

OFFICIAL



HARINGEY COUNCIL

AUDIT CHARTER 2017

Policy History					
Version	Summary of Change	Contact	Implementation Date	Review Date	EqIA Date
1.2	Inclusion of IPPF mission and core principles	Head of Audit & Risk Management	December 2017	January 2019	March 2015

Links and Dependencies
Employee Code of Conduct Disciplinary Procedures Council Constitution Whistleblowing Policy Anti-money Laundering Policy Anti-bribery Policy

Related Forms
Declaration of Interests Form Declaration of Receipt of Gift or Hospitality

1. Public Sector Internal Audit Standards

- 1.1 The UK Public Sector Internal Audit Standards (PSIAS), which came into effect from 1 April 2013, and were revised in April 2017, provide a consolidated approach across the whole of the public sector providing continuity, sound corporate governance and transparency.
- 1.2 The PSIAS are mandatory and the Head of Audit and Risk Management will report on compliance with the Standards as part of the Annual Internal Audit Report; an independent peer review will be undertaken at least every five years, as required by PSIAS, supplemented by an annual self-assessment to ensure ongoing compliance.
- 1.3 The PSIAS require Haringey Council to implement and retain an 'Internal Audit Charter'. The purpose of the Internal Audit Charter is to formally define the internal audit activity's purpose, authority and responsibility. This Charter will be reviewed on a regular basis and presented to the Corporate Committee for review and approval.

2. Definition of Internal Audit

- 2.1 The PSIAS mandatory definition of internal auditing has been adopted by Haringey Council as follows:
'Internal auditing is an independent, objective assurance and consulting (advisory) activity designed to add value and improve an organisation's operations. It helps the organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.'

3. Mission and Core Principles

- 3.1 The mandatory elements of the International Professional Practices Framework (IPPF) include an overarching 'Mission' for Internal Audit services '*...to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight*'.
- 3.2 The 'Core Principles' that underpin delivery of the IPPF mission require internal audit functions to:
 - Demonstrate integrity;
 - Be objective and free from undue influence (independent);
 - Align with the strategies, objectives and risks of the organisation;
 - Be appropriately positioned and adequately resourced;
 - Demonstrate quality and continuous improvement;
 - Communicate effectively;
 - Provide risk-based assurance;
 - Be insightful, proactive, and future-focused; and
 - Promote organisational improvement.

4. Authority of Internal Audit

OFFICIAL

4.1 Internal Audit has unrestricted access to all Council records and information, both manual and computerised, cash, stores and other Council property or assets it considers necessary to fulfil its responsibilities. All the Council's activities, funded from whatever source, fall within the remit of the internal audit service. Audit may enter Council property and has unrestricted access to all locations and officers where necessary, on demand, and without prior notice. This right of access is included in the Council's Constitution (Part Four, Section I, paragraph 5.45).

5. Responsibility and Accountability

- 5.1 With Haringey Council, the Corporate Committee will fulfil the functions of '**The Board**'; and the Senior Leadership Team and Statutory Officers' Group will fulfil the functions of '**Senior Management**', as defined by PSIAS.
- 5.2 The responsibility for maintaining an adequate and effective system of internal audit within Haringey Council lies with the authority's Chief Finance Officer (S151 Officer).
- 5.3 The Head of Audit and Risk Management is the person designated to fulfil the role of the 'Chief Audit Executive' and is also required to provide an annual opinion to the Council and to the Chief Finance Officer, via the Corporate Committee, on the adequacy and the effectiveness of the internal control system for the whole Council.
- 5.4 Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud. Internal audit procedures are designed to focus on areas identified by the Council as being of greatest risk and significance and rely on management to provide full access to accounting records and transactions for the purposes of internal audit work and to ensure the authenticity of these documents.
- 5.5 The remit of Internal Audit covers the entire control environment of the Council. Where appropriate, Internal Audit will undertake audit or consulting work for the benefit of the Council in organisations wholly or partly owned by the Council.
- 5.6 Internal Audit may also conduct any special reviews requested by the Council, Corporate Committee or the s151 Officer, provided such reviews do not compromise its objectivity, independence or achievement of the approved annual internal audit plan.
- 5.7 Internal Audit will consider all requests from the Council's external auditors for access to any information, files or working papers obtained or prepared during audit work that has been finalised, which external audit would need to discharge their responsibilities.

6. Independence of Internal Audit

- 6.1 The Head of Audit and Risk Management has free and unfettered access to:
- Chair of the Corporate Committee;
 - Chief Executive;
 - Chief Finance Officer;
 - Monitoring Officer; and

OFFICIAL

- Any other member of the Senior Leadership Team and Statutory Officers' Group.

- 6.2 The Head of Audit and Risk Management reports functionally to the Board, and organisationally to the Assistant Director of Corporate Governance, who is also the Council's Monitoring Officer. The Head of Audit and Risk Management has direct access to the Chief Executive who carries the responsibility for the proper management of the Council and for ensuring that the principles of good governance are reflected in sound management arrangements.
- 6.3 The independence of the Head of Audit and Risk Management is further safeguarded by ensuring that their annual appraisal is not inappropriately influenced by those subject to audit. This is achieved by ensuring that the Chief Executive and/or the Chair of the Corporate Committee contribute to, and/or review the appraisal of the Head of Audit and Risk Management.
- 6.4 All Council and relevant contractor staff in Audit and Risk Management are required to make an annual declaration of interest to ensure that auditors' objectivity is not impaired and that any potential conflicts of interest are appropriately managed.
- 6.5 Internal Audit may also provide consultancy services, such as providing advice on implementing new systems and controls. However, any significant consulting activity not already included in the audit plan and which might affect the level of assurance work undertaken will be reported to the Corporate Committee. To maintain independence, any audit staff involved in significant consulting activity will not be involved in the audit of that area for at least 12 months.
- 6.6 Where it is considered necessary to the proper discharge of internal audit function, the Head of Audit and Risk Management has direct access to elected Members of the Council and in particular those who serve on committees charged with governance (i.e. the Corporate Committee).

7. Non-audit Areas

- 7.1 The PSIAS require the Internal Audit Charter to identify any 'Non-audit' areas that fall under the management of the Internal Audit service. For Haringey these are:
- Counter-Fraud and Corruption. Promoting fraud awareness and maintaining effective anti-fraud policies and procedures; acting as a corporate service for the investigation of irregularities and, where criminal investigation is considered, to liaise directly with the police and advise services on such matters. The Fraud Team plays a specific counter-fraud and investigation role jointly with Homes for Haringey in relation to Housing Tenancy Fraud; the investigation of serious whistleblowing concerns raised via the Council's whistleblowing policy also fall within the Team's remit.
 - Insurance and operational risk management. Providing a full claims handling service for the Council and Homes for Haringey; procuring and management of all externally provided insurance contracts; management of the leasehold property insurance portfolio; providing claims related and financial information to managers; and training and development on insurance and operational risk management for staff.

OFFICIAL

- Risk Management. Providing risk management support to Haringey Council; promoting the consistent use of risk management and ownership of risk at all levels across the Council; managing and reviewing the Council's risk management framework.

7.2 In order to fulfil the requirements of the PSIAS and avoid potential conflicts of interest and loss of objectivity, the 'non-audit' functions are independently audited on a regular basis by the externally procured audit service and the Council's external auditors, with the results reported to the Corporate Committee.

8. Reporting

8.1 The PSIAS require the Head of Audit and Risk Management to report at the top of the organisation and this is done in the following ways:

- The Internal Audit Strategy and Charter and any amendments to them are reported to the Statutory Officers' Group and Corporate Committee for review and approval;
- The annual Internal Audit Plan is compiled by the Head Audit and Risk Management, taking account of the Council's risk framework and after input from the Senior Leadership Team and Statutory Officers' Group. It is then presented to the Corporate Committee for formal approval;
- The adequacy, or otherwise, of the level of internal audit resources (as determined by the Head of Audit and Risk Management) and the independence of internal audit is reported annually to the Corporate Committee. The approach to providing resource is set out in the Internal Audit Strategy;
- Performance against the Internal Audit Plan and any significant risk exposures and control issues arising from audit work are reported to the Statutory Officers' Group and Corporate Committee on a quarterly basis;
- Any significant consulting or advisory activity not already included in the audit plan and which might affect the level of assurance work undertaken will be reported to the Corporate Committee;
- Results from internal audit's performance management processes and performance indicators will be reported to the Corporate Committee; and
- Any instances of non-conformance with the Public Sector Internal Audit Standards must be reported to the Corporate Committee and will be included in the annual Head of Internal Audit report. If there is significant non-conformance this may be included in the Council's Annual Governance Statement.

9. Due Professional Care

9.1 The Internal Audit function is bound by the following standards:

- Institute of Internal Auditor's International Code of Ethics;
- Seven Principles of Public Life (Nolan Principles);
- UK Public Sector Internal Audit Standards (PSIAS);
- All Council Policies and Procedures; and
- All relevant legislation.

9.2 Internal Audit is subject to a quality assurance and improvement programme that covers all aspects of internal audit activity. This consists of an annual self-assessment of the service and its compliance with the UK PSIAS, ongoing

OFFICIAL

performance monitoring and an external assessment (peer review) at least once every five years by a suitably qualified, independent assessor.

- 9.3 A programme of Continuous Professional Development (CPD) is maintained for all staff working on audit engagements to ensure that auditors maintain and enhance their knowledge, skills and audit competencies. The Head of Audit and Risk Management is required to hold a relevant professional qualification (CCAB or equivalent, or CMIIA) and be suitably experienced.