

**Agenda Item No:** 9

**Report to:** Audit Committee

**Date of Meeting:** 27 June 2013

**Report Title:** Audit Committee Report 2012/13 to Council

**Report By:** Tom Davies  
Chief Auditor

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### **Purpose of Report**

Report from the Audit Committee on its annual review of the effectiveness of Internal Audit to Council.

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### **Recommendation(s)**

- 1. That the Audit Committee Report 2012/13 is approved for presentation to Council.**

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### **Reasons for Recommendations**

Regulation 6 of the Accounts and Audit Regulations (England) 2011 requires relevant bodies to conduct an annual review of the effectiveness of its system of internal audit and for a committee of the body to consider the findings.

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## Introduction

1. Regulation 6 of the Accounts and Audit Regulations (England) 2011 requires Local Authorities to conduct a review at least once a year of the effectiveness of its system of internal control and publish a statement on internal control each year with the authority's financial statements.
2. This report, which follows the format recommended by the Chartered Institute of Public Finance and Accountancy, sets out the review of internal control and assurance gathering process as required by the statute and accompanying guidance.
3. In addition, Regulation 6 of the Regulations requires relevant bodies to conduct an annual review of the effectiveness of its system of internal audit and for a committee of the body to consider the findings. Proper practices in relation to internal audit for relevant bodies for the period up to 31 March 2013 may be found in the "Code of Practice for internal audit in local government in the United Kingdom 2006". We have assessed ourselves against the checklist contained therein and are compliant.
4. With effect from 1 April 2013, however, the newly introduced Public Sector Internal Audit Standards have replaced the proper practices as contained in the "Code of Practice for internal audit in local government in the United Kingdom 2006". We are in a transitional phase and not far from being compliant with them. A report will come to the 25 September Audit Committee meeting.

## Principal statutory obligations and organisational objectives

### Responsibility for Statutory Obligations

5. The Council has formally established responsibilities for its statutory obligations through the Constitution that sets out individual officer and member responsibilities, delegations to officers and committees, and committee terms of reference. These records are accessible on the Council's website and through the Monitoring Officer.
6. Detailed officer responsibilities are set out in job descriptions and structure charts.
7. Directors are accountable for ensuring that responsibilities, authorities and any limits to authorities are appropriately and clearly established within their directorates. The Audit Committee receives internal and external audit reports and ensures that any non-compliance is remedied through appropriate recommendations, and where necessary, requires assurance that recommendations have been implemented.

### Organisational objectives and priorities

8. The multi-functional nature of the Council means that there are a large number of mandatory and discretionary requirements and powers. Hastings Borough Council took action to identify its priority objectives resulting in a list of principles and priorities underpinning the Corporate Plan. The priority areas were then devolved through Directors to Service Managers in the form of Service Delivery Plans.

9. There is a Local Code of Corporate Governance. Audit Committee Terms of Reference clearly assign responsibility for the scrutiny of corporate governance arrangements to the Audit Committee.

### **Performance against planned outcomes**

10. The Authority knows how well it is performing against its planned outcomes through a comprehensive and effective performance management system. This system monitors performance against plans, targets, and financial budgets, with quarterly reports to the Overview and Scrutiny Committees.

### **Identifying principal risks to achieving the objectives**

11. 'Risk' is any obstacle, or potential obstacle, to the achievement of the Council's priority objectives or statutory duties. The purpose of risk management is to ensure the achievement of the Council's objectives with efficient use of resources.
12. By identifying high-risk groups or areas, corporate policies and service resources can be targeted on those groups or areas.
13. The Council has a formal Risk Management Framework that was approved by Cabinet. The Framework is designed to encourage managers to 'own' the risks associated with their areas of responsibility. Managers use a corporately agreed matrix for identifying and assessing risks and controls.
14. The council continues to ensure the identification of key risks from both a strategic and operational perspective. Using a process of self-assessment, top management re-assessed the strategic risks (those to service provision, statutory compliance, and reputation) and services assessed operational risks (financial, physical and contractual risks).
15. During 2012/13 both the Strategic Risk Register and Operational Risk Registers were regularly updated.
16. Council has approved Terms of Reference for the Audit Committee giving it a clear remit to,  
  
"Review, evaluate and approve: The effectiveness of the Council's process for assessing significant risk exposures and the measures taken by management to mitigate risks to an acceptable level"
17. A large part of the internal audit plan is risk-driven.

### **Key controls for managing principal risks**

18. To ensure that its controls are fully up to date with the current operating environment, Financial Operating Procedures provide the framework within which Members and Officers must operate and compliance is routinely checked through audit reports to the Audit Committee.

19. In addition, the Council has these controls in place:

- a. The Council has adopted the CIPFA Code on Treasury Management to ensure compliance with the Prudential Code
- b. An Anti-Fraud and Anti-Corruption Strategy (Fighting Fraud Locally)
- c. A Whistle-blowing Policy
- d. Codes of Conduct for Members and Officers
- e. Registers of Interests for Members and Officers
- f. A Scheme of Delegation, including financial and budgetary responsibilities
- g. Risk Registers (reviewed by Audit Committee) are updated on an ongoing basis
- h. Each service produces a Service Delivery Plan and performance is monitored through quarterly Performance Reviews
- i. A Corporate Health and Safety system of monitoring and review is in place
- j. A Corporate complaints procedure operates

**Sources of assurance**

20. Sources of assurance on the adequacy and effectiveness of the Council's controls over key risks include:

21. a. An Audit Committee that is a fully constituted Committee of the Council
- b. An internal Audit and Investigations service that is independent in planning, operating, and reporting, and that reports to the Audit Committee
- c. A Chief Finance Officer with responsibility for ensuring the proper administration of the Council's financial affairs
- d. Processes for maintaining internal control include a framework of regular management information, Financial Rules and Finance Operating Procedures, administrative procedures (including segregation of duties), management supervision and a system of delegation and accountability
- e. A performance management system that includes commentary on service-level risk, the setting of targets for service delivery and monitoring of performance against targets and plans
- f. A strategic Corporate Plan setting out the Council's priorities, which cascades to operational plans at service and project level, including consideration of risks
- g. An annual budget and quarterly reviews of actual expenditure to budget
- h. A Local Code of Corporate Governance agreed by Cabinet

- i. A project management system for major projects
- j. A Risk Management Framework
- k. Declaration of related party transactions forms for members
- l. Codes of Conduct for Members and Officers
- m. A Staff Health & Safety Group that monitors insurable and public liability risks
- n. A Corporate Risk Management Group that meets regularly
- o. Risk management processes designed to ensure that Directors and Managers retain ownership of the risks and internal controls associated with their areas of responsibility. Directors and Managers are therefore an important source of assurance on the effectiveness of controls for managing risks
- p. The Audit and Investigations service carries out audit and risk reviews of high-risk areas to provide assurance that major risks have been identified and are being actively managed, and that the internal control environment is adequate
- q. The Head of Finance in his role provides a source of assurance that the requirements of the Local Government Act 1972 Section 151 are being met
- r. The Monitoring Officer, undertakes the relevant statutory duties and provides a source of assurance that the Council's affairs are conducted in compliance with relevant legislation and Codes of Conduct
- s. External audit provides a source of assurance on the operation of internal controls in that PKF inspects internal audit work at each annual external audit.

## **Evaluation of assurances and identification of gaps**

### **The Audit and Investigations Service**

- 22. On the basis of the audits reported to the Audit Committee by the Audit and Investigations Division, the audit conclusion is that during the year 2011/12, 83% of the Council's operations that were audited incorporate control systems that are 'Satisfactory' or better.
- 23. In financial systems, the audit aims to evaluate the strength of controls for ensuring the proper administration of financial resources. In the audit of non-financial areas, the audit aims to evaluate the strength of controls for ensuring that external obligations are met and that the success criteria of the activity under review are achieved. The following table shows the audit conclusion for each of the main audits carried out in 2012/13.

24.

Audit Conclusion	No of Audits
A: Good More than the key controls are in place and work effectively. While improvement may be possible, there are no significant audit concerns	3
B: Satisfactory The key controls are in place and work effectively. Improvement is possible but there are no significant audit concerns	5
C: Adequate but with reservations in some areas Some controls in place are adequate but there are audit concerns in some areas	0
D: Poor Controls are not adequate or not present or not adequately complied with. Improvement is essential	0
Total audits	8

25. This compares with previous years as follows:

Audit Conclusion	2009-10	2010-11	2011-12	2012-13
	No of audits	No of audits	No of audits	No of audits
A, B: Good / Satisfactory	6	8	5	8
C, D: Adequate / Poor	1	0	1	0

26. The audit conclusions are defined in the service's own Internal Audit Manual.

27. Based on the audit work undertaken by Internal Audit, the Authority's overall internal control system is considered to be satisfactory.

### External Audit

28. External audit is carried out by PKF and is an important source of assurance on the adequacy of the Council's arrangements for ensuring proper arrangements for its financial affairs. During 2012/13 the Audit Committee received the following reports:

Report Title

Date issued

External Audit Report on final Accounts	Sept 2012
Appointment of PKF (UK) LLP as External Auditor & Audit Fees 2012/13 and beyond	Sept 2012
Annual Audit Letter 2011/12	Oct 2012
Planning Letter 2012/13	Dec 2012
Grant Claim and Returns Certification for the year ended 31/03/12	Jan 2013
External Annual Audit Plan 2012/13	Feb 2012

29. BDO (PKF for last year) gave an unqualified opinion on the Council's accounts for 2011/12 and an unqualified opinion on value for money and concluded that the Council's 2011/12 expenditure plans were met.

#### **Areas of audit concern arising from internally conducted audits**

30. Although risk levels changed, there were few concerns arising from internally conducted audits.

#### **Areas of audit concern arising from External Audit**

31. No significant areas of audit concern have been highlighted in the Annual Audit Letter (October 2012).
32. The key findings reported in it were:
- (i) The financial statements give a true and fair view of the Council's financial affairs and income and expenditure for the year and were properly prepared in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2011/12.
  - (ii) The Annual Governance Statement was not misleading or inconsistent with other information of which the external auditor was aware.
  - (iii) Internal controls remain adequate.
  - (iv) External audit were able to rely on the work of Internal Audit.
  - (v) An unqualified opinion was given on the 'Whole of Government Accounts' assurance statement.
  - (vi) External audit were satisfied that in all respects, the Council has put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources for the year 31 March 2012 and issued an unqualified value for money conclusion.
  - (vii) The financial and economic outlook remains challenging but the council is working effectively to reduce the budget gap. Some uncertainty remains as the full financial effects of the Government's reforms of council tax and housing benefit (through the universal credit) and the future retention of business rates are determined.

## Policy Implications

## Risk Management

33. This report has referred to the way that the council manages its risks.

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### Wards Affected

None

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### Area(s) Affected

None

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### Policy Implications

Please identify if this report contains any implications for the following:

Equalities and Community Cohesiveness	No
Crime and Fear of Crime (Section 17)	No
Risk Management	Yes
Environmental Issues	No
Economic/Financial Implications	No
Human Rights Act	No
Organisational Consequences	No
Local People's Views	No

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### Background Information

External audit Annual Governance Report 2011/12  
External audit Annual Audit Letter 2011/12

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