Buckinghamshire & Milton Keynes Fire Authority



Meeting and date: Overview and Audit Committee, 13 March 2024

Report title: Internal Audit Report – Internal Audit Strategy and Annual Internal

Audit Plan 2024/25

Lead Member: Councillor David Carroll

Report sponsor: Mark Hemming – Director of Finance and Assets

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Action: Decision.

Recommendations: That Members note the Internal Audit Strategy and approve the

Annual Internal Audit Plan.

Executive summary:

This paper sets out the Internal Audit Strategy and the proposed Internal Audit Plan for 2024/25 (attached at Appendix A) for the approval of the Committee.

There are no material changes from the strategy of previous years, however, there remains some flexibility through a small provision of contingency days to enable the Director of Finance and Assets to work with Internal Audit to direct the work to the most appropriate areas. The final reports will be presented to Members at the next Overview and Audit Committee meeting.

Financial implications: The audit work is contained within the 2024/25 budget.

Risk management: There are no risk implications arising from this report.

Legal implications: There are no legal implications arising from this report.

Privacy and security implications: There are no privacy and security implications arising from this report.

Duty to collaborate: Not applicable.

Health and safety implications: There are no health and safety implications arising from this report.

Environmental implications: There are no environmental implications arising from this report.

Equality, diversity, and inclusion implications: There are no equality and diversity implications arising from this report.

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Consultation and communication: Not applicable.

Background papers:

Appendix	Title	Protective Marking
Α	Internal Audit Strategy and Annual Internal Audit Plan 2024/25	Not applicable

Buckinghamshire & Milton Keynes Fire Authority



Internal Audit Strategy and Annual Plan 2024/25

Overview and Audit Committee

13 March 2024

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1. Introduction

- 1.1 Buckinghamshire Council's (BC) Business Assurance Team is responsible for implementation of the Buckinghamshire and Milton Keynes Fire Authority's (BMKFA) Internal Audit Strategy through delivery of work programmes in accordance with the agreed Service Level Agreement. This paper details the Internal Audit Strategy for 2024/25 and the proposed Internal Audit Plan for the year. The Plan will be subject to regular review and presented to the Overview and Audit Committee on a quarterly basis, together with a progress report, for approval.
- 1.2 The responsibility, status and authority of Internal Audit at the Fire Authority is outlined within the Constitution and Financial Regulations.

2. Internal Audit Strategy

- 2.1 The Accounts and Audit Regulations 2015 require the Fire Authority to maintain an adequate and effective Internal Audit Service in accordance with proper internal audit practices. The Fire 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. Proper internal audit practices are defined in the Public Sector Internal Audit Standards 2017.
- 2.2 The Public Sector Internal Audit Standards (PSIAS) defines Internal Audit as "an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes". The PSIAS set out the mandatory guidance that constitutes the principles of the fundamental requirements for the professional practice of internal auditing within the public sector, and the Buckinghamshire

Council Internal Audit Service operates in accordance with these standards. The standards also require that the Chief Internal Auditor (CIA) provides an opinion in an annual report on the System of Internal Control, which is used to inform the Fire Authority's Annual Governance Statement. In providing this opinion the (CIA) is required to review annually the financial management, risk management and governance processes operating within the Authority. This includes reviewing internal control systems for key processes on a risk basis.

- 2.3 The Internal Audit Service is provided as part of a service level agreement with Buckinghamshire Council. The Council's Internal Audit Service is delivered in partnership with the APEX Audit Framework, hosted by the London Borough of Croydon. This partnership arrangement includes an element of a "call-off contract" should it be necessary to outsource specific technical audits such as ICT or complex contracts.
- 2.4 A key part of the strategy is ensuring the right skills mix and resources exist to deliver an effective service. For the 2024/25 Internal Audit Plan, we aim to provide continuity in the resources we allocate for the audit assignments; the Audit Manager will oversee the programme of work, ensuring work is delivered on time and to the correct quality, and will present the quarterly plans and progress reports to the Overview and Audit Committee; suitably qualified and experienced auditors will be allocated to undertake the audit assignments.
- 2.5 The Annual Internal Audit Plan is drafted for the approval of the Overview and Audit Committee, in consultation with the Senior Management Board, with consideration of the Fire Authority's Corporate Plan, Strategic Risks and previous audit activity. There will remain a significant emphasis for internal audit activity in reviewing financial systems and compliance with the governance framework; however, the Plan also reflects other strategic priorities that will be progressed during 2024/25.

 Appendix B is the Fire Authority's Audit Universe, which is a list audits performed in previous years and the awarded assurance opinions.

2.6 The plan and allocation of audit days will be regularly reviewed by the Audit Manager and the Director of Finance and Assets to ensure the focus of the audit activity is directed to the key risk areas where independent assurance is required.

Our Approach to an Internal Audit Assignment



2.7 In order to underpin the Annual Audit Opinion, a risk-based methodology will be applied to all audit assignments, providing assurance that key controls are well designed and operating effectively to mitigate principal risk exposures. Terms of reference

will be prepared for each audit assignment, in consultation with the relevant Manager, to ensure that key risks within the audited area are identified.

2.8 The quality of work is assured through the close supervision of staff and the subsequent review of reports, audit files and working papers by the Audit Manager. Exit meetings are held with the relevant officers to ensure factual accuracy of findings and subsequent reporting, and to agree appropriate action where additional risk mitigation is required.

3. The Internal Audit Plan

- 3.1 The Internal Audit Plan for 2024/25 is outlined within Appendix A.
- 3.2 Each audit assignment will result in a specific audit report although the audit methodology will vary depending on the requirements of the scope of work. The audit techniques to be used will be selected from the following, depending on which is considered to be the most effective for delivering the audit objectives:
 - Risk Based Audit (Risk): In which risks and controls associated with the achievement of defined business objectives are identified and both the design and operation of the controls in place to mitigate key risks are assessed and tested, to ascertain the residual risk to the achievement of managements' objectives. Any audit work intended to provide an audit opinion will be undertaken using this approach.
 - Systems Based Audit (Systems): A full audit in which every aspect and stage of the audited subject is fully considered. It includes review of both the design and operation of controls. Undertaken from a systems perspective with a 'cradle to grave approach'.
 - Key Controls Testing (Key): Clearly focused on a small number of material or key controls.
 - Systems Development Audit (SDA): Ongoing review of developing plans and designs for new systems and processes aimed at identifying potential weaknesses in control if the plans and designs go ahead as they are.

- Verification Audit (Verification): Where there is pre-existing confidence that controls are well designed, but compliance is a material issue, audits which test only for compliance with controls can be appropriate. Audit undertaken to verify key outcomes. This work normally takes the form of checking data and management actions to confirm accuracy and appropriateness and does not consider controls or risks in the wider sense.
- Advisory / consultancy Assurance Reviews: The PSIAS defines consulting services as follows: "Advisory and client related service activities, the nature and scope of which are agreed with the client, are intended to add value and improve an organisation's governance, risk management and control processes without the internal auditor assuming management responsibility. Examples include counsel, advice, facilitation and training".
- **Follow-Up:** Work undertaken to assess the extent to which management action plans have been implemented. This may be following up our own recommendations from previous years or through follow-up of other assurance provider outcomes (e.g. External Audit).
- 3.3 In accordance with the Audit Strategy, we will audit the processes in place for governance, financial management and risk management on an annual basis. We will continue to work with the External Auditors to ensure the scope of our work is sufficient that they can seek to place reliance on it for their audit of the Statement of Accounts and value for money opinion.
- 3.4 Implementation of the Internal Audit Plan will be monitored by use of Key Performance Indicators as outlined in **Appendix C**.

 These will be discussed at service level agreement meetings with the Director of Finance and Assets.

4. Responsible Officers

Audit Service

Selina Harlock (Audit Manager)	01296 383717	selina.harlock@buckinghamshire.gov.uk
Alex Prestridge (Audit Lead)	01296 387089	alex.prestridge@buckinghamshire.gov.uk
Fire Authority Mark Hemming (Director of Finance & Assets)	01296 744671	mhemming@bucksfire.gov.uk

Appendix A – Internal Audit Plan 2024/25

Auditable Area	Key Audit Objectives	Days Budget (Timing)	Risk Assessed
Core Financial Controls	To fulfil our statutory responsibilities, we will undertake work to provide assurance over key controls within the financial governance framework, which consists of the following key systems:	30 days	High
	 Financial Control/Monitoring Procure to Pay Debtors Capital Financial Regulations General Ledger Reconciliations Treasury Management All audit findings from the 2023/24 review will be followed-up to ensure that actions have been fully implemented. 		
Development of the Corporate Plan Assurance	To provide assurance on the Corporate Plan that is being developed so as to ensure that lessons have been learnt from previous plans, feedback from key stakeholders is considered and that an effective framework is in place to enable effective monitoring of the key objectives identified in the respective plans and strategies.	15 days	High
Workforce Planning	To determine the extent to which the Authority has assessed its current and future workforce and skills gap; and evaluate the strategies that have been developed in order to address the identified risks.	10 days	High
Energy Management	To ensure that the Authority has an effective Environmental Strategy which drives effective monitoring of energy consumption, with a clear focus and drive to reduce the Authority's carbon footprint.	10 days	High
Project Management Framework	To ensure that the Authority have robust project management and governance arrangements in place that are operating effectively.	10 days	High
Contingency	A contingency has been included within the audit plan to provide flexibility and in recognition of an expected but as yet unspecified need that may arise during the year.	10 days	N/A
Follow-Up General	To ensure all outstanding medium and high recommendations raised in previous audits are implemented.	10 days	Various
Corporate Work	A proportion of the total audit resource is made available for 'corporate work'. Corporate work is non-audit specific activity which still 'adds value' or fulfils our statutory duties. Examples of this type of work include attendance and reporting to Management and Committee, and audit strategy and planning work. This also includes developing the Audit Plan, writing the Annual Report and undertaking the annual Review of Effectiveness of Internal Audit.	10 days	N/A
Total		105 days	

Below is a list of auditable areas identified during the development of the plan and will be noted as contingency audits or will be considered for the next year.

Auditable Area	Days Budget (Timing)
Improvement Plan Assurance : Does the Authority have effective arrangements and adequate oversight on progress being made to implement the actions identified within the improvement plans. An effective framework is in place to ensure that poor progress is escalated in a timely manner and adequate governance arrangements are in place to enable effective and timely decision making to support the delivery of the improvement plans.	10

Appendix B – Audit Universe (Previous Audit Activity and Assurance Level)

Audit	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Core Financial Controls	√ (Reasonable)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)	√ (Substantial)
Asset Management System (Project)	√ (Reasonable)											
HR Workforce Planning, Training and Appraisal / Performance Management	(Reasonable)											
Property Management	√ (Reasonable)					√ (Substantial)						
Treasury Management		√ (Substantial)	(Incl. in Core Financial Controls)	(Incl. in Core Financial Controls)	(Incl. in Core Financial Controls)	(Incl. in Core Financial Controls)					(Incl. in Core Financial Controls)	(Incl. in Core Financial Controls)
Fleet Management		√ (Reasonable)	Oontrois)	Oontrois)	OUTITIOS)	(Substantial)					Controls	Controls)
ICT Strategy		(Reasonable)		√ (Reasonable)		(Castania)						
Asset Management System		(Limited)		(Reasonable)					√ (Partial)			
Corporate Governance			√ (Reasonable)			√ (Substantial)						
Risk Management			√ (Substantial)								√ (Substantial	
Housing Accommodation and Allowances			(Reasonable)									
HR People Management			√ (Substantial)							(Reasonable)		
Pensions Administration				√ (Reasonable)							√ (Substantial	
Control Centre				√ (Reasonable)								
Financial Planning					√ (Substantial)							
Business Continuity					√ (Reasonable)						√ (Reasonable	
Project Management					√ (Reasonable)							
Information Security							√ (Reasonable)					
Project Management BLH							√ (Reasonable)					
Stores							√ (Limited)					
Cyber Security								√ (Reasonable)				
Performance Management								(Reasonable)				
Budget Monitoring and Forecasting								√ (Substantial)				
GDPR									√ (Partial)			
Resource Management System (IT Application Audit)									√ (Partial)			
Procurement Governance and Compliance										√ (Reasonable)		
Portfolio Management Office Assurance										√ (Reasonable)		
Asset Management Process Mapping										N/A		
Blue Light Hub – Post Project Evaluation										(Limited)		

HR/ Payroll Process Mapping					N/A	
Partnership Working						(Reasonable)
Medium Term Financial Plan Assurance						N/A
Contract and Critical Supplier Management						(Reasonable)
Management Corporate Improvement Plan Assurance						N/A

^{*} Please note that the assurance opinions were changed in 2020/21 where we introduced 'Partial' as a new conclusion on the system of internal control. However, effective 2022/23 these were revised to be in line with the CIPFA recommended opinions.

Appendix C – 2024/25 Internal Audit Key Performance Indicators

	Performance Measure	Target	Method
1	Elapsed time between start of the audit (opening meeting) and Exit Meeting.	Target date agreed for each assignment by the Audit manager, stated on Terms of Reference, but should be no more than 3 X the total audit assignment days (excepting annual leave etc.)	Internal Audit Performance Monitoring System
2	Elapsed Time for completion of audit work (exit meeting) to issue of draft report.	15 Days	Internal Audit Performance Monitoring System
3	Elapsed Time between issue of Draft report and issue of Final Report	15 Days	Internal Audit Performance Monitoring System
4	% of Internal Audit Planned Activity delivered by 30 April 2025	100% of Plan by End of April 2025	Internal Audit Performance Monitoring System
5	% of High and Medium priority recommendations followed up after implementation date	All High and Medium recommendations followed up within three months of the date of expected implementation	Internal Audit Performance Monitoring System
6	Customer satisfaction questionnaire (Audit Assignments)	Overall customer satisfaction 95%	Questionnaire
7	Extent of reliance External Audit can place on Internal Audit	Reliance placed on IA work	External Audit Annual Report

We will also continue to monitor performance standards outlined in the service level agreement. This includes ensuring requests for assistance with suspected cases of fraud (% of responses made within 24 working hours) as appropriate and also monitors relationship management issues in the areas of:

- Timeliness
- Willingness to cooperate/helpfulness
- Responsiveness
- Methodical approach to dealing with requests
- Quality of work/service provided