments and specific testing takes place to ensure that there are adequate controls in place to prevent and detect fraud, errors and omissions, as part of the opinion work.

The Counter Fraud Team is trained to investigate cases to a criminal standard and adhere to a range of legislative requirements to enable cases to be prosecuted, where necessary.

The Counter Fraud Team undertakes work of a proactive nature through various data matching exercises. The aim is to try to identify potential frauds at an early stage, assess the controls against the risks and enable identified fraud to be dealt with whilst giving a level of assurance over Council data.

The Counter Fraud team also responds reactively to allegations of fraud from both internal and external sources, aiming to investigate cases, where appropriate, to a criminal standard. Council policies require that the Assurance Service is notified of all suspected or detected fraud and corruption.

The Counter Fraud Team maintains and updates the Council's Counter Fraud policies, including:

- Anti-fraud and corruption policy
- Anti-money laundering policy
- Bribery Act policy
- Prosecution policy
- Policy for the use of the confiscation regime within the Proceeds of Crime Act 2002.

The team also provide training and resources to enable officers to identify and prevent fraud in the design and control of their systems.

Work carried out by the Counter Fraud Team is reported to Members and contributes to the Head of Assurance's annual opinion.

## Reporting

The UK Public Sector Internal Audit Standards (PSIAS) require the Head of Assurance to report to the top of the organisation and this is done in the following ways:

- The Internal Audit Charter and any amendments are reported to the senior management team and the Audit Committee. The annual Internal Audit Plan is compiled by the Head of Assurance, taking account of the risk framework and after input from directors and heads of service. It is then presented to the senior management team and the Audit Committee, annually, for noting and comment.
- The adequacy, or otherwise, of the level of internal audit resources (as determined by the Head of Assurance) and the independence of internal audit will be reported annually to the Audit Committee. Performance against the Internal Audit Plan and any significant risk exposures and control issues arising from audit work are reported regularly to the Audit Committee.
- Any significant consulting activity not already included in the audit plan and which might affect the level of assurance work undertaken will be reported to the Audit Committee.
- Any instances of non-conformance with the Public Sector Internal Audit Standards will be included in the annual Head of Assurance report. If there is significant non-conformance, this may be included in the Council's Annual Governance Statement.

# **Internal Audit Access Rights**

Internal audit has unrestricted access to all records and information, both manual and computerised, cash, stores and other property or assets it considers necessary to fulfil its responsibilities. Audit may enter a property and has unrestricted access to all locations and officers where necessary, on demand, and without prior notice. Right of access to other bodies funded by the Council should be set out in the conditions of funding.

#### **Internal Audit Resources**

Internal audit must have sufficient resources in terms of numbers, grades, qualifications and levels of experience, having regard to its objectives and to the UK Public Sector Internal Audit Standards and Local Government Application Note.

The Head of Assurance is responsible for ensuring that the resources of the Internal Audit Service are sufficient to meet its responsibilities. If a situation arose whereby resources were insufficient this will be reported to the Directors of Finance, the Section 151 Officers and, if not resolved, the Audit Committees.