Committee and Date

Audit and Governance Committee

26th September 2025

10:00am

Item

Public

Internal Audit Charter and Mandate

Responsible Officer:	Barry Hanson		
email:	barry.hanson@shropshire.gov.uk	Tel:	07990 086409
Cabinet Member (Portfolio Holder):	Heather Kidd, Leader of the Council Duncan Kerr, Chairman of the Audit and Governance Committee Roger Evans, Portfolio Holder – Finance		

1. Synopsis

The Charter demonstrates how Internal Audit complies with Global Internal Audit Standards. The Audit Committee approves the Charter which incorporates the mandate, mission, code of ethics, definition and core principles of Internal Audit. Amendments have been made to better align to the Global Internal Audit Standards (GIAS) as applied in the UK Public Sector and revised UK Internal Audit Code of Practice.

2. Executive Summary

2.1. The Internal Audit Team works to a Charter which complies with the Global Internal Audit Standards [1](GIAS) as applied in the UK public sector, based on international standards. The Charter is reviewed and considered by the Audit and Governance Committee on an annual basis. Minor edits have been made to better align to the new Global Internal Audit Standards (GIAS) and revised UK Internal Audit Code of Practice as detailed in **Appendix A**. Proposed changes are shown in ***bold, underlined and italic*** font.

[1] https://www.cipfa.org/policy-and-guidance/standards/global-internal-audit-standards-in-the-uk-public-sector

3. Recommendations

3.1. The Committee is asked to consider and endorse, with appropriate comment, the Internal Audit Charter (**Appendix A**).

Report

4. Risk Assessment and Opportunities Appraisal

4.1. The Audit Committee has a key function in ensuring that effective corporate governance arrangements are maintained in the Council. The Internal Audit Charter provides evidence of such arrangements in respect of the Internal Audit function and complies with the Global Internal Audit Standards (GIAS).

4.2. The recommendations contained in this report are compatible with the provisions of the Human Rights Act 1998. There are no direct environmental, equalities, consultation or climate change consequences of this proposal.

5. Financial Implications

5.1. Shropshire Council continues to manage unprecedented financial demands and a financial emergency was declared by Cabinet on 10 September 2025. The overall financial position of the Council is set out in the monitoring position presented to Cabinet on a monthly basis. Significant management action has been instigated at all levels of the Council reducing spend to ensure the Council's financial survival. While all reports to Members provide the financial implications of decisions being taken, this may change as officers review the overall financial situation and make decisions aligned to financial survivability. All non-essential spend will be stopped and all essential spend challenged. These actions may involve (this is not exhaustive):

- scaling down initiatives,
- changing the scope of activities,
- delaying implementation of agreed plans, or
- extending delivery timescales.

5.2. There are no direct financial implications from adopting the Charter and Mandate.

6. Climate Change Appraisal

6.1. This report does not directly make decisions on energy and fuel consumption; renewable energy generation; carbon offsetting and mitigation; or on climate change adaption. Therefore, no effect to report.

7. Background

7.1. In January 2024, the Institute of Internal Auditors (IIA) issued the Global Internal Audit Standards (the Standards) with implementation required by 9th January 2025. The previous version, the International Standards for the Professional Practice of Internal Auditing, released in 2017 (the 2017 Standards), remains approved for use during this transition period.

7.2. CIPFA has introduced a Code of Practice for the Governance of Internal Audit in UK Local Government effective from April 2025. The code applies to all principal authorities in UK local government and is complementary to CIPFA's work on the replacement for the former Public Sector Internal Audit Standards (PSIAS). By ensuring effective arrangements for internal audit, authorities support the best use of their resources and robust governance.

7.3. CIPFA advise that the code applies to the governance of internal audit and is the responsibility of those charged with governance within a local government body. The code sets out the conditions for internal audit, consistent with existing CIPFA guidance and governance within the sector. For Chief Audit Executives (CAE), the code will meet the same objectives as the 'essential conditions' set out in the Global Standards, but in a way that is appropriate for UK local government.

7.4. CIPFA has undertaken an in-depth review of internal audit standards for the UK local government sector. The governance expectations in Domain III, Governing the Internal Audit Function, very much align with existing CIPFA recommendations through the Statement on the Role of the Head of Internal Audit and its guidance to audit committees (Position Statement and Audit Committees, Practical Guidance for Local Authorities and Police). As a result, CIPFA is confident that many local government bodies would achieve conformance with the Principles of Domain III, however a clear roadmap for the sector would support internal audit teams, audit committees and senior management and ensure greater consistency. It also sends a clear message about the importance and value of internal audit.

7.5. The Head of Policy and Governance and Internal Audit Manager have attended engagement webinars on both consultations in the autumn and will ensure that the new code is implemented effective from April 2025.

7.6. The Charter establishes Internal Audit's position within the organisation, including the nature of the Chief Audit Executive's reporting relationship with the Audit Committee; authorises access to personnel, records, and physical properties relevant to audit work; and defines the scope of internal audit activities as set out in **Appendix A**. The senior management and board representatives for Internal Audit's client organisations is set out in **Annex B** of the Charter. Changes to both are shown in ***bold, underlined and italic*** font.

7.7. There is no change to the areas of potential conflict from previous years, the details of which are repeated here. The role of Head of Policy and Governance has operational responsibility for Information Governance. In addition, from December 2024 this post also has responsibility for the Council's Complaints function. The Internal Audit Manager post adds a layer of independence from the CAE in the operational management of the audit team on a day-to-day basis. This is in line with CIPFA guidance on the Role of the Head of Internal Audit2.

7.8. The Internal Audit Manager has direct access to the Chief Executive, Chairman of the Audit Committee, Leader of the Council, S151 Officer and Monitoring Officer to ensure independence is maintained. In addition, the post holder is required to be CCAB qualified and therefore bound by their professional body code of ethics as

[2] The role of the head of internal audit | CIPFA

well as the general requirement to adhere to the NOLAN principles on standards in public life.

7.9. The Internal Audit Charter refers to;

- The nature of assurance services provided to the Council.
- Organisational independence
- Individual objectivity
- Impairment to independence or objectivity
- Proficiency and due professional care
- Continuing professional development
- Quality assurance and improvement programme – internal and external.

7.10. The Charter will communicate the contribution that Internal Audit makes to the Council and includes:

- Internal Audit's mission
- Purpose, principles and responsibilities
- Independence and objectivity
- Competencies and standards
- Planning
- Nature of work
- Reporting
- Quality assurance
- Fraud and corruption
- Rights of access.

7.11. Final approval of the Internal Audit Charter resides with Shropshire Council's Audit Committee.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Accounts and Audit Regulations 2015

Global Internal Audit Standards 2025

Internal Audit Quality Assurance External Assessment, February 2022

CIPFA Statement on the role of the head of internal audit in public service organisations, 2019 edition

CIPFA Local government application note for the United Kingdom Public Sector Internal Audit Standards 2019 edition

Local Member: N/A

Appendices

Appendix A - Internal Audit Charter and Mandate with annexes A and B

APPENDIX A

Shropshire Council

Internal Audit Charter and Mandate

Mission Statement

To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

www.shropshire.gov.uk
General Enquiries: 0345 678 9000

INTERNAL AUDIT CHARTER

INTRODUCTION

1. ***The Global Internal Audit Standards (GIAS) consist of five Domains, which encompass 15 guiding principles, supported by individual standards thereafter that include requirements, considerations and examples of application.***

2. ***The 5 Domains are:***

   • (I) Purpose of the Internal Auditing.

   • (II) Ethics and Professionalism.

   • (III) Governing the Internal Audit Function.

   • (IV) Managing the Internal Audit Function.

   • (V) Performing Internal Audit Services.

3. ***This Internal Audit Charter is compliant with the requirements of Domain I of the Standards in that it sets out the following minimum requirements:***

   • Purpose of Internal Auditing.

   • Commitment to adhering to the Global Internal Audit Standards.

   • Mandate, including Authority and scope and types of services to be provided.

   • Organisational position and reporting relationships.

4. ***This charter establishes Internal Audit's position within the Council, including functional reporting relationships with the Audit and Governance Committee[3], authority to access personnel, records, and physical properties relevant to the undertaking of its engagements[4]; and defines the scope of the Internal Audit activity. Final approval of this Charter rests with the Audit and Governance Committee[5].***

COMMITMENT TO ADHERING TO THE GLOBAL INTERNAL AUDIT STANDARDS

5. ***The Council's Internal Audit function will adhere to the mandatory elements of the Global Internal Audit Standards in the UK Public Sector. The Head of Policy and Governance will report annually to the Audit and Governance Committee and senior management regarding the Internal Audit function's conformance with the Standards, which will be assessed through a Quality Assurance and Improvement Program (QAIP).***

[3] See glossary for translation of the terms used in the Global Internal Audit Standards in respect of Shropshire Council's Internal Audit activity and those of its external clients.
[4] Engagement is the term in the GIAS used to represent audit work.
[5] The Audit and Governance Committee is referenced in the GIAS as the Board.

6. The basis of internal financial administration within the Council lies in the Financial Rules contained in the Council's Constitution. This Charter should be read in conjunction with the relevant sections of these Financial Rules.

7. The authority and requirement for an internal audit function derives from two pieces of legislation: *Section 151 of the Local Government Act 1972,* requires that authorities 'make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs'. The *Accounts and Audit Regulations 2015* require that a relevant body must 'evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance'. Any officer or member of a relevant body shall if the body requires make available such documents, records and information and explanations as are considered necessary by the internal auditors.

8. The Financial Rules (Part 4, Appendix C2) state the Section 151 Officer has a 'statutory responsibility for the overall financial administration of the Council's affairs and is responsible for maintaining an adequate and effective internal audit'.

9. In accordance with good practice, The Audit ***and Governance*** Committee will review this Charter annually after consultation with senior management[6].

MISSION AND MANDATE OF INTERNAL AUDIT

10. The mission of Internal Audit is to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

11. The mandate of Internal Audit is prescribed by the council's Financial Procedure Rules under the obligation and intention to provide assurance to the Council about its financial and business systems and control arrangements. Responsibility The Chief Executive, (in consultation with the ***Executive Director (S151 Officer)*** and Monitoring Officer) must make provision for an internal audit function which is an independent review of the accounting, financial and other operations of the Council. The Head of Policy and Governance will report directly to the Chief Executive, the Chair of the Audit ***and Governance*** Committee or the External Auditor in any circumstance where the functions and responsibilities of the Executive Director (S151 Officer) are being reviewed. (Other than routine reporting of work carried out).

12. The Head of Policy and Governance will provide a written summary of the activities of the Internal Audit function to the Audit and ***Governance*** Committee at least three times per year and an Annual Report produced for consideration by the Audit and ***Governance*** Committee, including an audit opinion on the adequacy and effectiveness of the Council's risk management systems and internal control environment.

[6] Senior management comprises of the Head of the Paid Service, Monitoring Officer, Section 151 Officer and directors.

INTERNAL AUDIT PURPOSE AND RESPONSIBILITIES

Purpose

13. The purpose of Internal Audit as defined by Domain I of the Standards is:

'To strengthen the organisation's ability to create, protect, and sustain value by providing independent, risk-based, and objective assurance, advice, insight and foresight.'

Internal auditing is most effective when:

• It is performed by competent professional in conformance with the GIAS, which are set out in the public interest.

• The internal audit function is independently positioned with direct accountability to the board (Audit and Governance Committee).

• Internal auditors are free from undue influence and committed to making objective assessment.

14. Internal Audit risk based planning is aligned with the strategic objectives of the Council as set out in the Shropshire Plan[7]. The Internal Audit team supports the Council in achieving its vision through the delivery of the Internal Audit plans and consultancy activities.

Principles

15. Internal Audit, the auditors and the internal audit activity, comply with the following principles in delivering and achieving internal audit's mission:
    - Demonstrates integrity.
    - Demonstrates competence and due professional care.
    - Is objective and free from undue influence (independent).
    - Aligns with the strategies, objectives, and risks of the organisation.
    - Is positioned appropriately and resourced adequately.
    - Demonstrates quality and continuous improvement.
    - Communicates effectively.
    - Provides risk-based assurance[8].
    - Is insightful, proactive, and future-focused.
    - Promotes organisational improvement.

Objectives

16. Internal Audit's objective is to give assurance and an opinion to the Section 151 Officer, Audit ***and Governance*** Committee and the Council, on the adequacy of the Council's risk management, governance and control environment and the extent to which it can be relied upon, in line with the Accounts and Audit (England) Regulations 2015.

[7] ***The Shropshire Plan 2022-2025 | Shropshire Council***
[8] Assurance opinions and recommendation categories are defined in Annex A

Responsibilities

17. Internal Audit is responsible for conducting an independent appraisal of all the Council's (and that of its external clients) activities, financial or otherwise, including services provided in partnership or under contract with external organisations. It provides this service to the Council and all levels of management.

18. Internal Audit complies with the requirements of the Global Internal Audit Standards (GIAS) including the Definition of Internal Auditing, the Principles and the Code of Ethics (see **Annex A**) and other relevant guidance; including those issued by individual auditors' professional bodies.

19. The scope of internal audit includes:
    - reviewing, appraising and reporting on the following;
    - the soundness, adequacy and application of internal controls;
    - the extent to which the Council's assets are accounted for and safeguarded from losses of all kinds arising from fraud and other offences, waste, extravagance, inefficient administration, poor value for money or other causes;
    - the suitability and reliability of financial and other management data developed within the Council;
    - conducting selected value for money reviews of the efficiency and economy of the planning and operation of the Council's functions;
    - providing a responsive, challenging and informative internal advice and consultancy service for committees and services;
    - undertaking any non-recurring studies as directed by the Section 151 Officer;
    - advising on or undertaking fraud investigation work, except for benefit fraud, in accordance with the Council's Fraud Investigation procedure, prosecutions policy and the disciplinary guide;
    - participating in the National Fraud Initiative; and
    - Periodically undertaking an audit needs assessment taking into consideration the authority's risk management process.

20. Internal Audit also conduct special reviews or assignments where requested by management, which fall outside the approved work plan and for which a contingency is included in the audit plan.

INDEPENDENCE AND OBJECTIVITY

21. Independence is the freedom from conditions that threaten the ability of the internal audit activity to carry out their responsibilities in an unbiased manner.

22. The role of Head of Policy and Governance has operational responsibility for Information Governance. ***In addition, from December 2024 this post also has responsibility for the Council's Complaints function***. The Internal Audit Manager

post adds a layer of independence from the CAE in the operational management of the audit team on a day-to-day basis.

23. Objectivity is an unbiased mental attitude that allows internal auditors to perform audit reviews in such a manner that they believe in their work product and that no quality compromises are made. Objectivity requires that internal auditors do not allow their judgement on audit matters to be influenced, distorted, or subordinated by others.

24. Threats to objectivity and independence must be managed at the individual auditor, audit, functional and organisational levels.

25. Internal Audit has no executive responsibilities and is independent of the activities that it audits to enable Auditors to provide impartial and unbiased professional evaluations, opinions and recommendations. Internal Audit is free to plan, undertake and report on its work as the CAE deems appropriate, in consultation with relevant managers. Counter fraud is a responsibility of the CAE but remains independent of the services from where counter fraud controls are operating.

26. The CAE has direct access to the Section 151 Officer, Monitoring Officer, Chief Executive, the External Auditor, senior managers, the Leader, Audit ***and Governance*** Committee and other members as required.

27. The CAE fosters constructive working relationships and mutual understanding with management, external auditors and with other review agencies.

28. Constructive working relationships make it more likely that internal audit work will be accepted and acted upon, although the internal auditor does not allow their objectivity or impartiality to be impaired.

29. Internal auditors are required to have an impartial, unbiased attitude characterised by integrity and objectivity in their approach to work. They avoid conflicts of interest and a register of interests is maintained. Audit reviews are planned to ensure potential conflicts are avoided. To ensure integrity and objectivity are not impaired, auditors will not audit areas of previous responsibility for a period of at least twelve months after the responsibility ended. Auditors should not allow external factors to compromise their professional judgement and must maintain confidentiality in their work.

30. The CAE cannot give total assurance that control weaknesses or irregularities do not exist. Managers are fully responsible for the quality of internal control within their area of responsibility. They should ensure that appropriate and adequate risk management processes, control systems, accounting records, financial processes and governance arrangements i.e. the control environment, exist without depending on internal audit activity to identify weaknesses.

31. The CAE is to be consulted about significant proposed changes in the internal control system and the implementation of new systems and shall make recommendations on the standards of control to be applied.

32. This need not prejudice the audit objectivity when reviewing the systems later.

COMPETENCIES AND STANDARDS

33. Audits must be performed with proficiency and due professional care. Internal auditors must possess the knowledge, skills and other competencies needed to perform their individual responsibilities.

34. The CAE holds a relevant professional accountancy/audit qualification and is suitably experienced. In addition, the CAE must maintain a team of staff who are properly trained to fulfil all their responsibilities and continue to enhance their knowledge, skills and competencies through continuing professional development.

35. Internal auditors are expected to:
    - exercise due professional care based upon appropriate experience, training, ability, integrity and objectivity;
    - apply confidentiality as required by law and best practice and
    - obtain and record sufficient audit evidence to support their findings and recommendations.

INTERNAL AUDIT PLANNING

36. The CAE produces the Council's annual risk-based audit plan, in consultation with the Section 151 Officer, to establish priorities, achieve objectives and ensure the efficient and effective use of audit resources. The plan considers the Accounts and Audit (England) Regulations 2015, the management of risk, previous internal/external audit work, discussions with the Head of the Paid Service and senior managers, external networking intelligence, local and national risks, comments from the Audit ***and Governance*** Committee and any requirements of the External Auditor.

37. The Plan is subject to regular reviews and revisions as required to reflect changes to the risk environment and these changes are approved when significant. The Plan includes an element of contingency to allow Internal Audit to be responsive to changing risks and requests for assistance from managers. It is the responsibility of the Section 151 Officer to ensure that the budget[9] and resources allocated to Internal Audit are sufficient to ensure delivery of the plan and to report any concerns to the Audit ***and Governance*** Committee. The Audit ***and Governance*** Committee agree the annual risk based plan and any significant change to the plan during the year.

38. The Internal Audit team has retained a suitable mix of skills in finance, information technology, contract management, governance, establishments, systems, counter fraud, investigations and project management. To help supplement the internal resources and respond to demand during periods of change, additional audit time will be purchased from external contractors to deliver the plan.

[9] The budget, including the remuneration the Audit Service Manager is approved by Council.

NATURE OF WORK

39. The internal audit activity must evaluate and contribute to the improvement of governance, risk management and control processes using a systematic and disciplined approach.

Governance

40. The internal audit activity must assess and make appropriate recommendations for improving the governance process in its accomplishment of the following objectives:
    - promoting appropriate ethics and values within the organisation;
    - ensuring effective organisational performance management and accountability;
    - communicating risk and control information to appropriate areas of the organisation;
    - coordinating the activities of, and communicating information among, the Audit ***and Governance*** committee, external and internal auditors and management;
    - the internal audit activity must assess whether the information technology governance of the organisation supports the organisation's strategies and objectives.

Risk Management

41. Determining whether risk management processes are effective is a judgment resulting from the internal auditor's assessment that:
    - organisational objectives support and align with the organisation's mission;
    - significant risks are identified and assessed;
    - appropriate risk responses are selected that align risks and their mitigation with the organisation's risk appetite;
    - relevant risk information is captured and communicated in a timely manner across the organisation, enabling staff, management and the board to carry out their responsibilities.

42. The internal audit activity must evaluate the potential for the occurrence of fraud and how the organisation manages fraud risk.

43. When assisting management in establishing or improving risk management processes, internal auditors must refrain from assuming any management responsibility by managing risks.

Control

44. The internal audit activity must evaluate the adequacy and effectiveness of controls in responding to risks within the organisation's governance operations and information systems regarding the:
    - achievement of the organisation's strategic objectives;
    - reliability and integrity of financial and operational information;
    - effectiveness and efficiency of operations and programmes;

- safeguarding of assets; and
- compliance with laws, regulations, policies, procedures and contracts.

45. In accordance with the GIAS, most individual audits are undertaken using the risk-based systems audit approach, the key elements of which are listed below:
    - identify and record the objectives, risks and controls;
    - establish the extent to which the objectives of the system are consistent with higher level corporate objectives;
    - evaluate the controls in principle to decide if they are appropriate and can be reasonably relied upon to achieve their purpose;
    - identify any instances of over and under control;
    - determine an appropriate strategy to test the effectiveness of controls, i.e. through compliance and/or substantive testing;
    - arrive at conclusions and produce a report, leading to management actions as necessary and providing an opinion on the effectiveness of the control environment.

46. To reduce duplication of effort Internal Audit will work in partnership to identify and place reliance on assurance work completed elsewhere in the Council. A computerised audit management system, supported by working papers, is used to streamline working practices. This reflects best professional practice.

INTERNAL AUDIT REPORTING

47. Internal Audit findings are reported in writing to appropriate managers against four assurance opinions (good, reasonable, limited and unsatisfactory). The CAE sets standards for reporting, review and approval before issue. The reports:
    - prompt management action to implement recommendations for change, leading to improvement in performance and control;
    - provide a formal record of points arising from the assignment, and where appropriate, of agreements reached with management;
    - state scope, purpose and extent of conclusions;
    - make recommendations relative to the risk which are appropriate, relevant and flow from the conclusions;
    - acknowledge the action taken or proposed by management; and
    - ensure that appropriate risk-based arrangements are made to determine whether action has been taken on internal audit recommendations, or that management has understood and assumed the risk of not acting.

48. The CAE reports regularly to the Section 151 Officer and at least three times a year to the Council's Audit ***and Governance*** Committee on progress against the annual audit plan and other issues of concern in respect of the control environment and emerging issues. The Audit ***and Governance*** Committee meet at least four times per year and they have a detailed work plan agreed for the year. In addition, the CAE produces an annual report to the Section 151 Officer and Audit ***and Governance***

Committee on the main issues raised by Internal Audit during the year and on the performance of Internal Audit. The annual report:

- includes an opinion on the overall adequacy and effectiveness of the Council's control environment (definitions in Annex A);
- discloses any qualifications to that opinion, together with the reasons for the qualification;
- presents a summary of the audit work undertaken to formulate the opinion, including reliance placed on work by other assurance bodies;
- draws attention to any issues the CAE considers particularly relevant to the preparation of the Annual Governance Statement;
- compares the work undertaken with the work as planned and summarises the performance of the Internal Audit function against its performance measures and criteria;
- comments on compliance with these standards and communicates the results of the Internal Audit quality assurance and improvement programme.

QUALITY ASSURANCE

49. To ensure Internal Audit independence, the audit of any areas managed by the CAE will be conducted by an appropriate auditor and reviewed by an audit senior. The CAE will take no part in the audit or review process other than in the role of auditee. The final report will be issued to the Section 151 Officer and the ***Service*** Director, Legal and Governance (Monitoring Officer) as the CAE's line manager.

50. The CAE will develop and maintain a quality assurance and improvement programme covering all aspects of the internal audit activity and conforming to the relevant standards. This will include an on-going internal assessment covering adequate supervision of work performed, an internal review process and the retention of appropriate evidence. In addition, at least once every five years, an external assessment of Internal Audit by an appropriate person[10] external to the Council will be conducted. The timing, form of the assessment, qualifications of any external assessor, results and any improvement plans will be agreed with and reported to the Audit ***and Governance*** Committee in the annual report[11]. Significant deviations will be considered for inclusion in the Annual Governance Statement.

51. The CAE develops and maintains a set of performance measures which are reported to the Section 151 Officer and Audit ***and Governance*** Committee. These are also documented within the service plan and within individual Performance Development Plan (PDP) documents for all members of the team.

FRAUD AND CORRUPTION

52. The Internal Audit Service is not responsible within services for the prevention or detection of fraud and corruption. Managing the risk of fraud and corruption is the responsibility of management.

[10] Qualified independent assessor or assessment team
[11] For both internal and external reviews

53. The CAE should be informed of all suspected or detected fraud, corruption or impropriety and will consider the implications when giving an opinion on the adequacy and effectiveness of the relevant controls, and the overall internal control environment.

RIGHTS OF ACCESS

54. Under the Council's Financial Rules, internal auditors have the authority to:
    - access at reasonable times, premises or land used by the Council;
    - access all assets, records, documents, correspondence and control systems except for those from which they are statutorily prevented;
    - require and receive any information and explanation considered necessary concerning any matter under consideration;
    - require any employee of the Council to account for cash, stores or any other Council property under his/her control and produce supporting evidence and assets for inspection if required;
    - access records belonging to third parties, such as contractors, when required.

Reviewed September 2025

Annex A

Global Internal Audit Standards

The GIAS define internal auditing as an independent, objective assurance and consulting activity designed to add value and improve an organization's operations. It helps organisations achieve their objectives by providing a systematic, disciplined approach to evaluating and enhancing the effectiveness of risk management, control, and governance processes. Essentially, internal audit strengthens an organisation's ability to create, protect, and sustain value by offering objective insights and foresight.

Overall Assurance Opinion

The GIAS require the CAE to provide an overall assurance opinion on the adequacy and effectiveness of the organisation's governance, risk management, and internal control frameworks. Opinions consider the expectations of senior managers, the board and other stakeholders and are supported by appropriate, reliable and useful information.

Overall Assurance Opinion	Indication of when this type of opinion may be given**	Traditional Opinion
Substantial	Limited number of medium risk related weaknesses identified but generally only low risk rated weaknesses have been found in individual assignments/ observations. No one area is classified as high or/ critical risk	Unqualified
Reasonable	Medium risk rated weakness identified in individual assignments/ observations that are not significant in aggregate to the system of governance, risk management or control. High risk rated weaknesses identified in individual assignments/ observations that are isolated to specific systems, processes and services. None of the individual assignment reports/ observations have an overall high or critical risk	
Limited	Medium risk related weaknesses identified in individual assignments that are significant in aggregate but discrete parts of the system of internal control remain unaffected and/or High risk rated weaknesses identified in individual assignments/ observations that are significant in aggregate but discrete parts of the system of internal control remain unaffected, and/or Critical risk rated weaknesses identified in individual assignments/ observations that are not widespread to the system of internal control, and	

Overall Assurance Opinion	Indication of when this type of opinion may be given**	Traditional Opinion
	More than a minority of the individual assignment reports/ observations may have an overall report classification or rating of high or critical risk	
No Assurance	High risk rated weaknesses identified in individual assignments/ observations that in aggregate are widespread to the system of internal control and/or Critical risk rated weaknesses identified in individual assignments/ observations that are widespread to the system of internal control or More than a minority of the individual assignment reports/ observations have an overall report classification of either high or critical risk. Lack of management action to deliver improvements, may be identified by repeating recommendations of a high or critical risk	Qualified
Disclaimer	An opinion cannot be issued because insufficient internal audit work has been completed due to either: -restrictions in the agreed audit programme, which means that audit work would not provide sufficient evidence to conclude on the adequacy and effectiveness of governance, risk management and control, or - unable to complete enough reviews and gather sufficient evidence to conclude on the adequacy of arrangements for governance, risk management and control	Qualified

Audit assurance opinions for engagements are awarded on completion of audit reviews reflecting the efficiency and effectiveness of the controls in place and consideration of the engagement results and their significance.

Audit assurance Opinions for engagements are graded as follows:

Good	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is a sound system of control in place which is designed to address relevant risks, with controls being consistently applied.
Reasonable	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is generally a sound system of control but there is evidence of non-compliance with some of the controls.
Limited	Evaluation and testing of the controls that are in place performed in the areas examined identified that, whilst there is basically a sound system of control, there are weaknesses in the system that leaves some risks not addressed and there is evidence of non-compliance with some key controls.

Unsatisfactory	Evaluation and testing of the controls that are in place identified that the system of control is weak and there is evidence of non-compliance with the controls that do exist. This exposes the Council to high risks that should have been managed.

Audit recommendation categories are an indicator of the effectiveness of the Council's internal control environment and are rated according to their priority.

Best Practice (BP)	Proposed improvement, rather than addressing a risk.
Requires Attention (RA)	Addressing a minor control weakness or housekeeping issue.
Significant (S)	Addressing a significant control weakness where the system may be working but errors may go undetected.
Fundamental (F)	Immediate action required to address major control weakness that, if not addressed, could lead to material loss.

Consultancy Activity

Audit can, where resources and skills exist, provide independent and objective consultancy services, which apply the professional skills of Internal Audit through a systematic and disciplined approach, and may contribute to the opinion that Internal Audit provides on the control environment.

Consultancy comprises the range of services, which may go beyond Internal Audit's usual assurance roles, provided to assist management in meeting the objectives of the Council.

The nature and scope of the work may include:

- Facilitation;
- Process and/or control design;
- Training;
- Advisory services and
- Risk assessment support.

As with any piece of work, it is important to clearly define the terms of reference for the involvement of Audit in any consultancy activities, so that both the client and the auditor know what is expected from the involvement of Audit.

Any auditor asked to provide consultancy services or undertake a consultancy-style activity should consult their manager or the CAE before agreeing to provide such services. For any significant additional consulting services not already included in the plan, approval will be sought from the Audit ***and Governance*** Committee prior to accepting the engagement.'

Code of Ethics

Internal auditors in UK public sector organisations must conform to the Code of Ethics within the Standards. If individual internal auditors have membership of another professional body then he or she must also comply with the relevant requirements of that organisation.

There are four principles in the code of ethics:

1. **Integrity** – The integrity of internal auditors establishes trust and thus provides the basis for reliance on their judgement.

2. **Objectivity** – Internal auditors exhibit the highest level of professional objectivity in gathering, evaluating and communicating information about the activity or process being examined. Internal auditors make a balanced assessment of all the relevant circumstances and are not unduly influenced by their own interests or by others in forming judgements.

3. **Confidentiality** – Internal auditors respect the value and ownership of information they receive and do not disclose information without appropriate authority unless there is a legal or professional obligation to do so.

4. **Competency** – Internal auditors apply the knowledge, skills and experience needed in the performance of internal audit services.

Internal auditors who work in the public sector must also have regard to the Committee on Standards of Public Life's Seven Principles of Public Life.[12]

[12] Information can be found at www.public-standards.gov.uk

Annex B

Glossary of Terms for External Clients where they are different to the Council

Cornovii Development Ltd

Senior Management	Managing Director
Board	Cornovii Development Board

Oswestry Town Council

Senior Management	Town Clerk
Board	Town Council

Shropshire County Pension Fund

Senior Management	Pension Fund Administrator
Board	Pensions Committee

West Mercia Energy

Senior Management	Treasurer Managing Director
Board	Joint Committee