

Agenda Item 5

Annual Internal Audit Plan 2024/25



Falkirk Integration Joint Board Audit Committee

1 March 2024

Annual Internal Audit Plan 2024/25

For Approval

1. Executive Summary

- 1.1 This paper seeks approval for the Annual Internal Audit Plan for Falkirk IJB for 2024/25.

2. Recommendations

The Audit Committee is asked to:

- 2.1 Approve the Annual Internal Audit Plan for 2024/25
- 2.2 Request that Falkirk IJB's Internal Auditors proceed with the implementation of the approved Audit Plan and report back as required to the IJB Audit Committee regarding progress of that plan; and
- 2.3 Approve the Falkirk IJB Internal Audit Charter and note that no changes are required.

3. Background

- 3.1 As stated in the Integrated Resources Advisory Group (IRAG) guidance, it is the responsibility of the IJB to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources. This includes determining who will provide the internal audit service for the IJB and nominating a Chief Internal Auditor.
- 3.2 The IJB approved the appointment of Fife, Tayside and Forth Valley Internal Audit (FTF) and Falkirk Council Internal Audit Service, as the IJB's Internal Auditors on 5 February 2016. Both FTF and Falkirk Council Internal Audit Service will provide resources under the terms of the joint working arrangements already in place. From 2022/23 the Chief Internal Auditor role has been provided by FTF Internal Audit, and in this year, FTF will provide all the audit resource.

- 3.3 In order that all parts of the system receive appropriate information on the adequacy and effectiveness of internal control within their purview, including controls operated by other bodies which impact on their control environment, at its meeting on 28 March 2019, the Audit Committee agreed an internal audit protocol, which covers the sharing of internal audit outputs between the IJB, Falkirk Council and NHS Forth Valley. This protocol is currently under review and will be presented to the June 2024 Audit Committee for approval.
- 3.4 Public Sector Internal Audit Standards state that the purpose, authority and responsibility of the internal audit activity must be formally defined in an Internal Audit Charter. The standards also require that the charter is periodically reviewed and presented to senior management and the Board for approval. The internal audit charter establishes the internal audit activity position within the organisation, including the nature of the Chief Internal Auditor's functional reporting relationship with the Board; authorises access to records, personnel and physical properties relevant to the performance of engagements; and defines the scope of internal audit activities.
- 3.5 We have therefore prepared an Internal Audit Charter for consideration and approval by the Audit Committee.
- 3.6 Public Sector Internal Audit Standards set out the need to establish risk based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals. The audit plan is designed to provide the Chief Internal Auditor with sufficient evidence to form an opinion on the adequacy and effectiveness of internal controls. It therefore includes the delivery of standard products required each year and is further based on professional judgement of audit need based on the IJB's risk environment. In addition, account is taken of assurance which can be provided to the IJB based on work performed under the Internal Audit Plans of both parties. The Internal Audit Plan describes how the available resources will be utilised during the year.
- 3.7 Resources to deliver the plan will be provided by FTF Internal Audit. A total of 40 days have been included in the 2024/25 Internal Audit Plan.

4. Planned Internal Audit Work

- 4.1 The plan is predicated on the basis that operational controls over services are maintained and assured through the partners. An Internal Audit Joint Working Protocol has been agreed as has a Protocol for sharing Internal Audit Outputs. Audit Committee members are asked to note that relevant audits will be shared under the output sharing protocol which will provide additional assurance to the IJB.
- 4.2 We have reviewed the extant strategic risks of the organisation and we have held discussions with the Interim Chief Finance Officer to ensure the substantive audit assignments in 2024/25 add maximum value.

- 4.3 It is proposed that in 2024/25, for the first time, an Internal Control Evaluation (ICE) will be undertaken in January 2025. The scope of the ICE will be a holistic overview of governance within Falkirk IJB to provide assurance that there is a sound system of internal control that supports the achievement of the IJB's objectives. Completion of this work will allow detailed consideration of the control environment and will provide early warning of any significant issues that may affect the Governance Statement, allowing management to take any required remedial action before year-end. It also means that year-end work to produce the Annual Internal Audit Report providing the Chief Internal Auditor's opinion will be more efficient, building on the detailed ICE work and reducing demands on management time during the annual accounts process. Annual Report work will focus on year-end assurances and confirmation that previously agreed actions have been implemented.
- 4.4 Together, the ICE and the Internal Audit Annual Report 2024/25 will provide assurance on the overall systems of internal control, incorporating the findings of any full reviews undertaken during the year. The allocation of days for completing the 2024/25 Annual Report is traditionally included in the plan for the following year i.e. 2025/26. It is anticipated that, building on the work undertaken in the ICE, in future years the Annual Report allocation will be 5 days, freeing up more audit days for the ICE and other substantive audits.
- 4.5 Noting that the IJB's Internal Auditors will flexibly adjust the plan as required if risks change throughout the year, the IJB Audit Committee is now asked to approve this plan, request that Internal Audit proceed with the implementation of this plan and report back regarding progress at each IJB Audit Committee Meeting, with the intention that all final 2024/25 Internal Audit reports will be completed and reported to the IJB by June 2025.

Ref	Audit	Indicative Scope	Strategic risk	Days	Target Audit Committee
FK01-25	Audit Planning	Agreeing audit universe and preparation of internal audit annual plan.	Full SRR considered	2	March 2024
FK02-25	Audit Management	Liaison with management, liaison with Chief Finance Officer and attendance at Audit Committee.	N/A	5	Ongoing
FK03-25	Internal Control Evaluation	Holistic assessment of the internal control environment in preparation for production of 2024/25 Annual Internal Audit Report. Follow-up of previous agreed Governance Statement and Internal Audit actions.	SRR2 Governance arrangements SRR 5 Assurance	15	March 2025

FK04-25	Workforce	Assessment of coherent, co-ordinated, adequate and effective approach to managing significant workforce risks. Strategic & operational responses across the totality of the workforce, including contracted services and 3rd sector.	SRR Capacity and Infrastructure	4 8	June 2025
FK05-25	Annual Internal Audit Report 2023/24	Preparation for 2023/24 Annual Internal Audit Report including assistance with completion of IJB governance self-assessment checklist.	SRR2 Governance arrangements SRR Assurance	5 10	September 2024

4.6 Internal Audit is committed to ensuring that internal audit assignments are reported to the target Audit Committee date as noted in the proposed plan above.

5. Conclusions

5.1 Completion of planned work will allow Internal Audit to provide assurance on the adequacy of the IJB's arrangements for risk management, governance and control of delegated resources.

Resource Implications

There are no resource implications arising from the recommendations in this report.

Impact on IJB Outcomes and Priorities

Effective governance, including risk management and internal control, will be necessary to deliver the outcomes and priorities of the IJB.

Directions

A new direction or change to an existing direction is not required.

Legal & Risk Implications

The internal audit planning process which produced this proposed Annual Internal Audit Plan takes into account the strategic risk profile of the organisation. Individual internal audit assignments identify the key risks at the planning stage and our work is designed to evaluate whether appropriate systems are in place and operating effectively to mitigate the risks identified. Legislative requirements are a core consideration in planning all internal audit reviews.

Consultation

All Internal Reports are circulated in draft and reviewed by management prior to final publication.

Equalities Assessment

An Equality Impact Assessment is not required. All internal audit reviews

which involve review of policies and procedures will examine the way in which equality and diversity is incorporated within documentation.

6. Report Author

6.1 J Lyall BAcc CPFA, Chief Internal Auditor

7. Appendices

Appendix 1: Appendix 1 – Internal Audit Charter

Falkirk IJB Internal Audit Charter

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Introduction

Public Sector Internal Audit Standards require each organisation to agree an Audit Charter which is regularly updated following approval by the Board, in this case through the Audit Committee of Falkirk IJB. This Charter is complementary to the relevant provisions included in the organisation's own Standing Orders (SOs) and Standing Financial Instructions (SFIs), which include provision for the delivery of audit services to Falkirk IJB.

The terms 'Board' and 'senior management' are required to be defined under the Standards and therefore have the following meaning in this Charter:

- Board means the Integration Joint Board (IJB) with responsibility to direct and oversee the activities and management of the organisation. The Board has delegated authority to the Audit Committee in terms of providing a reporting interface with internal audit activity; and
- Senior Management means the Chief Officer as the designated Accountable Officer for Falkirk IJB. The Chief Officer has made arrangements within this Charter for an operational interface with internal audit activity through the Chief Finance Officer.

In addition, for clarity, the following definitions are explained:

- FTF Audit and Management Services (FTF) are the Internal Auditors for NHS Forth Valley and will provide the Falkirk IJB internal audit service for 2022/23 onwards. Accountable Officer means the Chief Officer.
- Partner bodies means Falkirk Council and NHS Forth Valley.

Purpose and responsibility

Within the organisation, responsibility for internal control rests fully with management to ensure that appropriate and adequate arrangements are established. *"Internal audit is an independent, objective assurance and consulting function designed to add value and improve the operations of Falkirk IJB. Internal audit helps the organisation accomplish its objectives by bringing a systematic and disciplined approach to evaluate and improve the effectiveness of governance, risk management and control processes." Its mission is to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.* (See Annex 1 for FTF Mission Statement).

Internal Audit is responsible for providing an independent and objective assurance opinion to the Accountable Officer, the Board and the Audit Committee on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control. In addition, internal audit's findings and recommendations are beneficial to management in securing improvement in the audited areas.

The Shared Services Agreement and associated Service Specification between FTF and NHS Forth Valley set out their specific responsibilities as internal auditors to NHS Forth Valley and by extension, to Falkirk IJB.

Authority and Accountability

Internal Audit derives its authority from the Integration Joint Board, the Accountable Officer and the Audit Committee. These authorities are established in Standing Orders and Standing Financial Instructions adopted by the IJB.

The Chief Internal Auditor (CIA) leads the internal audit activity and assigns a named contact to each client. For line management (e.g. individual performance) and professional quality purposes (e.g. compliance with the Public Sector Internal Audit Standards), the Regional Audit Managers report to the Chief Internal Auditor. A reporting protocol has been agreed between the Falkirk Council and NHS Forth Valley internal audit services to ensure work is performed to the required standards.

The Chief Internal Auditor reports on a functional basis to the Accountable Officer and to the Audit Committee on behalf of the Board. Accordingly the Chief Internal Auditor has a direct right of access to the Accountable Officer, the Chair of the Audit Committee and the Chair of the IJB if deemed necessary.

The Audit Committee approves all Internal Audit plans and may review any aspect of its work. The Audit Committee provides for the opportunity for private meetings with the Chief Internal Auditor. The Audit Committee Chair and members have a right to have private meetings with the Chief Internal Auditor and vice versa if issues cannot be addressed through Audit Committee meetings.

In order to facilitate its assessment of governance within the organisation, Internal Audit is granted access to attend any committee, sub-committee or group of the IJB charged with aspects of governance.

Scope

The scope of Internal Audit encompasses the examination and evaluation of the adequacy and effectiveness of the organisation's governance, risk management arrangements, systems of internal control, and the quality of performance in carrying out assigned responsibilities to achieve the organisation's stated goals and objectives. It includes but is not limited to:

- Reviewing the reliability and integrity of financial and operating information and the means used to identify measure, classify, and report such information;
- Reviewing the systems established to ensure compliance with those policies, plans, procedures, laws, and regulations which could have a significant impact on operations, and reports on whether the organisation is in compliance;
- Reviewing assurances received on internal controls operating through partner bodies;
- Reviewing and appraising the economy and efficiency with which resources are employed, this may include benchmarking and sharing of best practice;
- Reviewing assurances received that directions are consistent with the organisation's objectives and goals are being carried out as planned;
- Reviewing specific operations at the request of the Audit Committee or management, this may include areas of concern identified in the corporate risk register;
- Monitoring and evaluating the effectiveness of the organisation's risk management arrangements and the overall system of assurance (see below);
- Ensuring effective co-ordination, as appropriate, with external auditors; and
- Reviewing the Annual Governance Statement prepared by senior management.

Internal Audit will devote particular attention to any aspects of the risk management, internal control and governance arrangements affected by material changes to the organisation's risk environment.

If the Chief Internal Auditor or the Audit Committee consider that the level of audit resources or the Charter in any way limit the scope of internal audit, or prejudice the ability of internal

audit to deliver a service consistent with the definition of internal auditing, they will advise the Accountable Officer and Board accordingly.

Risk Management

Internal Audit will liaise with both the Audit Committee and senior management as part of our annual internal audit planning process to discuss the alignment of audit priorities to strategic and emerging risks. This will include the strategic risks not being audited in-year to enable a discussion about coverage and the level of audit resource.

Periodically, a detailed review of risk management arrangements will be undertaken by internal audit as well as an annual high level review as part of the governance assessment to inform the Annual Internal Audit report and specifically the Chief Internal Auditor's opinion on the adequacy and effectiveness of internal control.

Irregularities, Fraud & Corruption

It is the responsibility of management to maintain systems that ensure the organisation's resources are utilised in the manner and on activities intended. This includes the responsibility for the prevention and detection of fraud and other illegal acts.

Internal Audit shall not be relied upon to detect fraud or other irregularities. However, Internal Audit will give due regard to the possibility of fraud and other irregularities in work undertaken. Additionally, Internal Audit shall seek to identify weaknesses in control that could permit fraud or irregularity.

If Internal Audit discovers suspicion or evidence of fraud or irregularity, this will immediately be reported to the organisation's Fraud Liaison Officer in accordance with the relevant partner's Fraud policy/plan.

Independence and Objectivity

Independence as described in the Public Sector Internal Audit Standards is the freedom from conditions that threaten the ability of internal audit to carry out internal audit responsibilities in an unbiased manner. To achieve the degree of independence necessary to effectively carry out the responsibilities of the internal audit activity, the Chief Internal Auditor will have direct and unrestricted access to the Board and Senior Management, in particular the Chair of the Audit Committee and the Accountable Officer.

Organisational independence is effectively achieved when the auditor reports functionally to the Audit Committee on behalf of the Board. Such functional reporting includes the Audit Committee:

- approving the Internal Audit Charter;
- approving the risk based internal audit plan;
- receiving outcomes of all internal audit work together with the assurance rating; and
- reporting on internal audit activity's performance relative to its plan.

Whilst maintaining effective liaison and communication with the organisation, as provided in this Charter, all internal audit activities shall remain free of untoward influence by any element in the organisation, including matters of audit selection, scope, procedures, frequency, timing, or report content to permit maintenance of an independent and objective attitude necessary in rendering reports.

Internal Auditors shall have no executive or direct operational responsibility or authority over any of the activities they review. Accordingly, they shall not develop nor install systems or procedures, prepare records, or engage in any other activity which would normally be subject to Internal Audit.

This Charter makes appropriate arrangements to secure the objectivity and independence of Internal Audit as required under the standards. The Shared Services Agreement between FTF and NHS Forth Valley sets out the operational independence of FTF as internal auditors. In particular it states '*FTF may be called upon to provide advice on controls and related matters, subject to the need to maintain objectivity and to consider resource constraints. Normally FTF will have no executive role nor will it have any responsibility for the development, implementation or operation of systems. Any internal audit input to systems development work will be undertaken as specific assignments. In order to preserve independence and objectivity, any such involvement in systems development activities will be restricted to the provision of advice and ensuring key areas in respect of control are addressed.*'

FTF have controls in place to ensure compliance with the relevant aspects of the Public Sector Internal Audit Standards and the wider requirement to conform with NHS Scotland standards of conduct regulations.

Similarly, Falkirk Council Internal Audit has a Charter in place which sets out how to maintain the internal auditors' independence and objectivity.

Appointment of Chief Internal Auditor and Internal Audit Staff, Professionalism, Skills & Experience

Under the Service Specification for FTF, NHS Fife, as the host body, is responsible for appointing a Chief Internal Auditor who is a member of a CCAB Institute or CMIIA with experience equivalent to at least five years post-qualification experience and at least three years of audit.

The Specification also sets out the required qualified skill-mix and the proportion of the Audit Plan to be delivered by the Chief Internal Auditor, Regional Audit Manager and other qualified staff as well as specifying the responsibility of FTF to ensure staff are suitably trained with appropriate skills with a formal requirement for preparation and maintenance of Personal Development Plans for all audit staff. These provisions apply to the totality of the service provided to NHS Forth Valley and are also applicable to Falkirk IJB, although not specifically measured for them.

Relationships

The Chief Internal Auditor will maintain functional liaison to the Chief Finance Officer who has been nominated by the Accountable Officer as executive lead for Internal Audit.

In order to maximise its contribution to the Board's overall system of assurance, Internal Audit teams will work closely with each other as well as IJB management in planning its work programme. Co-operative relationships between the audit teams and with management enhance the ability of internal audit to achieve its objectives effectively. Audit work will be planned in conjunction with partner auditors as well as management, particularly in respect of the timing of audit work.

Internal Audit will meet regularly with the external auditor to consult on audit plans, discuss matters of mutual interest, discuss common understanding of audit techniques, method and terminology, and to seek opportunities for co-operation in the conduct of audit work. In particular, internal audit will make available their working files to the external auditor for them to place reliance upon the work of Internal Audit where appropriate.

Internal Audit strives to add value to the organisation's processes and help improve its systems and services. To support this, Internal Audit will obtain an understanding of the organisation and its activities, encourage two way communications between internal audit and operational staff, discuss the audit approach and seek feedback on work undertaken.

Subject to the availability of resources, FTF and its staff shall co-operate and respond to reasonable requests or give support in situations, whether or not they are detailed in the specification.

Standards, Ethics, and Performance

Internal Audit must comply with the Core Principles for the Professional Practice of Internal Auditing, the Code of Ethics, the Standards and the Definition of Internal Auditing. The Chief Internal Auditor will discuss the Mission of Internal Audit and the mandatory elements of the International Professional Practices Framework with senior management and the Board.

Internal Audit will report progress against the Annual Internal Audit Plan to each meeting of the Audit Committee.

Reporting arrangements

Arrangements for reporting individual assignments are contained within the Reporting and Output Sharing Protocol approved by the Audit Committee.

Internal Audit will produce an Annual Internal Audit Report for each audit year in time to provide the assurance required in considering the Board's Annual Accounts.

The Annual Internal Audit Report should contain:

- *An opinion on whether:*
 - ✧ *Based on the work undertaken, there were adequate and effective internal controls in place throughout the year;*
 - ✧ *The Accountable Officer has implemented a governance framework in line with required guidance sufficient to discharge the responsibilities of this role;*
 - ✧ *The Internal Audit Plan has been delivered in line with PSIAS;*
- *Analysis of any changes in control requirements during the year;*
- *Comment on the key elements of the control environment.*

Assurances provided to parties outside the organisation;

Internal Audit will not provide assurance on activities undertaken by Falkirk IJB to outside parties without specific instruction from Falkirk IJB or as per the approved output sharing protocol.

Approach

To ensure delivery of its scope and objectives in accordance with the Charter, the lead Internal Audit team has arrangements in place for annual and strategic planning, individual audit assignment planning and reporting. Fieldwork allocated to either or both Internal Audit teams will be conducted in accordance with the normal audit approach adopted by that team, including appropriate quality assurance processes.

Access and Confidentiality

Internal Audit shall have the authority to access all the organisation's information, documents, records, assets, personnel and premises that it considers necessary to fulfil its role. This shall extend to the resources of the third parties that provide services on behalf of the organisation.

All information obtained during the course of a review will be regarded as strictly confidential to the organisation and shall not be divulged to any third party without the prior permission of the Accountable Officer. S6.6 of the Shared Service Agreement sets out those circumstances in which reports and working papers will be shared with the statutory External Auditors and the application of the Freedom of Information (Scotland) Act 2002.

Quality Assurance

The Chief Internal Auditor has established a quality assurance programme designed to give assurance through internal and external review that the work of Internal Audit is compliant with the Public Sector Internal Audit Standards (PSIAS) and to achieve its objectives. A commentary on compliance against PSIAS will be provided in the Annual Internal Audit Report.

Resolving Concerns

The Chief Internal Auditor will be responsible for managing the delivery of the internal audit service. The Chief Internal Auditor will be available to meet with the Chief Finance Officer as required to discuss the service and any issues arising. If the matter is not resolved to the satisfaction of the Client, the matter shall be presented to the next available meeting of the Audit Committee.

Review of the Internal Audit Charter

This Internal Audit Charter shall be reviewed annually and approved by the Audit Committee.

Date: March 2024

Date of next review: March 2025.

Annex 1 FTF Mission Statement

Mission and values

The purpose of the internal audit function has been defined within the Public Sector Internal Audit Standards (PSIAS). FTF, following discussion with staff and the Partnership Board has developed a mission and vision statement which incorporates this definition as well as additional elements reflecting our way of delivering the audit function as follows:

WORKING TOGETHER TO PROVIDE ASSURANCE AND ADD VALUE

We achieve this by following the Public Sector Internal Audit Standards:

*“Internal Audit is an independent, objective **assurance** and consulting activity designed to **add value** and **improve** an organisation’s operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes”.*

We work with our clients to provide an excellent service by understanding their values, their objectives and risks and the environment in which they operate. We value and listen to our staff and ensure that they have the skills and knowledge they require to help us to succeed, continuously assessing and improving the service we provide.