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The Arc High Street Clowne S43 4JY

To: Chair & Members of the Audit Committee

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Tuesday 14th January 2025

Dear Councillor

AUDIT COMMITTEE

You are hereby summoned to attend a meeting of the Audit Committee of the Bolsover District Council to be held in the Council Chamber on Wednesday 22nd January 2025 at 14:00 hours.

<u>Register of Members' Interests</u> - Members are reminded that a Member must within 28 days of becoming aware of any changes to their Disclosable Pecuniary Interests provide written notification to the Authority's Monitoring Officer.

You will find the contents of the agenda itemised on page 3.

Yours faithfully

Solicitor to the Council & Monitoring Officer

J. S. Fielden



Equalities Statement

Bolsover District Council is committed to equalities as an employer and when delivering the services it provides to all sections of the community.

The Council believes that no person should be treated unfairly and is committed to eliminating all forms of discrimination, advancing equality and fostering good relations between all groups in society.

Access for All statement

You can request this document or information in another format such as large print or **language** or contact us by:

• Phone: 01246 242424

• Email: enquiries@bolsover.gov.uk

- **BSL Video Call:** A three-way video call with us and a BSL interpreter. It is free to call Bolsover District Council with Sign Solutions, you just need Wi-Fi or mobile data to make the video call, or call into one of our Contact Centres.
- Call with <u>Relay UK</u> a free phone service provided by BT for anyone who
 has difficulty hearing or speaking. It's a way to have a real-time conversation
 with us by text.
- Visiting one of our <u>offices</u> at Clowne, Bolsover, Shirebrook and South Normanton

AUDIT COMMITTEE AGENDA

Wednesday 22nd January 2025 at 14:00 hours taking place in the Council Chamber, The Arc, Clowne

Item No.		Page No.(s)
1.	Apologies For Absence	- (-)
2.	Urgent Items of Business	
	To note any urgent items of business which the Chairman has consented to being considered under the provisions of Section 100(B) 4(b) of the Local Government Act 1972.	
3.	Declarations of Interest	
	Members should declare the existence and nature of any Disclosable Pecuniary Interest and Non Statutory Interest as defined by the Members' Code of Conduct in respect of:	
	a) any business on the agendab) any urgent additional items to be consideredc) any matters arising out of those itemsand if appropriate, withdraw from the meeting at the relevant time.	
4.	Minutes	
	To consider the minutes of the last meeting held on 26th September 2024	To Follow
	REPORTS OF THE INTERNAL AUDIT CONSORTIUM MANAGER	
5.	Global Internal Audit Standards	4 - 100
6.	Summary of progress on the Internal Audit Plan 2024/25	101 - 109
	REPORT OF THE SECTION 151 OFFICER	
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8.	Audit Committee Work Programme 2024/25	118 - 119



Bolsover District Council

Meeting of the Audit Committee on 22nd January 2025

Global Internal Audit Standards

Report of the Portfolio Holder for Resources

Classification	This report is public
Contact Officer	Jenny Williams – Head of the Internal Audit Consortium

PURPOSE/SUMMARY OF REPORT

- To present for members' information the Global Internal Audit Standards (GIAS), the CIPFA Application Note: Global Internal Audit Standards in the UK Public Sector Applicable from 1 April 25 and the CIPFA Consultation document Code of Practice for the Governance of Internal Audit (the Code).
- To ensure that the Audit Committee understands its governance role in respect of internal audit as set out in the new Code.
- To present an action plan to achieve full compliance with the GIAS and the Code.

REPORT DETAILS

1. Background

- 1.1 In January 2024 the Institute of Internal Auditors (IIA) published the Global Internal Audit Standards (Appendix 1) that are intended to guide the worldwide professional practice of internal auditing and serve as a basis for evaluating and elevating the quality of the internal audit function.
- 1.2 From the 1st April 2025 the GIAS will replace the Public Sector Internal Audit Standards (PSIAS). The Internal Audit Consortium is currently compliant with the PSIAS and whilst many of the principles of auditing are the same, work is ongoing to ensure full compliance with the GIAS.

2. <u>Details of Proposal or Information</u>

- 2.1 The GIAS are organised into 5 domains:
 - Domain 1: Purpose of Internal Auditing is intended to assist internal auditors and internal audit stakeholders in understanding and articulating the value of internal auditing.

- Domain 11: Ethics and Professionalism outline the behavioural expectations for professional internal auditors, including Chief Audit Executives (Head of Internal Audit). Conformance with these principles and standards instills trust in the profession of internal auditing, creates an ethical culture within the internal audit function, and provides the basis for reliance on internal auditors' work and judgement.
- Domain 111: Governing the Internal Audit Function Appropriate
 governance arrangements are essential to enable the internal audit function
 to be effective. This domain outlines the requirements for the Chief Audit
 Executive to work closely with the board (Audit Committee) to establish the
 internal audit function, position it independently, and oversee its performance.
 This domain also outlines senior managements responsibilities that support
 the board's responsibilities and promote strong governance of the internal
 audit function.
- Domain 1V: Managing the Internal Audit Function The Chief Audit Executive
 is responsible for managing the internal audit function in accordance with the
 internal audit charter and Global Internal Audit Standards. This responsibility
 includes strategic planning, obtaining and deploying resources, building
 relationships, communicating with stakeholders, and ensuring and enhancing
 the performance of the function.
- Domain V: Performing Internal Audit Services this requires internal auditors
 to effectively plan engagements, conduct the engagement work to develop
 findings and conclusions, collaborate with management to identify
 recommendations and / or action plans that address the findings, and
 communicate with management and the employees responsible for the
 activity under review throughout the engagement and after it closes.
- 2.2 Within these domains are 15 guiding principles that enable effective internal auditing. Each principle is supported by standards that contain requirements, considerations for implementation and examples of evidence of conformance. Together, these elements help internal auditors achieve the principles and fulfil the purpose of internal auditing.
- 2.3 The next external review of Internal Audit is due in May 2026 and this review will need to assess the Internal Audit Consortium's compliance with the GIAS.

CIPFA Application Note: Global Internal Audit Standards in the UK Public Sector Applicable from 1 April 25

2.4 While the Global Internal Audit Standards (GIAS) apply to all internal audit functions, internal auditors in the public sector work in a political environment under governance, organisational and funding structure. The CIPFA Application note (Appendix 2) therefore sets out the interpretations and requirements which need to be applied to the GIAS requirements, in order that these form a suitable basis for internal audit practice in the UK public sector.

CIPFA Code of Practice for the Governance of Internal Audit in UK Local Government.

- 2.5 CIPFA has developed the Consultation Code of Practice for the Governance of Internal Audit in Local Government (the Code) (Appendix 3) to support authorities in establishing their internal audit arrangements and providing oversight and support for internal audit. The Code is designed to work alongside the new internal audit standards.
- 2.6 The Code is aimed at those responsible for ensuring effective governance arrangements for internal audit so for Bolsover District Council this is the Audit Committee.
- 2.7 The Code is currently in draft pending finalisation by CIPFA.

Action Plan to achieve conformance with the Global Internal Audit Standards in the UK Public Sector and with the Code of Practice for the Governance of Internal Audit

- 2.8 The Head of the Internal Audit Consortium has undertaken a self-assessment against the Global Internal Audit Standards using the Institute of Internal Auditors self-assessment toolkit.
- 2.9 Whilst the bulk of the Standards are already complied with, some areas for improvement have been identified to ensure full compliance and these are detailed in the action plan at Appendix 4.
- 2.10 In summary, the main action plan points relate to: -
 - Updates to current documentation to ensure that they reference the GIAS rather than the PSIAS e.g. The Internal Audit Charter, Internal Audit Manual,
 - Retaining evidence of regular training on ethical and professional behaviour, objectivity, due professional care and communication skills,
 - Clarifying Board (Audit Committee) responsibilities championing internal audit and assessing their effectiveness,
 - Development of an Internal Audit Strategy,
 - Documentation of the basis of reliance on other assurances,
 - Greater emphasis on identifying the root cause of problems identified,
 - 2025/26 Annual Governance Statement to detail how the Council complies with the Code.

3. Reasons for Recommendation

- 3.1 To update Members on the GIAS and Code of Practice in respect of the operation and governance of internal audit.
- 4 Alternative Options and Reasons for Rejection
- 4.1 N/A

RECOMMENDATION(S)

That the report be noted.

IMPLICATIONS:

Finance and Risk Yes□ No ⊠
Details:
Compliance with the GIAS and the Code ensures that internal audit is operating in
accordance with best practice which reduces the risk that weaknesses in respect of
governance, risk and internal control go undetected.
On behalf of the Section 151 Officer
on bonan or the coolen for ones.
<u>Legal (including Data Protection)</u> Yes□ No ⊠
Details:
The core work of internal audit is derived from the statutory responsibility under the
Accounts and Audit Regulations 2015 which requires the Council to "undertake an
effective internal audit to evaluate the effectiveness of its risk management, control
and governance processes, taking in to account the Public Sector Internal Audit
Standards or guidance". On behalf of the Solicitor to the Council
On behall of the Solicitor to the Council
Staffing Yes□ No ⊠
<u>Staffing</u> Yes□ No ⊠ Details:
The GIAS can be implemented with the current resources available.
The Onto can be implemented with the current resources available.
On behalf of the Head of Paid Service
Equality and Diversity, and Consultation Yes□ No ⊠
Details: N/A
Details. N/A
Environment Yes□ No ⊠
Details: N/A

DECISION INFORMATION:

☑ Please indicate which threshold applies:		
Is the decision a Key Decision? A Key Decision is an Executive decision which has a significant impact on two or more wards in the District or which results in income or expenditure to the Council above the following thresholds:	Yes□	No ⊠
Revenue (a) Results in the Council making Revenue Savings of £75,000 or more or (b) Results in the Council incurring Revenue Expenditure of £75,000 or more.	(a) □	(b) □
Capital (a) Results in the Council making Capital Income of £150,000 or more or (b) Results in the Council incurring Capital Expenditure of £150,000 or more.	(a) □	(b) □
District Wards Significantly Affected: (to be significant in terms of its effects on communities living or working in an area comprising two or more wards in the District) Please state below which wards are affected or tick All if all wards are affected:		
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	Yes□	No □
	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring		_
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □ Other □	Yes□	No 🗆
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □	Yes□ Yes□	No 🗆

DOCUMENT INFORMATION			
Appendix No	Title		
1	Global Internal Audit Standards		
2	CIPFA Application Note: Global Internal Audit Standards in the UK Public Sector Applicable from 1 April 2025		
3	Consultation CIPFA Code of Practice for the Governance of Internal Audit		
4	Action Plan to achieve conformance with the Global Internal Audit Standards in the UK Public Sector and the CIPFA Code of Practice for the Governance of Internal Audit		

Background Papers

(These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Executive you must provide copies of the background papers).

DECEMBER 2024

Appendix 1

Condensed Version of the

Global Internal Audit Standards™



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Acknowledgements

The Institute of Internal Auditors is grateful to the stakeholders that provided guidance and assistance in the development of the Global Internal Audit Standards™. The IIA particularly recognizes members of the International Internal Audit Standards Board – a global group of internal auditors who have generously volunteered their time and expertise to ensure the Standards elevate the professional practice of internal auditing. The IIA thanks the International Professional Practices Framework Oversight Council for its essential role in ensuring the standard-setting process serves the public interest, the Professional Certifications Board for its advice, and IIA staff and technical advisors for ensuring the successful implementation and management of all aspects of the project.

About the International Professional Practices Framework

A framework provides a structural blueprint and coherent system that facilitates the consistent development, interpretation, and application of a body of knowledge useful to a discipline or profession. The International Professional Practices Framework (IPPF)® organizes the authoritative body of knowledge, promulgated by The Institute of Internal Auditors, for the professional practice of internal auditing. The IPPF includes Global Internal Audit Standards, Topical Requirements, and Global Guidance.

The IPPF addresses current internal audit practices while enabling practitioners and stakeholders globally to be flexible and responsive to the ongoing needs for high-quality internal auditing in diverse environments and organizations of different purposes, sizes, and structures.

Mandatory

Global Internal Audit Standards guide the worldwide professional practice of internal auditing and serve as a basis for evaluating and elevating the quality of the internal audit function. At the heart of the Standards are 15 guiding principles that enable effective internal auditing. Each principle is supported by standards that contain requirements, considerations for implementation, and examples of evidence of conformance. Together, these elements help internal auditors achieve the principles and fulfill the Purpose of Internal Auditing.

Topical Requirements are designed to enhance the consistency and quality of internal audit services related to specific audit subjects and to support internal auditors performing engagements in those risk areas. Internal auditors must conform with the relevant requirements when the scope of an engagement includes one of the identified topics.

Topical Requirements strengthen the ongoing relevance of internal auditing in addressing the evolving risk landscape across industries and sectors.

Supplemental

Global Guidance supports the Standards by providing nonmandatory information, advice, and best practices for performing internal audit services. It is endorsed by The IIA through formal review and approval processes.

Global Practice Guides provide detailed approaches, step-by-step processes, and examples on subjects including:

- · Assurance and advisory services.
- Engagement planning, performance, and communication.
- · Financial services.
- · Fraud and other pervasive risks.
- Strategy and management of the internal audit function.
- · Public sector.
- · Sustainability.

Global Technology Audit Guides (GTAG®) provide auditors with the knowledge to perform assurance or consulting services related to an organization's information technology and information security risks and controls.

Fundamentals of the Global Internal Audit Standards

The Institute of Internal Auditors' Global Internal Audit Standards guide the worldwide professional practice of internal auditing and serve as a basis for evaluating and elevating the quality of the internal audit function. At the heart of the Standards are 15 guiding principles that enable effective internal auditing. Each principle is supported by standards that contain requirements, considerations for implementation, and examples of evidence of conformance. Together, these elements help internal auditors achieve the principles and fulfill the Purpose of Internal Auditing.



PURPOSE

of Internal Auditino

Internal Auditing and the Public Interest

Public interest encompasses the social and economic interests and overall well-being of a society and the organizations operating within that society (including those of employers, employees, investors, the business and financial community, clients, customers, regulators, and government). Questions of public interest are context specific and should weigh ethics, fairness, cultural norms and values, and potential disparate impacts on certain individuals and subgroups of society.

Internal auditing plays a critical role in enhancing an organization's ability to serve the public interest. While the primary function of internal auditing is to strengthen governance, risk management, and control processes, its effects extend beyond the organization. Internal auditing contributes to an organization's overall stability and sustainability by providing assurance on its operational efficiency, reliability of reporting, compliance with laws and/or regulations, safeguarding of assets, and ethical culture. This, in turn, fosters public trust and confidence in the organization and the broader systems of which it is a part.

The IIA is committed to setting standards with input from the public and to benefit the public. The International Internal Audit Standards Board is responsible for establishing and maintaining the Standards in the interest of the public. This is achieved through an extensive, ongoing due process overseen by an independent body, the IPPF Oversight Council. The process includes soliciting input from and considering the interests of various stakeholders—including internal audit practitioners, industry experts, government bodies, regulatory agencies, public representatives, and others—so that the Standards reflect the diverse needs and priorities of society.

Applicability and Elements of the Standards

The Global Internal Audit Standards set forth principles, requirements, considerations, and examples for the professional practice of internal auditing globally. The Standards apply to any individual or function that provides internal audit services, whether an organization employs internal auditors directly, contracts them through an external service provider, or both. Organizations receiving internal audit services vary in sector and industry affiliation, purpose, size, complexity, and structure.

The Standards apply to the internal audit function and individual internal auditors including the chief audit executive. While the chief audit executive is accountable for the internal audit function's implementation of and conformance with all principles and standards, all internal auditors are responsible for conforming with the principles and standards relevant to performing their job responsibilities, which are presented primarily in Domain II: Ethics and Professionalism and Domain V: Performing Internal Audit Services.

The Standards are organized into five domains:

- · Domain I: Purpose of Internal Auditing.
- · Domain II: Ethics and Professionalism.
- Domain III: Governing the Internal Audit Function.
- Domain IV: Managing the Internal Audit Function.
- Domain V: Performing Internal Audit Services.

Domains II through V contain the following elements:

- · Principles: broad descriptions of a related group of requirements and considerations.
- · Standards, which include:
 - Requirements: mandatory practices for internal auditing.
 - Considerations for Implementation: common and preferred practices to consider when implementing the requirements.
 - Examples of Evidence of Conformance: ways to demonstrate that the requirements of the Standards have been implemented.

The Standards use the word "must" in the Requirements sections and the words "should" and "may" to specify common and preferred practices in the Considerations for Implementation sections. Each standard ends with a list of examples of evidence. The examples are neither requirements nor the only ways to demonstrate conformance; rather, they are provided to help internal audit functions prepare for quality assessments, which rely on demonstrative evidence. The Standards use certain terms as defined in the accompanying glossary. To understand and implement the Standards correctly, it is necessary to understand and adopt the specific meanings and usage of the terms as described in the glossary.

Demonstrating Conformance with the Standards

The requirements, considerations for implementation, and examples of evidence of conformance are designed to help internal auditors conform with the Standards. While conformance with the requirements is expected, internal auditors occasionally may be unable to conform with a requirement yet still achieve the intent of the standard. Circumstances that may necessitate adjustments are often related to resource limitations or specific aspects of a sector, industry, and/or jurisdiction. In these exceptional circumstances, alternative actions should be implemented to meet the intent of the related standard. The chief audit executive is responsible for documenting and conveying the rationale for the deviation and the adopted alternative actions to the appropriate parties. Related requirements and information appear in Standard 4.1 Conformance with Global Internal Audit Standards and Domain III: Governing the Internal Audit Function together with its principles and standards. While the circumstances necessitating adjustments are too varied to list, the following section acknowledges two areas that consistently draw questions: small internal audit functions and those in the public sector.

Application in Small Internal Audit Functions

The internal audit function's ability to fully conform with the Standards may be affected by its size or the size of the organization. With limited resources, completing certain tasks may be challenging. Additionally, if the internal audit function comprises only one member, an adequate quality assurance and improvement program will require assistance from outside the internal audit function. (See also Standards 10.1 Financial Resource Management, 12.1 Internal Quality Assessment, and 12.3 Oversee and Improve Engagement Performance.)

Application in the Public Sector

While the Global Internal Audit Standards apply to all internal audit functions, internal auditors in the public sector work in a political environment under governance, organizational, and funding structures that may differ from those of the private sector. The nature of these structures and related conditions may be affected by the jurisdiction and level of government in which the internal audit function operates. Additionally, some terminology used in the public sector differs from that of the private sector. These differences may affect how internal audit functions in the public sector apply the Standards. The section "Applying the Global Internal Audit Standards in the Public Sector," which follows Domain V: Performing Internal Audit Services, describes strategies for conformance amid the circumstances and conditions unique to internal auditing in the public sector.

Glossary

activity under review - The subject of an internal audit engagement. Examples include an area, entity, operation, function, process, or system.

advisory services - Services through which internal auditors provide advice to an organization's stakeholders without providing assurance or taking on management responsibilities. The nature and scope of advisory services are subject to agreement with relevant stakeholders. Examples include advising on the design and implementation of new policies, processes, systems, and products; providing forensic services; providing training; and facilitating discussions about risks and controls. "Advisory services" are also known as "consulting services."

assurance - Statement intended to increase the level of stakeholders' confidence about an organization's governance, risk management, and control processes over an issue, condition, subject matter, or activity under review when compared to established criteria.

assurance services - Services through which internal auditors perform objective assessments to provide assurance. Examples of assurance services include compliance, financial, operational/performance, and technology engagements. Internal auditors may provide limited or reasonable assurance, depending on the nature, timing, and extent of procedures performed.

board - Highest-level body charged with governance, such as:

- · A board of directors.
- · An audit committee.
- · A board of governors or trustees.
- · A group of elected officials or political appointees.
- · Another body that has authority over the relevant governance functions.

In an organization that has more than one governing body, "board" refers to the body/bodies authorized to provide the internal audit function with the appropriate authority, role, and responsibilities.

If none of the above exist, "board" should be read as referring to the group or person that acts as the organization's highest-level governing body. Examples include the head of the organization and senior management.

chief audit executive - The leadership role responsible for effectively managing all aspects of the internal audit function and ensuring the quality performance of internal audit services in accordance with Global Internal Audit Standards. The specific job title and/or responsibilities may vary across organizations.

competency - Knowledge, skills, and abilities.

compliance - Adherence to laws, regulations, contracts, policies, procedures, and other requirements.

conflict of interest - A situation, activity, or relationship that may influence, or appear to influence, an internal auditor's ability to make objective professional judgments or perform responsibilities objectively.

control - Any action taken by management, the board, and other parties to manage risk and increase the likelihood that established objectives and goals will be achieved.

control processes - The policies, procedures, and activities designed and operated to manage risks to be within the level of an organization's risk tolerance.

criteria - In an engagement, specifications of the desired state of the activity under review (also called "evaluation criteria").

engagement - A specific internal audit assignment or project that includes multiple tasks or activities designed to accomplish a specific set of related objectives. See also "assurance services" and "advisory services."

engagement conclusion – Internal auditors' professional judgment about engagement findings when viewed collectively. The engagement conclusion should indicate satisfactory or unsatisfactory performance.

engagement objectives - Statements that articulate the purpose of an engagement and describe the specific goals to be achieved.

engagement planning - Process during which internal auditors gather information, assess and prioritize risks relevant to the activity under review, establish engagement objectives and scope, identify evaluation criteria, and create a work program for an engagement.

engagement results - The findings and conclusion of an engagement. Engagement results may also include recommendations and/or agreed upon action plans.

engagement supervisor - An internal auditor responsible for supervising an internal audit engagement, which may include training and assisting internal auditors as well as reviewing and approving the engagement work program, workpapers, final communication, and performance. The chief audit executive may be the engagement supervisor or may delegate such responsibilities.

engagement work program - A document that identifies the tasks to be performed to achieve the engagement objectives, the methodology and tools necessary, and the internal auditors assigned to perform the tasks. The work program is based on information obtained during engagement planning.

external service provider - Resource from outside the organization that provides relevant knowledge, skills, experience, and/or tools to support internal audit services.

finding - In an engagement, the determination that a gap exists between the evaluation criteria and the condition of the activity under review. Other terms, such as "observations," may be used.

fraud - Any intentional act characterized by deceit, concealment, dishonesty, misappropriation of assets or information, forgery, or violation of trust perpetrated by individuals or organizations to secure unjust or illegal personal or business advantage.

governance - The combination of processes and structures implemented by the board to inform, direct, manage, and monitor the activities of the organization toward the achievement of its objectives.

impact - The result or effect of an event. The event may have a positive or negative effect on the entity's strategy or business objectives.

independence - The freedom from conditions that may impair the ability of the internal audit function to carry out internal audit responsibilities in an unbiased manner.

inherent risk - The combination of internal and external risk factors that exists in the absence of any management actions.

integrity - Behavior characterized by adherence to moral and ethical principles, including demonstrating honesty and the professional courage to act based on relevant facts.

internal audit charter - A formal document that includes the internal audit function's mandate, organizational position, reporting relationships, scope of work, types of services, and other specifications.

internal audit function - A professional individual or group responsible for providing an organization with assurance and advisory services.

internal audit mandate -The internal audit function's authority, role, and responsibilities, which may be granted by the board and/or laws and regulations.

internal audit manual - The chief audit executive's documentation of the methodologies (policies, processes, and procedures) to guide and direct internal auditors within the internal audit function.

internal audit plan - A document, developed by the chief audit executive, that identifies the engagements and other internal audit services anticipated to be provided during a given period. The plan should be risk-based and dynamic, reflecting timely adjustments in response to changes affecting the organization.

internal auditing - An independent, objective assurance and advisory service designed to add value and improve an organization's operations. It helps an organization accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of governance, risk management, and control processes.

likelihood - The possibility that a given event will occur.

may - As used in the Considerations for Implementation of the Global Internal Audit Standards, the word "may" describes optional practices to implement the Requirements.

methodologies - Policies, processes, and procedures established by the chief audit executive to guide the internal audit function and enhance its effectiveness.

must - The Global Internal Audit Standards use the word "must" to specify an unconditional requirement.

objectivity - An unbiased mental attitude that allows internal auditors to make professional judgments, fulfill their responsibilities, and achieve the Purpose of Internal Auditing without compromise.

outsourcing - Contracting with an independent external provider of internal audit services. Fully outsourcing a function refers to contracting the entire internal audit function, and partially outsourcing (also called "cosourcing") indicates that only a portion of the services are outsourced.

periodically - At regularly occurring intervals, depending on the needs of the organization, including the internal audit function.

professional skepticism - Questioning and critically assessing the reliability of information.

public sector - Governments and all publicly controlled or publicly funded agencies, enterprises, and other entities that deliver programs, goods, or services to the public.

quality assurance and improvement program – A program established by the chief audit executive to evaluate and ensure the internal audit function conforms with the Global Internal Audit Standards, achieves performance objectives, and pursues continuous improvement. The program includes internal and external assessments.

residual risk - The portion of inherent risk that remains after management actions are implemented.

results of internal audit services - Outcomes, such as engagement conclusions, themes (such as effective practices or root causes), and conclusions at the level of the business unit or organization.

risk - The positive or negative effect of uncertainty on objectives.

risk and control matrix - A tool that facilitates the performance of internal auditing. It typically links business objectives, risks, control processes, and key information to support the internal audit process.

risk appetite - The types and amount of risk that an organization is willing to accept in the pursuit of its strategies and objectives.

risk assessment - The identification and analysis of risks relevant to the achievement of an organization's objectives. The significance of risks is typically assessed in terms of impact and likelihood.

risk management - A process to identify, assess, manage, and control potential events or situations to provide reasonable assurance regarding the achievement of the organization's objectives.

risk tolerance - Acceptable variations in performance related to achieving objectives.

root cause - Core issue or underlying reason for the difference between the criteria and the condition of an activity under review.

senior management - The highest level of executive management of an organization that is ultimately accountable to the board for executing the organization's strategic decisions, typically a group of persons that includes the chief executive officer or head of the organization.

should - As used in the Considerations for Implementation of the Global Internal Audit Standards, the word "should" describes practices that are preferred but not required.

significance - The relative importance of a matter within the context in which it is being considered, including quantitative and qualitative factors, such as magnitude, nature, relevance, and impact. Professional judgment assists internal auditors when evaluating the significance of matters within the context of the relevant objectives.

stakeholder - A party with a direct or indirect interest in an organization's activities and outcomes. Stakeholders may include the board, management, employees, customers, vendors, shareholders, regulatory agencies, financial institutions, external auditors, the public, and others.

workpapers - Documentation of the internal audit work done when planning and performing engagements. The documentation provides the supporting information for engagement findings and conclusions.

Domain I: Purpose of Internal Auditing

The purpose statement is intended to assist internal auditors an internal audit stakeholders in understanding and articulating the value of internal auditing.



Purpose Statement

Internal auditing strengthens the organization's ability to create, protect, and sustain value by providing the board and management with independent, risk-based, and objective assurance, advice, insight, and foresight.

Internal auditing enhances the organization's:

- · Successful achievement of its objectives.
- · Governance, risk management, and control processes.
- · Decision-making and oversight.
- · Reputation and credibility with its stakeholders.
- · Ability to serve the public interest.

Internal auditing is most effective when:

- It is performed by competent professionals in conformance with the Global Internal Audit Standards, which are set in the public interest.
- · The internal audit function is independently positioned with direct accountability to the board.
- · Internal auditors are free from undue influence and committed to making objective assessments.

Domain II: Ethics and Professionalism

The principles and standards in the Ethics and Professionalism domain of the Global Internal Audit Standards replace The IIA's former Code of Ethics and outline the behavioral expectations for professional internal auditors; including chief audit executives, other individuals, and any entities that provide internal audit services.



Conformance with these principles and standards instills trust in the profession of internal auditing, creates an ethical culture within the internal audit function, and provides the basis for reliance on internal auditors' work and judgment.

All internal auditors are required to conform with the standards of ethics and professionalism. If internal auditors are expected to abide by other codes of ethics, behavior, or conduct, such as those of an organization, conformance with the principles and standards of ethics and professionalism contained herein is still expected. The fact that a particular behavior is not mentioned in these principles and standards does not preclude it from being considered unacceptable or discreditable.

While internal auditors are responsible for their own conformance, the chief audit executive is expected to support and promote conformance with the principles and standards in the Ethics and Professionalism domain by providing opportunities for training and guidance. The chief audit executive may choose to delegate certain responsibilities for managing conformance but retains accountability for the ethics and professionalism of the internal audit function.

Principle 1 Demonstrate Integrity

Internal auditors demonstrate integrity in their work and behavior.

Integrity is behavior characterized by adherence to moral and ethical principles, including demonstrating honesty and the courage to act based on relevant facts, even when facing pressure to do otherwise, or when doing so might create potential adverse personal or organizational consequences. In simple terms, internal auditors are expected to tell the truth and do the right thing, even when it is uncomfortable or difficult.

Integrity is the foundation of the other principles of ethics and professionalism, including objectivity, competency, due professional care, and confidentiality. The integrity of internal auditors is essential to establishing trust and earning respect.

Standard 1.1 Honesty and Professional Courage

Requirements

Internal auditors must perform their work with honesty and professional courage.

Internal auditors must be truthful, accurate, clear, open, and respectful in all professional relationships and communications, even when expressing skepticism or offering an opposing viewpoint. Internal auditors must not make false, misleading, or deceptive statements, nor conceal or omit findings or other pertinent information from communications. Internal auditors must disclose all material facts known to them that, if not disclosed, could affect the organization's ability to make well-informed decisions.

Internal auditors must exhibit professional courage by communicating truthfully and taking appropriate action, even when confronted by dilemmas and difficult situations.

The chief audit executive must maintain a work environment where internal auditors feel supported when expressing legitimate, evidence-based engagement results, whether favorable or unfavorable.

Standard 1.2 Organization's Ethical Expectations

Requirements

Internal auditors must understand, respect, meet, and contribute to the legitimate and ethical expectations of the organization and must be able to recognize conduct that is contrary to those expectations.

Internal auditors must encourage and promote an ethics-based culture in the organization. If internal auditors identify behavior within the organization that is inconsistent with the organization's ethical expectations, they must report the concern according to applicable policies and procedures.

Standard 1.3 Legal and Ethical Behavior

Requirements

Internal auditors must not engage in or be a party to any activity that is illegal or discreditable to the organization or the profession of internal auditing or that may harm the organization or its employees.

Internal auditors must understand and abide by the laws and/or regulations relevant to the industry and jurisdictions in which the organization operates, including making disclosures as required.

If internal auditors identify legal or regulatory violations, they must report such incidents to individuals or entities that have the authority to take appropriate action, as specified in laws, regulations, and applicable policies and procedures.

Principle 2 Maintain Objectivity

Internal auditors maintain an impartial and unbiased attitude when performing internal audit services and making decisions.

Objectivity is an unbiased mental attitude that allows internal auditors to make professional judgments, fulfill their responsibilities, and achieve the Purpose of Internal Auditing without compromise. An independently positioned internal audit function supports internal auditors' ability to maintain objectivity.

Standard 2.1 Individual Objectivity

Requirements

Internal auditors must maintain professional objectivity when performing all aspects of internal audit services. Professional objectivity requires internal auditors to apply an impartial and unbiased mindset and make judgments based on balanced assessments of all relevant circumstances.

Internal auditors must be aware of and manage potential biases.

Standard 2.2 Safeguarding Objectivity

Requirements

Internal auditors must recognize and avoid or mitigate actual, potential, and perceived impairments to objectivity.

Internal auditors must not accept any tangible or intangible item, such as a gift, reward, or favor, that may impair or be presumed to impair objectivity.

Internal auditors must avoid conflicts of interest and must not be unduly influenced by their own interests or the interests of others, including senior management or others in a position of authority, or by the political environment or other aspects of their surroundings.

When performing internal audit services:

- Internal auditors must refrain from assessing specific activities for which they were
 previously responsible. Objectivity is presumed to be impaired if an internal auditor
 provides assurance services for an activity for which the internal auditor had responsibility
 within the previous 12 months.
- If the internal audit function is to provide assurance services where it had previously performed advisory services, the chief audit executive must confirm that the nature of the advisory services does not impair objectivity and must assign resources such that individual objectivity is managed. Assurance engagements for functions over which the chief audit executive has responsibility must be overseen by an independent party outside the internal audit function.
- If internal auditors are to provide advisory services relating to activities for which they had previous responsibilities, they must disclose potential impairments to the party requesting the services before accepting the engagement.

The chief audit executive must establish methodologies to address impairments to objectivity. Internal auditors must discuss impairments and take appropriate actions according to relevant methodologies.

Standard 2.3 Disclosing Impairments to Objectivity

Requirements

If objectivity is impaired in fact or appearance, the details of the impairment must be disclosed promptly to the appropriate parties.

If internal auditors become aware of an impairment that may affect their objectivity, they must disclose the impairment to the chief audit executive or a designated supervisor.

If the chief audit executive determines that an impairment is affecting an internal auditor's ability to perform duties objectively, the chief audit executive must discuss the impairment with the management of the activity under review, the board, and/or senior management and determine the appropriate actions to resolve the situation.

If an impairment that affects the reliability or perceived reliability of the engagement findings, recommendations, and/or conclusions is discovered after an engagement has been completed, the chief audit executive must discuss the concern with the management of the activity under review, the board, senior management, and/or other affected stakeholders and determine the appropriate actions to resolve the situation. (See also Standard 11.4 Errors and Omissions.)

If the objectivity of the chief audit executive is impaired in fact or appearance, the chief audit executive must disclose the impairment to the board. (See also Standard 7.1 Organizational Independence.)

Principle 3 Demonstrate Competency

Internal auditors apply the knowledge, skills, and abilities to fulfill their roles and responsibilities successfully.

Demonstrating competency requires developing and applying the knowledge, skills, and abilities to provide internal audit services. Because internal auditors provide a diverse array of services, the competencies needed by each internal auditor vary. In addition to possessing or obtaining the competencies needed to perform services, internal auditors improve the effectiveness and quality of services by pursuing professional development.

Standard 3.1 Competency

Requirements

Internal auditors must possess or obtain the competencies to perform their responsibilities successfully. The required competencies include the knowledge, skills, and abilities suitable for one's job position and responsibilities commensurate with their level of experience. Internal auditors must possess or develop knowledge of The IIA's Global Internal Audit Standards.

Internal auditors must engage only in those services for which they have or can attain the necessary competencies.

Each internal auditor is responsible for continually developing and applying the competencies necessary to fulfill their professional responsibilities. Additionally, the chief audit executive must ensure that the internal audit function collectively possesses the competencies to perform the internal audit services described in the internal audit charter or must obtain the necessary competencies. (See also Standards 7.2 Chief Audit Executive Qualifications and 10.2 Human Resources Management.)

Standard 3.2 Continuing Professional Development

Requirements

Internal auditors must maintain and continually develop their competencies to improve the effectiveness and quality of internal audit services. Internal auditors must pursue continuing professional development including education and training. Practicing internal auditors who have attained professional internal audit certifications must follow the continuing professional education policies and fulfill the requirements applicable to their certifications.

Principle 4 Exercise Due Professional Care

Internal auditors apply due professional care in planning and performing internal audit services.

The standards that embody exercising due professional care require:

- · Conformance with the Global Internal Audit Standards.
- · Consideration of the nature, circumstances, and requirements of the work to be performed.
- · Application of professional skepticism to critically assess and evaluate information.

Due professional care requires planning and performing internal audit services with the diligence, judgment, and skepticism possessed by prudent and competent internal auditors. When exercising due professional care, internal auditors perform in the best interests of those receiving internal audit services but are not expected to be infallible.

Standard 4.1 Conformance with the Global Internal Audit Standards

Requirements

Internal auditors must plan and perform internal audit services in accordance with the Global Internal Audit Standards.

The internal audit function's methodologies must be established, documented, and maintained in alignment with the Standards. Internal auditors must follow the Standards and the internal audit function's methodologies when planning and performing internal audit services and communicating results.

If the Standards are used in conjunction with requirements issued by other authoritative bodies, internal audit communications must also cite the use of the other requirements, as appropriate.

If laws or regulations prohibit internal auditors or the internal audit function from conforming with any part of the Standards, conformance with all other parts of the Standards is required and appropriate disclosures must be made.

When internal auditors are unable to conform with a requirement, the chief audit executive must document and communicate a description of the circumstance, alternative actions taken, the impact of the actions, and the rationale. Requirements related to disclosing nonconformance with the Standards are described in Standards 8.3 Quality, 12.1 Internal Quality Assessment, and 15.1 Final Engagement Communication.

Standard 4.2 Due Professional Care

Requirements

Internal auditors must exercise due professional care by assessing the nature, circumstances, and requirements of the services to be provided, including:

- · The organization's strategy and objectives.
- The interests of those for whom internal audit services are provided and the interests of other stakeholders.
- · Adequacy and effectiveness of governance, risk management, and control processes.
- · Cost relative to potential benefits of the internal audit services to be performed.
- · Extent and timeliness of work needed to achieve the engagement's objectives.
- · Relative complexity, materiality, or significance of risks to the activity under review.
- Probability of significant errors, fraud, noncompliance, and other risks that might affect objectives, operations, or resources.
- · Use of appropriate techniques, tools, and technology.

Standard 4.3 Professional Skepticism

Requirements

Internal auditors must exercise professional skepticism when planning and performing internal audit services.

To exercise professional skepticism, internal auditors must:

- · Maintain an attitude that includes inquisitiveness.
- · Critically assess the reliability of information.
- Be straightforward and honest when raising concerns and asking questions about inconsistent information.
- Seek additional evidence to make a judgment about information and statements that might be incomplete, inconsistent, false, or misleading.

Principle 5 Maintain Confidentiality

Internal auditors use and protect information appropriately.

Because internal auditors have unrestricted access to the data, records, and other information necessary to fulfill the internal audit mandate, they often receive information that is confidential, proprietary, and/or personally identifiable. (See also Principle 6 Authorized by the Board and its standards.) This includes information in physical and digital form as well as information derived from oral communication, such as formal or informal meeting discussions. Internal auditors must respect the value and ownership of information they receive by using it only for professional purposes and protecting it from unauthorized access or disclosure, internally and externally.

Standard 5.1 Use of Information

Requirements

Internal auditors must follow the relevant policies, procedures, laws, and regulations when using information. The information must not be used for personal gain or in a manner contrary or detrimental to the organization's legitimate and ethical objectives.

Standard 5.2 Protection of Information

Requirements

Internal auditors must be aware of their responsibilities for protecting information and demonstrate respect for the confidentiality, privacy, and ownership of information acquired when performing internal audit services or as the result of professional relationships.

Internal auditors must understand and abide by the laws, regulations, policies, and procedures related to confidentiality, information privacy, and information security that apply to the organization and internal audit function.

Considerations specifically relevant to the internal audit function include:

- · Custody, retention, and disposal of engagement records.
- · Release of engagement records to internal and external parties.
- · Handling of, access to, or copies of confidential information when it is no longer needed.

Internal auditors must not disclose confidential information to unauthorized parties unless there is a legal or professional responsibility to do so.

Internal auditors must manage the risk of exposing or disclosing information inadvertently.

The chief audit executive must ensure that the internal audit function and individuals assisting the internal audit function adhere to the same protection requirements.

Domain III: Governing the Internal Audit Function

Appropriate governance arrangements are essential to enable the internal audit function to be effective. This domain outlines the requirements for chief audit executives to work closely with the board to establish the internal audit function, position it independently, and oversee its performance. This domain also outlines senior management's responsibilities that support the board's responsibilities and promote strong governance of the internal audit function.

While the chief audit executive is responsible for the requirements in this domain, activities of the board and senior management are essential to the internal audit function's ability to fulfill the Purpose of Internal Auditing. These activities are identified as "essential conditions" in each standard and establish a necessary foundation for an effective dialogue between the board, senior management, and the chief audit executive, ultimately enabling an effective internal audit function.

Meeting with the Board and Senior Management

The chief audit executive must discuss this domain with the board and senior management. The discussions should focus on:

- · The Purpose of Internal Auditing as articulated in Domain I: Purpose of Internal Auditing.
- The essential conditions outlined under each of the standards in Domain III: Governing the Internal Audit Function.
- The potential impact on the effectiveness of the internal audit function if the board or senior management does not provide the support outlined in the essential conditions.

The discussions are needed to inform the board and senior management about the importance of the essential conditions and to gain alignment among their respective responsibilities.

The nature and frequency of these discussions depend on the circumstances and changes in the organization. For example, the chief audit executive should discuss these essential conditions with the board and senior management if:

- The Standards change significantly or a new internal audit function is created.
- · The chief audit executive is new to the role or organization.
- There are significant changes in the relationship between the board and the chief audit executive, such as a new chairperson to whom the chief audit executive reports or a change in the structure or composition of the board that affects this reporting relationship.
- There are significant changes in the structure or composition of senior management that affect the chief audit executive's positioning within the organization.

It is important for the chief audit executive to receive input from both the board and senior management. While the board may have the ultimate responsibility to approve the internal audit mandate, charter, and other requirements outlined in this domain, senior management typically has a key role in providing input to the board and the chief audit executive. Senior management's perspective is valuable and helps support the internal audit function's positioning and authority in the organization.

PURPOSE

Disagreements on Essential Conditions

If either the board or senior management disagrees with one or more of these essential conditions, the chief audit executive must emphasize – with examples – how absence of the condition(s) may affect the internal audit function's ability to fulfill its purpose or conform with specific standards. The chief audit executive should also discuss alternatives to the essential conditions that may provide the same results.

The chief audit executive may reach agreement with the board and senior management that one or more of the essential conditions are not necessary to conform with the Standards. In such instances, the chief audit executive must document:

- The reasons for agreeing that a particular condition is unnecessary.
- Alternative conditions that compensate for the absent conditions, to support the judgments of the board and senior management.

If the chief audit executive does not agree with the board's and/or senior management's reasons for not performing one or more of the conditions, the chief audit executive may conclude that the internal audit function cannot conform with the Standards. In such cases, the chief audit executive should document the reasons why the board and/or senior management will not perform the essential conditions. This documentation should be shared with the board and senior management to ensure clarity regarding their positions and made available to an external quality assessor.

If the chief audit executive position is open for any reason, the board should appoint one or more individuals in the interim.

Definition of Board

The glossary to the Global Internal Audit Standards defines the term "board" as the highest-level body charged with governance, such as:

- · A board of directors.
- · An audit committee.
- · A board of governors or trustees.
- · A group of elected officials or political appointees.
- Another body that has authority over the relevant governance functions.

In an organization that has more than one governing body, "board" refers to the body or bodies authorized to provide the internal audit function with the appropriate authority, role, and responsibilities.

If none of the above exists, "board" should be read as referring to the group or person that acts as the organization's highest-level governing body. Examples include the head of the organization and senior management.

If the nature of the board varies from the definition provided in the glossary, the chief audit executive should document the governing structure to which the internal audit function reports and how this structure is consistent with the definition of board. This may include environments where multiple boards exist, sometimes found in multi-national organizations or the public sector, or where a multi-tiered structure is in place.

Application of this Domain

The Standards apply to individuals and functions that provide internal audit services. Internal audit services may be provided by persons within or outside the organization for organizations that vary in purpose, size, complexity, and structure. The Standards apply whether an organization employs internal auditors directly, contracts them through an external service provider, or both. The chief audit executive's responsibilities are performed by one or more individuals designated by the board. The chief audit executive, whether employed directly by the organization or through an external service provider, is responsible for conformance with the Standards as demonstrated through the quality assurance and improvement program. In all cases, the board retains the responsibility to support and oversee the internal audit function.

Principle 6 Authorized by the Board

The board establishes, approves, and supports the mandate of the internal audit function.

The internal audit function receives its mandate from the board (or applicable law in certain public sector environments). The mandate specifies the authority, role, and responsibilities of the internal audit function and is documented in the internal audit charter. The mandate empowers the internal audit function to provide the board and senior management with objective assurance, advice, insight, and foresight. The internal audit function carries out the mandate by bringing a systematic, disciplined approach to evaluating and improving the effectiveness of governance, risk management, and control processes throughout the organization.

Standard 6.1 Internal Audit Mandate

Requirements

The chief audit executive must provide the board and senior management with the information necessary to establish the internal audit mandate. In those jurisdictions and industries where the internal audit function's mandate is prescribed wholly or partially in laws or regulations, the internal audit charter must include the legal requirements of the mandate. (See also Standard 6.2 Internal Audit Charter and "Applying the Global Internal Audit Standards in the Public Sector.")

To help the board and senior management determine the scope and types of internal audit services, the chief audit executive must coordinate with other internal and external assurance providers to gain an understanding of each other's roles and responsibilities. (See also Standard 9.5 Coordination and Reliance.)

The chief audit executive must document or reference the mandate in the internal audit charter, which is approved by the board. (See also Standard 6.2 Internal Audit Charter.)

Periodically, the chief audit executive must assess whether changes in circumstances justify a discussion with the board and senior management about the internal audit mandate. If so, the chief audit executive must discuss the internal audit mandate with the board and senior management to assess whether the authority, role, and responsibilities continue to enable the internal audit function to achieve its strategy and accomplish its objectives.

Essential Conditions

Board

- Discuss with the chief audit executive and senior management the appropriate authority, role, and responsibilities of the internal audit function.
- Approve the internal audit charter, which includes the internal audit mandate and the scope and types of internal audit services.

Senior Management

- Participate in discussions with the board and chief audit executive and provide input on expectations for the internal audit function that the board should consider when establishing the internal audit mandate.
- Support the internal audit mandate throughout the organization and promote the authority granted to the internal audit function.

Standard 6.2 Internal Audit Charter

Requirements

The chief audit executive must develop and maintain an internal audit charter that specifies, at a minimum, the internal audit function's:

- · Purpose of Internal Auditing.
- · Commitment to adhering to the Global Internal Audit Standards.
- Mandate, including scope and types of services to be provided, and the board's responsibilities and expectations regarding management's support of the internal audit function. (See also Standard 6.1 Internal Audit Mandate.)
- Organizational position and reporting relationships. (See also Standard 7.1 Organizational Independence.)

The chief audit executive must discuss the proposed charter with the board and senior management to confirm that it accurately reflects their understanding and expectations of the internal audit function.

Essential Conditions

Board

- Discuss with the chief audit executive and senior management other topics that should be included in the internal audit charter to enable an effective internal audit function.
- · Approve the internal audit charter.

Review the internal audit charter with the chief audit executive to consider changes
affecting the organization, such as the employment of a new chief audit executive or
changes in the type, severity, and interdependencies of risks to the organization.

Senior Management

 Communicate with the board and chief audit executive about management's expectations that should be considered for inclusion in the internal audit charter.

Standard 6.3 Board and Senior Management Support

Requirements

The chief audit executive must provide the board and senior management with the information needed to support and promote recognition of the internal audit function throughout the organization.

The chief audit executive must coordinate the internal audit function's board communications with senior management to support the board's ability to fulfill its requirements.

Essential Conditions

Board

- Champion the internal audit function to enable it to fulfill the Purpose of Internal Auditing and pursue its strategy and objectives.
- Work with senior management to enable the internal audit function's unrestricted access
 to the data, records, information, personnel, and physical properties necessary to fulfill the
 internal audit mandate.
- · Support the chief audit executive through regular, direct communications.
- Demonstrate support by:
 - Specifying that the chief audit executive reports to a level within the organization that allows the internal audit function to fulfill the internal audit mandate.
 - Approving the internal audit charter, internal audit plan, budget, and resource plan.
 - Making appropriate inquiries of senior management and the chief audit executive to determine whether any restrictions on the internal audit function's scope, access, authority, or resources limit the function's ability to carry out its responsibilities effectively.
 - Meeting periodically with the chief audit executive in sessions without senior management present.

Senior Management

- · Support recognition of the internal audit function throughout the organization.
- Work with the board and management throughout the organization to enable the internal audit function's unrestricted access to the data, records, information, personnel, and physical properties necessary to fulfill the internal audit mandate.

Principle 7 Positioned Independently

The board establishes and protects the internal audit function's independence and qualifications.

The board is responsible for enabling the independence of the internal audit function. Independence is defined as the freedom from conditions that impair the internal audit function's ability to carry out its responsibilities in an unbiased manner. The internal audit function is only able to fulfill the Purpose of Internal Auditing when the chief audit executive reports directly to the board, is qualified, and is positioned at a level within the organization that enables the internal audit function to discharge its services and responsibilities without interference.

Standard 7.1 Organizational Independence

Requirements

The chief audit executive must confirm to the board the organizational independence of the internal audit function at least annually. This includes communicating incidents where independence may have been impaired and the actions or safeguards employed to address the impairment.

The chief audit executive must document in the internal audit charter the reporting relationships and organizational positioning of the internal audit function, as determined by the board. (See also Standard 6.2 Internal Audit Charter.)

The chief audit executive must discuss with the board and senior management any current or proposed roles and responsibilities that have the potential to impair the internal audit function's independence, either in fact or appearance. The chief audit executive must advise the board and senior management of the types of safeguards to manage actual, potential, or perceived impairments.

When the chief audit executive has one or more ongoing roles beyond internal auditing, the responsibilities, nature of work, and established safeguards must be documented in the internal audit charter. If those areas of responsibility are subject to internal auditing, alternative processes to obtain assurance must be established, such as contracting with an objective, competent external assurance provider that reports independently to the board.

When the chief audit executive's nonaudit responsibilities are temporary, assurance for those areas must be provided by an independent third party during the temporary assignment and for the subsequent 12 months. Also, the chief audit executive must establish a plan to transition those responsibilities to management.

If the governing structure does not support organizational independence, the chief audit executive must document the characteristics of the governing structure limiting independence and any safeguards that may be employed to achieve this principle.

Essential Conditions

Board

- Establish a direct reporting relationship with the chief audit executive and the internal audit function to enable the internal audit function to fulfill its mandate.
- · Authorize the appointment and removal of the chief audit executive.
- Provide input to senior management to support the performance evaluation and remuneration of the chief audit executive.
- Provide the chief audit executive with opportunities to discuss significant and sensitive matters with the board, including meetings without senior management present.
- Require that the chief audit executive be positioned at a level in the organization that enables
 internal audit services and responsibilities to be performed without interference from
 management. This positioning provides the organizational authority and status to bring
 matters directly to senior management and escalate matters to the board when necessary.
- Acknowledge the actual or potential impairments to the internal audit function's
 independence when approving roles or responsibilities for the chief audit executive that
 are beyond the scope of internal auditing.
- Engage with senior management and the chief audit executive to establish appropriate safeguards if chief audit executive roles and responsibilities impair or appear to impair the internal audit function's independence.
- Engage with senior management to ensure that the internal audit function is free from interference when determining its scope, performing internal audit engagements, and communicating results.

- Position the internal audit function at a level within the organization that enables it to perform its services and responsibilities without interference, as directed by the board.
- Recognize the chief audit executive's direct reporting relationship with the board.
- Engage with the board and the chief audit executive to understand any potential impairments to the internal audit function's independence caused by nonaudit roles or other circumstances and support the implementation of appropriate safeguards to manage such impairments.
- Provide input to the board on the appointment and removal of the chief audit executive.
- Solicit input from the board on the performance evaluation and remuneration of the chief audit executive.

Standard 7.2 Chief Audit Executive Qualifications

Requirements

The chief audit executive must help the board understand the qualifications and competencies of a chief audit executive that are necessary to manage the internal audit function. The chief audit executive facilitates this understanding by providing information and examples of common and leading qualifications and competencies.

The chief audit executive must maintain and enhance the qualifications and competencies necessary to fulfill the roles and responsibilities expected by the board. (See also Principle 3 Demonstrate Competency and its standards.)

Essential Conditions

Board

- Review the requirements necessary for the chief audit executive to manage the internal audit function, as described in Domain IV: Managing the Internal Audit Function.
- Approve the chief audit executive's roles and responsibilities and identify the necessary qualifications, experience, and competencies to carry out these roles and responsibilities.
- Engage with senior management to appoint a chief audit executive with the qualifications and competencies necessary to manage the internal audit function effectively and ensure the quality performance of internal audit services.

Senior Management

- Engage with the board to determine the chief audit executive's qualifications, experience, and competencies.
- Enable the appointment, development, and remuneration of the chief audit executive through the organization's human resources processes.

Principle 8 Overseen by the Board

The board oversees the internal audit function to ensure the function's effectiveness.

Board oversight is essential to enable the overall effectiveness of the internal audit function. Achieving this principle requires collaborative and interactive communication between the board and the chief audit executive as well as the board's support in ensuring the internal audit function obtains sufficient resources to fulfill the internal audit mandate. Additionally, the board receives assurance about the quality of the performance of the chief audit executive and the internal audit function through the quality assessment and improvement program, including the board's direct review of the results of the external quality assessment.

Standard 8.1 Board Interaction

Requirements

The chief audit executive must provide the board with the information needed to conduct its oversight responsibilities. This information may be specifically requested by the board or may be, in the judgment of the chief audit executive, valuable for the board to exercise its oversight responsibilities.

The chief audit executive must report to the board and senior management:

- The internal audit plan and budget and subsequent significant revisions to them. (See also Standards 6.3 Board and Senior Management Support and 9.4 Internal Audit Plan.)
- Changes potentially affecting the mandate or charter. (See also Standards 6.1 Internal Audit Mandate and 6.2 Internal Audit Charter.)
- · Potential impairments to independence. (See also Standard 7.1 Organizational Independence.)
- Results of internal audit services, including conclusions, themes, assurance, advice, insights, and monitoring results. (See also Standards 11.3 Communicating Results, 14.5 Engagement Conclusions, and 15.2 Confirming the Implementation of Recommendations or Action Plans.)
- Results from the quality assurance and improvement program. (See also Standards 8.3 Quality, 8.4 External Quality Assessment, 12.1 Internal Quality Assessment, and 12.2 Performance Measurement.)

There may be instances when the chief audit executive disagrees with senior management or other stakeholders on the scope, findings, or other aspects of an engagement that may affect the ability of the internal audit function to execute its responsibilities. In such cases, the chief audit executive must provide the board with the facts and circumstances to allow the board to consider whether, in its oversight role, it should intervene with senior management or other stakeholders.

Essential Conditions

Board

- Communicate with the chief audit executive to understand how the internal audit function is fulfilling its mandate.
- Communicate the board's perspective on the organization's strategies, objectives, and risks to assist the chief audit executive with determining internal audit priorities.
- Set expectations with the chief audit executive for:
 - The frequency with which the board wants to receive communications from the chief audit executive.
 - The criteria for determining which issues should be escalated to the board, such as significant risks that exceed the board's risk tolerance.
 - The process for escalating matters of importance to the board.

- Gain an understanding of the effectiveness of the organization's governance, risk
 management, and control processes based on the results of internal audit engagements
 and discussions with senior management.
- Discuss with the chief audit executive disagreements with senior management or other stakeholders and provide support as necessary to enable the chief audit executive to perform the responsibilities outlined in the internal audit mandate.

Senior Management

- Communicate senior management's perspective on the organization's strategies, objectives, and risks to assist the chief audit executive with determining internal audit priorities.
- Assist the board in understanding the effectiveness of the organization's governance, risk management, and control processes.
- Work with the board and the chief audit executive on the process for escalating matters
 of importance to the board.

Standard 8.2 Resources

Requirements

The chief audit executive must evaluate whether internal audit resources are sufficient to fulfill the internal audit mandate and achieve the internal audit plan. If not, the chief audit executive must develop a strategy to obtain sufficient resources and inform the board about the impact of insufficient resources and how any resource shortfalls will be addressed.

Essential Conditions

Board

- Collaborate with senior management to provide the internal audit function with sufficient resources to fulfill the internal audit mandate and achieve the internal audit plan.
- Discuss with the chief audit executive, at least annually, the sufficiency, both in numbers and capabilities, of internal audit resources to fulfill the internal audit mandate and achieve the internal audit plan.
- · Consider the impact of insufficient resources on the internal audit mandate and plan.
- Engage with senior management and the chief audit executive on remedying the situation if the resources are determined to be insufficient.

- Engage with the board to provide the internal audit function with sufficient resources to fulfill the internal audit mandate and achieve the internal audit plan.
- Engage with the board and the chief audit executive on any issues of insufficient resources and how to remedy the situation.

Standard 8.3 Quality

Requirements

The chief audit executive must develop, implement, and maintain a quality assurance and improvement program that covers all aspects of the internal audit function. The program includes two types of assessments:

- External assessments. (See also Standard 8.4 External Quality Assessment.)
- Internal assessments. (See also Standard 12.1 Internal Quality Assessment.)

At least annually, the chief audit executive must communicate the results of the internal quality assessment to the board and senior management. The results of the external quality assessments must be reported when completed. In both cases, such communications include:

- The internal audit function's conformance with the Standards and achievement of performance objectives.
- If applicable, compliance with laws and/or regulations relevant to internal auditing.
- If applicable, plans to address the internal audit function's deficiencies and opportunities for improvement.

Essential Conditions

Board

- Discuss with the chief audit executive the quality assurance and improvement program, as outlined in Domain IV: Managing the Internal Audit Function.
- Approve the internal audit function's performance objectives at least annually. (See also Standard 12.2 Performance Management.)
- Assess the effectiveness and efficiency of the internal audit function. Such an assessment includes:
 - Reviewing the internal audit function's performance objectives, including its conformance with the Standards, laws and regulations; ability to meet the internal audit mandate; and progress towards completion of the internal audit plan.
 - Considering the results of the internal audit function's quality assurance and improvement program.
 - Determining the extent to which the internal audit function's performance objectives are being met.

- · Provide input on the internal audit function's performance objectives.
- Participate with the board in an annual assessment of the chief audit executive and internal audit function.

Standard 8.4 External Quality Assessment

Requirements

The chief audit executive must develop a plan for an external quality assessment and discuss the plan with the board. The external assessment must be performed at least once every five years by a qualified, independent assessor or assessment team. The requirement for an external quality assessment may also be met through a self-assessment with independent validation.

When selecting the independent assessor or assessment team, the chief audit executive must ensure at least one person holds an active Certified Internal Auditor® designation.

Essential Conditions

Board

- Discuss with the chief audit executive the plans to have an external quality assessment of the internal audit function conducted by an independent, qualified assessor or assessment team.
- Collaborate with senior management and the chief audit executive to determine the scope and frequency of the external quality assessment.
- Consider the responsibilities and regulatory requirements of the internal audit function
 and the chief audit executive, as described in the internal audit charter, when defining the
 scope of the external quality assessment.
- Review and approve the chief audit executive's plan for the performance of an external quality assessment. Such approval should cover, at a minimum:
 - The scope and frequency of assessments.
 - The competencies and independence of the external assessor or assessment team.
 - The rationale for choosing to conduct a self-assessment with independent validation instead of an external quality assessment.
- Require receipt of the complete results of the external quality assessment or selfassessment with independent validation directly from the assessor.
- Review and approve the chief audit executive's action plans to address identified deficiencies and opportunities for improvement, if applicable.
- Approve a timeline for completion of the action plans and monitor the chief audit executive's progress.

- Collaborate with the board and the chief audit executive to determine the scope and frequency of the external quality assessment.
- Review the results of the external quality assessment, collaborate with the chief audit
 executive and board to agree on action plans that address identified deficiencies and
 opportunities for improvement, if applicable, and agree on a timeline for completion of
 the action plans.

Domain IV: Managing the Internal Audit Function

The chief audit executive is responsible for managing the internal audit function in accordance with the internal audit charter and Global Internal Audit Standards. This responsibility includes strategic planning, obtaining and deploying resources, building relationships, communicating with stakeholders, and ensuring and enhancing the performance of the function.



The individual responsible for managing the internal audit function is expected to conform with the Standards including performing the responsibilities described in this domain whether the individual is directly employed by the organization or contracted through an external service provider. The specific job title and responsibilities may vary across organizations.

The chief audit executive may delegate appropriate responsibilities to other qualified professionals in the internal audit function but retains ultimate accountability.

The direct reporting relationship between the board and the chief audit executive enables the internal audit function to fulfill its mandate. (See also Standard 7.1 Organizational Independence.) In addition, the chief audit executive typically has an administrative reporting line to the highest-ranking person in senior management, such as the chief executive officer, to support day-to-day activities and establish the status and authority necessary to ensure the results of the internal audit services are given due consideration.

Principle 9 Plan Strategically

The chief audit executive plans strategically to position the internal audit function to fulfill its mandate and achieve long-term success.

Planning strategically requires the chief audit executive to understand the internal audit mandate and the organization's governance, risk management, and control processes. A properly resourced and positioned internal audit function develops and implements a strategy to support the organization's success. In addition, the chief audit executive creates and implements methodologies to guide the internal audit function and develop the internal audit plan.

Standard 9.1 Understanding Governance, Risk Management, and Control Processes

Requirements

To develop an effective internal audit strategy and plan, the chief audit executive must understand the organization's governance, risk management, and control processes.

To understand governance processes, the chief audit executive must consider how the organization:

- · Establishes strategic objectives and makes strategic and operational decisions.
- · Oversees risk management and control.
- · Promotes an ethical culture.
- · Delivers effective performance management and accountability.
- · Structures its management and operating functions.
- · Communicates risk and control information throughout the organization.
- Coordinates activities and communications among the board, internal and external providers of assurance services, and management.

To understand risk management and control processes, the chief audit executive must consider how the organization identifies and assesses significant risks and selects appropriate control processes. This includes understanding how the organization identifies and manages the following key risk areas:

- · Reliability and integrity of financial and operational information.
- · Effectiveness and efficiency of operations and programs.
- · Safeguarding of assets.
- · Compliance with laws and/or regulations.

Standard 9.2 Internal Audit Strategy

Requirements

The chief audit executive must develop and implement a strategy for the internal audit function that supports the strategic objectives and success of the organization and aligns with the expectations of the board, senior management, and other key stakeholders.

An internal audit strategy is a plan of action designed to achieve a long-term or overall objective. The internal audit strategy must include a vision, strategic objectives, and supporting initiatives for the internal audit function. An internal audit strategy helps guide the internal audit function toward the fulfillment of the internal audit mandate.

The chief audit executive must review the internal audit strategy with the board and senior management periodically.

Standard 9.3 Methodologies

Requirements

The chief audit executive must establish methodologies to guide the internal audit function in a systematic and disciplined manner to implement the internal audit strategy, develop the internal audit plan, and conform with the Standards. The chief audit executive must evaluate the effectiveness of the methodologies and update them as necessary to improve the internal audit function and respond to significant changes that affect the function. The chief audit executive must provide internal auditors with training on the methodologies. (See also Principles 13 Plan Engagements Effectively, 14 Conduct Engagement Work, and 15 Communicate Engagement Results and Monitor Action Plans, and their standards.)

Standard 9.4 Internal Audit Plan

Requirements

The chief audit executive must create an internal audit plan that supports the achievement of the organization's objectives.

The chief audit executive must base the internal audit plan on a documented assessment of the organization's strategies, objectives, and risks. This assessment must be informed by input from the board and senior management as well as the chief audit executive's understanding of the organization's governance, risk management, and control processes. The assessment must be performed at least annually.

The internal audit plan must:

- Consider the internal audit mandate and the full range of agreed-to internal audit services.
- Specify internal audit services that support the evaluation and improvement of the organization's governance, risk management, and control processes.
- Consider coverage of information technology governance, fraud risk, the effectiveness of the organization's compliance and ethics programs, and other high-risk areas.
- Identify the necessary human, financial, and technological resources necessary to complete the plan.
- Be dynamic and updated timely in response to changes in the organization's business, risks operations, programs, systems, controls, and organizational culture.

The chief audit executive must review and revise the internal audit plan as necessary and communicate timely to the board and senior management:

- The impact of any resource limitations on internal audit coverage.
- The rationale for not including an assurance engagement in a high-risk area or activity in the plan.

- Conflicting demands for services between major stakeholders, such as high-priority requests based on emerging risks and requests to replace planned assurance engagements with advisory engagements.
- · Limitations on scope or restrictions on access to information.

The chief audit executive must discuss the internal audit plan, including significant interim changes, with the board and senior management. The plan and significant changes to the plan must be approved by the board.

Standard 9.5 Coordination and Reliance

Requirements

The chief audit executive must coordinate with internal and external providers of assurance services and consider relying upon their work. Coordination of services minimizes duplication of efforts, highlights gaps in coverage of key risks, and enhances the overall value added by providers.

If unable to achieve an appropriate level of coordination, the chief audit executive must raise any concerns with senior management and, if necessary, the board.

When the internal audit function relies on the work of other assurance service providers, the chief audit executive must document the basis for that reliance and is still responsible for the conclusions reached by the internal audit function.

Principle 10 Manage Resources

The chief audit executive manages resources to implement the internal audit function's strategy and achieve its plan and mandate.

Managing resources requires obtaining and deploying financial, human, and technological resources effectively. The chief audit executive needs to obtain the resources required to perform internal audit responsibilities and deploy the resources according to the methodologies established for the internal audit function.

Standard 10.1 Financial Resource Management

Requirements

The chief audit executive must manage the internal audit function's financial resources.

The chief audit executive must develop a budget that enables the successful implementation of the internal audit strategy and achievement of the plan. The budget includes the resources necessary for the function's operation, including training and acquisition of technology and tools. The chief audit executive must manage the day-to-day activities of the internal audit function effectively and efficiently, in alignment with the budget.

The chief audit executive must seek budget approval from the board. The chief audit executive must communicate promptly the impact of insufficient financial resources to the board and senior management.

Standard 10.2 Human Resources Management

Requirements

The chief audit executive must establish an approach to recruit, develop, and retain internal auditors who are qualified to successfully implement the internal audit strategy and achieve the internal audit plan.

The chief audit executive must strive to ensure that human resources are appropriate, sufficient, and effectively deployed to achieve the approved internal audit plan. *Appropriate* refers to the mix of knowledge, skills, and abilities; *sufficient* refers to the quantity of resources; and *effective deployment* refers to assigning resources in a way that optimizes the achievement of the internal audit plan.

The chief audit executive must communicate with the board and senior management regarding the appropriateness and sufficiency of the internal audit function's human resources. If the function lacks appropriate and sufficient human resources to achieve the internal audit plan, the chief audit executive must determine how to obtain the resources or communicate timely to the board and senior management the impact of the limitations. (See also Standard 8.2 Resources.)

The chief audit executive must evaluate the competencies of individual internal auditors within the internal audit function and encourage professional development. The chief audit executive must collaborate with internal auditors to help them develop their individual competencies through training, supervisory feedback, and/or mentoring. (See also Standard 3.1 Competency.)

Standard 10.3 Technological Resources

Requirements

The chief audit executive must strive to ensure that the internal audit function has technology to support the internal audit process. The chief audit executive must regularly evaluate the technology used by the internal audit function and pursue opportunities to improve effectiveness and efficiency.

When implementing new technology, the chief audit executive must implement appropriate training for internal auditors in the effective use of technological resources. The chief audit executive must collaborate with the organization's information technology and information security functions to implement technological resources properly.

The chief audit executive must communicate the impact of technology limitations on the effectiveness or efficiency of the internal audit function to the board and senior management.

Principle 11 Communicate Effectively

The chief audit executive guides the internal audit function to communicate effectively with its stakeholders.

Effective communication requires building relationships, establishing trust, and enabling stakeholders to benefit from the results of internal audit services. The chief audit executive is responsible for helping the internal audit function establish ongoing communication with stakeholders to build trust and foster relationships. Additionally, the chief audit executive oversees the internal audit function's formal communications with the board and senior management to enable quality and provide insights based on the results of internal audit services.

Standard 11.1 Building Relationships and Communicating with Stakeholders

Requirements

The chief audit executive must develop an approach for the internal audit function to build relationships and trust with key stakeholders, including the board, senior management, operational management, regulators, and internal and external assurance providers and other consultants.

The chief audit executive must promote formal and informal communication between the internal audit function and stakeholders, contributing to the mutual understanding of:

- · Organizational interests and concerns.
- · Approaches for identifying and managing risks and providing assurance.
- · Roles and responsibilities of relevant parties and opportunities for collaboration.
- · Relevant regulatory requirements.
- · Significant organizational processes, including financial reporting.

Standard 11.2 Effective Communication

Requirements

The chief audit executive must establish and implement methodologies to promote accurate, objective, clear, concise, constructive, complete, and timely internal audit communications.

Standard 11.3 Communicating Results

Requirements

The chief audit executive must communicate the results of internal audit services to the board and senior management periodically and for each engagement as appropriate. The chief audit executive must understand the expectations of the board and senior management regarding the nature and timing of communications.

The results of internal audit services can include:

- · Engagement conclusions.
- · Themes such as effective practices or root causes.
- · Conclusions at the level of the business unit or organization.

Engagement Conclusions

The chief audit executive must review and approve final engagement communications, which include engagement conclusions, and decide to whom and how they will be disseminated before they are issued. If these duties are delegated to other internal auditors, the chief audit executive retains overall responsibility. The chief audit executive must seek the advice of legal counsel and/or senior management as required before releasing final communications to parties outside the organization, unless otherwise required or restricted by laws and/or regulations. (See also Standards 11.4 Errors and Omissions, 11.5 Communicating the Acceptance of Risks, and 15.1 Final Engagement Communication.)

Themes

The findings and conclusions of multiple engagements, when viewed holistically, may reveal patterns or trends, such as root causes. When the chief audit executive identifies themes related to the organization's governance, risk management, and control processes, the themes must be communicated timely, along with insights, advice, and/or conclusions, to the board and senior management.

Conclusions at the Level of the Business Unit or Organization

The chief audit executive may be required to make a conclusion at the level of the business unit or organization about the effectiveness of governance, risk management, and/or control processes, due to industry requirements, laws and/or regulations, or the expectations of the board, senior management, and/or other stakeholders. Such a conclusion reflects the professional judgment of the chief audit executive based on multiple engagements and must be supported by relevant, reliable, and sufficient information.

When communicating such a conclusion to the board or senior management, the chief audit executive must include:

- · A summary of the request.
- The criteria used as a basis for the conclusion; for example, a governance framework or risk and control framework.
- · The scope, including limitations and the period to which the conclusion pertains.
- · A summary of the information that supports the conclusion.
- · A disclosure of reliance on the work of other assurance providers, if any.

Standard 11.4 Errors and Omissions

Requirements

If a final engagement communication contains a significant error or omission, the chief audit executive must communicate corrected information promptly to all parties who received the original communication.

Significance is determined according to criteria agreed upon with the board.

Standard 11.5 Communicating the Acceptance of Risks

Requirements

The chief audit executive must communicate unacceptable levels of risk.

When the chief audit executive concludes that management has accepted a level of risk that exceeds the organization's risk appetite or risk tolerance, the matter must be discussed with senior management. If the chief audit executive determines that the matter has not been resolved by senior management, the matter must be escalated to the board. It is not the responsibility of the chief audit executive to resolve the risk.

Principle 12 Enhance Quality

The chief audit executive is responsible for the internal audit function's conformance with the Global Internal Audit Standards and continuous performance improvement.

Quality is a combined measure of conformance with the Global Internal Audit Standards and the achievement of the internal audit function's performance objectives. Therefore, a quality assurance and improvement program is designed to evaluate and promote the internal audit function's conformance with the Standards, achievement of performance objectives, and pursuit of continuous improvement. The program includes internal and external assessments. (See also Standards 8.3 Quality and 8.4 External Quality Assessment.)

The chief audit executive is responsible for ensuring that the internal audit function is continuously seeking improvement. This requires developing measures to assess the performance of internal audit engagements, internal auditors, and the internal audit function. These measures form the basis for evaluating progress toward performance objectives including continuous improvement.

Standard 12.1 Internal Quality Assessment

Requirements

The chief audit executive must develop and conduct internal assessments of the internal audit function's conformance with the Global Internal Audit Standards and progress toward performance objectives.

The chief audit executive must establish a methodology for internal assessments, as described in Standard 8.3 Quality, that includes:

- Ongoing monitoring of the internal audit function's conformance with the Standards and progress toward performance objectives.
- Periodic self-assessments or assessments by other persons within the organization with sufficient knowledge of internal audit practices to evaluate conformance with the Standards.
- Communication with the board and senior management about the results of internal assessments.

Based on the results of periodic self-assessments, the chief audit executive must develop action plans to address instances of nonconformance with the Standards and opportunities for improvement, including a proposed timeline for actions. The chief audit executive must communicate the results of periodic self-assessments and action plans to the board and senior management. (See also Standards 8.1 Board Interaction, 8.3 Quality, and 9.3 Methodologies.)

Internal assessments must be documented and included in the evaluation conducted by an independent third party as part of the organization's external quality assessment. (See also Standard 8.4 External Quality Assessment.)

If nonconformance with the Standards affects the overall scope or operation of the internal audit function, the chief audit executive must disclose to the board and senior management the nonconformance and its impact.

Standard 12.2 Performance Measurement

Requirements

The chief audit executive must develop objectives to evaluate the internal audit function's performance. The chief audit executive must consider the input and expectations of the board and senior management when developing the performance objectives.

The chief audit executive must develop a performance measurement methodology to assess progress toward achieving the function's objectives and to promote the continuous improvement of the internal audit function.

When assessing the internal audit function's performance, the chief audit executive must solicit feedback from the board and senior management as appropriate.

The chief audit executive must develop an action plan to address issues and opportunities for improvement.

Standard 12.3 Oversee and Improve Engagement Performance

Requirements

The chief audit executive must establish and implement methodologies for engagement supervision, quality assurance, and the development of competencies.

- The chief audit executive or an engagement supervisor must provide internal auditors with guidance throughout the engagement, verify work programs are complete, and confirm engagement workpapers adequately support findings, conclusions, and recommendations.
- To assure quality, the chief audit executive must verify whether engagements are performed in conformance with the Standards and the internal audit function's methodologies.
- To develop competencies, the chief audit executive must provide internal auditors with feedback about their performance and opportunities for improvement.

The extent of supervision required depends on the maturity of the internal audit function, the proficiency and experience of internal auditors, and the complexity of engagements.

The chief audit executive is responsible for supervising engagements, whether the engagement work is performed by the internal audit staff or by other service providers. Supervisory responsibilities may be delegated to appropriate and qualified individuals, but the chief audit executive retains ultimate responsibility.

The chief audit executive must ensure that evidence of supervision is documented and retained, according to the internal audit function's established methodologies.

Domain V: Performing Internal Audit Services

Performing internal audit services requires internal auditors to effectively plan engagements, conduct the engagement work to develop findings and conclusions, collaborate with management to identify recommendations and/ or action plans that address the findings, and communicate with management and the employees responsible for the activity under review throughout the engagement and after it closes.

Although the standards for performing engagements are presented in a sequence, the steps in performing engagements are not always distinct, linear, and sequential. In practice, the order in which steps are performed may vary by engagement and have overlapping and iterative aspects. For example, engagement planning includes gathering information and assessing risks, which may continue throughout the engagement. Each step may affect another or the engagement as a whole. Therefore, internal auditors should review and understand all standards in this domain before beginning an engagement.

Internal audit services involve providing assurance, advice, or both. Internal auditors are expected to apply and conform with the Standards when performing engagements, whether they are providing assurance or advice, except when otherwise specified in individual standards.

Assurance services are intended to provide confidence about governance, risk management, and control processes to the organization's stakeholders, especially the board, senior management, and the management of the activity under review. Through assurance services, internal auditors provide objective assessments of the differences between the existing conditions of an activity under review and a set of evaluation criteria. Internal auditors evaluate the differences to determine whether there are reportable findings and to provide a conclusion about the engagement results, including reporting when processes are effective.

Internal auditors may initiate advisory services or perform them at the request of the board, senior management, or the management of an activity. The nature and scope of advisory services may be subject to agreement with the party requesting the services. Examples of advisory services include advising on the design and implementation of new policies, processes, systems, and products; providing forensic services; providing training; and facilitating discussions about risks and controls. When performing advisory services, internal auditors are expected to maintain objectivity by not taking on management responsibility. For example, internal auditors may perform advisory services as individual engagements, but if the chief audit executive takes on responsibilities beyond internal auditing, then appropriate safeguards must be implemented to maintain the internal audit function's independence. (See also Standard 7.1 Organizational Independence.)

Internal audit services are performed as described in the chief audit executive's established methodologies. (See also Standard 9.3 Methodologies.) The chief audit executive may delegate appropriate responsibility to other qualified professionals in the internal audit function but retains ultimate accountability.

PURPOSE

Principle 13 Plan Engagements Effectively

Internal auditors plan each engagement using a systematic, disciplined approach.

The Global Internal Audit Standards, along with the methodologies established by the chief audit executive, form the foundation of internal auditors' systematic, disciplined approach to planning engagements. Internal auditors are responsible for effectively communicating at all stages of the engagement.

Engagement planning starts with understanding the initial expectations for the engagement and the reason the engagement was included in the internal audit plan. When planning engagements, internal auditors gather the information that enables them to understand the organization and the activity under review and to assess the risks relevant to the activity. The engagement risk assessment allows internal auditors to identify and prioritize the risks to determine the engagement objectives and scope. Internal auditors also identify the criteria and resources needed to perform the engagement and develop an engagement work program, which describes the specific engagement steps to be performed.

Standard 13.1 Engagement Communication

Requirements

Internal auditors must communicate effectively throughout the engagement. (See also Principle 11 Communicate Effectively and its related standards and Standard 15.1 Final Engagement Communication.)

Internal auditors must communicate the objectives, scope, and timing of the engagement with management. Subsequent changes must be communicated with management timely. (See also Standard 13.3 Engagement Objectives and Scope.)

At the end of an engagement, if internal auditors and management do not agree on the engagement results, internal auditors must discuss and try to reach a mutual understanding of the issue with the management of the activity under review. If a mutual understanding cannot be reached, internal auditors must not be obligated to change any portion of the engagement results unless there is a valid reason to do so. Internal auditors must follow an established methodology to allow both parties to express their positions regarding the content of the final engagement communication and the reasons for any differences of opinion regarding the engagement results. (See also Standards 9.3 Methodologies and 14.4 Recommendations and Action Plans.)

Standard 13.2 Engagement Risk Assessment

Requirements

Internal auditors must develop an understanding of the activity under review to assess the relevant risks. For advisory services, a formal, documented risk assessment may not be necessary, depending on the agreement with relevant stakeholders.

To develop an adequate understanding, internal auditors must identify and gather reliable, relevant, and sufficient information regarding:

- · The organization's strategies, objectives, and risks relevant to the activity under review.
- · The organization's risk tolerance, if established.
- The risk assessment supporting the internal audit plan.
- The governance, risk management, and control processes of the activity under review.
- Applicable frameworks, guidance, and other criteria that can be used to evaluate the effectiveness of those processes.

Internal auditors must review the gathered information to understand how processes are intended to operate.

Internal auditors must identify the risks to review by:

- · Identifying the potentially significant risks to the objectives of the activity under review.
- · Considering specific risks related to fraud.
- · Evaluating the significance of the risks and prioritizing them for review.

Internal auditors must identify the criteria that management uses to measure whether the activity is achieving its objectives.

When internal auditors have identified the relevant risks for an activity under review in past engagements, only a review and update of the previous engagement risk assessment is required.

Standard 13.3 Engagement Objectives and Scope

Requirements

Internal auditors must establish and document the objectives and scope for each engagement.

The engagement objectives must articulate the purpose of the engagement and describe the specific goals to be achieved, including those mandated by laws and/or regulations.

The scope must establish the engagement's focus and boundaries by specifying the activities, locations, processes, systems, components, time period to be covered in the engagement, and other elements to be reviewed, and be sufficient to achieve the engagement objectives.

Internal auditors must consider whether the engagement is intended to provide assurance or advisory services because stakeholder expectations and the requirements of the Standards differ depending on the type of engagement.

Scope limitations must be discussed with management when identified, with a goal of achieving resolution. Scope limitations are assurance engagement conditions, such as resource constraints or restrictions on access to personnel, facilities, data, and information, that prevent internal auditors from performing the work as expected in the audit work program. (See also Standard 13.5 Engagement Resources.)

If a resolution cannot be achieved with management, the chief audit executive must elevate the scope limitation issue to the board according to an established methodology.

Internal auditors must have the flexibility to make changes to the engagement objectives and scope when audit work identifies the need to do so as the engagement progresses.

The chief audit executive must approve the engagement objectives and scope and any changes that occur during the engagement.

Standard 13.4 Evaluation Criteria

Requirements

Internal auditors must identify the most relevant criteria to be used to evaluate the aspects of the activity under review defined in the engagement objectives and scope. For advisory services, the identification of evaluation criteria may not be necessary, depending on the agreement with relevant stakeholders.

Internal auditors must assess the extent to which the board and senior management have established adequate criteria to determine whether the activity under review has accomplished its objectives and goals. If such criteria are adequate, internal auditors must use them for the evaluation. If the criteria are inadequate, internal auditors must identify appropriate criteria through discussion with the board and/or senior management.

Standard 13.5 Engagement Resources

Requirements

When planning an engagement, internal auditors must identify the types and quantity of resources necessary to achieve the engagement objectives.

Internal auditors must consider:

- · The nature and complexity of the engagement.
- The time frame within which the engagement is to be completed.
- Whether the available financial, human, and technological resources are appropriate and sufficient to achieve the engagement objectives.

If the available resources are inappropriate or insufficient, internal auditors must discuss the concerns with the chief audit executive to obtain the resources.

Standard 13.6 Work Program

Requirements

Internal auditors must develop and document an engagement work program to achieve the engagement objectives.

The engagement work program must be based on the information obtained during engagement planning, including, when applicable, the results of the engagement risk assessment.

The engagement work program must identify:

- · Criteria to be used to evaluate each objective.
- · Tasks to achieve the engagement objectives.
- Methodologies, including the analytical procedures to be used, and tools to perform the tasks.
- · Internal auditors assigned to perform each task.

The chief audit executive must review and approve the engagement work program before it is implemented and promptly when any subsequent changes are made.

Principle 14 Conduct Engagement Work

Internal auditors implement the engagement work program to achieve the engagement objectives.

To implement the engagement work program, internal auditors gather information and perform analyses and evaluations to produce evidence. These steps enable internal auditors to:

- · Provide assurance and identify potential findings.
- · Determine the causes, effects, and significance of the findings.
- Develop recommendations and/or collaborate with management to develop action plans.
- · Develop conclusions.

Standard 14.1 Gathering Information for Analyses and Evaluation

Requirements

To perform analyses and evaluations, internal auditors must gather information that is:

- Relevant consistent with engagement objectives, within the scope of the engagement, and contributes to the development of engagement results.
- Reliable factual and current. Internal auditors use professional skepticism to evaluate whether information is reliable. Reliability is strengthened when the information is:
 - Obtained directly by an internal auditor or from an independent source.
 - Corroborated.
 - Gathered from a system with effective governance, risk management, and control processes.
- Sufficient when it enables internal auditors to perform analyses and complete
 evaluations and can enable a prudent, informed, and competent person to repeat the
 engagement work program and reach the same conclusions as the internal auditor.

Internal auditors must evaluate whether the information is relevant and reliable and whether it is sufficient such that analyses provide a reasonable basis upon which to formulate potential engagement findings and conclusions. (See also Standard 14.2 Analyses and Potential Engagement Findings.)

Internal auditors must determine whether to gather additional information for analyses and evaluation when evidence is not relevant, reliable, or sufficient to support engagement findings. If relevant evidence cannot be obtained, internal auditors must determine whether to identify that as a finding.

Standard 14.2 Analyses and Potential Engagement Findings

Requirements

Internal auditors must analyze relevant, reliable, and sufficient information to develop potential engagement findings. For advisory services, gathering evidence to develop findings may not be necessary, depending on the agreement with relevant stakeholders.

Internal auditors must analyze information to determine whether there is a difference between the evaluation criteria and the existing state of the activity under review, known as the "condition." (See also Standard 13.4 Evaluation Criteria.)

Internal auditors must determine the condition by using information and evidence gathered during the engagement.

A difference between the criteria and the condition indicates a potential engagement finding that must be noted and further evaluated. If initial analyses do not provide sufficient evidence to support a potential engagement finding, internal auditors must exercise due professional care to determine whether additional analyses are required.

If additional analyses are required, the work program must be adjusted accordingly and approved by the chief audit executive.

If internal auditors determine that no additional analyses are required and there is no difference between the criteria and the condition, the internal auditors must provide assurance in the engagement conclusion regarding the effectiveness of the activity's governance, risk management, and control processes.

Standard 14.3 Evaluation of Findings

Requirements

Internal auditors must evaluate each potential engagement finding to determine its significance. When evaluating potential engagement findings, internal auditors must collaborate with management to identify the root causes when possible, determine the potential effects, and evaluate the significance of the issue.

To determine the significance of the risk, internal auditors must consider the likelihood of the risk occurring and the impact the risk may have on the organization's governance, risk management, or control processes.

If internal auditors determine that the organization is exposed to a significant risk, it must be documented and communicated as a finding.

Internal auditors must determine whether to report other risks as findings, based on the circumstances and established methodologies.

Internal auditors must prioritize each engagement finding based on its significance, using methodologies established by the chief audit executive.

Standard 14.4 Recommendations and Action Plans

Requirements

Internal auditors must determine whether to develop recommendations, request action plans from management, or collaborate with management to agree on actions to:

- Resolve the differences between the established criteria and the existing condition.
- · Mitigate identified risks to an acceptable level.
- · Address the root cause of the finding.
- · Enhance or improve the activity under review.

When developing recommendations, internal auditors must discuss the recommendations with the management of the activity under review.

If internal auditors and management disagree about the engagement recommendations and/ or action plans, internal auditors must follow an established methodology to allow both parties to express their positions and rationale and to determine a resolution. (See also Standard 9.3 Methodologies.)

Standard 14.5 Engagement Conclusions

Requirements

Internal auditors must develop an engagement conclusion that summarizes the engagement results relative to the engagement objectives and management's objectives. The engagement conclusion must summarize the internal auditors' professional judgment about the overall significance of the aggregated engagement findings.

Assurance engagement conclusions must include the internal auditors' judgment regarding the effectiveness of the governance, risk management, and/or control processes of the activity under review, including an acknowledgment of when processes are effective.

Standard 14.6 Engagement Documentation

Requirements

Internal auditors must document information and evidence to support the engagement results. The analyses, evaluations, and supporting information relevant to an engagement must be documented such that an informed, prudent internal auditor, or similarly informed and competent person, could repeat the work and derive the same engagement results.

Internal auditors and the engagement supervisor must review the engagement documentation for accuracy, relevance, and completeness. The chief audit executive must review and approve the engagement documentation. Internal auditors must retain engagement documentation according to relevant laws and/or regulations as well as policies and procedures of the internal audit function and the organization.

Principle 15 Communicate Engagement Results and Monitor Action Plans

Internal auditors communicate the engagement results to the appropriate parties and monitor management's progress toward the implementation of recommendations or action plans.

Internal auditors are responsible for issuing a final communication after completing the engagement and communicating the engagement results to management. Internal auditors continue to communicate with the management of the activity under review to confirm that action plans are implemented.

Standard 15.1 Final Engagement Communication

Requirements

For each engagement, internal auditors must develop a final communication that includes the engagement's objectives, scope, recommendations and/or action plans if applicable, and conclusions.

The final communication for assurance engagements also must include:

- The findings and their significance and prioritization.
- · An explanation of scope limitations, if any.
- A conclusion regarding the effectiveness of the governance, risk management, and control processes of the activity reviewed.

The final communication must specify the individuals responsible for addressing the findings and the planned date by which the actions should be completed.

When internal auditors become aware that management has initiated or completed actions to address a finding before the final communication, the actions must be acknowledged in the communication.

The final communication must be accurate, objective, clear, concise, constructive, complete, and timely, as described in Standard 11.2 Effective Communication.

Internal auditors must ensure the final communication is reviewed and approved by the chief audit executive before it is issued.

The chief audit executive must disseminate the final communication to parties who can ensure that the results are given due consideration. (See also Standard 11.3 Communicating Results.)

If the engagement is not conducted in conformance with the Standards, the final engagement communication must disclose the following details about the nonconformance:

- · Standard(s) with which conformance was not achieved.
- · Reason(s) for nonconformance.
- · Impact of nonconformance on the engagement findings and conclusions.

Standard 15.2 Confirming the Implementation of Recommendations or Action Plans

Requirements

Internal auditors must confirm that management has implemented internal auditors' recommendations or management's action plans following an established methodology, which includes:

- Inquiring about progress on the implementation.
- · Performing follow-up assessments using a risk-based approach.
- · Updating the status of management's actions in a tracking system.

The extent of these procedures must consider the significance of the finding.

If management has not progressed in implementing the actions according to the established completion dates, internal auditors must obtain and document an explanation from management and discuss the issue with the chief audit executive. The chief audit executive is responsible for determining whether senior management, by delay or inaction, has accepted a risk that exceeds the risk tolerance. (See also Standard 11.5 Communicating the Acceptance of Risks.)

Applying the Global Internal Audit Standards in the Public Sector

While the Global Internal Audit Standards apply to all internal audit functions, internal auditors in the public sector work in a political environment under governance, organizational, and funding structures that may differ from those of the private sector. The nature of these structures and related conditions may be affected by the jurisdiction and level of government in which the internal audit function operates. Additionally, some terminology used in the public sector differs from that of the private sector. These differences may affect how internal audit functions in the public sector apply the Standards. For this reason, the external quality assessment of an internal audit function in the public sector should be performed by an assessment team knowledgeable about public sector activities and governance structures. (See also Standard 8.4 External Quality Assessment.)

The public sector is founded upon and governed under a legal framework that includes laws, regulations, administrative orders and rules, and other types of governing requirements specific to the jurisdiction(s) within which an organization operates. Throughout the Global Internal Audit Standards, the term "laws and/or regulations" is used to represent the legal framework. Laws and/or regulations may establish the mandate, organizational position, reporting relationship, scope of work, funding, and other requirements of the internal audit function.

Through such mandates, internal audit functions in the public sector are often required to focus on:

- · Ensuring compliance with laws and/or regulations.
- Identifying opportunities to improve the efficiency, effectiveness, and economy of government processes and programs.
- Determining whether public resources are adequately safeguarded and used appropriately to provide services in an equitable manner.
- · Assessing whether an organization's performance aligns with its strategic objectives and goals.

The following sections describe situations in which the application of the Standards may differ for internal auditors in the public sector.

Laws and/or Regulations

The chief audit executive must be aware of the laws and/or regulations that affect the internal audit function's ability to fully conform with all provisions in the Standards. A charter or other documentation may be used to explain how the internal audit function is meeting the requirements of the laws and/or regulations as well as the intent of the Standards. When conformance is not possible, the chief audit executive must document the reason, make appropriate disclosures, and conform with all other requirements of the Standards. (See also Standards 4.1 Conformance with Global Internal Audit Standards, 6.1 Internal Audit Mandate, 6.2 Internal Audit Charter, 8.3 Quality, 8.4 External Quality Assessment, 12.1 Internal Quality Assessment, and 15.1 Final Engagement Communication.)

The following list describes situations in which laws and/or regulations may affect the ability of internal audit functions in the public sector to conform with the Standards:

- When laws and/or regulations serve as the internal audit mandate and charter, the chief audit executive
 may not have the authority or ability to make amendments. Thus, the requirement in Standard
 6.1 Internal Audit Mandate to periodically review the mandate for updates may not be warranted.
 However, the chief audit executive could periodically conduct and document a focused review of the
 mandate and charter to determine that the established path to legal and/or regulatory compliance
 is accurately defined.
- Public disclosure laws and/or regulations may govern the types of documents that are required to be released to the public and those that cannot be released to the public. The methodologies of internal audit functions in the public sector should include these requirements. (See also Standards 5.1 Use of Information and 5.2 Protection of Information.)
- Laws and/or regulations may limit the type of private discussions that the chief audit executive may have with the board. (See also the Glossary definition of "board" as well as Standards 6.3 Board and Senior Management Support and 7.1 Organizational Independence.)
- Laws and/or regulations may require internal audit functions in the public sector to present internal audit results at public meetings. Methodologies for the dissemination of final communications should adhere to these requirements. (See also Standards 11.2 Effective Communication and 15.1 Final Engagement Communication.)
- In the public sector the external assurance provider is often mandated. In some jurisdictions, the
 authority of a supreme audit institution may supersede that of the internal audit function and
 internal audit functions may be required to adhere to planning as stipulated and conduct joint work.
 In Standard 11.1 Building Relationships and Communicating with Stakeholders the internal audit
 function is required to coordinate with the external assurance provider, and this authority may
 supersede the coordination role. (See also Standards 6.1 Internal Audit Mandate and 9.5 Coordination
 and Reliance.)

Internal auditors in the public sector have a broad base of stakeholders, including the public within the jurisdiction as well as appointed and elected officials. The internal audit function may be legally required to be accountable and transparent to the public. To adequately serve their stakeholders, internal auditors may consider input from the public when planning and performing internal audit services. Public input may be provided by users of government services, such as utilities, public transit systems, parks and recreation facilities, building permitting processes, and others. (See also Standards 9.4 Internal Audit Plan, 11.1 Building Relationships and Communicating with Stakeholders, and 13.2 Engagement Risk Assessment.)

Governance and Organizational Structure

Internal audit functions in the public sector are governed under a variety of structures. Some public sector organizations may be subject to multiple levels of governance, both within and outside the organization, which may complicate the reporting relationships of the chief audit executive as well as the oversight and funding of the function.

The Global Internal Audit Standards reference responsibilities related to the "board" and "senior management." The glossary defines "board" using concepts that encompass various governance structures in the public sector. Because the board in the public sector may be a policy-setting body, it may not have authority over aspects of the chief audit executive and the internal audit function as described in the Standards. For example, such a body may not be able to appoint, remove, or set remuneration for the chief audit executive. In those situations, the board should still provide input to management regarding performance evaluations and decisions to appoint and remove the chief audit executive. In other public sector organizations, "senior management" may be defined differently than it is in the Standards. When the term is used to refer to the management of the activity under review, safeguards to independence must be implemented to mitigate the risk of interference with the internal audit function's work.

The chief audit executive should avoid taking direction from elected officials without first consulting the board and senior management, who directly oversee the internal audit function, unless the officials have direct oversight responsibilities.

The examples below describe governance and organizational structures in which internal audit functions may need to adjust the application of some standards (the list is not exhaustive):

- Internal audit functions may be separate from other parts of the organization, and the chief audit executive reports directly to a legislative body that functions as a board.
- Internal audit functions may be placed at the highest level of the government organization, and the chief audit executive reports directly to the head of the organization.
- Internal audit functions may be placed within another component of the overall organization (such as a department or other unit within a government organization), and the chief audit executive reports to the head of the organization or a nonexecutive/supervisory board. This may occur when there is a tiered governance structure and where there is more than one governing body.
- Internal audit functions may be separate from other parts of the organization because the chief audit executive is elected and retained by the voters within a jurisdiction and does not report to any specific oversight body or person in the organization.
- Internal audit functions may be placed lower in the organization, and the chief audit executive reports to a single senior manager from that department.

While some of these situations do not meet the independence requirements in the Global Internal Audit Standards, establishing an audit committee comprising public members, independent of management, safeguards independence and provides ongoing oversight, advice, and feedback. (See also Standards 6.2 Internal Audit Charter and 6.3 Board and Senior Management Support, Principle 7 Positioned Independently and its standards, and Standard 8.1 Board Interaction.)

Funding

The funding processes for internal audit functions vary widely in the public sector. Some governance and organizational structures do not give the board and senior management authority over the budget. These conditions prevent the chief audit executive from being able to seek budget approval from the board and senior management and limit the ability to seek or obtain additional funding due to other funding priorities within the organization.

For example, some internal audit functions within the public sector can submit independent budget requests to their board or legislative body for approval. Others' budgets are part of a larger organizational budget, and the allocation to the internal audit function is determined by the head of the organization and often approved by an outside legislative body. In either case, the chief audit executive could advocate to the board for the resources needed.

Even when the budget is set by laws and/or regulations, the chief audit executive must adhere to other requirements of the standards related to managing the budget. (See also Standards 6.3 Board and Senior Management Support, 7.1 Organizational Independence, 8.2 Resources, and 10.1 Financial Resource Management.)

The following public sector conditions may limit the way the chief audit executive may spend allocated funds:

The position classification structure and/or labor agreements often establish pay ranges for each
position classification based on the knowledge, skills, and responsibilities of the position that limit
the authority of the chief audit executive or board to establish the remuneration for each employee.
In such situations, the chief audit executive should collaborate with the human resources function,
as described in Standard 10.2 Human Resources Management.

- The internal audit function may be required to use only software approved for the organization,
 which may limit the chief audit executive's ability to obtain technology to support the internal audit
 function. Internal audit functions in the public sector should engage their board as advocates for
 supporting their technology needs and may need to use software available to achieve the audit plan
 in the most efficient way possible while maintaining conformance with the Standards. (See also
 Standard 10.3 Technological Resources.)
- When funding limitations prevent the chief audit executive from obtaining adequate resources to conduct an external quality assessment, internal audit functions in the public sector may benefit from participating in peer programs to conduct the assessment. (See also Standards 8.4 External Quality Assessment and 10.1 Financial Resource Management.)
- When an outside authority or oversight body provides the funding for the internal audit function in the
 public sector, the chief audit executive may be required to provide final engagement communications
 to the funding authority. (See also Standards 11.1 Building Relationships and Communicating with
 Stakeholders, 11.2 Effective Communication, and 15.1 Final Engagement Communication.)



About The IIA

The Institute of Internal Auditors (IIA) is a nonprofit international professional association that serves more than 245,000 global members and has awarded more than 190,000 Certified Internal Auditor® (CIA®) certifications worldwide. Established in 1941, The IIA is recognized throughout the world as the internal audit profession's leader in standards, certifications, education, research, and technical guidance. For more information, visit theiia.org.

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Application Note

Global Internal Audit Standards in the UK Public Sector

Applicable from 1 April 2025

Issued by the Relevant Internal Audit Standard Setters:













In collaboration with:



December 2024

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1. Purpose

This document provides a framework for the practice of internal audit in the UK public sector when taken together with the Global Internal Audit Standards (GIAS) issued by the Institute of Internal Auditors (IIA).

It sets out interpretations and requirements which need to be applied to the GIAS requirements, in order that these form a suitable basis for internal audit practice in the UK public sector.

2. Scope

The requirements herein apply to all internal audit service providers, whether in-house, shared services or outsourced, which are operating within or providing internal audit services to the UK public sector.

All internal audit assurance and advisory services fall within the scope of this document.

3. Effective date

From 1 April 2025 the requirements of this Application Note and of the Global Internal Audit Standards apply to work on internal audit engagements commenced on or after this date.

4. Review process

This Application Note will periodically be reviewed by the IASAB on behalf of the RIASS. This review will include consideration of the applicability within the UK public sector of any Topical Requirements issued by the IIA.

5. Authority for setting standards

The authority for setting standards for internal audit in the UK public sector rests with the Relevant Internal Audit Standard Setters (RIASS). These are HM Treasury in respect of central government; the Scottish Government, the Department of Finance Northern Ireland and the Welsh Government in respect of central government and the health sector in their administrations; the Department of Health and Social Care in respect of the health sector in England; and the Chartered Institute of Public Finance and Accountancy in respect of local government across the United Kingdom. To support the development process, the UK public sector Internal Audit Standards Advisory Board (IASAB) was created. This includes representation from each of the RIASS, audit committees, internal audit practitioners and the Chartered IIA. The role of the IASAB is to develop material to support UK public sector internal audit, to consult on that material, and based on that consultation to advise the RIASS on the standards to be used.

6. Application of standards in the UK public sector

Together the RIASS determine the standards and requirements applicable to the practice of internal auditing in the UK public sector as a whole. The RIASS have determined that the Global Internal Audit Standards (GIAS) issued by the Institute for Internal Auditors (IIA) are a suitable basis for the practice of internal auditing in the UK public sector, subject to interpretations and requirements set out in this note.

The GIAS include a section on *Applying the Global Internal Audit Standards in the Public Sector*, and recognise that differences in governance structures, regulations and funding in the public sector may sometimes demand different approaches to maintain appropriate quality, efficiency and effectiveness in delivering internal audit. While the appendix is welcome, it encompasses a broader scope of public sector circumstances internationally than those which are relevant to the UK. At the same time, it is not an exhaustive guide to public sector context either internationally or in relation to the UK.

This Application Note therefore provides UK public sector-specific context, interpretations of GIAS requirements in the specific circumstances expected to apply across the UK public sector and some additional requirements which the RIASS consider essential for the practice of internal audit in the UK public sector.

Each RIASS may provide guidance or set specific requirements applicable to the part of the public sector over which they have authority. Sub-sector specific material is not presented in this note.

7. Conformance

Auditors working in the UK public sector must follow the requirements of the GIAS subject to the interpretations and additional requirements set out in this Application Note. When expressing conformance with standards, auditors must be clear that they are conforming to the GIAS subject to the Application Note, and must refer to this as conformance with *Global Internal Audit Standards in the UK Public Sector*.

Auditors must confirm adherence to the Application Note alongside all other reports on conformance with the Global Internal Audit Standards such as Standard 12.1 on internal quality assessment. Auditors must also note any non-conformance with this Application Note alongside any other non-conformance reporting such as that described in Standard 4.1 (*Conformance with the Global Internal Audit Standards*).

External Quality Assessors working in the UK public sector under Standard 8.4 (*External Quality Assessment*) must also consider conformance with this Application Note as part of reporting their results.

8. Relevant internal audit standard setters in the UK

	Central government	Health sector	Local government*
	government departments and related public bodies, parliamentary bodies and counterpart bodies in the devolved government administrations	boards, trusts and authorities managed within NHS England, NHS Scotland, NHS Wales and Health and Social Care (Northern Ireland)	elected councils and combined authorities, police bodies, fire and emergency bodies, parks authorities, passenger transport authorities and partnerships and various other bodies
UK wide bodies	HM Treasury	_	_
England	HM Treasury	Department for Health and Social Care	CIPFA
Scotland	Scottish Government	Scottish Government	CIPFA
Wales	Welsh Government	Welsh Government	CIPFA

^{*}Internal audit functions in some smaller local government bodies may not be required to follow the global standards or this Application Note. While CIPFA is the standard setter for local government in England, some smaller authorities may instead follow guidance issued by the Joint Panel on Accountability and Governance (JPAG). Where internal audit is carried out using the Global Internal Audit Standards, it must also be carried out in conformance with the Application Note: Global Internal Audit Standards in the UK Public Sector.

9. General context for the UK public sector

9A. Ethics and standards in public life

The GIAS generally and GIAS 1.2 (*Organisation's Ethical Expectations*) specifically describe the importance of internal auditors encouraging and promoting an ethics-based culture alongside personal adherence to the ethical expectations of their organisation. This need for ethical behaviour is especially relevant in the UK public sector where those delivering public services are both servants of the public and stewards of public resources. The government has set out Seven Principles of Public Life (also known as the 'Nolan Principles') that apply to all public servants (including contractors working in the public service).

The Seven Principles of Public Life

- Selflessness: Holders of public office should act solely in terms of the public interest.
- Integrity: Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family or their friends. They must declare and resolve any interests and relationships.
- **Objectivity:** Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.
- Accountability: Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.
- Openness: Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.
- Honesty: Holders of public office should be truthful.
- **Leadership:** Holders of public office should exhibit these principles in their own behaviour and treat others with respect. They should actively promote and robustly support the principles and challenge poor behaviour wherever it occurs.

Internal auditors working in the UK public sector must apply these alongside all other relevant ethical frameworks.

9B. Handling information

The GIAS set out the duty on internal auditors to be faithful custodians of the information they gather, sharing only in limited, defined and controlled ways. GIAS 5.2 (*Protection of Information*) describes the need for awareness of responsibilities in protecting information and demonstrating respect for the confidentiality, privacy and ownership of information.

While the duties under GIAS mainly relate to restricting the sharing of information, auditors working in the UK public sector must also be aware of circumstances under which sharing or publication of

information will be required. They must be aware of their organisation's policies and procedures for routine publication of certain information and where there are statutory obligations to share or publish information.

9C. Value for money

GIAS 9.1 (Understanding Governance, Risk Management, and Control Processes) describes the need for a chief audit executive to understand the organisation's governance, risk management and control processes to develop an effective strategy and plan. Alongside the listed requirements in the Standard, auditors in the UK public sector must be aware of the importance of securing value for money and the definitions which define that term in their part of the UK public sector.

Auditors must also be aware of the importance of value for money, alongside other key considerations, when determining appropriate evaluation criteria under GIAS 13.4 (Evaluation Criteria).

9D. The role of regulators

GIAS 9.5 (Coordination and Reliance) sets out a duty for chief audit executives to co-ordinate with other assurance providers. In the UK public sector, there are various relevant outside assurance providers whose authority flows from separate legal or regulatory sources beyond the control or influence of the chief audit executive. The chief audit executive may not have any ability to access the work of those assurance providers or gain insight into the scope and timing of their work. Under these circumstances the chief audit executive must consider whether it is possible or practical to co-ordinate. Where they do not co-ordinate, they must set out to the board the barriers which prevent effective co-ordination.

10. UK public sector-specific interpretations and requirements

10A. Resources

The GIAS section on Applying the Global Internal Audit Standards in the Public Sector notes that funding processes for internal audit functions vary, that some governance and organisational structures do not give boards authority over budget and that such conditions prevent the chief audit executive from being able to seek or obtain additional funding due to other funding priorities within the organisation. Chief audit executives may also be constrained in the way in which they use financial resources and manage human and technological resources.

The circumstances outlined above are relevant to most UK public sector internal audit functions and their associated audit committees, and interpretation is required to provide an appropriate basis for conformance, as follows:

- Boards may not have authority over budgets and this may prevent the chief audit executive
 from being able to seek or obtain additional funding due to other funding priorities within the
 organisation. In such circumstances to fulfil GIAS 8.2 (Resources) the chief audit executive must
 develop a resource strategy which suggests practical approaches for consideration by the board.
- The chief audit executive must inform the board of the impact of insufficient resources and any options available to mitigate that impact.
- The chief audit executive may have no ability to develop resource management approaches distinct from their organisation and tailored to the needs of the internal audit function. The chief audit executive's ability to develop a strategy to obtain sufficient resources and address shortfalls may also be constrained by their organisation's legal or regulatory obligations. Under these circumstances the chief audit executive will not be expected to follow the requirements of GIAS 10.1 to 10.3 (Manage Resources) if they cannot develop approaches that achieve the objectives of those standards. Instead, a chief audit executive must set out in the Charter what alternative approaches apply to the internal audit service, and then seek to manage financial, human and IT resources within those constraints.

The chief audit executive must also inform the board of any resource management arrangements at the organisation that may put at risk the ability of the internal audit service to fulfil its mandate.

10B. Overall conclusions and annual reporting

GIAS 11.3 (Communicating Results) references the possibility that a chief audit executive may be required to make a conclusion at the level of the organisation about the effectiveness of governance, risk management and/or control. In the UK public sector, a chief audit executive must prepare such an overall conclusion at least annually in support of wider governance reporting, mindful of any specific sector obligations or processes. This overall conclusion must encompass governance, risk management and control.

The chief audit executive must also report annually on the results of quality assessment carried out under GIAS 12.1 (*Internal Quality Assessment*), including progress against action plans to address instances of non-conformance.

The requirement for an overall conclusion must also inform planning carried out under GIAS 9.4 (*Internal Audit Plan*). The requirement for an annual conclusion does not imply that planning needs to follow an annual cycle, but where planning is carried out in other timeframes it must still be clear to senior management and the board that this supports an annual conclusion.

10C. Chief audit executive qualifications

GIAS 7.2 (Chief Audit Executive Qualifications) sets out expectations relevant to the global practice of internal audit. The RIASS seek to maintain an expectation that chief audit executives in the public sector hold appropriate professional qualifications alongside relevant experience. Therefore, in considering whether a chief audit executive is suitably qualified, an organisation must be looking for:

- CMIIA, or a CCAB qualification, or an equivalent professional qualification which includes training on the practice of internal audit, and
- suitable internal audit experience.

10D. Selecting independent assessors

The RIASS have determined that the qualification requirement in GIAS 8.4 (External Quality Assessment) should be **replaced** by a different qualification requirement.

GIAS 8.4 sets out a requirement that when selecting the independent assessor or assessment team, the chief audit executive must ensure at least one person holds an active Certified Internal Auditor designation. The RIASS have determined that this requirement is **replaced** by a requirement that at least one person have the characteristics outlined for chief audit executive qualification. The RIASS consider that such a person would normally have an understanding of the GIAS commensurate with the Certified Internal Auditor designation, including internal audit relevant continuing professional development and an understanding of how the GIAS are applied in the UK public sector. These matters must be considered as part of the selection process.

11. Determining the essential conditions in relation to governance

GIAS Domain III (*Governing the Internal Audit Function*) explains that appropriate governance arrangements with boards and senior management are essential to fulfil the Purpose of Internal Audit. The individual standards within Domain III include baseline 'essential conditions' which need to be satisfied in order to achieve conformance. The GIAS allows that in some cases it may be appropriate to determine alternatives to the essential conditions that achieve the same results.

The GIAS section Applying the Global Internal Audit Standards in the Public Sector includes non-exhaustive material explaining that public sector governance and organisational structures may require internal audit functions to adjust the application of some standards. This is the case in many UK public sector bodies and in these cases it will be necessary to determine alternatives to the Domain III essential conditions that achieve the same results. These must be agreed with the board/audit committee and, if permanent, must be explained in the Audit Charter.

The barriers to achievement of the baseline essential conditions vary in extent and effect across different parts of the UK public sector. The RIASS for individual sectors¹ may choose to issue specific material for their sector, which internal auditors and quality assessors in the relevant sector must comply with. For this reason no material on alternative conditions is provided in this Application Note.

¹ CIPFA as RIASS for local government has issued the *Code of Practice for the Governance of Internal Audit in UK Local Government* that among other things includes conditions, which, when applied in the local government internal audit context, will achieve the objectives of the GIAS conditions.



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Code of Practice for the Governance of Internal Audit in UK Local Government

1. Summary

CIPFA has developed the Code of Practice for the Governance of Internal Audit in UK Local Government (the Code) to support authorities in establishing their internal audit arrangements and providing oversight and support for internal audit.

The Code is designed to work alongside new internal audit standards and replaces the organisational responsibilities set out in the <u>Statement on the role of the head of internal audit</u> (CIPFA, 2019). It is aimed at those responsible for ensuring effective governance arrangements for internal audit:

- the body or individual charged with governance
- the audit committee
- senior management of the authority, including the statutory officers, head of paid service, monitoring officer and section 151/section 95 officer.

It applies to all authorities within the scope of the statutory regulations on internal audit, as set out in Appendix A of the Code. The Code applies regardless of how internal audit is provided.

2. Background to the Code

Authorities have a requirement for internal audit as set out in national regulations. As the relevant internal audit standard setter (RIASS) for UK local government, CIPFA works with other RIASS through the Internal Audit Standards Advisory Board (IASAB) to mandate the appropriate internal audit standards. Since 2013, the RIASS have jointly mandated the Public Sector Internal Audit Standards (PSIAS) based on the International Professional Practices Framework of the Institute of Internal Auditors (IIA). New standards, Global Internal Audit Standards (UK public sector), will be mandated from 1 April 2025 consisting of

the Global Internal Audit Standards (GIAS) of the IIA and the Application Note: Global Internal Audit Standards in the UK public sector.

The new standards include 'essential conditions' for the governance of internal audit. These conditions are needed to allow effective internal audit practice and for internal auditors to conform with GIAS (UK public sector). Previously, CIPFA has issued guidance to authorities on the governance of internal audit in the <u>Statement on the role of the head of internal audit</u> and in its <u>Position Statement: audit committees in local authorities and police</u>, and the accompanying publication.

When the IIA published GIAS, it recognised that in the public sector, governance structures or other laws or regulations may impact on how the essential conditions can be applied. This is the case in UK local government, where there isn't a straightforward replacement for the 'board' as described in GIAS. Elected representatives are ultimately those charged with governance, whether that is the full council of an authority or an elected police and crime commissioner. Audit committees are non-executive advisory bodies with limited decision-making powers and police audit committees cannot be delegated any decision-making powers. Internal audit's primary mandate comes from statutory regulations rather than the decision of the audit committee.

The GIAS also provides for the chief audit executive to reach agreement with those in governance roles and senior management on alternative conditions that still allow for conformance with the standards. The Code provides the route to satisfying the essential conditions in GIAS (UK public sector), tailored for UK local government. The GIAS (UK public sector) directs the local government sector bodies to apply this Code.

This Code meets the objectives of the essential conditions, by providing for the necessary governance of internal audit, but in a way that is appropriate for UK local government bodies. It includes roles and responsibilities of the audit committee, senior management, and those charged with governance towards internal audit.

3. Implementing the Code

By following the Code, both the authority and the chief audit executive can be confident that governance in their authority is working in the way that is expected in the Principles and Standards in Domain III of GIAS (UK public sector). The chief audit executive must, of course, conform with the full standards to achieve overall conformance. But by using the Code alongside GIAS (UK public sector), local government bodies are better placed to achieve that conformance.

The Code builds on existing CIPFA guidance, including:

- Position Statement: audit committees in local authorities and police 2022
- The role of the head of internal audit (2019) (the Code replaces the governance aspects)
- The Financial Management Code (2019)

Much of the Code is already recognised good practice as per existing CIPFA guidance, and many authorities will have these arrangements, or close to them, in place. Bringing them together into a code will strengthen the position of internal audit in local government and support its professionalism. Strengthening governance arrangements will ensure authorities are better able to meet their challenging service priorities and make best use of their resources.

4. Demonstrating compliance

The authority should explain how it complies with the Code in its annual governance statement. CIPFA is currently updating its guidance on annual governance statements for publication in 2025. It is anticipated that conformance with both the Code and GIAS (UK public sector) will be featured in the new guidance. Effective arrangements for the governance of internal audit, as well as effective internal audit, are vital parts of an authority's governance arrangements.

The Code must also be included in the chief audit executive's annual internal quality assessment for report to the audit committee. The Code should also be used for the external quality assessment that authorities need at least once every five years.

PROVISIONS OF THE CODE

1. Providing authority for internal audit

1.1 Internal audit's mandate

To be effective and to meet the requirements of professional standards, internal audit's authority needs to be established.

In local government in the UK, internal audit's authority has statutory backing through the regulations issued by national UK governments. Authorities should familiarise themselves with the appropriate regulations that apply to them (see Appendix A). Regulations also include internal audit's rights of access.

In GIAS (UK public sector) this is referred to as internal audit's mandate, so the primary mandate comes from the regulations.

In addition to internal audit's mandate from regulations, each body may agree a wider statement of internal audit's authority. In developing the mandate with the chief audit executive, senior management should consider their wider assurance framework. The framework ensures that those responsible for governance and the audit committee receive the assurances they need, including assurance from first and second lines, and clarifies how internal audit contributes.

Development of the mandate will involve the chief audit executive, senior management and the audit committee. If the audit committee has the delegated power, it must approve the mandate. Alternatively, the audit committee should recommend approval to those charged with governance.

If there are changes to the regulations, the mandate must be updated to reflect them.

1.2 Internal audit's charter

The chief audit executive has a responsibility to prepare a charter that conforms with GIAS (UK public sector). When reviewing the charter, the audit committee should be satisfied that it covers the governance arrangements for internal audit. It must include the mandate derived from the regulations, plus any additional agreed mandate, and include internal audit's reporting line to the audit committee. The charter should include the administrative reporting arrangements for internal audit and the chief audit executive.

Senior management must work with the chief audit executive to ensure that the charter sets out the arrangements the function needs to achieve internal audit's purpose. In local government, internal audit's role would normally include:

- Supporting the delivery of the authority's strategic objectives by providing risk-based and objective assurance on the adequacy and effectiveness of governance, risk management and internal controls.
- Championing good practice in governance through assurance, advice and contributing to the authority's annual governance review.

¹ The means by which leaders, managers and decision makers can have confidence that the governance arrangements that they have approved are being implemented, operating as intended, and remain fit for purpose. See <u>Developing an effective assurance framework in a local authority</u> (CIPFA, 2023).

² Management assurance from line management and internal review or oversight functions.

- Advising on governance, risk management and internal control arrangements for major projects, programmes and system changes.
- Access to the authority's collaborative and arm's-length arrangements.

If the audit committee has the authority, it must approve the charter; alternatively it should recommend approval to those charged with governance.

Where there are significant changes to the governance of the authority, its risks or the internal audit function, the charter must be reviewed to ensure it is still fit for purpose and new formal approval given. A regular review is recommended to confirm the charter or update as required.

1.3 Support for internal audit

Internal audit's activities require access to and support from senior management, the audit committee and those charged with governance. Support allows internal audit to apply their mandate and charter in practice and meet expectations.

Support means:

- Championing the role and work of internal audit to the staff within the authority and to partner organisations with whom internal audit will work.
- Facilitating access to senior management, the audit committee and the authority's external auditor.
- Assisting, where possible, with access to external providers assurance such as regulators, inspectors and consultants.
- Engaging constructively with internal audit's findings, opinions and advice.
- Building awareness and understanding of the importance of good governance, risk management and internal control for the success of the authority, and of internal audit's contributions.

Support also means putting in place conditions to enable its work:

- When senior management and those charged with governance agree organisational structures, they must ensure that the reporting line of the chief audit executive is not lower than a member of the senior management team and has access to all members of the team.
- Where internal audit is outsourced or delivered through a partnership arrangement, senior management and those charged with governance should ensure there is a nominated chief audit executive, and client responsibility lies with a member of senior management.

The audit committee can demonstrate its support for internal audit by:

- Enquiring of senior management and the chief audit executive about any restrictions
 on the internal audit's scope, access, authority or resources that limit its ability to
 carry out its responsibilities effectively.
- Considering the audit plan or planning scope, and formally approving or recommending approval to those charged with governance.
- Meeting at least annually with the chief audit executive in sessions without senior management present.

2. Positioning internal audit independently

On behalf of those charged with governance and the audit committee, senior management establishes and protects the internal audit function's independence and qualifications.

2.1 Organisational independence

On behalf of those charged with governance, senior management need to establish and safeguard internal audit's independence. These arrangements must include:

- Ensuring internal audit's access to staff and records, as set out in regulations and the charter, operates freely and without any interference.
- Ensuring that the chief audit executive reports in their own right to the audit committee on the work of internal audit.
- Providing opportunities for the chief audit executive to meet with the audit committee without senior management present.
- Where there are actual or potential impairments to the independence of internal audit, senior management should work with the chief audit executive to remove or minimise them or ensure safeguards are operating effectively.
- Recognise that if the chief audit executive has additional roles and responsibilities beyond internal auditing, or if new roles are proposed, it could impact on the independence and performance of internal audit. The impact must be discussed with the chief audit executive and the views of the audit committee sought. Where needed, appropriate safeguards must be put in place by senior management to protect the independence of internal audit and support conformance with professional standards.

In local government, matters around the appointment, removal, remuneration and performance evaluation of the chief audit executive will be undertaken by senior management, but these arrangements must not be used to undermine the independence of internal audit. The audit committee should provide feedback on the proposed job description and the performance evaluation of the chief audit executive should include feedback from the chair of the audit committee.

The audit committee must support internal audit's independence by reviewing the effectiveness of safeguards at least annually, including any issues or concerns about independence from the chief audit executive. The chief audit executive must have the right of access to the chair of the audit committee at any time. The audit committee can escalate its concerns about internal audit independence to those charged with governance.

2.2 Qualifications of the chief audit executive

Ensuring effective leadership of the internal audit team requires a suitably qualified and experienced chief audit executive. The GIAS (UK public sector) sets out the qualification of and competencies expected of the chief audit executive. These must be taken into account by senior management when recruiting to the post.

Where internal audit is fully outsourced, senior management should ensure that an appropriate individual from the provider is nominated as the chief audit executive and meets the qualification requirements.

3. Oversight of internal audit

To ensure the effectiveness of internal audit, it should be overseen by the audit committee on behalf of those charged with governance.

Some local authorities in the UK have legislation or statutory guidance on the responsibilities of their audit committees. Details are in Appendix B.

CIPFA has established recommended practice for audit committees in local government and police, the <u>Position Statement: audit committees in local authorities and police 2022</u> and its supporting guidance publication, <u>Audit committees: practical guidance for local authorities and police</u> (2022).³ The following principles are consistent with their recommended practices for the oversight of internal audit.

3.1 Audit committee interaction

All audit committees should follow the CIPFA audit committee guidance for the oversight of internal audit.

To ensure there is good interaction between the audit committee and internal audit, audit committees must agree its work plan with the chief audit executive to ensure there is appropriate coverage of internal audit matters within audit committee agendas. The audit committee workplan should provide for the internal audit mandate and charter, strategy, plans, engagement reporting and the annual conclusion, and quality reports.

The audit committee must familiarise itself with the authority's assurance framework, governance, risk management and internal control arrangements to facilitate its interactions with internal audit.

Senior management should engage with the audit committee on significant changes to governance, risk and control arrangements and any concerns they may have on assurance. The audit committee should have oversight of the annual governance statement before final approval. Audit committee familiarity with these will support their effective interaction with internal audit.

Where there is disagreement about the management of risks or agreed audit actions between internal audit and senior management, the audit committee must review and make their recommendation to either management or those charged with governance.

3.2 Resources

The audit committee and senior management must engage with the chief audit executive to review whether internal audit's financial, human and technological resources are sufficient to meet internal audit's mandate as set out in the regulations and achieve conformance with GIAS (UK public sector).

Where there are concerns about internal audit's ability to fulfil its mandate or deliver an annual conclusion, the concerns should be formally recorded and reported to those charged

³ CIPFA's guidance on audit committees has been endorsed by the Ministry of Housing, Communities and Local Government as recommended practice for English authorities and by the Home Office for police audit committees in England and Wales. The Statutory and Non-Statutory Guidance for Principal Councils in Wales – supporting provisions within the Local Government Act 2000, the Local Government (Wales) Measure 2011 and the Local Government and Elections (Wales) Act 2021 also recommends CIPFA's guidance.

with governance. If resource issues result in a limitation of scope on the annual conclusion, this should also be reported and disclosed in the annual governance statement.

Decisions on internal audit resourcing by senior management and those charged with governance must take account of the longer-term risks to the governance and financial sustainability of the authority and internal audit's role in supporting those objectives.

Where there are temporary resource constraints, senior management must work with the chief audit executive to establish longer-term plans for sustainable internal audit resources.

3.3 Quality

Annually, the audit committee must review the results of the chief audit executive's assessment of conformance against GIAS (UK public sector), including any action plan.

The audit committee must review the chief audit executive's annual report, including the annual conclusion on governance, risk management and control, and internal audit's performance against its objectives.

To meet the requirements of the regulations (the mandate) for internal audit, the audit committee must satisfy itself on the effectiveness of internal audit. They should take into account conformance with the standards, interactions with the committee, performance and feedback from senior management. Their conclusions should be reported to those charged with governance, for example, as part of the audit committee's annual report.

3.4 External quality assessment

On behalf of those charged with governance and the audit committee, senior management must ensure that internal audit has an external quality assessment at least once every five years of its conformance against GIAS (UK public sector), including this Code. Senior management and the chief audit executive should discuss the timing of the review and report the options and their recommendation to the audit committee.

The proposals for the scope, method of assessment and assessor should be brought to the audit committee for agreement. The assessor must use this Code alongside the standards and be familiar with the sector.

The audit committee must receive the complete results of the assessment and consider the chief audit executive's action plan to address any recommendations. Progress should be monitored.

Where the audit committee does not have delegated authority, the committee should report the overall results of the external quality assessment to those charged with governance.

Appendix A – Current regulations for internal audit in local government (extracts)

The regulations are the basis for internal audit's authority or mandate. Authorities should use the regulations applicable to them. Subsequent amendment regulations have not changed the paragraphs on internal audit, but they may be updated or replaced in the future.

England

The Accounts and Audit Regulations 2015

Internal Audit

- 5.(1) A relevant 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.
- (2) Any officer or member of a relevant authority must, if required to do so for the purposes of the internal audit—
 - (a) make available such documents and records; and
 - (b) supply such information and explanations;

as are considered necessary by those conducting the internal audit.

(3) In this regulation "documents and records" includes information recorded in an electronic form.

Northern Ireland

The Local Government (Accounts and Audit) Regulations (Northern Ireland) 2015

Internal audit

- 6. (1) A local government body must undertake an adequate and effective internal audit of its accounting records and of its system of risk management, internal control and governance processes using internal auditing standards in force from time to time.
- (2) Any officer or member of a local government body must, if internal audit requires—
 - (a) make available such documents and records as appear to internal audit to be necessary for the purposes of the audit; and
 - (b) supply internal audit with such information and explanation as internal audit considers necessary for that purpose.
- (3) In this regulation "records" includes records and documents in an electronic form.

Scotland

The Local Authority Accounts (Scotland) Regulations 2014

Internal auditing

- 7. (1) A local authority must operate a professional and objective internal auditing service in accordance with recognised standards and practices in relation to internal auditing.
- (2) Any officer or member of a local authority must, as required by those undertaking internal auditing—
 - (a) make available such documents of that authority which relate to its accounting and other records for the purpose of internal auditing; and
 - (b) supply such information and explanation as those undertaking internal auditing consider necessary for that purpose.
- (3) A local authority must from time to time assess the efficiency and effectiveness of its internal auditing, in accordance with the standards and practices referred to in paragraph (1).
- (4) The findings of the assessments referred to in paragraph (3) must be considered, as part of the consideration of the system of internal control referred to in regulation 5(2), at the meeting referred to in regulation 5(3).

Wales

The Accounts and Audit (Wales) Regulations 2014

Internal audit

- 7. (1) A relevant body must maintain an adequate and effective system of internal audit of its accounting records and of its system of internal control.
- (2) Any officer or member of that body must, if the body requires—
 - (a) make available such documents of the body which relate to its accounting and other records as appear to that body to be necessary for the purpose of the audit; and
 - (b) supply the body with such information and explanation as that body considers necessary for that purpose.
- (3) A larger relevant body must, at least once in each year, conduct a review of the effectiveness of its internal audit.
- (4) The findings of the review referred to in paragraph (3) must be considered, as part of the consideration of the system of internal control referred to in regulation 5(3), by the committee or body referred to in that paragraph.

Appendix B – Current legislation or statutory guidance on the responsibilities of audit committees in UK local government

Local Government Measure 2011 as amended by the Local Government and Elections (Wales) Act 2021 (extract)

- 81. Local authorities to appoint governance and audit committees
- (1) A local authority must appoint a committee (a "governance and audit committee") to—

...

(e) oversee the authority's internal and external audit arrangements

Cities and Local Government Devolution Act 2016 Levelling Up and Regeneration Act 2023

For audit committees in combined authorities and combined county authorities.

Audit committee requirements for police

The Financial Management Code of Practice (Home Office, 2018), includes:

The police and crime commissioner (PCC) and the chief constable should establish
an independent audit committee. It is recommended that this be a combined body
which will consider the internal and external audit reports of both the PCC and the
chief constable.

Global Standards Internal Audit Consortium Action Plan December 2024

Domain	Principle	Standard	Standard Description	Action	When by	Who
11	1	1.1	Internal Auditors must	To include ethics training	March 2025	Head of
			perform their work with	annually on a team meeting		Internal
			honesty and	agenda		Audit
			professional courage.			
11	1	1.3	Internal Auditors must	To include training in laws,	March 2025	Head of
			not engage in or be	regulations, ethical and		Internal
			party to any activity that	professional behaviour on team		Audit
			is illegal or discreditable	meeting agenda annually		
			to the organisation or			
			the profession of			
			internal auditing or that			
			may harm the			
			organisation or its			
			employees.			
11	2	2.1 & 2.2	Internal Auditors must	Objectivity training to be	March 2025	Head of
94			maintain professional	undertaken in team meetings		Internal
			objectivity when	annually		Audit
			performing all aspects			
			of internal audit services			
11	4	4.1	The Internal Audit	The Internal Audit Manual	August 2025	Head of
			functions methodologies	requires updating to reflect the		Internal
			must be established,	Global Standards and principles		Audit
			documented and	instead of the Public Sector		Head of Internal Audit
			maintained in alignment	Internal Audit Standards		
			with the Standards.			

Domain	Principle	Standard	Standard Description	Action	When by	Who
11	4	4.2	Internal auditors must exercise due professional care by assessing the nature, circumstances and requirements of the services to be provided.	Due professional care to be discussed annually at team meetings	March 2025	Head of Internal Audit
111 95	6	6.1 & 6.2	The Head of the Internal Audit Consortium must provide the Audit Committee and Senior management with the necessary information to establish the internal audit mandate. The Internal Audit Charter must include the legal requirements of the mandate.	Internal Audit Charter to be updated to specifically record the Internal Audit Mandate i.e. Accounts and Audit Regulations 2015. Review of the current Internal Audit Charter to ensure that it reflects the requirements of the Global Internal Audit Standards e.g. a specific sentence must be included committing to adhering to the Global Standards	April 2025	Head of Internal Audit
111	6	6.3 & 7.1	The Audit Committee should meet periodically with Internal Audit without the presence of Senior Management	To be arranged as and when required but at least annually	July 2025	Head of Internal Audit
11	6	6.3 & 7.1	The Audit Committee should provide input to	The Audit Committee to be consulted by the Director of	April 2026	Director of Finance

Domain	Principle	Standard	Standard Description	Action	When by	Who
			support senior management in the performance evaluation of the Head of the Internal Audit Consortium	Finance on the performance of the Head of the Internal Audit Consortium (to be fed back to CBC Service Director Finance)		
1V 96	9	9.2	The Head of the Internal Audit Consortium must develop and implement a strategy for the internal audit function that supports the strategic objectives and success of the organisation and aligns with the expectations of the Audit Committee, senior management and other key stakeholders.	Develop an internal audit strategy including vision, strategic objectives and supporting initiatives	September 2025	Head of Internal Audit
1V	9	9.3	The Head of the Internal Audit Consortium must establish methodologies to guide the internal audit function in a systematic and disciplined manner to	There is a comprehensive internal audit manual however this requires updating to reflect the Global Standards citing specific standards rather than the PSIAS Standards at present and	August 2025	Head of Internal Audit

Domain	Principle	Standard	Standard Description	Action	When by	Who
			implement the internal audit strategy, develop the internal audit plan and conform with the standards.	reference to the Strategy once written.		
1V	9	9.5	When the Internal Audit Function relies on the work of other assurance providers, the Head of the Internal Audit Consortium must document the basis for that reliance and is still responsible for the conclusions reached by the internal audit function	Other assurances that we are aware of are already documented. For the assurances that we rely on, the basis for reliance will be documented e.g. PSN certification, external audit, Derby City Internal Auditors re the operation of the Building Control partnership and Social Housing Regulator reviews.	April 2025	Head of Internal Audit
9 }	10	10.3	The Head of the Internal Audit Consortium must strive to ensure that the internal audit function has technology to support the Internal Audit Process	Sections of the internal audit strategy should describe current or planned initiatives for using technology to advance the internal audit functions objectives. Development of AI to be kept under review for potential use by the Consortium.	September 2025	Head of Internal Audit

Domain	Principle	Standard	Standard Description	Action	When by	Who
1V	11	11.1	The Head of the Internal Audit Consortium must promote formal and informal communication between the internal audit function and its stakeholders	A Guide to Internal audit is on the intranet but this was written some years ago and requires updating / refreshing.	September 2025	Head of Internal Audit
1V	2	11.2	The Head of the Internal Audit Consortium must establish and implement methodologies to promote accurate, objective, clear, concise, constructive, complete and timely internal audit communications	however this will be	February 2025	Head of Internal Audit
98	14	14.3 & 14.4	When evaluating potential engagement findings internal auditors must collaborate with management to identify the root causes when possible.	Test schedule conclusion for each test where there is a finding to be updated to include the root causes of an issue, analysis to follow.	25/26 audits onwards	Head of Internal Audit and Audit team

Domain	Principle	Standard	Standard Description	Action	When by	Who
V	15	15.1	When internal auditors	Reports to reflect more	25/26 audits	Audit team
			become aware that	consistently when actions have	onwards	
			management has	already been taken during audits		
			initiated or completed	to address the risks identified.		
			actions to address a			
			finding before the final			
			communication, the			
			actions must be			
			acknowledged in the			
			communication			

Additional Requirements of the Application note and The Code of Practice for the Governance of Internal Audit in UK Local Government

Requirement	<u>Action</u>	When by	<u>Who</u>
When expressing conformance with Standards,	To be included in revised Charter and	April 2025 and	Head of
guditors must be clear that they are conforming to	the 2025/26 annual report onwards.	July 2026	Internal
the GIAS subject to the Application note, and must			Audit
refer to this as Conformance with Global Internal			
Audit Standards in the UK Public Sector			
Auditors must confirm adherence to the Application	To be included in the Annual Report	July 2026	Head of
note and note any non -conformance	2025/26		Internal
			Audit
The Authority should explain how it complies with the	To be included in the 2025/26 Annual	August 2026	Director of
Code of Practice for the Governance of Internal Audit	Governance Statement		Finance

in UK Local Government in its Annual Governance			
Statement			
The Code must be included in the Head of the	Used for November 2024 self-	May 2026	Head of
Internal Audit Consortium's annual internal quality	assessment.		Internal
assessment and used in external assessments	Next external review due May 26		Audit
The Audit Committee must satisfy itself on the	BDC & NEDDC section 151 Officers	July 2026	N/A
effectiveness of Internal Audit taking into account	already take a report to Audit		
conformance with the Standards, interactions with	Committee annually assessing the		
the Committee, performance and feedback from	effectiveness of IA – to also be done		
Senior Management. Their conclusions should be	by CBC & DDDC 151 Officers.		
reported to those charged with Governance e.g. as			
part of the audit Committee annual report.			
The Internal Audit Charter should reflect internal	To ensure included in Internal Audit	April 2025	Head of
audits role – Championing good practice in	Charter		Internal
governance through assurance, advice and			Audit
contributing to the authority's annual governance			
review.			



Bolsover District Council

Meeting of the Audit Committee on 22nd January 2025

Summary of Progress on the 2024/25 Internal Audit Plan

Report of the Portfolio Holder for Resources

Classification	This report is public
Contact Officer	Jenny Williams – Head of the Internal Audit Consortium

PURPOSE/SUMMARY OF REPORT

To present for Members' information a progress report in respect of the 2024/25 Internal Audit Plan.

REPORT DETAILS

1. Background

1.1 The Public Sector Internal Audit Standards require that the Head of the Internal Audit Consortium reports periodically to the Audit Committee in respect of performance against the audit plan. Significant risk and control issues should also be reported.

2. <u>Details of Proposal or Information</u>

- 2.1 Appendix 1 is a summary of reports issued September to December 2024 in respect of the 2024/25 Internal Audit Plan. This includes a summary of the reports issued in respect of Dragonfly Development Ltd.
- 2.2 The Appendix shows for each report the level of assurance given and the number of recommendations made / agreed where a full response has been received. This provides an overall assessment of the system's ability to meet its objectives and manage risk. The definitions of the assurance levels used can be seen in the table below. The assurance levels have also now been linked to definitions of risk within the risk management strategy.

Assurance Level	Internal Audit Definition	Risk Register Link
Substantial Assurance	There is a sound system of controls in place, designed to achieve the system objectives. Controls are being consistently applied and risks well managed.	Minor / negligible impact
Reasonable Assurance	The majority of controls are in place and operating effectively, although some control improvements are required. The system should achieve its objectives. Risks are generally well managed.	Minor / moderate
Limited Assurance	Certain important controls are either not in place or not operating effectively. There is a risk that the system may not achieve its objectives. Some key risks were not well managed.	Moderate / Severe Impact
Inadequate Assurance	There are fundamental control weaknesses, leaving the system/service open to material errors or abuse and exposes the Council to significant risk. There is little assurance of achieving the desired objectives.	Catastrophic Impact

- 2.3 In this period 4 reports have been issued 2 with Substantial and 2 with reasonable Assurance. In respect of Dragonfly Development Ltd 2 reports have been issued both with substantial assurance.
- 2.4 No issues arising relating to fraud were identified.
- 2.5 Appendix 2 provides details of progress on the 2024/25 Internal Audit Plan.

 Progress against the plan is behind schedule due to the time gap whilst recruiting a new Auditor and also increased training demands as both Auditors are still relatively new. It is still anticipated that sufficient work will be completed to enable an unlimited audit opinion to be given.

3. Reasons for Recommendation

- 3.1 To inform Members of progress on the 2024/25 Internal Audit Plans and to provide details of the Audit Reports issued to date.
- 3.2 To comply with the requirements of the Public Sector Internal Audit Standards.

4 Alternative Options and Reasons for Rejection

4.1 N/A

RECOMMENDATION

That the report be noted.

IMPLICATIONS:

Finance and Risk Yes□ No ⊠ Details:
Internal audit reviews help to ensure that processes and controls are operating effectively thereby contributing to ensuring that value for money is obtained.
On behalf of the Section 151 Officer
<u>Legal (including Data Protection)</u> Yes□ No ⊠ Details:
The core work of internal audit is derived from the statutory responsibility under the Accounts and Audit Regulations 2015 which requires the Council to "undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking in to account the Public Sector Internal Audit Standards or guidance".
On behalf of the Solicitor to the Council
<u>Staffing</u> Yes□ No ⊠ Details:
On behalf of the Head of Paid Service
Equality and Diversity, and Consultation Yes□ No ⊠
Details: N/A
Environment Yes□ No ⊠ Please identify (if applicable) how this proposal/report will help the Authority meet its carbon neutral target or enhance the environment. Details: N/A

DECISION INFORMATION

☑ Please indicate which threshold applies:		
Is the decision a Key Decision? A Key Decision is an Executive decision which has a significant impact on two or more wards in the District or which results in income or expenditure to the Council above the following thresholds:	Yes□	No ⊠
Revenue (a) Results in the Council making Revenue Savings of £75,000 or more or (b) Results in the Council incurring Revenue Expenditure of £75,000 or more.	(a) □	(b) 🗆
Capital (a) Results in the Council making Capital Income of £150,000 or more or (b) Results in the Council incurring Capital Expenditure of £150,000 or more.	(a) □	(b) □
District Wards Significantly Affected: (to be significant in terms of its effects on communities living or working in an area comprising two or more wards in the District) Please state below which wards are affected or tick All if all wards are affected:	All 🗆	
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	Yes□	No 🗆
_	Yes□ Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring		
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader Deputy Leader Executive SLT Relevant Service Manager Members Public	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □	Yes□	No □
(Only Key Decisions are subject to Call-In) If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer) Consultation carried out: (this is any consultation carried out prior to the report being presented for approval) Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □ Other □	Yes□ Yes□	No □ No □

DOCUMENT INFORMATION

Appendix No	Title
1	Summary of Internal Audit reports issued September to December 2024
2	Progress on the 2024/25 Internal Audit Plan

Background Papers

(These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Executive you must provide copies of the background papers).

December 2024

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Appendix '

BOLSOVER DISTRICT COUNCIL

Internal Audit Consortium - Report to Audit Committee Summary of Internal Audit Reports Issued September to December 2024

Report Ref No.	Report Title	Scope and Objectives	Assurance Provided			mber of mendations	
				Report Issued	Response Due	Made	Accepted
B007	Insurance	To ensure that the Council has appropriate insurances in place, that claims are being dealt with promptly and accurately and premiums have been paid.	Substantial	22/8/24	13/9/24	0	0
B008	Section 106	To ensure that Section 106 contributions are being received and spent timely	Reasonable	1/10/24	24/10/24	4 (2M 2L)	4
B009	Creditors	To ensure that invoices are paid accurately and timely and that they are supported by a purchase order	Substantial	5/11/24	26/11/24	4L	4

Report Ref No.	Report Title	Scope and Objectives	Assurance Provided	Date Rec			Number of commendations	
				Report Issued	Response Due	Made	Accepted	
B010	Money Laundering	To ensure that Money Laundering Regulations are complied with and that there is an up-to- date policy in place.	Reasonable	15/11/24	6/12/24	3M	3	
	Dragonfly Development Ltd							
D001	Insurance	To ensure that the Company has appropriate insurances in place, that claims are being dealt with promptly and accurately and premiums have been paid.	Substantial	28/8/24	18/9/24	0	0	
D002	Creditors	To ensure that invoices are paid accurately and timely and that they are supported by a purchase order	Substantial	5/11/24	26/11/24	3L	Note 1	

H = High Priority M = Medium Priority L = Low Priority

Note 1 – Response not yet received

Bolsover District Council Internal Audit Plan 2024/25

In Progress
Ongoing

	Risk	BDC 2024/25 Days
Main Financial Systems		
Main Accounting / Budgetary Control	M	15
Creditors	M	20
Debtors	М	15
Cash and Banking	М	20
Council Tax	М	20
Government Grants / sign off	М	3
Treasury Management	М	15
Housing Benefits	М	20
Total Main Financial Systems		128
Dragonfly	Н	15
Corporate Gov Arrangements		15
Total		13
Corporate / Cross Cutting		
Climate Change	М	12
Corporate Governance / Assurance Statement	Н	2
Corporate Targets	М	12
Financial advice / working groups	Н	20
Health and Safety (Joint with NEDDC)	М	10
Risk Management	М	10
Total Cross Cutting		66
Other Operational Audits		
Asset Management Arrangements	М	8

	Risk	BDC 2024/25 Days
Corporate Credit Cards	L	5
Petty Cash	L	5
Disabled Facilities Grants (Joint with NEDDC)	М	10
E.H Misc Licensing (Joint with NEDDC)	L	8
Extreme Wheels	L	8
Insurance	М	12
Members Expenses	L	12
Money Laundering	L	5
Section 106	М	12
Social Media / Facebook / Bolsover TV	L	10
Total Operational Areas		95
IT Related		
Network Security/Disaster Recovery etc (Joint with NEDDC)	Н	15
Total IT		15
Dragonfly		73
Special Investigations / Contingency/ emerging risks		40
Apprenticeships / training		30
Audit Committee / Client Liaison/Board Meetings		15
National Fraud Initiative		6
Grand Total		483



BOLSOVER DISTRICT COUNCIL

Meeting of the Audit Committee on 22nd January 2025

Local audit delays - update

Report of the Director of Finance & Section 151 Officer

Classification	This report is Public.
Contact Officer	Director of Finance & Section 151 Officer Theresa Fletcher

PURPOSE/SUMMARY OF REPORT

To update the Committee with the latest information on 'The Local Audit Backstop dates,' in line with the Chartered Institute of Public Finance and Accountancy (CIPFA) document, published in December 2024.

REPORT DETAILS

1 <u>Background</u>

- 1.1 At the Audit Committee on the 12th of March 2024, Members were presented with a report titled 'Local audit delays consultation and proposals for the future.' This report gave the background to how the local audit system ended up with the significant backlog of audit opinions that currently exist and gave details on the government proposals to clear the backlog and embed timely audit, as well as the consultation on proposals to resolve the current situation.
- 1.2 This report today, gives an update to the previous report and gives revised key dates.

Key Facts

- 1.3 As a reminder for Members, below are the key facts:
 - The backstop dates are a nationwide measure to address the backlog of incomplete audits of financial statements across local government in England.
 - They have been introduced as a way to reset the system and assist a return to a regular process of timely audit and publication of financial statements.
 - How each authority is affected depends on how many financial years' statements are outstanding.

1.4 The key dates are as follows:

Financial year	Statutory backstop date
2022/23 and before	13 December 2024
2023/24	28 February 2025
2024/25	27 February 2026
2025/26	31 January 2027
2026/27	30 November 2027
2027/28	30 November 2028

- 1.5 The opinion on our statement of accounts for the year 2023/24 is outstanding, as Forvis Mazars are still carrying out the audit they began in early October.
- 1.6 The CIPFA publication gives a number of areas for Members to be aware of to ensure the Audit Committee continues to be effective.

Understanding the current position

- 1.7 At Bolsover only the latest year, 2023/24 is affected. All years previous to that have already been signed off by the auditors.
- 1.8 The unaudited (draft) statements have been signed off by the Section 151 Officer and are currently being audited.
- 1.9 The audit of the statements is being severely impacted by not having the audited financial statements for Dragonfly, from their auditors. Forvis Mazars have been trying work around solutions to undertake work to gain audit assurance wherever they can, but unfortunately, it is unlikely to be sufficient.
- 1.10 Finance staff have made repeated attempts to obtain the draft and audited statements from the accountants of Dragonfly. At the time of writing this report (23/12/24), we have still not received the final version of the draft accounts, to be able to forward them onto Forvis Mazars for testing.
- 1.11 Not having the audited statements is also causing problems for the Dragonfly companies. The CEO of Dragonfly has had to apply to Companies House to request an extension to the filing deadline for both companies as at the moment it is not possible to file their accounts for 2023/24 and meet the deadline of 29 December 2024. An extension to the end of March 2025 has been obtained for both companies.
- 1.12 A further area causing some delay to the audit is work being undertaken on pensions. A revised report for 2022/23 was requested from the actuary Hymans Robertson, after new guidance was received by Forvis Mazars on IFRIC 14. There is a cost to this report of £1,200, and it was received from the actuary on the 18th of December. We are currently waiting for the auditors to seek advice from their technical team before we get confirmation that the guery is now resolved.

What do our finance team need to be doing?

1.13 The team have prepared financial statements to the required standard, and they were ready for audit on time. They are now supporting the audit by answering questions and providing evidence to the auditor and liaising between Forvis Mazars and the Dragonfly auditors.

What do the auditors need to do?

- 1.14 The auditor has ensured there is resource available in Forvis Mazars to enable them to carry out our audit.
- 1.15 The aim of the auditor has been to work towards sign-off of the accounts before the backstop date of the 28th of February 2025. Unfortunately, issues outside of our control mean it is almost certain that the 2023/24 accounts will be disclaimed when we reach the backstop date.
- 1.16 We have called an extraordinary Audit Committee for the 20th of February, where the auditors will present their report to those charged with governance. This will be an opportunity for Members to review the accounts.

What happens at the backstop date – 28 February 2025?

1.17 By this date at the latest, the accounts must be published with the opinion of the auditor. Ideally the audit will be completed, and an unmodified opinion provided, but if this cannot be achieved in time, the auditor will issue a modified opinion.

What does a modified opinion mean?

Audit opinion	Description
Unmodified	This is the best possible outcome. It means the auditor obtains sufficient evidence to support a view that the financial statements are materially accurate and fairly represent the audited body's financial situation.
Qualified	This is problematic. The auditor has material concerns either because of not being able to gather sufficient evidence or finding evidence that suggests material error. However, the effect on the financial statements is contained in specific areas and is not widespread.
Disclaimer of opinion	This is more problematic than being qualified, reflecting a larger-scale lack of evidence – for example, due to time constraints imposed by the backstop dates – which means that the auditor cannot provide an opinion. The possible effects on the financial statements of undetected misstatements could be both material and widespread.
Adverse opinion	Normally considered the worst-case scenario. The auditor does have sufficient evidence, but it suggests that material misstatements exist that undermine the reliability of the financial statements as a whole.

- 1.18 Discussions have already been held with Forvis Mazars around possible consequences for not receiving the audited financial statements of Dragonfly in time for sufficient audit work to be carried out on them. At a meeting on the 23rd of December 2024, we were informed it was almost certain that the Council's statement of accounts for 2023/24 would be disclaimed. This is due to us not receiving the Dragonfly audited statements from their auditors. The group accounts part of the Council's financial statements must consist of the information from the Dragonfly audited financial statements plus the Council's single entity statements.
- 1.19 If a modified opinion is issued, the auditor must provide an explanation for why the opinion is modified.
 - How do we explain to the public or our stakeholders why we have received a modified opinion?
- 1.20 A local authority is accountable to its local community and its stakeholders, so it is right that it takes steps to explain how it is affected by the backstop and why.
- 1.21 Audit Committees should encourage clear accountability and communications.
- 1.22 Authorities should explain the national position but also be clear about any local issues that have contributed. The auditor's report should clearly explain the reasons this provides some independent assurance to the public.
 - What does a modified opinion mean for the audit of 2024/25 financial statements?
- 1.23 The Audit Committee should ask the auditor to explain the work they will be doing during the recovery and what steps the finance team can take to play their part.
- 1.24 We will be meeting with Forvis Mazars in early January 2025, to plan how we are best to proceed with the audit and to discuss the implications of a disclaimer on our 2024/25 accounts.
- 1.25 There will be an increase in the cost of the 2023/24 audit, how much is currently unknown, as a result of the extra group accounts work.
- 1.26 Work is already under way with the Dragonfly companies to make improvements in their financial statement audit process for the 2024/25 financial year.
 - <u>Does a modified opinion mean that we have less assurance over the robustness of our financial systems and the management of our finances?</u>
- 1.27 The audit opinion is an important source of assurance. It is issued in accordance with professional standards and is independent, so a modified opinion does provide less assurance. However, the audit report should highlight causes of concern to Members. Auditors are also recommended to issue recommendations at an early stage, so if they find weaknesses in the financial system, they must highlight these to the Committee.
- 1.28 Members also have other sources of assurance, including:

- Internal audit provide assurance over financial systems.
- BDC complies with CIPFA's Financial Management Code.
- Assurance is provided by the Section 151 Officer in the narrative report, within the Council's statement of accounts document.

Given this is a national problem, what is being done to sort it out?

- 1.29 Nationally, the Public Accounts Committee is monitoring the situation and has already issued reports. They hold the Ministry of Housing, Communities and Local Government (MHCLG) to account and have heard evidence from the Financial Reporting Council (FRC), Public Sector Audit Appointments (PSAA), the National Audit Office, CIPFA, the Local Government Association (LGA), and local audit firms.
- 1.30 The FRC will monitor the work of the audit firms as part of their audit quality role. They may censure firms who are not working appropriately to restore assurance and a return to normal.
- 1.31 The system partners are also taking steps to reform the local audit system. CIPFA has developed a Diploma in Local Audit to support the training of auditors in local audit. Other work is underway by the FRC as system leader to encourage firms to expand their local audit workforce and address the shortfall in auditors.
- 1.32 MHCLG will also be monitoring whether both firms and authorities meet the backstop requirements and will publish any concerns. They have indicated they will post a list of any authorities that have not complied with these backstops, and which are not eligible for the limited list of exemptions.

What implications does this have for our authority?

- 1.33 While the finance team are working on the statements and liaising with auditors, their resources are tightly stretched while undertaking work such as budget preparation and monitoring, and working with service teams, so this issue needs to be resolved for everyone's benefit.
- 1.34 Until the audit of the 2023/24 financial statements is complete, there will be an additional draw on the finance team's resources, and expected assurance from the financial statements will not be in place.

2 Reasons for Recommendation

2.1 To update the Audit Committee with the latest information on 'The Local Audit Backstop dates,' in line with the Chartered Institute of Public Finance and Accountancy (CIPFA) document, published in December 2024.

3 Alternative Options and Reasons for Rejection

3.1 There are no alternative options for consideration, this report is for information.

RECOMMENDATION(S)

That the Committee notes the report.

Approved by Councillor Clive Moesby, Portfolio Holder for Resources

IMPLICATIONS:

<u>Finance and Risk</u> Yes□ No ⊠ Details:
There are no financial implications arising from this report.
On behalf of the Section 151 Officer
Land Carlo Park Brotestina Var III No II
<u>Legal (including Data Protection)</u> Yes□ No ⊠ Details:
The Council has to prepare a statement of accounts in accordance with the statutory framework established for England by the Accounts and Audit Regulations 2015. The audit of those accounts is undertaken in accordance with the statutory framework established by Sections 3 and 20 of the Local audit and Accountability Act 2014 for England.
On behalf of the Solicitor to the Council
<u>Staffing</u> Yes□ No ⊠ Details:
There are no human resource issues arising directly out of this report.
On behalf of the Head of Paid Service
Equality and Diversity Impact and Consultation Yes□ No ⊠
Equality and Diversity Impact and Consultation Yes□ No ⊠ Details:
Not applicable to this report.
On behalf of the Information, Engagement and Performance Manager
Environment Yes□ No ⊠ Please identify (if applicable) how this proposal/report will help the Authority meet its carbon neutral target or enhance the environment. (Please speak to Richard Winter, Climate Change Officer, for advice) Details:
Not applicable to this report.

DECISION INFORMATION:

☑ Please indicate which threshold applies:				
Is the decision a Key Decision? A Key Decision is an Executive decision which has a significant impact on two or more wards in the District or which results in income or expenditure to the Council above the following thresholds:	Yes□	No ⊠		
Revenue (a) Results in the Council making Revenue Savings of £75,000 or more or (b) Results in the Council incurring Revenue Expenditure of £75,000 or more.	(a) □	(b) □		
Capital (a) Results in the Council making Capital Income of £150,000 or more or (b) Results in the Council incurring Capital Expenditure of £150,000 or more.	(a) □	(b) □		
District Wards Significantly Affected: (to be significant in terms of its effects on communities living or working in an area comprising two or more wards in the District) Please state below which wards are affected or tick All if all wards are affected:	AII ⊠			
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	Yes□	No ⊠		
If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? (decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer)	Yes□	No ⊠		
Consultation carried out: (this is any consultation carried out prior to the report being presented for approval)	Yes⊠	No □		
Leader □ Deputy Leader □ Executive □ SLT □ Relevant Service Manager □ Members □ Public □ Other ☒				
Links to Council Ambition: Customers, Economy, Environment, Housing				

DOCUMENT INFORMATION:

Appendix No	Title
Background	Papers
when prepar	npublished works which have been relied on to a material extent ing the report. They must be listed in the section below. If the ng to Executive, you must provide copies of the background

DECEMBER 2024

Agenda Item 8

Audit Committee Work Programme 2024/25

Date of Meeting	Items for the Agenda	Lead officer	
	Summary of Progress on the 2023/24 and 2024/25 Internal Audit Plan	Head of Internal Audit Consortium	
	Internal Audit Consortium Annual Report	Head of Internal Audit Consortium	
	Report of External Auditor - Auditor's Annual Report 2022/23	Forvis Mazars	
	Report of External Auditor - External Audit Progress Report	Forvis Mazars	
	Audit Committee Work Programme 2024/25	Section 151 Officer	
26 September 2024	Strategic Risk Register	Chief Executive Officer	
	BDC Statement of Accounts 2023/24	Section 151 Officer	
	Assessment of Going Concern Status	Section 151 Officer	
	Annual Report of Committee	Section 151 Officer	
	Annual Governance Statement and Local Code of Corporate Governance	Monitoring Officer	
	Report of Internal Audit - Summary of progress on the Internal Audit Plan 2024/25	Head of Internal Audit Consortium	
	Implementation of Internal Audit Recommendations	Head of Internal Audit Consortium	
	Review of the Internal Audit Charter	Head of Internal Audit Consortium	
	Report of External Auditor - Audit Strategy Memorandum	Forvis Mazars	
	Audit Committee Work Programme 2024/25	Section 151 Officer	

Date of Meeting	Items for the Agenda	Lead officer	
	Member Training 2024/25 - Member Discussion	Members	
22 January 2025	Global Internal Audit Standards	Head of Internal Audit Consortium	
	Report of Internal Audit - Summary of progress on the Internal Audit Plan 2024/25	Head of Internal Audit Consortium	
	Local Audit Delays Update	Section 151 Officer	
	Audit Committee Work Programme 2024/25	Section 151 Officer	
20 February 2025	Report to those charges with Governance - Forvis Mazar's Audit Completion Report	Forvis Mazars	
Extraordinary	Accounting Policies 2024/25	Section 151 Officer	
9 April 2025	Strategic Risk Register	Chief Executive Officer	
	Audit Committee - Self-assessment for effectiveness	Section 151 Officer	
	Report of Internal Audit - Internal Audit Plan 2025/26	Head of Internal Audit Consortium	
	Implementation of Internal Audit Recommendations	Head of Internal Audit Consortium	
	Report of Internal Audit - Summary of progress on the Internal Audit Plan 2024/25	Head of Internal Audit Consortium	
	Audit Committee Work Programme 2024/25	Section 151 Officer	