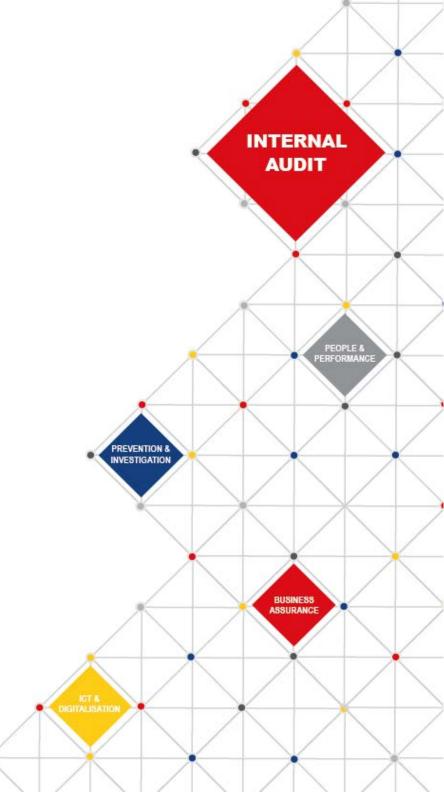
## **Chiltern District Council**

Strategic Plan 2018/19 to 2020/21 and Annual Internal Audit Plan 2018/19

## **FINAL**

2018/19



### **Internal Audit Annual Plan**

#### Introduction

This Annual Plan is drawn up in accordance with the Terms of Reference of TIAA and the Internal Audit Strategic Plan.

#### Audit Strategy Methodology

We adopt a proprietary risk based approach (GUARD) to determining your audit needs each year which includes reviewing your risk register and risk management framework, previous internal audit work for the organisation, the Regulatory Framework and assessment of Chiltern and South Bucks Councils, external audit recommendations together with key corporate documentation such as your business and corporate plan, standing orders, and financial regulations. The Strategy will be based predominantly on our understanding of the inherent risks facing the Councils and those within the sector and has been developed with senior management. The resultant risk analysis underpinning your Audit Plans is set out at Annex A.

#### Internal Audit Strategic and Annual Plan

The rolling strategic plan is set out in Annex B. The Annual Plan (Annex C) sets out the reviews that will be carried out, the planned times and the scopes for each of these reviews. The rolling strategic plan will be subject to ongoing review and could change as the risks change for the organisation and will be formally reviewed with senior management and the Audit and Standards Committee throughout the financial year.

The planned time set out in the Annual Plan for the individual reviews includes: research, preparation and issue of terms of reference, production and review of working papers and reports and site work. The timings shown in the Annual Plan assume that the expected controls will be in place.

Substantive testing will only be carried out where a review assesses the internal controls to be providing 'limited' or 'no' assurance with the prior approval of the Councils and additional time will be required to carry out such testing. Chiltern and South Bucks Councils are responsible for taking appropriate action to establish whether any loss or impropriety has arisen as a result of the control weaknesses.

#### Audit Committee Responsibility

It is the responsibility of the Audit and Standards Committee to determine that the number of audit days to be provided and the planned audit coverage are sufficient to meet the Committee's requirements and the areas selected for review are appropriate to provide assurance against the key risks within the organisation.

#### Reporting

**Assignment Reports:** A separate report will be prepared for each review carried out. Each report will be prepared in accordance with the arrangements contained in the Terms of Reference agreed with TIAA and which accord with the requirements of the Public Sector Internal Audit Standards (PSIAS).

**Progress Reports:** Progress reports will be prepared for each Audit and Standards Committee meeting. Each report will detail progress achieved to date against the agreed annual plan.

Annual Report: An Annual Report will be prepared for each year in accordance with the requirements set out in the Public Sector Internal Audit Standards (PSIAS). The Annual Report will include our opinion of the overall adequacy and effectiveness of Chiltern and South Bucks Councils governance, risk management and operational control processes.

#### **Satisfaction Questionnaires**

A satisfaction questionnaire will be issued with each final report to comply with our ISO requirements. An annual client satisfaction survey will also be issued with the annual report with the feedback received from these survey(s) being used to develop staff and the service we provide.

#### Liaison with the External Auditor

We will liaise with the Councils External Auditor. Any matters in the areas included in the Annual Plan that are identified by the external auditor in their audit management letters will be included in the scope of the appropriate review.

#### Background

Chiltern and South Bucks District Councils provide local government services to their respective districts. A regular internal audit of these services is required by the Accounts and Audit Regulations 2015.

#### **Assurance Mapping**

For each assurance review an assessment of the combined effectiveness of the controls in mitigating the key control risks will be provided. The assurance mapping process is set out in Annex D.

#### **Audit Remit**

The Audit Remit (Annex E) formally defines internal audit's purpose, authority and responsibility. It establishes internal audit's position within Chiltern and South Bucks Councils and defines the scope of internal audit activities and ensures compliance with the PSIAS.

#### **Conflict of Interest**

We are not aware of any conflicts of interest and should any arise we will manage them in line with PSIAS requirements, the Councils requirements and TIAA's internal policies.

#### Key Assurance Risk Areas (KARAS)

We have identified 5 'Key Assurance Risk Areas' upon which our audit planning process for Chiltern and South Bucks Councils will be built. For each audit assignment we will identify to which of the KARAs it is aligned. This then enables our Annual Report to set out our assessment of which, if any, of the individual KARAs the Council is most exposed and equally important how this compares with our other similar clients. The KARA initiative enables the provision of additional assurance to the Council in that as well as a Council specific assurance assessment we are also able to place this assurance assessment in the context of comparable processes at other organisations.

KARA	Rationale
Probity and Statutory non- compliance	Assurance over core compliance risks.
High impact risks	Targets high risks at the Council and risks emerging from elsewhere.
Customer satisfaction	Assurance that the Council is delivering high-quality services to its customers.
Major change	Pro-active work to ensure planned changes do not cause disruption or damage the Council's internal control framework.
Operational delivery	Assurance on efficiency and effectiveness of the Council's service delivery.

#### Performance

The following Performance Targets will be used to measure the performance of internal audit in delivering the Annual Plan:

Area	Performance Measure	Target
	Completion of planned audits.	100%
Achievement of the plan	Audits completed in time allocation.	100%
	Draft report issued within 10 working days of exit meeting.	95%
Reports Issued	Final report issued within 10 working days of receipt of responses.	95%
Professional Standards	Compliance with Public Sector Internal Audit Standards.	100%

#### **Key Contact Information**

Name	Contact Details
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Job Title: Client Manager	Phone number: 07976 815945

#### **Limitations and Responsibility**

Internal controls can only provide reasonable and not absolute assurance against misstatement or loss. The limitations on assurance include the possibility of one or more of the following situations, control activities being circumvented by the collusion of two or more persons, human error, or the overriding of controls by management. Additionally, no assurance can be provided that the internal controls will continue to operate effectively in future periods or that the controls will be adequate to mitigate all significant risks that may arise in future.

The responsibility for a sound system of internal controls rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses that may exist. Neither should internal audit work be relied upon to identify all circumstances of fraud or irregularity, should there be any, although the audit procedures have been designed so that any material irregularity has a reasonable probability of discovery. Even sound systems of internal control may not be proof against collusive fraud.

Reliance will be placed on management to provide internal audit with full access to staff and to accounting records and transactions and to ensure the authenticity of these documents.

The matters raised in the audit reports will be only those that come to the attention of the auditor during the course of the internal audit reviews and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. The audit reports are prepared solely for management's use and are not prepared for any other purpose.

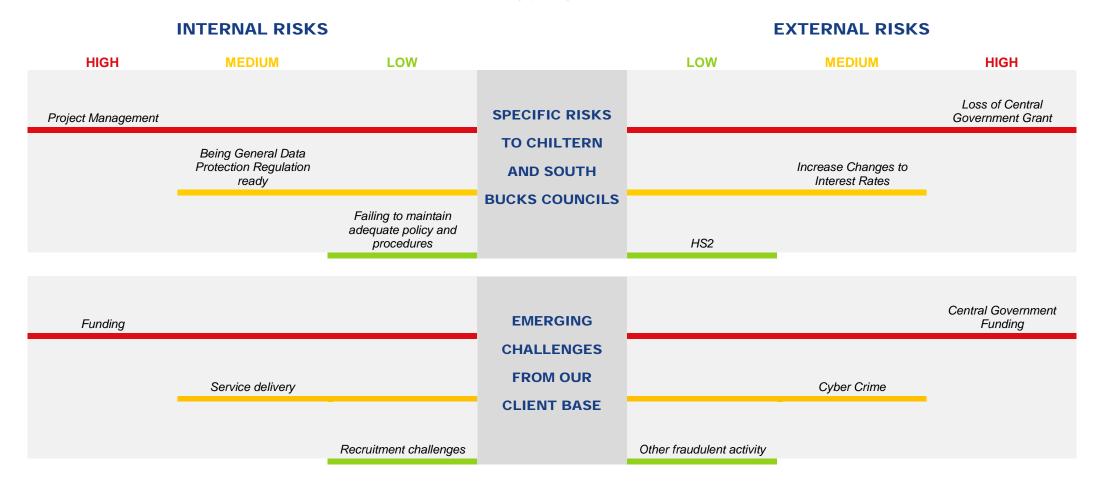
#### **Release of Report**

The table below sets out the history of this plan.

Date plan issued: January 2018

#### **Annex A: GUARD Risk Analysis**

As part of the audit planning process an assessment of key risks has been completed, to identify those that are most relevant to the organisation and where internal audit assurance would be best focussed. These are summarised by priority below.



#### Annex B: Annual Plan - 2018/19

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
	Governance	Assurance	8	Rationale: This is a high priority area and subject to an annual audit Scope: To be agreed with Director of Resources for 2018/19 audit	
3	Risk Management	Assurance	8	<ul> <li><u>Rationale:</u> A periodic review to test the appropriateness and effectiveness of the risk management arrangements at Chiltern and South Bucks Councils</li> <li><u>Scope:</u> The review will include:         <ul> <li>assess the effectiveness of the controls that mitigate the risk for a number of the key operational risks identified.</li> <li>challenge the risk management process and how managers/risk owners use risk management for everyday decision making</li> </ul> </li> </ul>	
2	Procurement	Assurance	8	<ul> <li><u>Rationale:</u> This is a regular audit to provide assurance that the Council's procurement and contracting procedures are sound and working well.</li> <li><u>Scope</u>: The audit will examine the following key areas: <ul> <li>The control framework is adequate to ensure that procurement and contracts are issued in compliance with the Council's Constitution, policies and procedures.</li> <li>Procurement and Contracts are undertaken to support an efficient procurement and contracting process.</li> <li>Appropriate systems and practices are in place for the sound management of procurement and contracts.</li> <li>Appropriate records are maintained, in particular the Contracts Register and compliance with the Transparency Code.</li> <li>Appropriate monitoring and post implementation review takes place to confirm that value for money has been achieved</li> </ul> </li> </ul>	
3	Counter Fraud	Assurance	8	<u>Rationale:</u> Potential fraudulent activity both internal and external is a real risk for the public sector and a periodic audit should be undertaken to assess the Council's preparedness. <u>Scope:</u> The focus of the review will be determined in discussions with the Director of Resources.	
1	Data Protection (GDPR)	Assurance	8	<u>Rationale:</u> Failure to comply with the new General Data Protection Regulations could mean very substantial fines. An assurance audit to assess compliance with the Regulations will help to identify any weakness or omission.	

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<ul> <li><u>Scope</u>: To review compliance with the General Data Protection Regulations (GDPR).</li> <li>The review will directly assess how compliant the Council is with the GDPR. This will include key elements such as (but not limited to): <ul> <li>Privacy Impact Assessments</li> <li>Data Subject rights (e.g. Right to be forgotten)</li> <li>Data Classification and Asset management</li> <li>Data Security</li> <li>Breach Management</li> <li>Governance</li> <li>Consent</li> <li>Data Controllers &amp; Processors</li> </ul> </li> </ul>	
3	Business Continuity	Assurance	7	<ul> <li><u>Rationale:</u> Business Continuity is essential for maintaining essential services to the community and Business Continuity Plans need to be tested to confirm they are resilient and able to provide continuation of business as usual. A periodic audit will provide assurance that Services will continue as required after a disruption.</li> <li><u>Scope:</u> The review will assess the adequacy and effectiveness of the internal controls in place at the Council for managing the business continuity planning process and ensuring that the Council is resilient to disruptive events that may impact upon the organisation. The audit will focus on the following key areas:</li> <li>Business Continuity risks per the Strategic and Operational risk registers have action plans to mitigate risk;</li> <li>Appropriate Corporate and Service Continuity plans are in place, which are regularly reviewed and readily accessible to staff;</li> <li>Business Impact Assessments are completed on a regular basis;</li> <li>Staff and additional financial resources required to execute the plans are adequate and available;</li> <li>Adequate training is provided to officers to ensure they are fully aware and understand their responsibilities in the event of an incident occurring; and</li> <li>Business Continuity Plans are periodically tested to ensure their effectiveness, with lessons learned being integrated into the planning process</li> </ul>	
2	Purchase Cards	Assurance	8	Rationale: This is a high profile expense and one that Members have asked for a regular audit to be undertaken.	

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place in the Councils for the distribution, monitoring and managing of the Councils Purchasing Cards.	
				The audit will focus on the following key areas:	
				<ul> <li>Adequate and effective procedures are in place for the appropriate management of Purchasing Cards to include the authorisation of credit card expenditure,</li> </ul>	
				<ul> <li>Spending limits are proportionate and appropriate;</li> </ul>	
				<ul> <li>Purchases are in accordance with agreed procedures;</li> </ul>	
				<ul> <li>Purchases for officer (and Member) expenses are in accordance with approved expenses procedures</li> </ul>	
				<ul> <li>Credit card statements are reconciled and correctly allocated to budgets on a timely basis.</li> </ul>	
				As part of the audit an analysis will be made of the types of items being purchased using the purchase cards based on a sample of cards in use.	
		Assurance	8	Rationale: This is a high profile expense and one that Members have asked for a regular audit to be undertaken	
				<u>Scope</u> : To assess the adequacy and effectiveness of the internal controls in place in the Councils for the managing and processing of mileage and expense claims. The audit will focus on the following key areas:	
				<ul> <li>Adequate and effective procedures are in place for the processing of expense claims;</li> </ul>	
1	Expenses			<ul> <li>The authorisation of expense claims is restricted to appropriate personnel;</li> </ul>	
				<ul> <li>Officer (and Member) expense claims are authorised and processed in accordance with approved procedures;</li> </ul>	
				<ul> <li>VAT is reclaimed where appropriate and all relevant receipts are retained to support claims made; and</li> </ul>	
				Expenses are correctly allocated to budgets on a timely basis.	
				As part of the audit an analysis will be made of the types of items being reimbursed based on a sample of claims	
				<u>Rationale:</u> Project Management is a high risk and a periodic assurance audit will help identify any weakness in the management of projects.	
1	Project Management	Assurance	8	Scope: The audit will consider the following key areas:	
				The project management framework including Project Management Toolkit, procedures/templates and guidance covering project management activities;	

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<ul> <li>Review of a sample project from the initial stages through to when the project is in progress covering:</li> <li>Project Initiation Document (PID)</li> <li>Initial plan</li> <li>Risk and Issues logs</li> <li>Budgetary control</li> <li>Quality log</li> <li>Stakeholder Analysis and Communications Plan</li> <li>Resource management</li> <li>Approval of projects by Committee/Council</li> <li>Monitoring of the operational and financial progress of projects by Project Team/Committee/Council; and</li> <li>Escalation of project risks from individual project risk logs/registers, corporate risk register and strategic risks, as appropriate.</li> </ul>	
2	Main Accounting	Assurance	7	<ul> <li><u>Rationale:</u> This is the main financial ledger and an important system for the Councils which is audited annually.</li> <li><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Councils for the financial accounting system (Integra). The review will focus on the following areas: <ul> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> <li>Access to Integra is restricted to authorised personnel only and the system is appropriately backed up;</li> <li>Financial information is produced which meets all legal/reporting requirements on a timely basis;</li> <li>Journal entries are supported by adequate narrative, with appropriate separation of duties in place;</li> <li>New ledger codes/amendments are supported by appropriate authorisation;</li> <li>Suspense accounts are regularly reviewed and cleared; and</li> </ul> </li> </ul>	
3/4	Payroll	Assurance	15	<ul> <li><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</li> <li><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Payroll function. The audit will focus on the following key areas: <ul> <li>Recommendations from the previous audit report have been implemented;</li> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> </ul> </li> </ul>	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				System access is restricted to authorised personnel only;	
				<ul> <li>Payroll data is supported by proper documentation, properly authorised, and subject to satisfactory segregation of duties; and</li> </ul>	
				Reasonableness checks and regular reconciliations are carried out.	
				In addition, a full examination of the total data held will be reviewed using data analytics techniques.	
				Rationale: Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit	
				<u>Scope</u> : To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Debtors function. The audit will focus on the following key areas:	
				<ul> <li>Recommendations from the previous audit report have been implemented;</li> </ul>	
	3/4 Accounts Receivable (Debtors)		8	<ul> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> </ul>	
3/4		Assurance		<ul> <li>System access is restricted to authorised personnel only;</li> </ul>	
				<ul> <li>Invoices and credit notes are raised following appropriate authorisation, and are actioned promptly and accurately;</li> </ul>	
				<ul> <li>Regular reconciliations are carried out between the sales ledger module and the general ledger control account;</li> </ul>	
				<ul> <li>Regular reviews of outstanding debtors are undertaken using aged debtor listing, with arrears action carried out promptly in accordance with procedures; and</li> </ul>	
				<ul> <li>Write-offs are approved by senior officers in accordance with procedures</li> </ul>	
				<u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit	
				<u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Creditors function. The audit will focus on the following key areas:	
				<ul> <li>Recommendations from the previous audit report have been implemented,</li> </ul>	
3/4	Accounts Payable (Creditors)	Assurance	8	<ul> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> </ul>	
				<ul> <li>System access is restricted to authorised personnel only;</li> </ul>	
				<ul> <li>New supplier set up/amendments to supplier details are subject to satisfactory segregation of duties;</li> </ul>	
				<ul> <li>Payments are supported by proper documentation, properly authorised, correctly coded, and subject to satisfactory segregation of duties; and</li> </ul>	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				Regular reconciliations are carried out between the purchase ledger module and the general ledger control account	
3/4	Benefits	Assurance	13	<ul> <li><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</li> <li><u>Scope:</u> To review and test the controls in place at the Council for the Housing Benefits function. The review will focus on the following key areas: <ul> <li>Appropriate policies and procedures are in place for managing the Benefits process.</li> <li>Access to the Benefits system is restricted and adequately controlled.</li> <li>Standard variables/parameters are independently reviewed at the start of the year.</li> <li>Benefits are properly due and correctly calculated, with appropriate sample checks carried out.</li> <li>Payment runs are subject to independent review and authorisation prior to payment.</li> <li>System performance is monitored and Benefits data regularly reconciled.</li> <li>Write-offs are approved by senior officers in accordance with authorised procedures</li> </ul> </li> </ul>	
3/4	Council Tax Support	Assurance	13	<ul> <li><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</li> <li><u>Scope:</u> To review and test the controls in place at the Council for the Council Tax Support function. The review will focus on the following key areas: <ul> <li>Appropriate policies and procedures are in place for managing the Council Tax Support process.</li> <li>Access to the Council Tax Support system is restricted and adequately controlled.</li> <li>Standard variables/parameters are independently reviewed at the start of the year.</li> <li>Council Tax Support is properly due and correctly calculated, with appropriate sample checks carried out.</li> <li>Payment runs are subject to independent review and authorisation prior to payment.</li> <li>System performance is monitored and Council Tax Support data regularly reconciled.</li> <li>Write-offs are approved by senior officers in accordance with authorised procedures</li> </ul> </li> </ul>	

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
3/4	Council Tax and NDR	Assurance	25	<ul> <li><u>Rationale:</u> Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit</li> <li><u>Scope:</u> To review the adequacy and effectiveness of the controls in place at the Council for the management of the Business Rates and Council Tax functions. The audit will focus on the following: <ul> <li>There are up to date documented procedures for Business Rates/Council Tax;</li> <li>System access is adequately controlled;</li> <li>The correct charges have been applied;</li> <li>Regular reconciliations are carried out with Valuation Office listings;</li> <li>Discounts and exemptions are approved by authorised staff and supported by documentary evidence;</li> <li>Refunds are appropriately approved and authorised prior to payment;</li> <li>Arrears are promptly identified and pursued and any write offs are valid and authorised;</li> <li>Suspense accounts are regularly cleared and any exception reports are regularly reviewed; and</li> <li>Systems are adequately monitored and reconciled</li> </ul> </li> </ul>	
3/4	Cash and Bank	Assurance	7	<ul> <li><u>Rationale:</u> Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit</li> <li><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Income (Cash &amp; Bank) function. The audit will focus on the following key areas: <ul> <li>Recommendations from the previous audit report have been implemented;</li> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> <li>System access is restricted to authorised personnel only;</li> <li>Adequate controls are in place to ensure amounts received are accurately and promptly banked;</li> <li>Adequate security is in place to manage all cash received and banking arrangements;</li> <li>Regular reconciliations are carried out between the cash receipting system, the general ledger and the Council's bank account; and</li> <li>All items posted to suspense accounts are checked and regularly cleared.</li> </ul> </li> </ul>	

FINAL

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
3/4	Budgetary Control	Assurance	7	<ul> <li><u>Rationale:</u> This is a periodic audit to provide assurance over the budgetary Control process.</li> <li><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for the management of the financial budget for the Council. The review will focus on the following areas: <ul> <li>Adequate policies and procedures are in place and accessible to all relevant staff;</li> <li>Budgets are comprehensive, with realistic assumptions, and are appropriately approved;</li> <li>Budgets are loaded into the ledger completely and accurately;</li> <li>Budgets are allocated to individuals at an appropriate level, with monitoring responsibilities clearly outlined;</li> <li>Budget monitoring reports are provided on a timely basis;</li> <li>Reasonable variance levels are set which trigger action and explanation; and</li> <li>Budget virements are subject to appropriate authorisation.</li> </ul> </li> </ul>	
3/4	ICT Audits – Annual Network Audit	Assurance	6	RationaleTo provide ongoing assurance about the quality of controls that operate at the core of the network, including password strength and how users are provided with network accounts and how these are then monitored for changes (e.g. leavers and movers), in order to provide assurance that the PSN requirements are being metScopeA review of the operating controls over the network infrastructure, including :• Network security policy;• External penetration testing;• Firewall administration access rights;• Firewall password security settings;• Review of firewall rules;• Patching of firewall appliances; and• Intrusion prevention	
2	ICT Audits – Members IT Support	Assurance	6	Rationale To ensure that the there are no IT security, or data risks associated with use of ICT equipment by members.	

Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<u>Scope</u> A review which analyses the security of and use of ICT equipment issued to members, including set-up and configuration, data security controls, password management, information movement.	
2	ICT Audits – GDPR	Assurance	6	RationaleTo ensure that the Council has recognised the changes – including the increased penalties for non-compliance - associated with the new GDPR legislation and is compliant with the new requirements.ScopeA review which verifies that policy and procedure changes have been made, key roles and responsibilities have been assigned – e.g. information asset owners and data controllers – and that resources have been assigned and a programme of user awareness and training has taken / is taking place.	
2	ICT Audits – Cyber Resilience	Assurance	6	Rationale         To ensure that there is an appropriate level of resilience from cyber-attack, including the range of preventive measures in place and also the extent and quality of the backup / recovery arrangements.         Scope         A review will consider the following:-         • Information Risk Management Regime         • Secure configuration         • Network security         • Managing user privileges         • User education and awareness         • Incident management         • Malware prevention         • Monitoring         • Removable media controls         • Home and mobile working	
2	ICT Audits – User Access to Business Systems	Assurance	8	Rationale To ensure that the procedures for allocating user accounts to a selection of significant business applications ensure that those users have only the required access to perform the functions associated with their current role and that the principal of 'least privilege' is adopted.	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<u>Scope</u> A review which captures starters, leavers, changes and amendments to user account activities and also the active control processes for managing the user populations. The review will also capture and analyse the existence and use of privileged user accounts within each application selected to determine the numbers in existence for reasonableness and how these 'superuser' accounts are maintained and used. Where possible we will use CAATS to extract and analyse user data to enhance this audit review.	
2	ICT Audits – Customer Experience	Advice	6	RationaleTo ensure that this most significant programme/project in the year ahead is properly and appropriately managed to ensure a successful outcome.ScopeAn advisory review – likely on a 'call-off' basis as the project unfolds - which provides concurrent guidance and instruction about how the key aspects should be designed, and/or implemented. This could be (but is not restricted to) project management, system integration testing, user security model (application access control configuration), change control processes, data cleansing, data migration (control and testing), Data migration (reconciliation), data migration (security), interface security and data (or interface) error handling.:	
2	Housing Homelessness and Temporary Accommodation	Assurance/follow up	8	<u>Rationale;</u> Following concerns at South Bucks Council a full internal audit was conducted into homelessness and temporary accommodation. This audit will follow up on the recommendations made last year <u>Scope;</u> This will be a follow up on recommendations made last year into homelessness and temporary accommodation.	
2	Housing Section 106	Assurance	8	<ul> <li><u>Rationale:</u> Management of Section 106 assets is a key function which receives a periodic audit.</li> <li><u>Scope:</u> The review will considered the following arrangements for the entering into, and monitoring of, Section 106 Agreements: <ul> <li>The determination and monitoring of financial contributions, including the schemes funded as a result of the receipt of such contributions.</li> <li>The policy and procedures in place for Planning arrangements for Section 106</li> </ul></li></ul>	
1	Disabilities Facilities Grant	Assurance	5	<u>Rationale:</u> An annual audit which is a central government requirement <u>Scope:</u> To examine all income and expenditure and to confirm money spent is in accordance with the Grant conditions	
1	Safeguarding	Assurance	6	Rationale: This is a periodic audit into an area that has significant reputational	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				<ul> <li>risk.</li> <li><u>Scope:</u> The review will consider the following key areas:</li> <li>Appropriate policies and procedures are in place;</li> <li>Risks are appropriately captured within service area business plans, with a relevant action plan is in place;</li> <li>A training programme is in place to raise awareness of Safeguarding and Prevent issues; and</li> <li>Adequate reporting mechanisms are in place to keep senior management and Members informed.</li> </ul>	
1	Chiltern Pools	Assurance	8	<u>Rationale:</u> This is a significant development for Chiltern Council and an early audit will help support the project <u>Scope:</u> To review the business case and progress to date to confirm that PRINCE 2 principles are being followed and the project is on course. There will be a requirement to review the documentation produced to date to confirm PRINCE 2 compliance.	
2	Health and Safety – Contractor Arrangements	Assurance	8	<ul> <li><u>Rationale</u>; This is a periodic review to assess the Councils (and Contractors) compliance with Health and Safety regulations for Contractors engaged with the Councils.</li> <li><u>Scope</u>; To assess the adequacy and effectiveness of the internal controls in place in Environmental Services for the management of Contractor Health &amp; Safety arrangements. The review will focus on: <ul> <li>a review of the controls in place for H&amp;S arrangements for contractors;</li> <li>a review of the policies and procedures for H&amp;S for contractors;</li> <li>the monitoring arrangements for H&amp;S</li> <li>risk management of H&amp;S</li> <li>reporting arrangements for contractor H&amp;S</li> </ul> </li> </ul>	
2	Property and Asset Management	Assurance	8	<ul> <li><u>Rationale:</u> This is a periodic audit which has not been audited for some time.</li> <li><u>Scope:</u> The audit will review the following: <ul> <li>Policy, Procedures and Legislation;</li> <li>Reviewing inspection regimes;</li> <li>Council Offices and in particular the management and maintenance of i) Capswood – South Bucks main office, and</li> <li>ii) Chiltern DC offices at King George V to include life span, cost of upkeep v cost of disposal fit for purpose now and into the future</li> </ul> </li> </ul>	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
				Subletting arrangements	
2	Planning Development and Enforcement	Assurance	11	<ul> <li><u>Rationale:</u> This is a periodic audit to provide assurance over the Planning Development and Enforcement process.</li> <li><u>Scope</u>: The audit will include the following keys areas of activity: <ul> <li>The policy and procedures to include the Legal, Organisational and Management arrangements</li> <li>Enforcement Notices</li> <li>Inspections and Monitoring</li> <li>Appeals</li> <li>Data and Information Security</li> <li>Risk and how this is managed</li> </ul> </li> </ul>	
1	Building Control	Assurance	8	<ul> <li><u>Rationale:</u> Building Control is an important local authority activity which has not been audited for some time.</li> <li><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for the building control function. The audit will focus on the following areas: <ul> <li>Up to date policies/procedures are in place and accessible, which are compliant with current legislation.</li> <li>Building control fees are in line with the Building Local Authority Charges Regulation 2010, and are reviewed regularly and presented to Committee for approval.</li> </ul> </li> <li>Applications are assessed in accordance with designated timescales by appropriately qualified personnel, and only processed upon receipt of the correct fee.</li> <li>Appropriate, accurate and complete records of applications are maintained.</li> <li>Building control income is received in full, and reconciled to the general ledger with any exceptions investigated</li> </ul>	
CREMAT	ORIUM				
1	Annual Internal Audit	Assurance	6	Rationale: As no external audit now takes place this is a detailed internal audit to give management confidence that the systems and procedures are working as expected. <u>Scope:</u> An internal audit that includes a review of all the Crematorium's financial transactions	



Quarter	Audit	Туре	Days	Rationale & Scope	Prog Ref
1	Additional Audit for 2018/19	Assurance	6	<u>Rationale</u> ; Due to system changes at the crematorium an additional audit has been requested for the financial year 2018/19 <u>Scope</u> ; To be determined and agreed	
2	Administration System – Follow up	Assurance	4	<u>Rationale:</u> A new administration system went live during 2017/18 and a follow up to the audit is required in 2018/19 <u>Scope:</u> This will be to review the recommendations made during the 2017/18 audit to confirm this have been implemented and the system is now working as expected with the appropriate controls in place	
MANAGE	MENT AND FOLLOW UP				
1-4	Follow-up	Follow up	10	<u>Rationale:</u> This is an annual review of the recommendations made during the year to confirm that there has been progress to implement them. <u>Scope:</u> All recommendations made during the year are reviewed to confirm what progress has been to implement them as agreed in the action plan	
1-4	Risk Management Assistance	Assistance	10	Time spent by Audit Director on providing ongoing assistance with Risk Management for the Councils	
4	2018/19 Annual Report	Management	2	Preparing the Annual Assurance report	
1-4	Management & Planning	Management	<u>22</u>	Time spent on managing the contract, liaison meetings, preparation for and attending Audit Committees and other management duties.	
		Total days	<u>342</u>		

			Days Required							
Review Area	KARA Risks 18/19	Туре	2017/18	<b>2018/19</b>	2019/20	2020/21	2021/22			
Corporate										
Governance	Probity and Statutory non-compliance	Assurance	8	8	8	8	8			
Risk Management	Probity and Statutory non-compliance	Assurance	-	8	-	8	-			
Procurement	Probity and Statutory non-compliance	Assurance	-	8	-	-	-			
Counter Fraud	Probity and Statutory non-compliance	Assurance	-	8	-	8	-			
Complaints and Compliments		Assurance	6	-	6	-	6			
Performance Management/Efficient Working		Assurance	-	-	8	-	-			
Contracts		Assurance	10	-	9	-	8			
Information Governance/Data Quality		Assurance	-	-	8	-	-			
Freedom of Information		Assurance	-	-	8	-	-			
Data Protection (GDPR)	Probity and Statutory non-compliance	Assurance	8	8	8	-	8			
Business Continuity	Probity and Statutory non-compliance	Assurance	-	7	-	8	-			
Emergency Planning		Assurance	6	-	-	6	-			
Health and Safety – Internal Arrangements		Assurance	-	-	7	-	-			
South Bucks – New Company		Assurance	-	-	8	-	-			
Purchase Cards	Probity and Statutory non-compliance	Assurance	8	8	8	8	8			
Expenses	Probity and Statutory non-compliance	Assurance	8	8	8	8	8			
Project Management	Probity and Statutory non-compliance	Assurance		8	-	8	-			

Finance							
Main Accounting	Probity and Statutory non-compliance	Assurance	7	7	7	7	7
Payroll	Probity and Statutory non-compliance	Assurance	12	15*	11	15	11
Accounts Receivable (Debtors)	Probity and Statutory non-compliance	Assurance	9	8	8	8	8
Accounts Payable (Creditors)	Probity and Statutory non-compliance	Assurance	9	8	8	8	8
Benefits	Probity and Statutory non-compliance	Assurance	13	13	13	13	13
Council Tax Support	Probity and Statutory non-compliance	Assurance	13	13	13	13	13
Council Tax and NDR	Probity and Statutory non-compliance	Assurance	20	25*	20	25	20
Cash and Bank	Probity and Statutory non-compliance	Assurance	8	7	7	7	7
Treasury Management		Assurance	8	-	7	-	7
Budgetary Control	Probity and Statutory non-compliance	Assurance	-	7	-	7	-
ICT							
Targeted Audits to be agreed and reported to the next Audit (and Standards) Committee		Assurance	24	-	12	18	18
Annual Network Audit	Probity and Statutory non-compliance	Assurance		6	6	6	6
Members IT Support	Probity and Statutory non-compliance	Assurance		6			
GDPR	Probity and Statutory non-compliance	Assurance		6			
Cyber Security	Probity and Statutory non-compliance	Assurance		6			
Business Systems	Probity and Statutory non-compliance	Assurance		8			
Customer Experience	Probity and Statutory non-compliance	Advice		6			
IT Strategy		Assurance		-	6	-	-

Health and Housing							
Housing Homelessness and Temporary Accommodation	Operational Delivery and follow up	Assurance	-	8	-	8	-
Temporary Accommodation (see above)		Assurance	15	-	-	-	-
Housing Section 106	Operational Delivery	Assurance	-	8	-	8	-
Environmental Health		Assurance	-	-	8	-	-
Licensing		Assurance	-	-	8	-	-
Disabilities Facilities Grant	Operational Delivery	Assurance	5	5	5	5	5
Community Services							
Grants		Assurance	-	-	-	6	-
Leisure Contract		Assurance	-	-	8	-	-
Safeguarding	Operational Delivery	Assurance	-	6	-	-	6
Chiltern Pools	Operational Delivery	Assurance	-	8	-	-	-
Environmental Services							
Health and Safety – Contractor Arrangements	Operational Delivery	Assurance	-	8	-	8	-
Grounds Maintenance		Assurance	8	-	-	6	-
Waste services (Chiltern, Wycombe and South Bucks)		Assurance	11	-	11	-	11
Waste Services – Health and Safety		Assurance	15	-	-	-	-
Waste Services – Health and Safety Follow up		Follow up	4	-	-	-	-
Environmental Services Contracts		Assurance	-	-	10	-	-
Car Parking		Assurance	7	-	7	-	7
Property and Asset Management	Operational Delivery	Assurance	-	8	-	8	-

Cemeteries		Assurance	8	-	-	6	-
Commercial Rents/debt recovery		Assurance	8	-	8	-	8
Sustainable Development							
Planning Development and Enforcement	Operational Delivery	Assurance	-	11	-	11	-
Building Control	Operational Delivery	Assurance	-	8	-	-	8
Legal and Democratic Services							
Land Charges		Assurance	-	-	8	-	-
Electoral Registration		Assurance	-	-	-	8	-
External Solicitors/Court Costs		Assurance	-	-	6	-	-
Human Resources							
Absence Management		Assurance	8	-	8	-	8
Recruitment		Assurance	8	-	-	8	-
Equalities		Assurance	-	-	8	-	-
Harmonised Policies and Procedures		Assurance	8	-	-	7	-
iTrent Payroll System (HR Module)		Assurance	6	-	-	-	6
Performance Monitoring		Assurance	-	-	7	-	-
Other							
Follow up		Follow up	10	10	10	10	10
Risk Management Assistance			15	10	10	10	10
Annual Report			2	2	2	2	2



Audit Management		22	22	22	22	22
	Sub total	337	326	344	322	273
Crematorium						
Annual Internal Audit	Assurance	5	6	6	6	6
Additional audit for 2018/19	Assurance	-	6	-	-	-
Administration System (follow up in 2018/19)	Assurance	5	4	-	-	-
	Grand Total	347	342	350	328	279

<ul> <li>*Addition</li> </ul>	l days	to	enable	а	comprehensive	review	of	key	databases	using	Data	Analytics	techniques.
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#### **Corporate Assurance Risks**

We consider four corporate assurance risks; directed; compliance; operational and reputational, and tailor the type of audit accordingly. For all types of audit we also taken into account value for money considerations and any linkages to the organisational Assurance Framework. The outcomes of our work on these corporate assurance risks informs both the individual assignment assurance assessment and also the annual assurance opinion statement. Detailed explanations of these assurance assessments are set out in full in each audit report.

#### **Assurance Assessment Gradings**

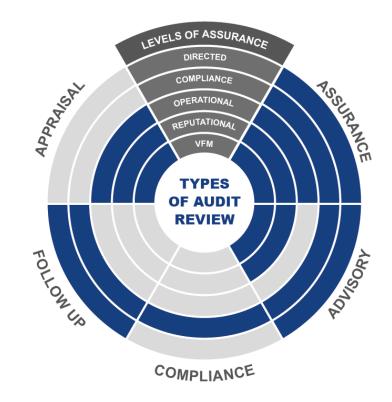
We use four levels of assurance assessment: substantial; reasonable, limited and no. Detailed explanations of these assurance assessments are set out in full in each audit report.

#### LEVELS OF ASSURANCE PROVIDED



#### **Types of Audit Review**

The Annual Plan includes a range of types of audit review. The different types of review focus on one or more of the corporate assurance risks. This approach enables more in-depth work to be carried out in the individual assignments than would be possible if all four assurance risks were considered in every review. The suite of audit reviews and how they individually and collectively enable us to inform our overall opinion on the adequacy and effectiveness of the governance, risk and control arrangements is set out in the assurance mapping diagram.



#### Role

The main objective of the internal audit activity carried out by TIAA is to provide, in an economical, efficient and timely manner, an objective evaluation of, and opinion on, the overall adequacy and effectiveness of the Councils framework of governance, risk management and control. TIAA is responsible for giving assurance to Chiltern and South Bucks Councils on the adequacy and effectiveness of the Councils risk management, control and governance processes.

#### Scope

All Chiltern and South Bucks Councils activities fall within the remit of TIAA. TIAA may consider the adequacy of controls necessary to secure propriety, economy, efficiency and effectiveness in all areas. It will seek to confirm that the Councils management has taken the necessary steps to achieve these objectives and manage the associated risks. It is not within the remit of TIAA to question the appropriateness of policy decisions. However, TIAA is required to examine the arrangements by which such decisions are made, monitored and reviewed.

TIAA may also conduct any special reviews requested by the board, audit committee or the nominated officer (being the post responsible for the day to day liaison with the TIAA), provided such reviews do not compromise the audit service's objectivity or independence, or the achievement of the approved audit plan.

#### **Standards and Approach**

TIAA's work will be performed with due professional care, in accordance with the requirements of the PSIAS.

#### Access

TIAA has unrestricted access to all documents, records, assets, personnel and premises of the Councils and is authorised to obtain such information and explanations as they consider necessary to form their opinion. The collection of data for this purpose will be carried out in a manner prescribed by TIAA's professional standards, Information Security and Information Governance policies.

#### Independence

TIAA has no executive role, nor does it have any responsibility for the development, implementation or operation of systems. However, it may provide independent and objective advice on risk management, control, governance processes and related matters, subject to resource constraints. For day to day administrative purposes only, TIAA reports to a nominated officer within the Councils and the reporting arrangements must take account of the nature of audit work undertaken. TIAA has a right of direct access to the chair of the Audit (and Standards) Committee and the Section 151 holder.

To preserve the objectivity and impartiality of TIAA's professional judgement, responsibility for implementing audit recommendations rests with the Councils management.

Consultancy activities are only undertaken with distinct regard for potential conflict of interest. In this role we will act in an advisory capacity and the nature and scope of the work will be agreed in advance and strictly adhered to.

#### Irregularities, Including Fraud and Corruption

TIAA will without delay report to the appropriate regulator, serious weaknesses, significant fraud, major accounting and other breakdowns subject to the requirements of the Proceeds of Crime Act 2003.

TIAA will be informed when evidence of potential irregularity, including fraud, corruption or any impropriety, is discovered so that TIAA can consider the adequacy of the relevant controls, evaluate the implication of the fraud on the risk management, control and governance processes and consider making recommendations as appropriate. The role of TIAA is not to investigate the irregularity unless commissioned to do so.