## <u>CIPFA'S AUDIT COMMITTEES PRACTICAL GUIDANCE FOR LOCAL AUTHORITIES (2013 EDITION)</u> <u>Evaluating the Effectiveness of the Audit & Governance 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. |
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| 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 & Governance Committee Effectiveness Assessment

| Areas where the audit<br>committee can add value by<br>supporting improvement               | Examples of how the audit committee can<br>add value and provide evidence of<br>effectiveness  | Self-evaluation, examples, areas of strength and weakness   | Overall<br>assessment:<br>5 – 1 See<br>key above |
|---|--|---|--|
| Promoting the principles of<br>good governance and their<br>application to decision making. | <ul> <li>Providing robust review of the Annual<br/>Governance Statement (AGS) and the<br/>assurances underpinning it.</li> <li>Working with key members to improve their<br/>understanding of the AGS and their contribution<br/>to it.</li> <li>Supporting reviews/audits of governance<br/>arrangements.</li> <li>Participating in self-assessments of governance<br/>arrangements.</li> <li>Working with partner audit committees to review<br/>governance arrangements in partnerships.</li> </ul> | The Committee reviews the draft AGS prior to approving<br>it and monitors progress of actions to address the<br>significant issues identified in the previous years AGS. It<br>also reviews the Risk Management Annual Report and<br>annual opinions from Internal Audit (IA) and External<br>Audit which support the AGS.<br>The Committee approves the IA annual audit plan, which<br>classifies audit reviews by assurance area to ensure<br>adequate coverage of risk, governance and control<br>frameworks. It receives a summary of key findings and<br>opinions from individual reviews supporting the overall<br>opinion.<br>Partnership arrangements are not covered by the current<br>terms of reference. However the Committee does<br>receive a report on the Council's Significant Partnerships<br>Register. | 4  |

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|   |  | The Committee Chair is a member of the Primary<br>Assurance Group, which reviews the AGS and related<br>assurance reports.   |  |
| Contributing to the development of an effective control environment.  | Monitoring the implementation of<br>recommendations from auditors.<br>Encouraging ownership of the internal control<br>framework by appropriate managers.<br>Raising significant concerns over controls with | Regular IA Progress Reports are presented to the<br>Committee. These include performance indicators<br>relating to the percentage of recommendations<br>implemented and commentary re outstanding 'must' level<br>recommendations.<br>Senior officers attend the Committee meetings on request                     | 5  |
|   | appropriate senior managers.   | to update on the progress of actions from key reports as<br>and provide explanations and updates on progress to<br>address significant audit concerns.   |  |
|   |  | The Committee reviews the summary of MAF red priority areas of concern.  |  |
|   |  | The Committee is also authorised by the Council to<br>investigate any activity within its terms of reference and to<br>seek any information it requires from any employee,<br>including those of partner organisations, and all<br>employees are directed to co-operate with any request<br>made by the Committee. |  |
| Supporting the establishment<br>of arrangements for the<br>governance of risk and for<br>effective arrangements to<br>manage risks. | Reviewing risk management arrangements and<br>their effectiveness, e.g. risk management<br>benchmarking.<br>Monitoring improvements.   | The Committee receives the annual risk management<br>report which includes key events and achievements for<br>the previous year and key developments for the next 12<br>months.<br>The corporate risk register summary identifies risk   | 5  |
|   | Holding risk owners to account for major/strategic risks.  | owners at Director/senior officer level and tracks changes<br>to residual risk scores. Regular reports are presented to<br>Committee on the corporate risk register and risk   |  |

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|  |   | management support activity during the year.  |  |
|  |   | The Committee carries out a 'deep dive' review of one or<br>more corporate risks with the relevant risk owner or key<br>contact at its meetings during the year.  |  |
| Advising on the adequacy of<br>the assurance framework and<br>considering whether<br>assurance is deployed<br>efficiently and effectively. | Specifying its assurance needs, identifying gaps<br>or overlaps in assurance.<br>Seeking to streamline assurance gathering and<br>reporting.<br>Reviewing the effectiveness of assurance<br>providers, e.g. internal audit, risk management,<br>external audit. | There is regular reporting of planned and actual coverage<br>by Internal and External Audit. The Committee<br>challenges opportunities for reliance on IA work by<br>External Auditors and receives Internal and External<br>Audit and Risk Management progress reports. The IA<br>report includes audits in progress and an in-year review<br>of resources and achievement of plan.  | 4  |
|  |   | IA have reviewed and provided assurance on risk management arrangements in 2015/16.   |  |
| Supporting the quality of the<br>internal audit activity,<br>particularly by underpinning its<br>organisational independence.              | Reviewing the audit charter and functional<br>reporting arrangements.<br>Assessing the effectiveness of internal audit<br>arrangements and supporting improvements.   | The Head of Audit & Assurance has right of access to<br>and regular briefings for the Chair of the Audit &<br>Governance Committee.<br>The Committee receives and approves the IA Charter<br>and annual strategic statement, including reporting and<br>monitoring arrangements, supporting the IA annual plan.<br>The External Auditors Audit Findings Report includes<br>commentary on Internal Audit as part of their assessment<br>of financial control arrangements. | 5  |
|  |   | The Committee reviews the Internal Audit Quality<br>Assurance Improvement Plan. The annual Head of Audit<br>Opinion Report includes an assessment of IA<br>performance and quality assurance. Committee<br>approved Peer review approach for external assessment<br>of IA compliance with Public Service Internal Audit<br>Standards and received the overall opinion and a   |  |

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|   |  | summary of the findings and themes from the Peer review action plan at its April meeting 201.   |  |
| Aiding the achievement of the<br>authority's goals and<br>objectives through helping to<br>ensure appropriate<br>governance, risk, control and<br>assurance arrangements. | Reviewing major projects and programmes to<br>ensure that governance and assurance<br>arrangements are in place.<br>Reviewing the effectiveness of performance<br>management arrangements. | Work on this area is included in Internal and External<br>Audit plans on a risk assessment basis. IA reviews are<br>classified under one of the three headings in the plan and<br>the annual report. Plans include reviews of key capital<br>and revenue projects. Additional ad hoc work is carried<br>out during the year on request by Directors.  | 4  |
|   |  | Internal audit progress report includes a summary of MAF red priority areas of concern.   |  |
|   |  | Performance management is not specifically identified in<br>the Committee Terms of Reference. There are other<br>processes in place within the Council's governance<br>structure which provide scrutiny and challenge for this<br>area, as part of the Corporate Plan Scorecard monitoring<br>arrangements, to hold Chief Officers and managers to<br>account on a regular basis, such as Management Board<br>and the PAM reporting process as well as Members<br>through PDS, SPT and Executive Board reporting. |  |
|   |  | Internal audit consider performance arrangements as part<br>of any relevant audit and would report on them as part of<br>our progress reporting arrangements.   |  |
|   |  | The IA plan also includes specific KPI audits.  |  |

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| Supporting the development of robust arrangements for ensuring value for money.   | Ensuring that assurance on value for money<br>arrangements is included in the assurances<br>received by the audit committee.<br>Considering how performance in value for<br>money is evaluated as part of the AGS.  | Standing Financial Instruction 3, Procurement and the<br>Payment of Creditors, and Corporate Contract &<br>Procurement Procedure Rules are in place as part of the<br>control framework to ensure that value for money is<br>considered in procurement activity. Regular Creditors<br>audits consider on compliance with these requirements.<br>The Committee receives the External Auditors Combined<br>Audit Findings and Value for Money Report. | 4  |
| Helping the authority to<br>implement the values of good<br>governance, including effective<br>arrangements for countering<br>fraud and corruption risks. | Reviewing arrangements against the standards<br>set out in CIPFA's <i>Managing the Risk of Fraud</i><br>(Red Book 2).<br>Reviewing fraud risks and the effectiveness of<br>the organisation's strategy to address those<br>risks.<br>Assessing the effectiveness of ethical<br>governance arrangements for both staff and<br>members. | Audit Findings and Value for Money Report.against the standards<br>ing the Risk of FraudA Counter Fraud Policy and Strategy is in place (which<br>was reviewed and updated in 2015/16 in accordance<br>with latest CIPFA guidance) supported by the Counter<br>Fraud Policy Framework which includes a Fraud<br>Response Plan, Whistleblowing Policy, Anti Money<br>Laundering Policy and Members and Employees' Codes<br>of Conduct.               | 5  |
|   |   | The Committee consider and approve the annual fraud<br>risk assessment as part of the External Auditor's<br>enquiries of those charged with governance and have<br>approved the Counter Fraud Plan as part of Internal Audit<br>annual plan 2016/17.  |  |
|   |   | The Committee receives the Counter Annual Report as<br>part of the suite of annual reports which is considered<br>prior to approval of the Annual Governance Statement:   |  |

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| Promoting effective public<br>reporting to the authority's<br>stakeholders and local<br>community and measures to<br>improve transparency and<br>accountability. | Improving how the authority discharges its<br>responsibilities for public reporting; for example,<br>better targeting at the audience, plain English.<br>Reviewing whether decision making through<br>partnership organisations remains transparent<br>and publicly accessible and encouraging<br>greater transparency. | <ul> <li>Audit &amp; Governance Committee meetings are held in public with minimal Part 2 items. Agendas and reports are published on Council internet website.</li> <li>An Annual Audit Committee report is prepared and considered by full Council.</li> <li>Council Committee agendas, reports and minutes are also available on the internet via the Council website along with Executive Members' and Officer decisions. Consideration of Partnership arrangements is not currently included in the Committee's terms of reference. However a corporate Partnership Governance Framework is in place, which includes a Governance Checklist and the Committee receives a report on the Council's Significant Partnerships Register.</li> </ul> | 4  |