

DERBYSHIRE COUNTY COUNCIL

AUDIT COMMITTEE MEETING

10 December 2019

**Report of the Director of Finance & ICT and Assistant Director of Finance
(Audit)**

EXTERNAL REVIEW OF AUDIT SERVICES

1. Purpose of Report

To inform Members of the result of the external review of Audit Services and the Unit's compliance with the Public Sector Internal Audit Standards (PSIAS).

2. Information & Analysis

The PSIAS are based on the mandatory elements of the International Professional Practices Framework (IPPF) of the Global Institute of Internal Auditors (IIA), and intended to promote further improvement in the professionalism, quality, consistency and effectiveness of internal audit across the public sector. The Standards recognise that a professional, independent and objective internal audit service is one of the key elements of good governance.

The objectives of the PSIAS are to:-

- define the nature of internal auditing within the UK public sector;
- set basic principles for carrying out internal audit in the UK public sector;
- establish a framework for providing internal audit services, which add value to the organisation, leading to improved organisational processes and operations;
- establish the basis for the evaluation of internal audit performance and to drive improvement planning.

The PSIAS require that external assessments must be conducted at least once every five years by a qualified, independent assessor or assessment team from outside the organisation. The last review was undertaken by PricewaterhouseCoopers and the result reported to Audit Committee on 25 March 2014.

Following a procurement process the Chartered Institute of Public Finance and Accountancy's (Cipfa) consultancy service (C.Co) was selected to undertake the external assessment. This assessment was carried out on the basis of a self-assessment with independent external validation.

Following the assessment Audit Services are judged as compliant with the PSIAS overall and in each of the four areas of focus assessed.

Mr Ian Kirby, C.Co Programme Director, will present the report arising from the review to Members attached as Appendix 1.

3. Considerations

In preparing this report the relevance of the following factors has been considered: financial, legal, prevention of crime and disorder, equality and diversity, human resources, environmental, health, property and transport considerations.

4. Background Papers

A file held by the Assistant Director of Finance (Audit).

5. Officers' Recommendation

That the Committee note the completion of the external assessment undertaken by C.Co and that Audit Services are judged compliant with the PSIAS overall and in each of the four areas of focus assessed.

Peter Handford
Director of Finance & ICT

Carl Hardman
Assistant Director of Finance (Audit)



C.CO

External Review of Internal Audit

Compliance with Public Sector Internal Audit Standards

Final Report

Author: Ian Kirby

Date: 02 December 2019



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Executive Summary

Introduction

- 1.1 Following an open procurement process, CIPFA C.Co Ltd (C.Co) was appointed by Derbyshire County Council (the Council) to undertake an ‘external assessment of the Council’s internal audit function’ which is a key requirement of the mandatory Public Sector Internal Audit Standards (PSIAS).
- 1.2 PSIAS requires that external assessments are undertaken once every five years and can take the form of a full external assessment, or a self-assessment with independent external validation. C.Co’s review was conducted as a ‘self-assessment with independent external validation’. This approach:
 - Conforms with the requirements of the PSIAS;
 - Minimises cost and disruption to the Council;
 - Identifies good/best practice; and
 - Supports improvement planning.
- 1.3 The methodology for self-assessment with independent validation was undertaken in three distinct phases: **pre-review** which consisted of a detailed document review together with the capture and analysis of questionnaire responses; **on-site review** that involved the further review of documentation and one to one interviews with members of the Internal Audit team and key officers of the Council; and **post-review** which involves the collation of all evidence and the drawing down of conclusions and recommendations.
- 1.4 C.Co is a subsidiary of the Chartered Institute of Public Finance & Accountancy the lead professional body for Local Government finance, accountancy and audit and one of the standard setters of the PSIAS. Although C.Co is a CIPFA company, it is a wholly independent entity providing a range of support and consultancy services to the wider public sector and has delivered these services to over 40 organisations across the UK. C.Co is well placed to deliver independent assurance and an opinion on the Council’s conformance, or not, to the Standards. C.Co’s employees are former public sector and local government employees, including those with relevant internal audit experience and knowledge of the PSIAS. Details of the reviewers’ relevant experience and qualifications are included at Appendix 1.
- 1.5 The Internal Audit team, the Council as a whole, questionnaire respondents and the Chair of the Audit Committee were fully supportive of the process and review methodology and the C.Co team would like to place on record its gratitude to everyone who contributed to a positive process.

Overall Assessment

- 2.1 Introduced in 2014, the Public Sector Internal Audit Standards (PSIAS) require that an external assessment of an organisation’s internal audit function is carried out once every five years by a qualified, independent assessor or assessment team from outside of the organisation. The Local Government Application Note (LGAN) sets out requirements for local government internal audit to inform the application of the PSIAS. An integral part of the PSIAS is the requirement that each authority completes the PSIAS self-evaluation contained within the LGAN. The LGAN outlines the “sector-specific requirements for local government organisations” (para 1.13) and “has been developed to satisfy the requirements set out in PSIAS 1311 and 1312 for periodic self-assessments and externally validated self-assessments”. This review was commissioned to satisfy the requirement for an external validation of the Derbyshire self-assessment.
- 2.2 Upon conclusion of the assessment, the review team offers a judgement on the validity of the self-assessment and provides an overall assessment as follows: **Conforms, Partially Conforms** or **Does Not Conform** against each thematic area of the LGAN, from which an aggregation of the themed scores gives an overall Authority score.
- 2.3 Following a detailed moderation process, C.Co has assessed Derbyshire County Council as follows:

Area of Focus	Judgement
Purpose and Positioning	Conforms
Structure & Resources	Conforms
Audit Execution	Conforms
Impact	Conforms
Overall Assessment	Conforms

- 2.4 In reaching its evidence-based judgement, the C.Co team has identified a number of areas of positive practice that include:
- A recognition of an improved service since the last external review of Audit Services in 2014;
 - Regular and transparent discussion between the Chief Audit Executive and those charged with governance;
 - A multi-skilled and multi-disciplinary Internal Audit team;
 - An Internal Audit team who support good governance and information security control frameworks; and

- The positive support and advocacy for Internal Audit from the Chair of Audit Committee.

Although C.Co did not identify any areas for improvement that materially and negatively impacted their view of the Internal Audit Service's conformance with the PSIAS, it did identify a number of areas where, in its view, the level of conformance or the wider value added delivery of audit could be enhanced. These enhancements include:

- Although the annual audit plan takes account of organisational risk, there is an opportunity to more explicitly align it to corporate and directorate risk registers. This will be particularly relevant in light of the proposals to develop the Council's risk management processes and awareness;
- A refinement and strengthening of Internal Audit's current approach to the issue and follow up of recommendations;
- The development of the current suite of key performance indicators to more comprehensively cover the performance of Internal Audit and its contribution to the Council's wider control environment; and
- The use of alternative sources of assurance to supplement the work of Internal Audit and provide opportunities to 'de-risk' some Council activity and support the delivery of the Plan.

Our detailed findings are set out on page 9 of this report.

Detailed Methodology

Approach

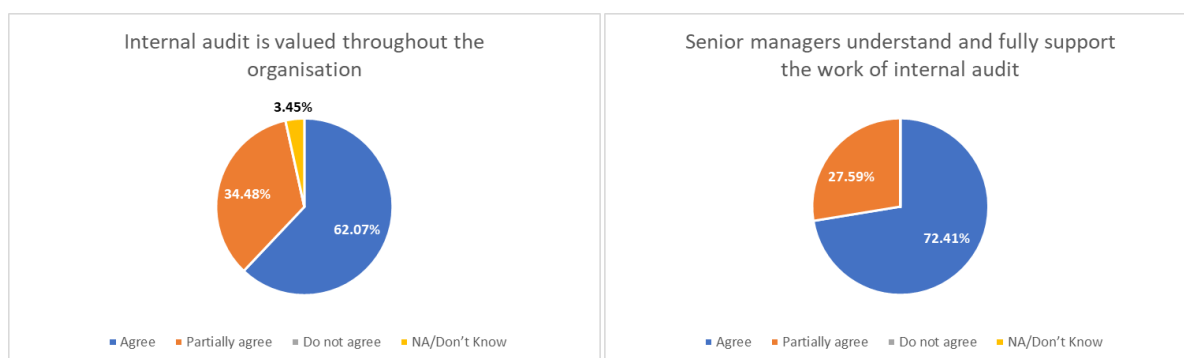
3.1 The Public Sector Internal Audit Standards (PSIAS) require that an external assessment of an organisation's internal audit function is carried out once every five years by a qualified, independent assessor or assessment team from outside of the organisation. External assessments can be in the form of a full external assessment, or a self-assessment with independent external validation. The Council commissioned a 'self-assessment with independent external validation'. The methodology that was deployed for this review is set out below and covers its three principal stages of review: pre-review; on-site review; post-review.

3.2 Pre-review

The Council was requested to complete and/or provide its self-evaluation of the Internal Audit Service against the CIPFA Local Government Application Note (LGAN) together with relevant supporting evidence/documentation in advance of the agreed on-site period. The review team requested a number of documents including the Internal Audit Plan & Charter, the Head of Internal Audit's Annual Report & Opinion and the Quality Assurance & Improvement Programme.

To support the on-site review, a customer survey form was issued to key personnel within the Council. Although the questionnaire was issued by the Internal Audit team, replies were

sent direct to C.Co to encourage a more open and frank response. A total of 30 responses were received which was significantly greater than our experience of other reviews of this nature. The actual responses were largely encouraging in nature with the majority being 'positive' or 'mostly positive' about all aspects of Internal Audit activity. All responses were analysed and, alongside the key document review, enabled the review team to determine 'key lines of enquiry' to shape the on-site activity and particularly the one to one discussions. By way of illustration, the responses to two of the questions are presented as follows:



3.3 On-site Review

The review itself comprises a combination of 'desktop' and 'actual on-site' review. The review cannot reasonably consider all elements of the LGAN self-assessment and the review team needed to use the 'desktop' period to determine strengths, weaknesses and subsequent key lines of enquiry in order that the review itself is risk-based, timely and adds real value. The Council's Internal Audit Service was assessed against the four broad themes of: Purpose and Positioning; Structure and Resources; Audit Execution; and Impact.

The focus of the four themes is as follows:

- Purpose and positioning – Does the internal audit service have the appropriate status, clarity of role and independence to fulfil its professional remit?
- Structure and resources – Does the internal audit service have the appropriate structure and resources to deliver the expected service?
- Audit execution – Does the internal audit service have the processes to deliver an effective and efficient internal audit service?
- Impact – Has the internal audit service had a positive impact on the governance, risk and control environment within the organisation?

The key considerations under each theme together with an alignment against each theme of the self-assessment checklist is detailed in Appendix 2. C.Co's judgement is based upon a 'true and fair' assessment and appraises the Service as Conforms, Partially Conforms or Does Not Conform against each thematic area of the LGAN and its overall score is an aggregation of the four themed scores. For clarity, the score descriptors are detailed below:

- Conforms – indicates that the Internal Audit service complies with all fundamental elements of the PSIAS and the majority of individual statements of good practice in all material respects.

- Partially Conforms – indicates that the Internal Audit service falls short of achieving some elements of good practice but is aware of the areas for development or opportunities for improvement in delivering effective internal audit.
- Does Not Conform – indicates that the Internal Audit service is not aware of, is not making efforts to comply with, or is failing to achieve many or all of the objectives and good practice statements. Such deficiencies would usually have a significant negative impact on the Internal Audit service’s effectiveness, its potential to add value to the organisation and would also represent significant opportunities for change.

3.4 Post Review

The post review period, based upon all of the evidence gathered reviewed and analysed during the pre and on-site phases, enables the compilation of key findings, elements of good practice and areas for improvement or enhancement in a summary report that includes the theme and overall scores. The report, its findings and the supporting evidence was internally quality assured (QA) by C.Co to ensure that the review is consistent with the methodology, that the assessments are evidence based, even-handed and fair.

The report was initially issued, as draft, to the Council to allow the correction of any factual inaccuracies and, with appropriate evidence, to challenge any of the key findings. This version of the report represents our ‘Final Report’.

It is for the Chief Audit Executive to determine the most appropriate means of communicating the results of the review to their officers and elected Members. However, C.Co has agreed to present this report and its findings to the Audit Committee.

Detailed Findings

Areas of Positive Practice

- 4.1 Based upon a combination of questionnaire responses, detailed document review and on-site interviews the C.Co team is in agreement that the Council's Internal Team conforms in all material aspects with the requirements of the Public Sector Internal Audit Standards (PSIAS). In reaching this judgement the team has been able to identify a number of areas of positive practice that are highlighted below.
- 4.2 There is a clear perception, and evidence, that the performance and standing of Audit Services has improved since 2014 when the current Chief Audit Executive (Assistant Director of Finance (Audit)) was appointed to the role. Further, it is evident that the Chief Audit Executive engages regularly and openly with Executive Directors and the Council's senior managers to discuss the Audit Plan, its progress and any current risks and issues.
- 4.3 The Chief Audit Executive has a positive, but appropriate professional relationship with the Chair of Audit Committee. The Chair himself is a positive and enthusiastic advocate of Internal Audit, is clear about his own and the Committee's role and is keen that all opportunities to enhance the delivery of all aspects of governance within the Council are identified and taken.
- 4.4 Internal Audit is seen as independent and objective within the organisation and in its approach to the development of the Internal Audit Plan and its delivery. This is further supported and by the Chief Audit Executive's 'unfettered' access, when appropriate and usually by exception, to Executive Directors, the Chair of the Audit Committee and the Leader of the Council.
- 4.5 The work of Internal Audit is supported by a comprehensive and compliant Audit Manual that is regularly reviewed, updated where appropriate and outputs of the review presented to Audit Committee. The Manual was last reviewed in September of this year.
- 4.6 Our survey of a range of Internal Audit clients identifies and recognises a team who engage in the promotion of good governance and information security control frameworks for the benefit of the wider organisation.
- 4.7 A detailed review of the Internal Audit team's core audit management system, MK Insight, and associated working papers has identified a good standard of documentation to support audit findings with clear evidence of review and challenge of findings and assumptions where appropriate. There was also evidence of time recording and monitoring of the time expended on individual audits. Prior to the commencement of any audit assignment, a detailed (internal

to the Service) project brief is prepared detailing the scope, timescales and testing strategy for the audit, the review team were keen to identify this brief as an example of positive practice.

- 4.8 The PSIAS defines internal audit as “an independent, objective assurance and consulting activity”. It is clear that Internal Audit at the Council undertake a number of consulting activities, such as training, on behalf of the Council, its schools and partner organisations. This work is clearly valued across this review’s consultees with its work on new ICT systems particularly valued by the Director of Finance & ICT.
- 4.9 The Internal Audit team is made up of officers with a wide range of skills and experience able to cover a broad range of audit assignments without the need to bring in additional, specialist support to deliver the Plan. The continuing development of individuals within the team is evidently supported through the Council’s ‘MyPlan’ appraisal process with continuing professional development identified, supported, planned and recorded.
- 4.10 The team has an understanding of the Code of Ethics requirements within the PSIAS and annually complete a declaration of interests acknowledging the Audit Manual requirements incumbent upon them.

Advisory Opportunities to Enhance the Internal Audit Service

- 5.1 As previously stated, the C.Co review team has judged Derbyshire’s Internal Audit service as conforming in all material aspects to the requirements of the Standards. However, during the course of its review activity, the review team has identified a number of opportunities that it believes would enhance not only the level of conformance with the Standards but the added value it offers the Council in improving the overall control environment. These ‘advisory’ opportunities are detailed within the narrative below and summarised in the table that follows.
- 5.2 The PSIAS state that the “chief audit executive is responsible for the development of a risk-based (annual) plan”. Our review of the 2018-19 and 2019-20 Internal Audit Plans alongside the corporate and service risk registers and our discussions with the Chief Audit Executive has identified only partial compliance with this requirement. Although the Plan is informed by both corporate and directorate risks, the Chief Audit Executive is clear that the Plan is not wholly risk based. He believes that to move toward a fully risk-based Plan would mean that some parts of the Council would never be audited, representing a risk in itself. Our discussion with the Executive Director of Adult Social Care revealed that she has now volunteered on behalf of the corporate management team to be the ‘risk champion’ and is keen to increase the wider Council’s risk awareness and maturity.

1 PSIAS Ref: 2050

It is our view that Internal Audit Service's approach to risk-based audit planning and its ability to respond to the organisation's emerging risks is reviewed alongside the development of the organisation's developing risk maturity.

- 5.3 The Chief Audit Executive has identified that the team will be unable to deliver, in full, the current year's Audit Plan and is planning to report as such to senior managers and the Audit Committee. The principal reason for the inability to deliver the Plan is the lack of capacity within the team owing to a number of unforeseen vacancies and difficulty in recruiting to those vacancies in year. It is the C.Co team's view that the formulation and delivery of the Plan would benefit from a formal and coordinated 'assurance mapping exercise' that would, initially, provide clarity on what opportunities exist to take assurance on the control environment from third parties.. Having completed this, to then consider which, if any, third party assurance upon which reliance could be placed. Third party assurance may allow the reduction in resource allocation, from the Plan, in certain areas and potentially negate the impacts of staff shortage/recruitment issues without impacting on Plan delivery. Alongside this and relying on its own work and assurance, the Plan might benefit in a similar way from more 'bite-size' audits rather than annual whole systems review. For example, an annual audit of the whole system of 'Payroll' appears unnecessary when a risk-based approach is applied and a 'dechunking' of the system into Starters – Transfers – Leavers, perhaps rotating on a risk-assessed basis appears more appropriate. Essentially Internal Audit should consider the strength of the control environment based on previous audits/ inspections to de-risk and better focus the approach for the system under review.

2 PSIAS Ref: 2010

It is our view that Internal Audit Plan development and delivery would benefit from a formal assurance mapping exercise and subsequent evaluation of which, if any, other forms of assurance the Service would place reliance on to reduce their own coverage in particular service areas.

- 5.4 The Plan currently operates with a 5% contingency. C.Co is not in a position to state whether this is the right or wrong amount. However, given the current difficulties faced regarding delivery of the Plan because of unforeseen vacancies, a review of the contingency element is worth consideration.

3 PSIAS Ref: 2050

In reviewing the approach to the development and delivery of the Audit Plan, the Chief Audit Executive should review the level of contingency within it.

- 5.5 The final audit reports issued by the Service contain recommendations that are classified as high, medium or low priority. Our discussions with senior managers suggest that the volume of these latter type of recommendations is perceived as high and their materiality low. This, C.Co believes has the potential to ‘water down’ the impact of the more material high and medium recommendations whose impact on control and risk management is, by definition, much higher. C.Co accepts that the Service would want to record all findings and their recommendations, there is an opportunity to define low recommendations as more advisory, to be raised on an informal basis and not included as formal recommendations within the report.

4 PSIAS Ref: 2400

It is suggested that the current practice of including low value recommendations within final audit reports is reviewed.

- 5.6 Although Internal Audit recommendations are ‘tracked’ through the core audit system, it is our understanding that recommendations are only followed up when the next cycle of audits takes place in the area concerned. This, C.Co believes, increases the risk of control improvements not being implemented and exposes the Council to the very risks that the initial audit identified. Although the implementation of recommendations will never be the responsibility of Internal Audit, their implementation is a measure of the positive impact and value that the Service has on the organisation.

5 PSIAS Ref: 2500

The Service should undertake a review of its process/approach for following up audit recommendations.

- 5.7 C.Co has identified the development of an internal project brief as an area of good practice. It is our view that there is an opportunity to utilise the project brief to increase the clarity and purpose of activity with auditees. C.Co suggest that developing some form of ‘terms of reference’ document outlining the purpose, scope, risks, key personnel and timescales of the audit will enhance the current communication at the start of the audit assignment and enhance the quality of the audit and the experience of the auditee.

6 PSIAS Ref: 2200

Consider the development of an appropriate terms of reference, utilising the current project brief, as a means of enhancing the audit process overall.

- 5.8 Our review of the self-assessment, key documentation and discussions with key officers within the Council has led us to the opinion that although Internal Audit is well-regarded and valued, it undersells its ability to proactively support, provide advice and guidance to further enhance its reputation, improve controls and reduce risk on major projects and other initiatives.

7 PSIAS Ref: 2010

The Service should clearly define its approach and ability to deliver internal consultancy and undertake an awareness campaign utilising internal communications or an e-brochure to raise the positive profile of the Service and alert the rest of the organisation to where and how the Service can support.

- 5.9 During the course of the review, C.Co were advised that the Service’s current suite of key performance indicators is under review. C.Co support this review and suggest that a more comprehensive suite of measures is developed to highlight the delivery of Internal Audit’s work and its impact on the wider organisation.

It is also worth pointing out that the Chair of Audit Committee is keen to see a wider suite of indicators moving forward – again, C.Co sees this as positive.

8 PSIAS Ref: 1230

In reviewing its key performance indicators, it is suggested that the following indicators should be retained or developed as part of this review:

- **Elapsed time** – this is start and finish time of the audit assignment overall and reflects the value of an audit being completed within an appropriate timescale.
- **Implementation of recommendations** – although the implementation of recommendations is not the responsibility of Internal Audit, this measure is more reflective of the impact of Internal Audit on the control environment, the quality of its recommendations and highlights where managers have failed to implement. It also links into our suggestion of the review of the ‘follow up’ of recommendations
- **Plan delivery** – a measure of progress that enables regular discussion about factors such as resourcing that impact on the delivery of Plan
- **Delivery within planned days** – a measure that highlights the ability to plan and deliver the time allocation for audits appropriately
- **Draft to Final Report turnaround** – again not all in the gift of Internal Audit but a useful measure to highlight where any ‘sign-off’ blocks exist and that the Final report is the key audit ‘product’.

- 5.10 Although we have identified that the team is completing annual declarations of interest, the declaration forms could be further improved by clarifying the following within the document:

- The nature of a declared relationships (spouse, mother, father, sibling etc);
- The mitigating actions taken by Internal Audit to reduce the risks associated with any interest; and
- A more explicit statement for the individual related to their knowledge of and conformance to the CIPFA Code of Ethics, a key requirement of the PSIAS.

9 PSIAS Ref: 1130

Review and revise the Internal Audit declaration of interest form in advance of the next round of completion.

5.11 Within the Standards there is an underlying principle that the independence of the Chief Audit Executive is safeguarded by ensuring that his or her remuneration or performance assessment is not inappropriately influenced by those subject to audit. “In the UK public sector this can be achieved by ensuring that the chief executive (or equivalent) undertakes, countersigns, contributes feedback to or reviews the performance appraisal of the CAE and that feedback is also sought from the chair of the audit committee”. There is no evidence to suggest that the Chair of Audit Committee currently contributes to the annual appraisal of the Chief Audit Executive.

10 PSIAS Ref: 1110

In order to inform the annual appraisal of the Chief Audit Executive a formal process should be established to obtain appropriate feedback from the Audit Committee Chair.

Summary Table of 'Advisory' Actions

Action Ref:	PSIAS Ref:	Paragraph Ref:	Action
Audit Planning			
1	2050	5.2	Review the Service's approach to risk-based audit planning
2	2010	5.3	Undertake an 'assurance mapping' exercise and develop a process for determining whether any elements of third-party assurance can be relied upon
3	2050	5.4	Review the current level (5%) of contingency within the Plan
7	2010	5.8	The Service should clearly define its approach and ability to deliver internal consultancy and undertake an awareness campaign utilising internal communications or an e-brochure to raise the positive profile of the Service and alerting the rest of the organisation to where and how the Service can support.
9	1130	5.10	Review and revise the Internal Audit declaration of interest form in advance of the next round of completion.
10	1110	5.11	Develop a formal process to obtain appropriate feedback from the Audit Committee Chair to inform the appraisal of the Chief Audit Executive.
Audit Reporting & Delivery			
4	2400	5.5	Review the current practice of including low value recommendations within final audit reports.
5	2500	5.6	Review the process/approach for following up audit recommendations.
6	2200	5.7	Consider the development of an appropriate terms of reference, utilising the current project brief, as a means of enhancing the audit process overall.

Action Ref:	PSIAS Ref:	Paragraph Ref:	Action
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Performance Management

8	1230	5.9	<p>In undertaking the review of key performance indicators have consideration to:</p> <ul style="list-style-type: none"> • Elapsed time • Implementation of recommendations • Plan delivery • Delivery within days • Draft to Final report turnaround
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Appendix 1

The CIPFA C.Co Review Team

Ian Kirby – C.Co Programme Director



Ian is MBA and CIPFA public audit qualified and has over 20 years of local government experience across a range of roles and responsibilities from front line social housing to Head of Internal Audit. He has consistently operated at a senior strategic level and has led a number of transformation projects in corporate and operational services and specialises in governance, performance management and transformational change. Ian was the principal author and lead for the development of the North West Chief Audit Executive's PSIAS peer review methodology.

James Dean – Operation Team & Subject Matter Expert



James is a CIPFA qualified career auditor with over 30 years' experience in internal audit, having commenced his career with the National Audit Office in 1987. He has built upon this experience and has latterly undertaken an Audit Manager role at a large unitary authority. In this capacity James has co-ordinated this authority's PSIAS review and has undertaken reviews on behalf of two other authorities in the same region.

Natalie Abraham – C.Co Operations Director



A CIPFA qualified Accountant, Natalie has in depth experience and knowledge of internal audit having operated in senior roles within local government. A former Head of Service, Natalie advised on governance, commercial models, contracts, procurements and service reviews. Most recently Natalie has led the development of a methodology and financial model for COSLA to calculate the actual cost of residential care. Natalie provided overall project management and subject matter expertise for this commission.

Appendix 2

Detailed Assessment Table

		Conforms	Partially Conforms	Does Not Conform	Comments
PSIAS Ref:	Purpose & Positioning				
1000	• Remit	X			
1000	• Reporting lines	X			
1110	• Independence	X			Action 9; Para 5.10 Action 10; Para 5.11
1230	• Continuing Professional Development	X			
2010	• Other assurance providers		X		Action 2; Para 5.3 Action 7; Para 5.8
2050	• Risk based plan		X		Action 1; Para 5.2 Action 3; Para 5.4
PSIAS Ref:	Structure & Resources				
1200	• Competencies	X			
1210	• Technical training & development	X			
1220	• Resourcing	X			
1230	• Performance management		X		Action 8; Para 5.9
1230	• Knowledge management	X			
PSIAS Ref:	Audit Execution				
1300	• Quality Assurance & Improvement Planning	X			
2000	• Management of the IA function	X			
2200	• Engagement planning		X		Action 6; Para 5.7
2300	• Engagement delivery	X			
2400	• Reporting		X		Action 4; Para 5.5
2450	• Overall Opinion	X			
2500	• Follow Up Procedures		X		Action 5; Para 5.6
	Impact				
	• Standing and reputation of internal audit	X			
	• Impact on organisational delivery	X			
	• Impact on Governance, Risk, and Control	X			

Conforms

X

Partially Conforms

Does Not Conform