

Fylde Borough Council

Internal Audit Plan 2024/2025

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Your Internal Audit Team



Louise Cobain

Engagement Lead

07795 564916

Louise.cobain@miaa.nhs.uk



Fiona Hill
Engagement Manager
07825 592842
Fiona.hill@miaa.nhs.uk



Ellie Lawson
Delivery Manager
07776 588011
Ellie.lawson@miaa.nhs.uk









1 Executive Summary

1.1 Working in partnership with you

MIAA Assurance, providing cost effective assurance, insight and foresight. These services are delivered in partnership with you to ensure they are personal and responsive, ensuring the best possible customer experience.





1.2 Your Risk Assessment

A strong risk assessment underpins the Internal Audit Plan. This has focused upon your Assurance Framework as this represents **Fylde Borough Council (the Council)** own assessment of the risks to achieving its strategic objectives. These are summarised in Appendix A. We have clearly set out the risks which have been prioritised within the audit plan and those which are not.

1.3 Your Internal Audit Plan

Your Internal Audit service includes core assurances, national and regional risk areas and strategic risks from your assurance framework. The draft plan is based on an initial risk assessment and provides indicative coverage for the Council. The plan will remain flexible to allow for responses to emerging challenges that the Council may face.

Your operational annual plan in Section 5 forms part of the Council's three year Strategic Plan (shown in Appendix A). This will be reviewed as part of our ongoing risk assessment process to ensure that it remains focused on the Council's key risks and challenges and adds value.

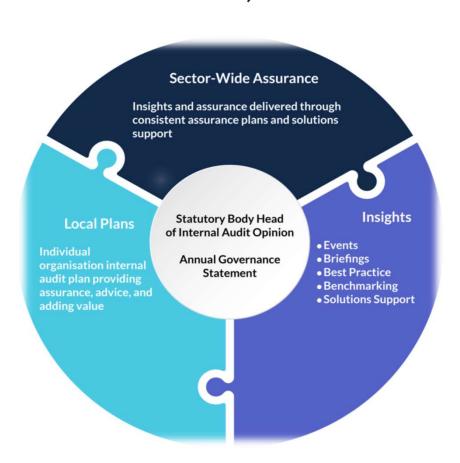
We will actively engage across the organisation to ensure we have a full and detailed understanding of your risks and can ensure we focus our work to best effect.

MIAA insights, including benchmarking, briefings and events will be integral to your plan.

This draft plan is based upon 23/24 fees. Fees will be lifted in line with planning guidance.



2 Your Assurance, Anti-Fraud and Solutions Services



Internal Audit, Assurance and Solution Plans

The public sector landscape in England continues to change, and the impact of COVID-19, international and economic challenges are likely to be felt for many years to come.

Our vision is for MIAA to continue to be a Trusted Advisor through the retention of personalised, local focus and relationships with the added benefits provided by an at scale provider.

This is about MIAA continuing to build on its shared services capability to create a comprehensive offering, which provides insight, adds value and supports transformational change whilst operating efficiently.

MIAA continue to review and adapt our audit service and the way we provide assurance to meet your needs in the changing landscape.

This is about risk assessment at every level and regrouping audit plans and advisory commissions to support organisations and the wider system.

3 Supporting you through Adding Value



Insights & Benchmarking

- Topical Briefings
- Assurance Checklists
- Through the Audit Committee Lens
- Benchmarking, shared learning & best practice

Fylde Borough Council National Level

Specialist Services

- Included within the Core IA Plan:
 - Digita
 - ✓ Capital & Estates
 - ✓ Business Intelligence & Data Analytics
- Highly experienced, professional and qualified teams
- Extensive Solutions Consultancy service

Events, Groups & Networks

- TIAN: The Internal Audit Network
- GARNET: Governance, Assurance Risk Network
- System Audit Chairs Forums
- Collaborative Masterclasses
- Representation at local, regional and national level across range of networks & professional bodies



4 Understanding Your Vision, Objectives & Risks



Understanding Your Vision, Objectives and Risks

A key focus of our strategic risk assessment is understanding your vision and ensuring that the internal audit plan contributes to your objectives. This in turn ensures that the assurances provided are built around your risks.







Assurance Built Around Your Risks

- Financial sustainability
- Delivery of key change programmes
- Leadership and workforce
- ICT Systems
- Climate Change

We map your strategic objectives and strategic risks to the 3 Year Strategic Internal Audit Plan (Appendix A). This is reviewed as part of the risk assessment process to ensure that the plan remains focused on the Council's key risks and challenges and adds value.





5 Internal Audit Risk Assessment

Fylde Council

The Fylde Borough Council internal audit plan is built from a risk assessment which has considered national and local system risks, place based developments and your local strategic risk assessment, along with our breadth of experience and understanding of the challenges you face.

A key focus of our strategic risk assessment is understanding your vision and ensuring that the internal audit plan contributes to your objectives. This in turn ensures that the assurances provided are built around your risks.

The initial strategic risk assessment and internal audit risk assessment has considered:

- Organisation intelligence including review of your Strategic Risk Register, Strategy and committee papers.
- Assurance mapping utilisation of the 3 lines of assurance model and professional standards to ensure focused coverage.
- Mandated assurance including core systems assurances, and Public Sector Internal Audit Standards requirements.
- Previous Internal Audit coverage we have reviewed your previous Internal Audit coverage to ensure the proposed plan does not duplicate coverage.
- Follow Up Internal Audit coverage will also include follow up of outstanding internal audit actions.



People

4 Internal Audit Plan on a Page

For Fylde Borough Council, this is the planning approach we will adopt:



Planning Approach

- Risk Assessment of the external environment, system and organisation (including your Strategic Risk Register).
- Engagement of Audit Committee, Executive Directors and management.
- Use of MIAA's client risk database to inform planning.
- Coverage of Critical Business Systems to support organisation's objectives through the strategic internal audit plan.
- Provision of sufficient resources and expertise.
- Compliance with Public Sector Internal Audit Standards (PSIAS).

Your Plan

The outcome of your risk assessment is summarised below:

Organisational Reviews
Provision of assurances across core and risk based reviews

- Risk Management
- Key Financial Controls
- Corporate Peer Review Action Plan
- Council Tax and NNDR
- Procurement
- Heritage Assets
- Building Statutory Compliance
- Environmental Protection
- Crematorium
- Planning Enforcement
- Sickness Absence
- Threat and Vulnerability
- CCTV

Added Value **Outcomes** Recommendations. advice & guidance to enhance the control environment **Assignment** assurance levels through briefings, thought leadership events & bench-Head of marking Internal Audit Opinion to inform the MIAA AGS contributions at local, system & national forums

Follow Up and Contingency

7 Operational Internal Audit Plan 24/25



Review & Scope	BAF Risk / Rationale	Planned Delivery	Executive Lead		
Governance & Leadership					
Risk Management - Core Controls: To provide assurance that core risk management controls have established and maintained.	HOIA Opinion Requirement/ PSIAS requirement	Q4	Head of Corporate Services		
Corporate Peer Review - Action Plan Review:	Management Request	TBC	Deputy Chief Executive		
Finance & Sustainability					
Key Financial Controls: To provide assurance that the most significant key controls are appropriately designed and operating effectively in practice.	Core Assurance/	Q3	Chief Financial Officer		
Council Tax and NNDR: To identify and evaluate the controls in place to manage key risks which would affect the effective operation of the system for NNDR and Council Tax.	Core Assurance/XXX	Q2	Chief Financial Officer		
Procurement: To review the design and controls of the procurement process and ensuring that the Council has an open and transparent process to procure goods and services and achieve value for money.	Strategic Risk – Transforming Public Sector Procurement	Q4	Head of Governance		
Service Delivery					
Heritage Assets: To review the systems and processes in place to manage Heritage Assets.	Bfwd from 2023/24	Q3	Head of Place and Culture		
Buildings Statutory Compliance: To confirm whether the Council can demonstrate that it has systems in place to ensure that buildings owned by the Council are maintained in accordance with Statutory requirements for building and property maintenance.	Strategic Risk – Asset Management/Management Request	Q4	Head of Technical Services		
Environmental Protection: To review the systems and processes in place to manage and provide Environmental Protection services.	Management Request	Q3	Head of Environmental and Housing Services		
Crematorium: To review the systems and processes in place to manage the Crematorium.	Management Request	Q2	Head of Environmental and Housing Services		
Planning Enforcement: To consider the systems and processes in place for Planning Enforcement and the breach of planning regulations.	PAS Review Actions/Management Request	Q3	Head of Planning		



Review & Scope	BAF Risk / Rationale	Planned Delivery	Executive Lead
People			
Sickness Absence: To evaluate the systems and processes in place to ensure that managers are proactively managing sickness absence, ensuring compliance with Council policy. This will include a review of the processes in place for the identification, recording, reporting and monitoring of sickness absence.	Core Assurance/Management Request	Q2	Head of Corporate Services
Information Technology			
Threat and Vulnerability: To provide an assessment on the effectiveness of the control framework being exercised by management in relation to threat and vulnerability management with reference to cyber security guidelines and good practice as provided by the National Cyber Security Centre (NCSC) and highlight areas of improvement, where appropriate.	Mandated Requirement	Q2	Head of Corporate Services
CCTV: To provide an assessment of the effectiveness of the control framework being exercised by management over the systems, data flows and associated external processes, with reference to guidelines and good practice as provided by the and Information Commissioners Office (ICO), the Surveillance Camera Code of Practice (amended March 2022) issued by the Secretary of State under Sections 29 to 31 of the PoFA 2012 and highlight areas of improvement, where appropriate.	Management Request	Q4	Head of Environmental and Housing Services
Follow up & Contingency			
Follow up and Contingency	PSIAS requirement	Q1 - Q4	XXXX
Planning & Reporting			
Planning, Management, Reporting & Meetings	PSIAS requirement	Q1 - Q4	XXXX

The Internal Audit Risk assessment and plan will be reviewed on an ongoing basis throughout the year and any requests for change discussed and approved via the Audit Committee. A formal 6 month review of the plan will also take place.



The following risk areas were identified as part of the annual risk assessment (refer above), but are not currently prioritised within the Internal Audit Plan coverage.

Risk Area	Review Origin	Rationale
Leisure Partnerships	Risk Assessment & Management Request	Further work is required by the Council. Proposed review for 2025/26.
Environmental Enforcement	Risk Assessment & Management Request	Not considered a priority. To be considered in future years.
Climate Change	Risk Assessment	Not mature enough to review. Proposed review for 2025/26.
Planning Advisory Service - Actions Review	Risk Assessment	Work is in progress. Proposed review for 2025/26.
Land Charges	Management Request	Land registry updates in progress. Not considered a priority.
Bathing Waters, Flooding and Surface Water Management	Management Request	Work is in progress. To be considered in future years.
Retention and Succession Planning	Risk Assessment	Performance Management Review 2023/24.

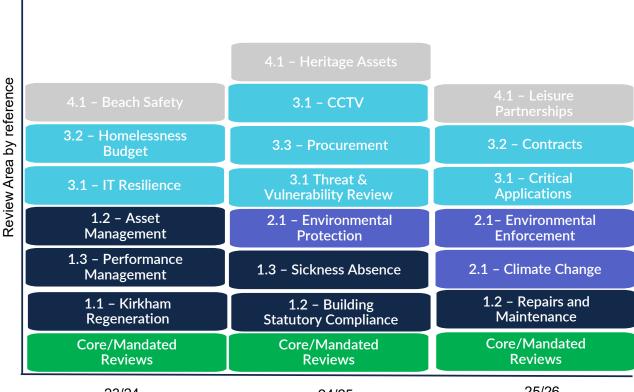
The Internal Audit Risk assessment and plan will be reviewed on an ongoing basis throughout the year and any requests for change discussed and approved via the Audit Committee. A formal 6 month review of the plan will also take place.

Appendix A - 3 Year Strategic Internal Audit Plan



We have mapped your strategic objectives and strategic risks to the 3 Year Strategic Internal Audit Plan. This will be reviewed as part of the risk assessment process to ensure that it remains focused on the Council's key risks and challenges and adds value.

REF	Strategic Risk	Risk Score		
Princ	Principal Objective: Economy			
1.1	Kirkham Futures Regeneration	16		
	Programme			
1.2	Management of key assets	6		
1.3	Recruitment/Retention and Succession	12		
	Planning			
Principal Objective: Environment				
2.1	Climate Change	9		
Principal Objective: Efficiency				
3.1	ICT Systems	12		
3.2	Rural Swimming Provision – Kirkham Pool	20		
3.3	Public Reform Event – Transforming 4			
	Public Sector Procurement			
Principal Objective: Tourism				
4.1	Leisure provision St Annes Pool	16		



25/26 23/24 24/25

Appendix B - Internal Audit Key Performance Indicators



An efficient and effective internal audit service is delivered in partnership. It is important that clear expectations are established and a range of KPIs are in place to support this. It is important that organisations ensure an effective Internal Audit Service. Whilst input and process measures offer some assurance, the focus should be on outcomes and impact from the service. Our annual Head of Internal Audit Opinion will provide you with a range of impact and effectiveness measures, as well as confirmation of our compliance with Public Sector Internal Audit Standards and accreditations.

In addition, the following operational KPIs have been proposed for you.

Operational KPI	Target	Measurement and Frequency
Agreement of Annual Plan prior to the start of the year	100%	Annual (measured as per agreed Audit Committee date / Audit Committee Workplan)
Completion of annual plan within agreed timetable and budget	100%	Annual (measured through HOIA opinion) plus in year reporting to Audit Committee
Presentation of the Head of Internal Audit Opinion to the Audit Committee		Annual (measured as per agreed Audit Committee date / Audit Committee Workplan)
Delivery of audit reports to audit committee as per the plan		Quarterly (measured as per annual operational delivery plan)
Terms of reference agreed with management at least 10 working days before commencement of audit	100%	Quarterly (measured as per TeamMate system) – requires MIAA and Council to deliver KPI (for urgent requests this may be shorter depending on the nature of the request)
Draft reports issued within 10 days of completion meeting	100%	Quarterly (measured as per TeamMate system)
Final audit report issued within 10 days of receiving management response	100%	Quarterly (measured as per TeamMate system)
Final audit reports are agreed by the nominated executive director, who will ensure consultation has taken place with relevant Council officers	100%	Quarterly (measured as per annual operational delivery plan)
Receipt of all internal audit reports in accordance with timelines for Audit Committee publication with completed cover sheets as required	100%	Quarterly (measured as per agreed Audit Committee dates)
Proportion or recommendations accepted by management	95%	Quarterly (measured as per TeamMate system) – the target allows for advisory recommendations (we would expect 100% of high risk recommendations).
Monitor and Follow Up implementation of accepted recommendations by due date	95%	Quarterly (measured through follow up reports) - requires Council and MIAA to deliver KPI
Issue of client satisfaction survey following completion of each review	100%	Quarterly (measured as per agreed Audit Committee dates)
Operation of systems to ISO Quality Standards and compliance with Public Sector Internal Audit Standards.	100%	Quarterly (measured as per agreed Audit Committee dates)
Commitment to training and development of audit staff. Maintenance of 65% Qualified (CCAB, IIA etc) 35% Part Qualified	100%	Quarterly (measured as per agreed Audit Committee dates)

Public Sector Internal Audit Standards

Our work was completed in accordance with Public Sector Internal Audit Standards and conforms with the International Standards for the Professional Practice of Internal Auditing.

Limitations

Our work does not provide absolute assurance that material errors, loss or fraud do not exist. Responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system.

Reports prepared by MIAA are prepared for your sole use and no responsibility is taken by MIAA or the auditors to any director or officer in their individual capacity. No responsibility to any third party is accepted as the report has not been prepared for, and is not intended for, any other purpose and a person who is not a party to the agreement for the provision of Internal Audit and shall not have any rights under the Contracts (Rights of Third Parties) Act 1999.

