Blackburn with Darwen Borough Council



Audit & Governance Committee Annual Report 2022/23

1. Background to the Governance Framework

1.1. What drives governance policy?

- 1.1.1. The Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded, properly accounted for, and used economically, efficiently and effectively. In discharging this overall responsibility, the Council is also responsible for ensuring that there are sound systems of internal control and governance in place which facilitate the effective exercise of the Council's functions and which include adequate arrangements for the management of risk.
- 1.1.2. Effective corporate governance is a fundamental feature of any successful public sector organisation. Corporate governance initially became a major issue after several high profile failures in the private sector. As a result, there have been several reviews directed at improving governance in that sector.
- 1.1.3. The trend for strengthening governance arrangements spread to the public sector and resulted in the publication of a joint Chartered Institute of Public Finance and Accountancy (CIPFA)/Society of Local Authority Chief Executives and Senior Managers (SOLACE) document, Delivering Good Governance in Local Government a Framework, in 2007. The Framework was intended to be used as best practice for developing and maintaining a locally adopted code of governance. It was intended to assist authorities in reviewing the effectiveness of their own governance arrangements by reference to best practice and using self-assessment.
- 1.1.4. In 2016 CIPFA/SOLACE published a revised Framework to ensure that local government continues to develop and shape its own approach to governance, taking account of the environment in which it now operates. The new Framework applied to annual governance statements prepared for the financial year 2016/17 onwards. It is based on the International Framework: Good Governance in the Public Sector published by CIPFA and the International Federation of Accountants in 2014 and contains seven core principles. These are set out in 1.1.8 below.
- 1.1.5. The International framework defines governance as follows: "Governance comprises the arrangements put in place to ensure the intended outcomes for stakeholders are defined and achieved."
- 1.1.6. It also states that:
 - "To deliver good governance in the public sector both governing bodies and individuals working for public sector entities must try to achieve their entities objectives while acting in the public interest at all times. Acting in the public interest implies primary consideration of the benefits for society, which should result in positive outcomes for service users and stakeholders."
- 1.1.7. Blackburn with Darwen Borough Council operates through a governance framework that brings together an underlying set of legislative requirements, governance principles and corporate policies and management processes.
- 1.1.8. The Council recognises the seven core principles of good governance identified by CIPFA/SOLACE to ensure that the intended outcomes for stakeholders are defined and achieved, while acting in the public interest at all times. These are:

- A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law;
- B. Ensuring openness and comprehensive stakeholder engagement;
- C. Defining outcomes in terms of sustainable economic, social, and environmental benefits:
- D. Determining the interventions necessary to optimise the achievement of the intended outcomes:
- E. Developing the entity's capacity, including the capability of its leadership and the individuals within it;
- F. Managing risks and performance through robust internal control and strong public financial management; and
- G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability.
- 1.1.9. The Council's local Code of Corporate Governance was revised during 2016 to ensure that it complied with the latest requirements. It was updated again during 2018/19 as part of the annual review of the Constitution, to provide improved clarity and explanation and was approved by full Council in May 2018.
- 1.1.10. The local Code establishes specific standards operating principles and values for the Council, its members and staff. These build on the Seven Principles of Public Life (the Nolan Principles). The Principles apply to anyone who works as a public officer –holder. This includes all those elected or appointed to public office and all people working in local government. The principles are:
 - Selflessness:
 - Integrity;
 - Objectivity;
 - Accountability;
 - Openness;
 - Honesty; and,
 - Leadership.
- 2. Blackburn with Darwen Borough Council Audit & Governance Committee
- 2.1. Why do we need an Audit Committee?
- 2.1.1. Whilst there is currently no statutory requirement to have an audit committee they are widely recognised as a core component of an effective governance framework and therefore reflect good practice. Regardless of a specific legislative or regulatory framework, Section 151 of the Local Government Act 1972 requires local authorities to make arrangements for the proper administration of their financial affairs and appoint a Chief Financial Officer to have responsibility for those affairs. To be truly effective, the Chief Financial Officer requires an effective audit committee to provide support and challenge, as well as an adequate and effective internal audit. Both these elements are now enshrined in the 'Public Sector Internal Audit Standards' and the supporting 'Local Government Application Note' published by CIPFA.

- 2.1.2. The Council's Audit & Governance Committee has a key role in overseeing and assessing the internal control, risk management and corporate governance arrangements in place and advising on the adequacy and effectiveness of these arrangements. This role is formalised in the Committee's terms of reference.
- 2.1.3. The Council's Audit & Governance Committee is properly constituted and is given sufficient authority and resources by the Council. The Committee has the right to obtain all the information it considers necessary and to consult directly with senior managers. In line with best practice from both the public and private sectors, the Audit & Governance Committee can report its observations and concerns directly to the Executive Board.
- 2.1.4. Good corporate governance requires independent and effective assurance about the adequacy of financial management and of management arrangements for achieving the organisation's objectives. These responsibilities require an independent and challenging approach. Through these mechanisms, Committee Members are able to use their skills and experiences to influence the Council's governance, internal control processes and risk management arrangements.
- 2.1.5. An effective Committee can bring many benefits to the Council, including:
 - increasing public confidence in the objectivity and fairness of financial and other reporting;
 - providing additional assurance through a process of independent and objective scrutiny;
 - raising awareness of the need for internal control and the implementation of audit recommendations; and,
 - reinforcing the importance and independence of internal audit.

2.2. What does an audit committee do?

- 2.2.1. Audit committees are a key component of corporate governance. They increase public confidence in the objectivity and fairness of financial and other reporting. They also provide a high-level focus on assurance and the organisation's arrangements for governance, managing risk and maintaining an effective control environment.
- 2.2.2. Good practice is contained within CIPFA's document 'Audit Committees Practical Guidance for Local Authorities and the Police' (2018 Edition). The latest edition of the document updates the core functions of an audit committee in relation to governance, risk management, internal control and audit. The introduction of the Public Sector Internal Audit Standards, along with annual governance statements and associated guidance has also been considered in relation to their impact on an audit committee.
- 2.2.3. During 2022/23 the Audit & Governance Committee consisted of six cross party elected Members. The Committee's purpose, as set out in its terms of reference, are to:
 - provide independent assurance of the adequacy of the risk management framework, overall governance and the associated control environment and the extent to which these meet the objectives of the Local Code of Corporate Governance;

- provide independent review of the Council's governance, risk management and control frameworks;
- oversee the financial reporting and annual governance processes; and
- oversee internal and external audit, helping to ensure efficient and effective assurance arrangements are in place.
- 2.2.4. The Audit & Governance Committee provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards. It also provides assurance, on behalf of the Council, about the extent to which the objectives of the Local Code of Corporate Governance, as set out in the Constitution, are being met. This purpose is reflected in the Committee's Terms of Reference, which are included at Appendix 1 of this report.
- 2.2.5. The CIPFA guidance includes a greater focus on the factors that support improvement. These include the knowledge and skills that Audit Committee members require and a focus on where the Audit Committee adds value. The publication provides practical support to the Committee in evaluating the existing Committee arrangements and any planned improvements.
- 2.2.6. The guidance includes a self-assessment checklist of good practice to assist both Members and Officers who are involved in the operation of the Committee. The checklist was reviewed and updated by Audit & Assurance on behalf of the Committee during 2022/23. It was presented for consideration at the Committee's meeting on 2 March 2023, along with an evaluation of the effectiveness of the Committee completed by the Head of Audit & Assurance on behalf of the Committee. The results of the assessments against the CIPFA best practise and evaluation of effectiveness are included at Appendix 2 and 3 of this report for reference. The results provide evidence that the Committee is operating effectively and, with the exception of independent member representation on the Committee, is following CIPFA best practice.
- 2.2.7. The Audit & Governance Committee met three times during the 2022/23 financial year. Timings of the meetings throughout the year are designed to coincide with the governance timetable. The June meeting received various annual assurance reports in respect of the year ended 31 March 2022 including the Head of Audit Annual Audit Opinion and the Treasury Management Annual Report. The Council's 2021/22 Annual Governance Statement was also received and approved. The meeting on 29 November received the External Auditors Audit Plan for their audit of the Council's Financial Statements for the year ending 31 March 2022.
- 2.2.8. The Committee meeting on 2 March 2023 received an update from External Audit on the progress of their work on the Council's 2020/21 and 2021/22 Financial Statements. The report noted that there were no significant matters arising from the 2021/22 audit to draw to members' attention at that stage. The Committee had previously received the Final Auditors Annual Report for 2020/21 at its meeting in June 2022. The reported that the external audit work on the financial statements was substantially complete except for a national issue that had arisen with regards to infrastructure assets. The External Auditor was awaiting the outcome from a task and finish group set up by CIPFA to consider this issue and then assess the impact on the audit of the 2020/21 financial statements.

- 2.2.9. The Committee's terms of reference and outline work programme (see Appendices 1 and 4), and associated reports it receives, are designed to enable its Members to make a positive contribution to the continual improvement of control and governance processes and arrangements across the Council, as well as performing the roles as identified by the Constitution. Member attendance details are set out in Appendix 4
- 2.2.10. As well as the assurance provided to the Committee from the key reports received from the Council's External Auditor, the Committee also places reliance on the work carried out by Audit & Assurance in delivering the annual internal audit plan. Assurance is gained throughout the year from considering the progress reports received at each meeting. These provide the Committee with an overview of the activity carried out by internal audit during the period, including counter fraud activity, and an overview of all audit reports finalised. Emphasis has been on limited or no assurance reports and related control implications. Where these opinions are in respect of key or fundamental systems the Committee will invite senior officers to update the members on progress of implementing recommendations from these reviews to provide further assurance to the Committee regarding the implementation of agreed actions. There were no limited or no assurance opinions provided on fundamental finance or other key systems during the year.
- 2.2.11. The Committee also receives a full year overview of internal audit work when the Internal Audit Annual Opinion Report is presented, alongside the Annual Counter Fraud Report. The former report provides the Head of Audit annual opinion on the Council's overall position in relation to the adequacy and effectiveness of risk, governance and internal control systems, based on the work completed by the internal audit team and other sources of assurance, as required by the Public Sector Internal Audit Standards.
- 2.2.12. The details of the Committee's work programme for 2022/23 and associated reports received, (see Appendix 4), demonstrate how the Committee has fulfilled its terms of reference during the year and its commitment to monitoring and helping improve the Council's risk, control and governance environments in the year ahead. The appendix also includes a summary of the planned and actual internal audits completed during the year, together with the assurance ratings for each completed review. This sets out details of the pattern of overall assurance provided across the agreed 2022/23 internal audit programme.
- 2.2.13. In addition to these meetings, an induction and refresher session was held for the Committee members to explain the purpose of the Committee and their role and responsibilities in June 2022 and presentation on the role of internal audit was delivered in September. The members were also provided with links to a CIPFA webinar on internal audit for audit committee members, the CIPFA Counter Fraud Workbook for Councillors and counter fraud training and awareness information.
- 2.2.14. There has also been a risk management awareness session during the year and two finance sessions for all members to provide them with an overview of Local Government finance concepts and requirements in advance of the February Finance Council meeting where the 2022/23 Council budget and Financial Strategy were presented for approval.

2.3. How do officers support the Committee?

- 2.3.1. During the year the Audit & Governance Committee has been supported by:
 - The Chief Executive, as Head of the Paid Service, with overall responsibility for the Council's management and executive arrangements;
 - The Strategic Director, Finance & Resources, as Section 151 Officer, who is responsible under the law for ensuring the proper administration of the Council's financial affairs; and
 - The Deputy Director, Legal and Governance, as the Council's Monitoring Officer, who is required by law to ensure that the Council acts within its legal powers at all times.
- 2.3.2. The Strategic Director, Finance & Resources takes the lead on financial, audit, risk management and internal control matters. The Deputy Director, Legal and Governance, leads on constitutional and legal issues. The Head of Audit & Assurance also has a key role to play in supporting the Committee because of the importance of the Internal Audit Service to governance. These Officers are responsible for making the Committee aware of any relevant changes in regulations, guidance, and codes of practice.
- 2.3.3. The Committee is also supported by External Audit colleagues, who attend each meeting to update members on the progress and results of their work, as well as providing regular sector updates for consideration. These highlight key findings and messages from national reports and studies and include questions for consideration by the Committee.
- 2.3.4. During the year the Committee continued its cycle of corporate risk reviews. Corporate risk owners and/or key contacts for the risk areas have provided briefings to the Committee on a selection of risk register entries. This has included details regarding the background to the risk identified, the risk assessment process and control arrangements in place to manage or mitigate the relevant risk should it occur. This review and challenge process has improved the Committee's oversight and understanding of the likelihood and potential impact of the corporate risks identified by the Council and on the achievement of related corporate priorities.

2.4. Effectiveness of the Audit & Governance Committee

- 2.4.1. The Committee considers that it has been effective in fulfilling its terms of reference during 2022/23. The details provided in this report and the reports presented and considered by its members during 2022/23 demonstrate that adequate consideration has been given to all the core areas identified to enable the Committee to fulfil its role and responsibilities.
- 2.4.2. The Committee's terms of reference set out a range of activities that provide appropriate assurance to the Council in terms of how it manages risk, and ensures adequate and effective control and governance arrangements exist and operate effectively to secure the efficiency and effective use of its resources. Training opportunities have been made available to members during the year to ensure that they are able to fulfil their role as members of the Committee.
- 2.4.3. The Committee has been active during the year in carrying out its duties in monitoring internal and external reports to ensure that it is satisfied with the effectiveness of controls and the governance and risk management

- arrangements in place, in accordance with its role and functions set out in its terms of reference in Appendix 1.
- 2.4.4. Based on the reports and information presented to the Audit & Governance Committee for consideration during the 2022/23 it is the members view that the Council has sound financial controls, risk management and governance arrangements in place.
- 2.4.5. The Committee also has the opportunity to invite those senior officers and managers to account for services or functions where they consider there have been significant financial, internal control or governance weaknesses identified. No significant areas of concern were identified during 2022/23 where this was required. The members continue to challenge any impairment in stewardship and control of public funds and assets, seeking assurance that prompt and proportionate management actions have been taken. This includes review of the follow-up work carried out as part of the Internal Audit Plan.
- 2.4.6. This provides the Council with assurance that effective internal control arrangements were in place during the last year and that appropriate action has been taken to address any concerns raised as a result of any of the inspection and assurance processes in place. This is evidenced by the details provided in Appendix 4 through the various reports received and considered by the Committee at its meetings during the year to support its work programme and how each of these enable the Committee to fulfil its terms of reference.
- 2.4.7. The External Auditor's Final Auditors Annual Report for 2020/21, considered by the Committee at its meeting in June 2022, included an opinion on value for money (VfM). The External Auditor was required to carry out sufficient work to be satisfied on whether the Council had put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources during the year ended March 2021 and to provide a conclusion on this. Under the National Audit Office 2020 Code of Audit Practice, auditors are now required to report in more detail on the Council's overall arrangements, as well as any significant weaknesses identified. The auditors were required to report on the arrangements under the following specified criteria:
 - improving economy, efficiency and effectiveness;
 - · financial sustainability; and
 - governance.
- 2.4.8. The External Auditor had did not identify any significant weaknesses in the arrangements in place in any of the above areas. A number of improvement recommendations were made in respect of financial sustainability and governance. Full details were provided in the report.
- 2.4.9. These related to the following areas:
 - The review of the medium term Financial Strategy;
 - Levels of reserve;
 - Reporting of mandated and discretionary expenditure;
 - The Council's Minimum Revenue provision; and
 - Updating of policies which were several year's old.

2.4.10.	The External Auditors work did not identify any signif weaknesses in arrangements. Therefore they did not recommendations nor did they have to discharge any under the Local Government Act 2014 for the 2020/21 auditors.	make any st other wider p	atutory

AUDIT & GOVERNANCE COMMITTEE TERMS OF REFERENCE

Statement of Purpose:

Our Audit and Governance Committee is a key component of Blackburn with Darwen Borough Council's corporate governance. It provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards.

The purpose of the Audit and Governance Committee is to:

- provide independent assurance to the Council of the adequacy of the risk management framework and the internal control environment and the extent to which these meet the objectives of the Local Code of Corporate Governance;
- provide independent review of the Council's governance, risk management and control frameworks;
- oversee the financial reporting and annual governance processes; and
- oversee internal and external audit, helping to ensure efficient and effective assurance arrangements are in place.

Governance, Risk and Control:

The Audit and Governance Committee will:

- 1. Review the Council's corporate governance arrangements against the good governance framework including the ethical framework and consider the local code of governance.
- 2. Review the Annual Governance Statement prior to approval and consider whether it properly reflects the risk environment and supporting assurances, taking into account internal audit's opinion on the overall adequacy and effectiveness of the Council's framework of governance, risk management and controls.
- 3. Consider the Council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
- 4. Consider the framework of assurance (including the Management Accountabilities Framework) and ensure that it adequately addresses the risks and priorities of the Council.
- 5. Monitor the effective development and operation of risk management in the Council.
- 6. Monitor progress in addressing risk-related issues reported to the Committee.
- 7. Consider reports on the effectiveness of internal controls and monitor the implementation of agreed actions.
- 8. Review the assessment of fraud risks and potential harm to the Council from fraud and corruption.
- 9. Monitor the Counter Fraud strategy, actions and resources.
- 10. To review the Governance and Assurance arrangements for significant partnership or collaborations.

Internal Audit

The Audit and Governance Committee will:

- 1. Approve the internal audit charter.
- 2. Approve the risk-based internal audit plan, including internal audit's resource requirements, the approach to using other sources of assurance and any work required to place reliance upon those other sources.
- 3. Approve significant interim changes to the risk-based internal audit plan and resource requirements.
- Make appropriate enquiries of both management and the Head of Audit & Assurance to determine if there are any inappropriate scope or resource limitations.

- 5. Consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing, of the Head of Audit and Assurance, and to approve and periodically review safeguards to limit such impairments.
- 6. Consider reports from the Head of Audit & Assurance on internal audit's performance during the year. These will include:
 - a) Updates on the work of internal audit including key findings, issues of concern and action in hand as a result of internal audit work.
 - b) Regular reports on the results of the Quality Assurance and Improvement Programme.
 - c) Reports on instances where the internal audit function does not conform to the Public Sector Internal Audit Standards and Local Government Application Note, considering whether the non-conformance is significant enough that it must be included in the Annual Governance Statement.
- 7. Consider the Head of Audit & Assurance's annual report, including:
 - a) The statement of the level of conformance with the Public Sector Internal Audit Standards and Local Government Application Note and the results of the Quality Assurance and Improvement Programme that supports the statement

 these will indicate the reliability of the conclusions of internal audit.
 - b) The opinion on the overall adequacy and effectiveness of the council's framework of governance, risk management and control together with the summary of the work supporting the opinion and the implications of any significant matters identified – these will assist the Committee in reviewing the Annual Governance Statement.
- 8. Consider an annual risk management report.
- 9. Consider summaries of specific internal audit reports as requested.
- 10. Receive reports outlining the action taken where the Head of Audit & Assurance has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions.
- 11. Contribute to the Quality Assurance and Improvement Programme and in particular, to the external quality assessment of internal audit that takes place at least once every five years.
- 12. Consider a report on the effectiveness of internal audit to support the Annual Governance Statement, where required to do so by the Accounts and Audit Regulations.
- 13. To provide free and unfettered access to the Chair of the Audit and Governance Committee for the Head of Audit and Assurance, including the opportunity for a private meeting with the Committee.

External Audit

The Audit and Governance Committee will:

- Support the independence of external audit through consideration of the external auditor's annual assessment of its independence and review of any issues raised by Public Sector Audit Appointments.
- 2. Consider the external auditor's annual letter, relevant reports, and the report to those charged with governance prior to publication of the annual accounts.
- 3. Consider specific reports as agreed with the external auditor.
- 4. Comment on the scope and depth of external audit work and to ensure it is effective and gives value for money.
- 5. Commission work from internal and external audit.
- 6. Advise and recommend on the effectiveness of relationships between external and internal audit and other inspection agencies or relevant bodies.

Financial Reporting

The Audit and Governance Committee will:

- Review the annual statement of accounts. Specifically, to consider whether appropriate accounting policies have been followed and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the council.
- 2. Consider the external auditor's report to those charged with governance on issues arising from the audit of the accounts.

Treasury Management

The Audit and Governance Committee will:

- 1. Monitor the Council's treasury management arrangements in accordance with the CIPFA Treasury Management Code of Practice.
- 2. Ensure effective scrutiny of the treasury management strategy and policies.
- 3. Review the treasury management risk profile and adequacy of risk management processes.
- 4. Consider reports on treasury management activity during the year.

Accountability Arrangements

The Audit and Governance Committee will:

- Report to those charged with governance on the Committee's findings, conclusions and recommendations concerning the adequacy and effectiveness of their governance, risk management and internal control frameworks; financial reporting arrangements, and internal and external audit functions.
- Report to full council on an annual basis outlining the Committee's performance in relation to the terms of reference and the effectiveness of the Committee in meeting its purpose.
- 3. Publish an annual report on the work of the Committee.

Authority

The Committee is authorised by the Council to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee, including those of partner organisations, and all employees are directed to co-operate with any request made by the Committee.

Frequency of Meetings

The Committee will normally meet five times each year to fulfil its requirements.

Outline Programme

In order to meet its principal responsibilities during the year the Committee will consider the following reports/activities:

PROGRAMME ACTIVITY:	TERMS OF REFERENCE NUMBER
Governance, Risk and Control	
Annual Statement (AGS)	1,2,3,4
AGS Progress Report	1,2
Risk Management Annual Report	4,5,6
Internal Audit Opinion Report	2,5,7
External Audit Findings Report	3
External Audit Annual Audit Letter	1,2,3

MAF Update	4
Risk Management Update	5,6
Corporate Health, Safety & Wellbeing Annual Report	4,5,6
IA Progress & Outcomes Report	7,8,9
Reports from Other Committees or agencies	3,4,5,6,7
Significant Partnerships Report	10
Internal Audit	
Annual Plan	1,2,4,5,13
IA Progress & Outcomes Report	3,4,5,6,9,10
Risk Management Annual Report	8
Annual Opinion Report	4,5,6,7,9,10,11,12,13
External Audit	
Annual Audit Letter	1,2,4,5
Annual Plan	2,4,5
Progress Report	1,3,4,5,6
Findings Report	1,2,3,5,6
Fees Letter	4,5
Financial Reporting	
Statement of Accounts	1
External Audit Findings Report	2
External Audit Annual Audit Letter	2
Application of Accounting Policies	1
Assessment of Going Concern Status	1
Treasury Management	
Strategy Report	1,2
Progress Report	1,3,4
Annual Outturn Report	1,3,4
Accountability Arrangements	
Committee Annual Report	1,2,3
Committee Self-assessment	2,3

The programme itself will develop over time as new statutory responsibilities are introduced and the timetable may vary, for example, as the Council is required to close its accounts earlier each year.

Membership

The Committee will consist of six members appointed by Full Council. In addition, the Executive Member for Finance & Governance will also attend each Committee meeting.

The Leader of the Council and all Executive Members are precluded from being voting members of the Committee.

A quorum shall be three Members.

New Committee members will be required to undertake appropriate induction training to enable them to adequately perform their duties as and when necessary.

Attendance

Committee members are expected to make every effort to attend all meetings, where this is not possible a substitute should be nominated.

To achieve these objectives the Committee will depend principally on the attendance of the Chief Executive, Director of Finance and Customer Services, the Director of HR, Legal & Corporate Services and the Head of Audit & Assurance or their nominated representatives. The Council's external auditors, external advisors and Directors may be requested to attend as and when appropriate.

Reporting

The Annual Audit and Governance Committee Report will be formally reported to Full Council.

Further reports will be made in those cases where the Committee considers matters must be formally brought to the attention of Full Council.

<u>Audit & Governance Committee Self-Assessment against CIPFA Position Statement in Local Authorities and Police 2022 Good Practice Checklist</u>

REF	CIPFA RECOMMENDED AUDIT COMMITTEE GOOD PRACTICE AND PRINCIPLES	YES	PARTIAL	NO	ACTION REQUIRED		
Indep	Independent and effective model						
The A	udit Committee should:						
1	Be directly accountable to full council.	V					
2	Be independent of both the executive and the scrutiny functions.	V					
3	Have rights of access to and constructive engagement with other committees/functions, for example scrutiny and service committees, corporate risk management boards and other strategic groups.	V					
4	Have rights to request reports and seek assurances from relevant officers.	V					
5	Be of an appropriate size to operate as a cadre of experienced, trained committee members.	V					
6	Include at least two co-opted independent members to provide appropriate technical expertise.		V		In the 2022 update of the Constitution the Committee membership has been amended to include 2 independent (non voting) members appointed by the Committee along with the 6 members appoint by Full Council. Arrangements can be made to appoint the co-opted independent members during 2023.		
	functions fic responsibilities include:						
7	Do the committee's terms of reference explicitly address all the core areas identified in CIPFA's Position Statement?	V					
	 Maintenance of governance, risk and control arrangements. 						
	Financial and governance reporting,						
	Establishing appropriate and effective arrangements for						

	audit and assurance.						
REF	CIPFA RECOMMENDED AUDIT COMMITTEE GOOD PRACTICE AND PRINCIPLES	YES	PARTIAL	NO	ACTION REQUIRED		
Audit	Audit committee membership						
8	Members are trained to fulfil their role so that they are objective, have an inquiring and independent approach, and are knowledgeable.	V					
9	The membership promotes good governance principles, identifying ways that better governance arrangement can help achieve the organisation's objectives.	V					
10	The chair is strong, independently minded, and displays a depth of knowledge, skills, and interest.	V					
11	The members demonstrate a willingness to operate in an apolitical manner.	V					
12	Members have unbiased attitudes – treating auditors, the executive and management fairly.	$\sqrt{}$					
13	The members are able to challenge the executive and senior managers when required.	V					
	gement and outputs charge its responsibilities effective	ely, the co	nmittee sho	ould:			
14	Meet regularly, at least four times a year, and have a clear policy on those items to be considered in private and those to be considered in public.	V					
15	Be able to meet privately and separately with the external auditor and with the head of internal audit	V					
16	Include, as regular attendees, the chief finance officer(s), the chief executive, the head of internal audit and the appointed external auditor.	V					
17	Have the right to call on any other officers of the authority as required.	V					
18	Support transparency, reporting regularly on its work to those charged with governance.		V		The Committee minutes are included as appendices to the Annual Report, which is presented to Full Council. Consider presenting these to full Council more regularly.		

REF	CIPFA RECOMMENDED AUDIT COMMITTEE GOOD PRACTICE AND PRINCIPLES	YES	PARTIAL	NO	ACTION REQUIRED
19	Report annually on how the committee has complied with the position statement, discharged its responsibilities, and include an assessment of its performance. The report should be available to the public.	√ 			

<u>CIPFA'S AUDIT COMMITTEES PRACTICAL GUIDANCE FOR LOCAL AUTHORITIES (2018 EDITION)</u> <u>Evaluating the Effectiveness of the Audit Committee</u>

Assessment key

5	Clear evidence is available from a number of sources that the committee is actively supporting improvements across all aspects of this area. The improvements made are clearly identifiable.
4	Clear evidence from some sources that the committee is actively and effectively supporting improvement across some aspects of this
	area.
3	The committee has had mixed experience in supporting improvement in this area. There is some evidence that demonstrates their
	impact but there are also significant gaps.
2	There is some evidence that the committee has supported improvements, but the impact of this support is limited.
1	No evidence can be found that the audit committee has supported improvements in this

Blackburn with Darwen Borough Council Audit Committee Effectiveness Assessment 2022/23

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment: 5 – 1 See key above
Promoting the principles of good governance and their application to decision making.	Supporting the development of a local code of corporate governance. Providing robust review of the Annual Governance Statement (AGS) and the assurances underpinning it. Working with key members to improve their understanding of the AGS and their contribution to it. Supporting reviews/audits of governance arrangements. Participating in self-assessments of governance arrangements. Working with partner audit committees to review governance arrangements in partnerships.	The Committee reviews the draft AGS prior to approving it and monitors progress of actions to address the significant issues identified in the previous year's AGS. It also receives regular internal audit and risk management progress reports. The Committee considers the Risk Management Annual Report and the annual opinions from Internal Audit (IA) and External Audit, which support the AGS. The Committee approves the IA annual audit plan, which classifies audit reviews by assurance area to ensure adequate coverage of risk, governance and control frameworks. It receives a summary of key findings and opinions from individual IA reviews supporting the overall opinion. The Committee's terms of reference includes the review of the governance and assurance arrangements for	4

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment: 5 – 1 See key above
		significant partnerships or collaborations. The Committee also receives an annual report on the Council's Significant Partnerships Register.	
Contributing to the development of an effective control environment.	Actively monitoring the implementation of recommendations from auditors. Encouraging ownership of the internal control framework by appropriate managers. Raising significant concerns over controls with appropriate senior managers.	Regular IA Progress Reports are presented to the Committee. These include performance indicators relating to the percentage of recommendations implemented and commentary re outstanding 'must' level recommendations. Senior officers attend the Committee meetings on request to update on the progress of actions from key reports as and provide explanations and updates on progress to address significant audit concerns. The Committee reviews the summary of Management Accountability Framework (MAF) red priority areas of concern. The Committee is also authorised by the Council to investigate	5
		any activity within its terms of reference and to seek any information it requires from any employee, including those of partner organisations, and all employees are directed to cooperate with any request made by the Committee.	
Supporting the establishment of arrangements for the governance of risk and for effective arrangements to manage risks.	Reviewing risk management arrangements and their effectiveness, e.g. risk management benchmarking. Monitoring improvements. Holding risk owners to account for major/strategic risks.	The Committee receives the annual risk management report, which includes key events and achievements for the previous year and key developments for the next 12 months. The corporate risk register summary identifies risk owners at Director/senior officer level and tracks changes to residual risk scores. Regular reports are presented to Committee setting out the summary corporate risk register and risk management support activity that has taken place during the year. This includes the details of the risk management support provided by Zurich Municipal.	5
		The Committee carries out a 'deep dive' review of one or more corporate risks with the relevant risk owner or key contact as part of its work programme during the year.	

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment: 5 – 1 See key above
Advising on the adequacy of the assurance framework and considering whether assurance is deployed efficiently and effectively.	Specifying its assurance needs, identifying gaps or overlaps in assurance. Seeking to streamline assurance gathering and reporting. Reviewing the effectiveness of assurance providers, e.g. internal audit, risk management, external audit.	There is regular reporting of planned and actual coverage by Internal and External Audit. The Committee challenges opportunities for reliance on IA work by External Auditors and receives Internal and External Audit and Risk Management progress reports. The IA report includes audits in progress and an in-year review of resources and achievement of plan.	4
Supporting the quality of the internal audit activity, particularly by underpinning its organisational independence.	Reviewing the internal audit charter and functional reporting arrangements. Assessing the effectiveness of internal audit arrangements providing constructive challenge and supporting improvements. Actively supporting the quality assurance and improvement.	The Head of Audit & Assurance has right of access to and regular briefings for the Chair of the Audit & Governance Committee. The Committee receives and approves the IA Charter and annual strategic statement, including reporting and monitoring arrangements, supporting the IA annual plan. The External Auditors Audit Findings Report includes commentary on Internal Audit as part of their assessment of financial control arrangements. The Committee reviews the Internal Audit Quality Assurance Improvement Plan. The annual Head of Audit Opinion Report includes an assessment of IA performance and quality assurance. The Committee approved a Peer review approach for the external assessment of IA compliance with Public Service Internal Audit Standards which was carried out during the year. The overall judgement confirmed that the IA team conformed with the requirements of the PSIAS across all areas of focus.	5

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment: 5 – 1 See key above
Aiding the achievement of the authority's goals and objectives through helping to ensure appropriate governance, risk, control and assurance arrangements.	Reviewing how the governance arrangements support the achievement of sustainable outcomes Reviewing major projects and programmes to ensure that governance and assurance arrangements are in place. Reviewing the effectiveness of performance management arrangements.	Work on this area is included in Internal and External Audit plans on a risk assessment basis. IA reviews are classified under one of the three headings in the plan and the annual report. Plans include reviews of key capital and revenue projects. Additional ad hoc work is carried out during the year on request from Directors. Internal audit progress reports include a summary of MAF red priority areas of concern. Performance management is not specifically identified in the Committee Terms of Reference. There are other processes in place within the Council's governance structure, which provide scrutiny and challenge for this area, as part of the Corporate Plan Scorecard monitoring arrangements, to hold Chief Officers and managers to account on a regular basis, such as Management Board and the PAM reporting process as well as Members through PDS, SPT and Executive Board reporting. Internal audit consider performance arrangements as part of any relevant audit and would report on them as part of our progress reporting arrangements. The IA plan also considers specific Key Performance Indicator audits as part of the annual audit planning process.	4
Supporting the development of robust arrangements for ensuring value for money.	Ensuring that assurance on value for money arrangements is included in the assurances received by the audit committee. Considering how performance in value for money is evaluated as part of the AGS.	Standing Financial Instruction 3, Procurement and the Payment of Creditors, and Corporate Contract & Procurement Procedure Rules are in place as part of the control framework to ensure that value for money is considered in procurement activity. Regular Creditors audits consider on compliance with these requirements. The Committee receives the External Auditor's Audit Findings Report. This includes a section on value for money and an overall conclusion on the Council's arrangements for securing economy, efficiency and effectiveness in its use of resources.	4

Areas where the audit committee can add value by supporting improvement	Examples of how the audit committee can add value and provide evidence of effectiveness	Self-evaluation, examples, areas of strength and weakness	Overall assessment: 5 – 1 See key above
Helping the authority to implement the values of good governance, including effective arrangements for countering fraud and corruption risks.	Reviewing arrangements against the standards set out in Code of Practice on managing the Risk of Fraud (CIPFA 2014). Reviewing fraud risks and the effectiveness of the organisation's strategy to address those risks. Assessing the effectiveness of ethical governance arrangements for both staff and members.	A Counter Fraud Policy and Strategy is in place supported by the Counter Fraud Policy Framework which includes a Fraud Response Plan, Whistleblowing Policy, Anti Money Laundering Policy and Members and Employees' Codes of Conduct. The Internal Audit progress reports include oversight of counter fraud activity and results. The Committee consider and approve the annual fraud risk assessment as part of the External Auditor's enquiries of those charged with governance. The Committee receives the Counter Annual Report as part of the suite of annual reports which is considered prior to approval of the Annual Governance Statement:	5
Promoting effective public reporting to the authority's stakeholders and local community and measures to improve transparency and accountability.	Improving how the authority discharges its responsibilities for public reporting; for example, better targeting at the audience, plain English. Reviewing whether decision making through partnership organisations remains transparent and publicly accessible and encouraging greater transparency. Publishing and annual report from the committee.	Audit & Governance Committee meetings are held in public with minimal Part 2 items. Agendas and reports are published on Council internet website. An Annual Audit Committee report is prepared and considered by full Council. Council Committee agendas, reports and minutes are also available on the internet via the Council website along with Executive Members' and Officer decisions.	4

2022/23 Member Attendance and Committee Work Programme

Three meetings were held during the year. The following Member attendance was recorded:

Councillor/Date	28 June 2022	29 November 2022	2 March 2023
Dave Harling - Chair	✓	√	✓
Salim Sidat - Deputy Chair	√	√	A
Neil Slater	√	√	Α
Jon Baldwin	√	√	✓
Sabahat Imtiaz	√	√	✓
Katrina Fielding	А	√	А

^{√ =} attended meeting A = sent apologies

A/S = Apologies received, substitute attended

N/A = Not a Committee Member at the time of the meeting.

Audit & Governance Committee Wo	ork Programi	ne 202	22/23	
PROGRAMME ACTIVITY:	TERMS OF REF. NUMBER	JUNE	NOVEMBER	MARCH
Audit & Governance Committee Work Programme 2022/23				
Governance, Risk and Control				
Annual Statement (AGS)	1,2,4	1		
AGS Progress Report	1,2,4,6		V	
Risk Management Annual Report	4,5,6,7	√		
Annual Counter Fraud Report	7,8,9	√		
Annual Internal Audit Opinion Report	1,2,4,7	√		
External Audit Annual Report incl VFM Arrangements	3	√		
MAF Update	1,4,5,6	√		
New CIPFA Guidance on Audit Committee	1	$\sqrt{}$		
Risk Management Update	4,5,6		V	√
IA Progress & Outcomes Report	1,4,5,6,7,8	√	√	√

PROGRAMME ACTIVITY:	TERMS OF REF. NUMBER	JUNE	NOVEMBER	MARCH
Health & Safety Annual Report	4,5,6	√		
Significant Partnerships Register	10			V
Internal Audit				
Annual Plan, Strategic 2-year Plan & Internal Audit Charter	1,2,3,4			1
IA Progress & Outcomes Report	3,4,5,6,7,9, 10,11,12	V	1	V
Annual Internal Audit Opinion Report	4,6,7,9,10,1 1,12	V		
Risk Management Annual Report	8	√		
External Audit				
External Audit Fees and Statutory Accounts Deadlines	1,3,4,5		V	
Outcome from Consultation on Local Audit Framework	5,6	√		
Arrangements for the External Auditor Appointment	1,4,5		V	
Annual Plan	2,3,4,5,6		V	
Progress Report	2,3,5,6	$\sqrt{}$		V
External Audit Findings Report incl VfM Arrangements	2,3,4,5	√		
Treasury Management				
Strategy Report and mid-Year Review	1,2,4		V	V
Progress Report	1,2,3,4	$\sqrt{}$	V	V
Annual Report	1,2,3,4	$\sqrt{}$		
Accountability Arrangements				
Committee Annual Report	1,2,3	$\sqrt{}$		
New CIPFA Guidance on Audit Committee	1	$\sqrt{}$		
Committee Effectiveness Self-Assessment	2,3			V

2022/23 Internal Audit Plan Planned vs Actual Days and Overall Assurance Opinions

			22/23 Plan			
Audit Assignment	CLASSIFICATION	<u>Priority</u>	Days Days	Actual Days	Assurance	<u>Opinion</u>
					Control	Compliance
CCTV Provision (Deferred to 2023/24)	Control	2	10	1		
Reablement Service (Deferred to 2023/24) Transitional Arrangements : Children to Adult Care (deferred to 2023/24)	Control Control	3 2	10 5	0		
Protocol ICS System	Control	2	10	17	Adequate	Adequate
Commissioning Panel Arrangements - Identification and collection of					raoquato	, idoquato
Health contributions (deferred to 2023/24)	Control	2	10	0		
Children's Centres	Control	3	10	11	Adequate	Adequate
Audits of Schools Finance systems:	Control	3	12	11		11. 20. 1
- Lower Darwen Primary School - Longshaw Infants School	Control Control	3	6	17 12	Limited Adequate	Limited Adequate
- Audley Infants School	Control	3	6	12	Adequate	Adequate
- St Edwards RC Primary School	Control	3	6	12	Limited	Adequate
- Lammack Primary School (Deferred to 2023/24)	Control	3	6	1		
- St Gabriel's CE Primary School	Control	3	6	11	Adequate	Adequate
- St James' CE Primary School (Lower Darwen) (WIP 2022/23)	Control	3	6	10		
- St Michael and St John CE Primary School	Control	3	6	10	Adequate	Adequate
Contract Monitoring (PH Contracts commissioned via CAPS) (WIP 2022/23)	Control	2	10	9		
Adult Weight Management Services Grant (addirtional to plan)	Control	1	2	2	N/A	N/A
Implementation of MIAA Audit Findings (Deferred to 2023/24)	Control	2	10	2	13,77	1471
Software licencing	Control	2	10	12	Limited	Adequate
Performance Indicators/Data Quality (WIP 2022/23)	Control	3	10	14		
Asset Management System (Deferred to 2023/24)	Control	2	10	2		
Local Transport Capital Funding/LTP Grant Certification Requirement	Control	1	5	6	N/A	N/A
Bus Subsidy Grant Protect & Vaccinate (Additional to plan)	Control Control	1	5	6 5	N/A Substantial	N/A Substantial
Fleet Procurement	Control	3	10	12	Adequate	Adequate
Property Services - Services to Schools (WIP 2022/23)	Control	3	10	3	Aucquale	Auequale
Property Services - Use of Design Consultants (WIP 2022/23)	Control	3	10	3		
Museums Collections Recording System (Deferred to 2023/24)	Control	3	10	1		
Payroll - Core system	Control	1	15	18	Adequate	Adequate
iTrent Implementation	Control	1	5	26	Adequate	Limited
Service to schools (Deferred to 2023/24)	Control	2	10	2		
RIPA processes (WIP 2022/23) Members Allowances and Induction	Control Control	2	10	18 12	Adequate	Adaguata
Legal Case Management	Control	3	10	11	Adequate Adequate	Adequate Adequate
Budgetary Setting and Control	Control	1	10	10	Substantial	Adequate
Main Accounting System - including account reconciliation's						
Control and suspense account reconciliation processes	Control	1	6	14	N/A	N/A
Reconciliations - Quarter 2	Control	1	1.5	1	N/A	N/A
Reconciliations - Quarter 3 (WIP 2022/23)	Control	1	1.5	2		
Reconciliations - Quarter 4	Control	1	1.5	0		
Council Tax (WIP 2022/23) Council Tax Rebate - Support with energy costs	Control Control	2	15 10	9	Adequate	Adequate
NNDR	Control	2	15	16	Substantial	Substantial
Housing Benefits	Control	2	15	19	Substantial	Substantial
Capital Programme/Budget - Monitoring and Reporting (Deferred to						
2023/24)	Control	2	10	0		
Treasury/Cash flow management/Major loss incurred regarding	Control	3	10	0		
investment and/or borrowing. (Deferred to 2023/24)						
Civica Asset management module	Control	3	10 5	6	Adequate	NI/A
Disposal of land Use/management, monitoring and reporting of Covid 19 Grant Funding	Control	3	5	·	Adequate	N/A
received	Control	1	15	7	N/A	N/A
Follow up of Actions re East Z East Lease (WIP 2021/22)	Control	1	2	5	N/A	N/A
Asset Management System (WIP 2021/22)	Control	2	2	6	Adequate	Limited
Retail Hospitality & Leisure & SBR Grant (WIP 2021/22)	Control	1	2	4	Adequate	Adequate
Off Payroll Engagement (IR35) (WIP 2021/22)	Control	2	2	2	Adequate	Adequate
Legal Counsel - Appointing and paying (WIP 2021/22)	Control	2	0.5	1	Adequate	Adequate
HR Contract Procurement and Management (WIP 2021/22) Planning Enforcement - GP51 (WIP 2021/22)	Control	3	2	4	Adequate	Adequate Adequate
Governance Arrangements - HR45 (WIP 2021/22)	Control Control	3 2	1	10 4	Adequate Substantial	Adequate Adequate
COVID 19 Grant Funding - Protect and Vaccinate (WIP 2021/22)	Control	2	1	4	N/A	N/A
Safeguarding the most vulnerable	Control	2	10	0		. 4, 1
Adults Contracts and Commissioning incl Private Care Home Contract						
Payments (2022/23 WIP)	Control	2	15	2		
						
Total 2022/23 Control Assignments (57)			442	424	35 (59)
Audit Assignment	CLASSIFICATION	Drionit	22/22 Dave	Actual Dave	Accurer	Oninion
Audit Assignment	GLASSIFICATION	Friority	ZZIZS Days	Actual Days	Assurance Control	Compliance
Transitional Arrangements : Children to Adult Care (Deferred to 2023/24)	Risk	2	5	0	Control	Compliance
Client case management systems including Access Controls	Risk	2	10	12	Substantial	Substantial
Local Authority Improvement Plan (WIP 2022/23)	Risk	1	10	9		
Inspection Readiness (WIP 2022/23)	Risk	1	10	7		
Universal Drug Grant Certification (additional to plan)	Risk	1	2	2	N/A	N/A
Covid Test & Trace Certification (additional to plan)	Risk	1	0	5	N/A	N/A
Failure to prevent data loss (Information Governance)/ Compliance with	Risk	2	10	0		
GDPR (Deferred to 2023/24)	Risk	2	10	11	Adequate	Limited
IBusiness Continuity/Disaster Recovery					, weywalt	Littled
Business Continuity/Disaster Recovery Digital Customer Portal. (Deferred to 2023/24)					حصفيها	
Business Continuity/Disaster Recovery Digital Customer Portal. (Deferred to 2023/24) Environment Strategy/ Climate Change Strategy//Carbon Management	Risk Risk	2 2	10 10	1		

Blackburn with Darwen Borough Council	Audit & Governance Committee Annual Audit Report 2022/23
Station with Salwell Bolough Coulled	27

Failure to adequately inspect and maintain highways.		_				
Deterioration of the highways network in particular road surfaces.	Risk	2	10	10	Adequate	Adequate
Failure to repair highways defects and street lighting faults on time Poor standard of privately run Homes of Muliple Occupancy (WIP						
2022/23)	Risk	2	15	17		
Fleet Management	Risk	3	10	13	Adequate	Adequate
Fuel Discrepancy and Finance Recharges (additional to plan)	Risk	1	3	5	N/A	N/A
Health & Safety - Failure to comply with H&S legislation & Council	Risk	2	10	1		
standards (Deferred to 2023/24)			-			
Information Sharing Protocols (Deferred to 2023/24)	Risk	2	10	1	Out stantial	A -l
New CIPFA Financial Mgmt Code and VFM Assessments Budget Setting (WIP 2021/22)	Risk Risk	2	10 8	10 11	Substantial Substantial	Adequate Substantial
Highways Inspection - Walls and Structures (WIP 2021/22)	Risk	2	7	10	Adequate	Adequate
Section 17 Payments - CE04 (WIP 2021/22)	Risk	3	2	13	Adequate	Adequate
Demand for specialist placements	Risk	2	10	0	'	
Safeguarding/Safeguarding Board (Deferred to 2023/24)	Risk	2	10	0		
Failure to meet the requirements of the Children & Families Act in relation	Risk	2	10	0		
to SEND				-		
Total 2022/23 Risk Assignments (22)			192	139	11 (23	2)
Total 2022/23 Nisk Assignments (22)			132	133	11 (23	,,
Audit Assignment	CLASSIFICATION	Priority	22/23 Days	Actual Days	Assurance (Opinion
					Control	Compliance
Children's Disabled Facilities Grant (DFG)	Governance	3	10	12	Adequate	Adequate
Fostering	Governance	2	10	26	Adequate	Adequate
Internal Public Health Spend/Social Determinants of Health Fund -	Governance	2	10	0		
Governance (Deferred to 2023/24) Town Fund (Degreen 625m plus Paul others) and Other Creek			-	-		
Town Fund (Darwen £25m plus BwD and others) and Other Grant Funding Projects (Deferred to 2023/24)	Governance	2	10	2		
Sports England Grant - Penine Lancashire (WIP 2021/22)	Governance	1	3	20	Substantial	Substantial
Corporate Governance, Ethical Framework (WIP 2021/22)	Governance	2	5.5	12	Adequate	Limited
					- 1	
Total 2022/23 Governance Assignments (6)			48.5	72	4 (6)	
Audit Assignment	CLASSIFICATION	Priority	22/23 Days	Actual Days	Assurance (
Failure to makiliae 0.40 Haalthy Child Dragramma Carriaga	Canaultanau	^	4	2	Control	<u>Compliance</u>
Failure to mobilise 0-19 Healthy Child Programme Services Value for money audit	Consultancy Consultancy	A A*	20	2 25	Substantial	Substantial
Value for money addit	Consultancy		20	25	Oubstailtiai	Oubstantial
Total 2022/23 Consultancy Assignments (2)			24	27	1 (2)	
, ,					` ,	
Grand Total			706.5	662		
Audit Assignment	CL ASSIFICATION	Priority	22/23 Dave	Actual Days	Assurance (Oninion
Audit Assignment	CLASSIFICATION	Priority	22/23 Days	Actual Days	Assurance C	Opinion Compliance
Audit Assignment Other Audit Work	CLASSIFICATION	Priority	22/23 Days	Actual Days		
	<u>CLASSIFICATION</u> Governance	Priority 2	3	5		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work	Governance Governance	2 1	3 10	5 5		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee	Governance Governance Governance	2 1 1	3 10 10	5 5 15		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit	Governance Governance Governance Other	2 1 1	3 10 10 2	5 5 15 2		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation	Governance Governance Governance Other Governance	2 1 1 1	3 10 10 2 4	5 5 15 2 3		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report	Governance Governance Governance Other Governance Governance	2 1 1 1 1 1	3 10 10 2 4 4	5 5 15 2 3 3		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation	Governance Governance Governance Other Governance	2 1 1 1	3 10 10 2 4	5 5 15 2 3		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries	Governance Governance Governance Other Governance Governance Other	2 1 1 1 1 1 2	3 10 10 2 4 4	5 5 15 2 3 3		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance	Governance Governance Other Governance Governance Governance Other Other	2 1 1 1 1 1 2 2	3 10 10 2 4 4 10 2	5 5 15 2 3 3 13		
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws)	Governance Governance Other Governance Governance Governance Other Other	2 1 1 1 1 1 1 2 2	3 10 10 2 4 4 10 2 4	5 5 15 2 3 3 13 13 1 8	Control	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/Project Groups	Governance Governance Other Governance Governance Governance Other Other	2 1 1 1 1 1 1 2 2	3 10 10 2 4 4 10 2 4	5 5 15 2 3 3 13 1		Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws)	Governance Governance Other Governance Governance Governance Other Other Other	2 1 1 1 1 1 1 2 2 2 2	3 10 10 2 4 4 10 2 4 0	5 5 15 2 3 3 13 1 1 8 0	<u>Control</u>	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws)	Governance Governance Other Governance Governance Governance Other Other	2 1 1 1 1 1 1 2 2	3 10 10 2 4 4 10 2 4 0	5 5 15 2 3 3 13 13 1 8	Control 0 (11) Assurance 0	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws)	Governance Governance Other Governance Governance Governance Other Other Other	2 1 1 1 1 1 1 2 2 2 2	3 10 10 2 4 4 10 2 4 0	5 5 15 2 3 3 13 1 1 8 0	<u>Control</u>	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI)	Governance Governance Other Governance Governance Governance Other Other Other	2 1 1 1 1 1 1 2 2 2 2	3 10 10 2 4 10 2 4 0 2 4 0	5 5 15 2 3 3 13 1 1 8 0	Control 0 (11) Assurance 0	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI) Review of Counter Fraud Strategy	Governance Governance Governance Other Governance Governance Other Other Other Other CLASSIFICATION Control	2 1 1 1 1 1 2 2 2 2 2 2	3 10 10 2 4 4 10 2 4 0 2 4 0 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	5 5 15 2 3 3 13 1 1 8 0 55 Actual Days	Control 0 (11) Assurance 0	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI) Review of Counter Fraud Strategy Counter Fraud Annual Plan/Report	Governance Governance Governance Other Governance Governance Other Other Other Other Other Other Other	2 1 1 1 1 1 2 2 2 2 2 Priority	3 10 10 2 4 4 10 2 4 0 2 2/23 Days	5 5 15 2 3 3 13 1 8 0 55 Actual Days	Control 0 (11) Assurance 0	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI) Review of Counter Fraud Strategy Counter Fraud Annual Plan/Report Proactive Fraud Testing	Governance Governance Governance Other Governance Governance Other Other Other CLASSIFICATION Control Control Governance	2 1 1 1 1 1 2 2 2 2 2 2 1	3 10 10 2 4 4 10 2 4 0 49 22/23 Days	5 5 15 2 3 3 13 1 1 8 0 55 Actual Days	Control 0 (11) Assurance 0	Compliance
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI) Review of Counter Fraud Strategy Counter Fraud Annual Plan/Report Proactive Fraud Testing Reactive investigations	Governance Governance Governance Other Governance Other Governance Control Control Governance Governance	2 1 1 1 1 1 2 2 2 2 2 2 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2	3 10 10 2 4 4 10 2 4 0 2 2/23 Days	5 5 15 2 3 3 13 1 1 8 0 55 Actual Days	Control 0 (11) Assurance 0	Compliance Dinion
Other Audit Work Review of Financial Regulations, SFIs, etc Follow up work Audit Committee Liaison with external audit Audit Committee Annual Report/Evaluation HolA Annual Report A & A Client liaison/Queries A & A Client liaison/DMT attendance A & A Client liaison/Project Groups Contingency (allocated to addional to plan reveiws) Total Other (11) Other Fraud Work National Fraud Initiative (NFI) Review of Counter Fraud Strategy Counter Fraud Annual Plan/Report Proactive Fraud Testing Reactive investigations Review/Monitor Fraud Risk Register	Governance Governance Governance Other Governance Governance Other	2 1 1 1 1 1 2 2 2 2 2 2 2 1 1 1 1 1 1 1	3 10 10 2 4 10 2 4 0 2 4 0 2 2/23 Days	5 5 15 2 3 3 13 1 1 8 0 55 Actual Days	Control 0 (11) Assurance 0	Compliance Dinion
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