

Policy

Internal Audit Charter

Version 1.0

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Terminology

Council: Relates to Tweed Shire Council as a business. **Governing Body:** Relates to the elected Councillors

Internal Audit Charter

Council has established the internal audit function as a key component of the council's governance and assurance framework and in compliance with the Departmental Chief Executive's Guidelines for risk management and internal audit in local councils in NSW. This charter provides the framework for the conduct of the internal audit function in council and has been approved by the council taking into account the advice of the council's audit, risk and improvement committee.

Purpose of internal audit

Internal audit is an independent, objective assurance and consulting activity designed to add value and improve a council's operations. It helps a council accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes¹.

The mission of Internal Audit is to enhance and protect organisational value by providing an independent and objective review and advisory service to provide advice to the governing body, general manager and audit, risk and improvement committee about the council's governance processes, risk management and control frameworks and its external accountability obligations. It also assists the council to improve its business performance.

The scope of Internal Audit work embraces the wider concept of corporate governance and risk, recognising that controls exist in the council to manage risks and promote effective and efficient governance and performance.

Internal Audit services may include:

- Assurance Services objective examination of evidence for the purpose of providing an independent assessment of risk management, control and governance processes.
- Advisory Services advisory and related activities, the nature and scope of which are agreed upon with the governing body and/or senior management and the audit, risk and improvement committee. Advisory services are intended to add value and improve business operations."

Internal Audit will offer a service catalogue, including:

- Internal audit engagements with a compliance, financial or performance improvement focus.
- Management requested services where business areas within the council may request Internal Audit services, usually in response to an issue or an emerging risk.
- Multi-stage audit engagements at key project milestones.
- Continuous auditing of controls using technology.

Independence

Council's internal audit function is to be independent of the council so it can provide an unbiased assessment of the council's operations and risk and control activities.

The internal auditor reports functionally to the council's audit, risk and improvement committee on the results of completed audits, and for strategic direction and accountability

¹ As defined by the International Standards for the Professional Practice of Internal Auditing (2017)

purposes, and reports administratively to the general manager to facilitate day-to-day operations. Internal audit activities are not subject to direction by the governing body and the council's management has no role in the exercise of the council's internal audit activities.

The audit, risk and improvement committee is responsible for communicating any internal audit issues or information to the governing body. Should the governing body require additional information, a request for the information may be made to the Chair of the audit, risk and improvement committee by resolution. The Chair may only provide the information requested by the governing body where the Chair is satisfied that it is reasonably necessary for the governing body to receive the information for the purposes of performing its functions under the Local Government Act. Individual councillors are not entitled to request or receive information from the committee.

The general manager must consult with the Chair of the council's audit, risk and improvement committee before appointing or making decisions affecting the employment of the internal auditor. If the internal auditor is dismissed, the general manager must report the reasons for their dismissal to the governing body. The audit, risk and improvement committee, through the chair, will contribute to the annual performance assessment of the internal auditor.

Where the chair of the council's audit, risk and improvement committee has any concerns about the treatment of the internal auditor, or any action taken that may compromise the internal auditor's ability to undertake their functions independently, they can report their concerns to the governing body.

The internal auditor is to confirm at least annually to the audit, risk and improvement committee the independence of internal audit activities from the council.

Authority

The governing body authorises the internal audit function to have full, free and unrestricted access to all functions, premises, assets, personnel, records and other documentation and information that the internal auditor considers necessary to enable the internal auditor to undertake its responsibilities.

All records, documentation and information accessed while undertaking internal audit activities are to be used solely for the conduct of these activities. The internal auditor and individual internal audit staff are responsible and accountable for maintaining the confidentiality of the information they receive when undertaking their work.

All internal audit documentation is to remain the property of council, including where internal audit services are performed by an external third-party provider.

Information and documents pertaining to internal audit are not to be made publicly available. The internal auditor may only release council information to external parties that are assisting the internal auditor to fulfil its responsibilities with the approval of the general manager, except where it is being provided to an external investigative or oversight agency for the purpose of informing that agency of a matter that may warrant its attention.

Role

The internal audit function is to support the council's audit, risk and improvement committee to review and provide independent advice to the council in accordance with section 428A of

the *Local Government Act 1993*. This includes conducting internal audits of council and monitoring the implementation of corrective actions.

The internal audit function is to also play an active role in:

- developing and maintaining a culture of accountability and integrity
- facilitating the integration or risk management into day-to-day business activities and processes, and
- promoting a culture of high ethical standards.

The internal audit function has no direct authority or responsibility for the activities it reviews. The internal audit function has no responsibility for developing or implementing procedures or systems and does not prepare records or engage in council functions or activities (except in carrying out its own functions).

Internal auditor

Council's internal audit function is to be led by the internal auditor as an employee of council. The internal auditor will have sufficient skills, knowledge and experience to ensure it fulfils its roles and responsibilities to the governing body and its audit, risk and improvement committee. The internal auditor must be independent, impartial, unbiased and objective when performing their work and free from any conflicts of interest.

Responsibilities of the internal auditor include:

- managing the day-to-day activities of the internal audit function
- managing the council's internal audit budget
- supporting the operation of the council's audit, risk and improvement committee
- approving internal audit project plans, conducting or supervising audits and assessments and providing independent advice to the audit, risk and improvement committee
- monitoring the council's implementation of corrective actions that arise from the findings of audits
- assisting with the implementation of the audit, risk and improvement committee's annual work plan and four-year strategic work plan
- ensuring the council's internal audit activities comply with the Guidelines on risk management and internal audit in local councils in NSW, and
- contract management and oversight of supplementary external providers (where appropriate).
- Establish a quality assurance and improvement program for the internal audit activity in accordance with the International Professional Practices Framework.
- Developing an Assurance Map built around the 3 Lines of Defence that rates the effectiveness of the various assurance activities across council.

The internal audit function

Members of the internal audit function are responsible to the internal auditor.

Individuals that perform internal audit activities for council must have:

- an appropriate level of understanding of the council's culture, systems and processes
- the skills, knowledge and experience necessary to conduct internal audit activities in the council
- effective interpersonal and communication skills to ensure they can partner with council staff effectively and collaboratively, and

honesty, integrity and diligence.

Performing internal audit activities

The work of the internal audit function is to be thoroughly planned and executed. The council's audit, risk and improvement committee must develop a strategic work plan every four years to ensure that all matters listed in Schedule 1 are reviewed by the Committee and considered by the internal audit function when developing their risk-based program of internal audits. The strategic work plan must be reviewed at least annually to ensure it remains appropriate.

The Committee is to also develop an annual workplan to guide the work of the internal audit function over the forward year.

The Internal Audit workplan is to include an allocation of capacity to the performance of unplanned audits. These unplanned audits will be in response to special requests from the General Manager to address emerging risk areas or specialist advice. These adjustments are to be reported at the next meeting of the ARIC.

On completion of each internal audit engagement, the Internal Auditor shall issue a draft report to relevant management to confirm the factual accuracy of the contents of the report.

The written report should show the results of the audit and the opinion of the auditor as to:

- Irregularities, system weaknesses and other shortcomings;
- Explanations advanced by responsible officers; and
- Remedial Actions taken or proposed.

The responsible officers will be invited to provide written responses to audit recommendations contained in the draft audit report. Such responses should be provided no later than ten working days after receiving the request and shall be included in the final report. The internal auditor's reporting timelines to the enterprise risk management committee will not be affected by an officer's failure to provide a timely response.

The internal auditor is to provide the findings and recommendations of internal audits to the enterprise risk management committee at the end of each audit, and then to audit, risk and improvement committee, with a confirmed management response. Each report is to include a response from the relevant senior manager.

Internal audit reports will be given an overall conclusion as follows;

Rating	Description
Good Practice	 Overall control environment representative of good practice, well-designed, effective, efficient, and functioning properly. No improvement opportunities identified.
Satisfactory	 Satisfactory overall control environment Small number of lower risk improvement opportunities identified, which require corrective action.
Improvement opportunity	 Adequate control environment in most areas. Medium risk improvement opportunities identified, which require corrective action.
Unsatisfactory	 Some key controls do not exist, or are not properly implemented, and there are medium/high risk improvement opportunities. Control environment is impaired.

Where an internal audit is given an overall conclusion rating of Improvement Opportunity or Unsatisfactory the relevant director or senior manager is to provide the enterprise risk management committee with a report of the actions to be taken in response to the internal audit recommendations identified including a timeline for implementation.

Internal audit recommendations will be rated based on the Enterprise Risk Matrix, refer to appendix 1. Where an internal audit recommendation has a rating of "high" the relevant director or senior manager is to provide a report to the enterprise risk management committee on the plans to address the identified recommendation, including a timeline for implementation. A quarterly update is to be provided to Enterprise Risk Management Committee on the status of these audit recommendations.

If a manager is making a request to put a previously raised audit recommendation on hold, the manager must provide a report to Enterprise Risk Management Committee to request approval for the change of status. This report is to include details of the circumstances to warrant the change, revised implementation timelines and interim mitigation strategies or controls. A quarterly update is to be provided to Enterprise Risk Management Committee on the status of on hold audit recommendations.

The internal auditor is to establish an ongoing monitoring system to follow up council's progress in implementing corrective actions.

The general manager, in consultation with the audit, risk and improvement committee, is to develop and maintain policies and procedures to guide the operation of the council's internal audit function.

The internal auditor is to ensure that the audit, risk and improvement committee is advised at each of the committee's meetings of the internal audit activities completed during that quarter, progress in implementing the annual work plan and progress made implementing corrective actions.

Conduct

Internal audit personnel are required to comply with the council's code of conduct. Complaints about breaches of council's code of conduct by internal audit personnel are to be dealt with in accordance with the *Procedures for the Administration of the Model Code of Conduct for Local Councils in NSW*. The general manager must consult with the council's audit, risk and improvement committee before any disciplinary action taken against the internal auditor in response to a breach of the council's Code of Conduct.

Internal auditors are also required to comply with the Code of Ethics for the Professional Practice of Internal Auditing issued by the Institute of Internal Auditors.

Professional standards

Internal Audit staff will perform their work in accordance with the 'International Professional Practices Framework' (IPPF) issued by the Institute of Internal Auditors (IIA).

Internal Audit will govern itself by adherence to mandatory guidance contained in the 'International Professional Practices Framework' (IPPF) issued by the Institute of Internal Auditors:

'Core Principles for the Professional Practice of Internal Auditing'.

- 'Definition of Internal Auditing'.
- 'Code of Ethics'.
- 'International Standards for the Professional Practice of Internal Auditing'.

This mandatory guidance constitutes the fundamental requirements for the professional practice of internal auditing and the principles against which to evaluate the effectiveness of Internal Audit performance.

Administrative arrangements

Audit, risk and improvement committee meetings

The internal auditor will attend audit, risk and improvement committee meetings as an independent non-voting observer. The internal auditor can be excluded from meetings by the committee at any time.

The internal auditor must meet separately with the audit, risk and improvement committee at least once per year.

The internal auditor can meet with the chair of the audit, risk and improvement committee at any time, as necessary, in between committee meetings.

External audit

Internal and external audit activities will be coordinated to help ensure the adequacy of overall audit coverage and to minimise duplication of effort.

Periodic meetings and contact between internal and external audit shall be held to discuss matters of mutual interest and to facilitate coordination.

External audit will have full and free access to all internal audit plans, working papers and reports.

Dispute resolution

The internal audit function should maintain an effective working relationship with the governing body and the audit, risk and improvement committee and seek to resolve any differences they may have in an amicable and professional way via discussion and negotiation.

In the event of a disagreement between the internal audit function and the governing body, the dispute is to be resolved by the general manager and/or the audit, risk and improvement committee. Disputes between the internal audit function and audit, risk and improvement committee are to be resolved by the governing body of the council.

Unresolved disputes regarding compliance with statutory or other requirements are to be referred to the Departmental Chief Executive in writing.

Review arrangements

Council's audit, risk and improvement committee must review the performance of the internal audit function each year and report its findings to the governing body.

The Internal Auditor is to provide a report to the audit, risk and improvement committee at the meeting subsequent to the end of the financial year:

- The performance of internal audit for the financial year as measured against agreed key performance indicators; and
- The approved internal audit plan of work for the previous financial year showing the current status of each audit.
- Details of internal audits deferred during the previous financial year including reasons why the deferral was necessary and when they are planned to be completed.

A strategic and quality assurance review of the internal audit function must be conducted each council term that considers the views of an external party with a strong knowledge of internal audit on the performance of the internal audit function and reported to the governing body.

This charter is to be reviewed annually by the audit, risk and improvement committee and once each council term by the governing body. Any substantive changes are to be approved by the governing body.

Further information

For further information on council's internal audit activities contact Matthew Elphick on melphick@tweed.nsw.gov.au or by phone 02 6670 2400.

Reviewed by internal auditor

25th March 2024

Reviewed by Chair of the council's audit, risk and improvement committee

Reviewed by council or in accordance with a resolution of the council.

21st March 2024

28.3.24

Schedule 1 – internal audit function responsibilities

Audit

Internal audit

- Conduct internal audits as directed by the council's audit, risk and improvement committee
- Implement the council's annual and strategic internal audit work plans
- Monitor the implementation by council of corrective actions
- Assist the council to develop and maintain a culture of accountability and integrity
- Facilitate the integration of risk management into day-to-day business activities and processes, and
- Promote a culture of high ethical standards.

External audit

- Provide input and feedback on the financial statement and performance audit coverage proposed by external audit and provide feedback on the audit services provided
- Review all external plans and reports in respect of planned or completed audits and monitor council's implementation of audit recommendations
- Provide advice on action taken on significant issues raised in relevant external audit reports and better practice guides

Risk

Risk management

Review and advise:

- if the council has in place a current and appropriate risk management framework that is consistent with the Australian risk management standard
- whether the council's risk management framework is adequate and effective for identifying and managing the risks the council faces, including those associated with individual projects, programs and other activities
- if risk management is integrated across all levels of the council and across all processes, operations, services, decision-making, functions and reporting
- of the adequacy of risk reports and documentation, for example, the council's risk register and risk profile
- whether a sound approach has been followed in developing risk management plans for major projects or undertakings
- whether appropriate policies and procedures are in place for the management and exercise of delegations
- if council has taken steps to embed a culture which is committed to ethical and lawful behaviour
- if there is a positive risk culture within the council and strong leadership that supports effective risk management
- of the adequacy of staff training and induction in risk management
- how the council's risk management approach impacts on the council's insurance arrangements
- of the effectiveness of council's management of its assets, and

• of the effectiveness of business continuity arrangements, including business continuity plans, disaster recovery plans and the periodic testing of these plans.

Internal controls

Review and advise:

- whether council's approach to maintaining an effective internal audit framework, including over external parties such as contractors and advisors, is sound and effective
- whether council has in place relevant policies and procedures and that these are periodically reviewed and updated
- whether appropriate policies and procedures are in place for the management and exercise of delegations
- whether staff are informed of their responsibilities and processes and procedures to implement controls are complied with
- if the council's monitoring and review of controls is sufficient, and
- if internal and external audit recommendations to correct internal control weaknesses are implemented appropriately

Compliance

Review and advise of the adequacy and effectiveness of the council's compliance framework, including:

- if the council has appropriately considered legal and compliance risks as part of the council's risk management framework
- how the council manages its compliance with applicable laws, regulations, policies, procedures, codes, and contractual arrangements, and
- whether appropriate processes are in place to assess compliance.

Fraud and corruption

Review and advise of the adequacy and effectiveness of the council's fraud and corruption prevention framework and activities, including whether the council has appropriate processes and systems in place to capture and effectively investigate fraud-related information.

Financial management

Assist the Audit, Risk and Improvement Committee as needed to Review and advise:

- if council is complying with accounting standards and external accountability requirements
- of the appropriateness of council's accounting policies and disclosures
- of the implications for council of the findings of external audits and performance audits and council's responses and implementation of recommendations
- whether the council's financial statement preparation procedures and timelines are sound
- the accuracy of the council's annual financial statements prior to external audit, including:
 - management compliance/representations
 - significant accounting and reporting issues
 - o the methods used by the council to account for significant or unusual transactions and areas of significant estimates or judgements

- appropriate management signoff on the statements
- if effective processes are in place to ensure financial information included in the council's report is consistent with signed financial statements
- if the council's financial management processes are adequate
- the adequacy of cash management policies and procedures
- if there are adequate controls over financial processes, for example:
 - o appropriate authorisation and approval of payments and transactions
 - o adequate segregation of duties
 - o timely reconciliation of accounts and balances
 - o review of unusual and high value purchases
- if policies and procedures for management review and consideration of the financial position and performance of the council are adequate, and
- if council's grants and tied funding policies and procedures are sound.

Governance

Review and advise of the adequacy of the council governance framework, including the council's:

- decision-making processes
- · implementation of governance policies and procedures
- reporting lines and accountability
- · assignment of key roles and responsibilities
- committee structure
- management oversight responsibilities
- human resources and performance management activities
- reporting and communication activities
- information and communications technology (ICT) governance, and
- management and governance of the use of data, information and knowledge

Improvement

Strategic planning

Review and advise:

- of the adequacy and effectiveness of the council's integrated, planning and reporting (IP&R) processes
- if appropriate reporting and monitoring mechanisms are in place to measure progress against objectives, and
- whether the council is successfully implementing and achieving its IP&R objectives and strategies.

Service reviews and business improvement

Review and advise:

- if council has robust systems to set objectives and goals to determine and deliver appropriate levels of service to the community and business performance
- if appropriate reporting and monitoring mechanisms are in place to measure service delivery to the community and overall performance, and
- how the council can improve its service delivery and the council's performance of its business and functions generally

Performance data and measurement

Review and advise:

- if council has a robust system to determine appropriate performance indicators to measure the achievement of its strategic objectives
- if the performance indicators council uses are effective, and
- of the adequacy of performance data collection and reporting.

Appendix 1 – Enterprise Risk Matrix Ratings

	Consequence				
Likelihood	Negligible	Minor	Moderate	Major	Catastrophic
Almost Certain	Low	Medium	Very High	Extreme	Extreme
Likely	Low	Medium	High	Very high	Extreme
Possible	Low	Medium	Medium	High	Very High
Unlikely	Low	Low	Medium	Medium	High
Rare	Low	Low	Low	Medium	Medium

	Descriptors
Almost Certain	Expected to occur in normal circumstances. There has been frequent past history. Guide: Is expected to occur multiple times within a year or incident is clearly imminent. Less than 10% of the critical controls associated with the risk are rated as either Effective or Mostly Effective. Without control improvement, it is almost certain that the risk will eventuate at
Likely	some point in time. Probably occur in most circumstances. Some recurring past event history. Guide: Is expected to occur approximately once per year. (Or for strategic risks – currently the issue is being discussed, under review and/or has become a Federal or State election issue.)
Possible	10-30% of the critical controls associated with the risk are rated as either Effective or Mostly Effective. Without control improvement, it is more likely than not that the risk will eventuate. Could occur sometime. Some past warning signs or previous event history. Guide: Likely to occur approximately once every 5 years. (Or for strategic risks – there is intermittent media coverage, policy advocacy changes or proposal for review.)
	30-70% of the critical controls associated with the risk are rated as either Effective or Mostly Effective and, if there is no improvement the risk may eventuate. Not expected to occur.
Unlikely	Guide: Likely to occur once every 10-20 years. (Or for strategic risks – not currently being discussed as a mainstream issue, may be some fringe media but low influence or not a current policy issue.) 70-90% of the critical controls associated with the risk are rated as either Effective or Mostly Effective. The strength of this control environment means that it is more than likely that the risk
Down.	eventuating would be caused by external factors not known to Council. May occur but only in exceptional circumstances. Guide: Likely to occur with less frequency than once every 20 years.
Rare	90% or more of the critical controls associated with the risk are rated as either Effective or Mostly Effective. The strength of this control environment means that, if this risk eventuates, it is most likely as a result of external circumstances outside of the control of Council.

Consequence Type	Negligible	Minor	Moderate	Major	Catastrophic
Environmental	Negligible impact on natural or built environment, or can be immediately reversed Perception of damage	Short term negative impact on natural environment that is easily containable/reversed Minor loss or damage of built assets Localised impact on amenity	Medium term impact on natural environment from single incident requiring intensive efforts to contain Temporary impact on amenity of large number of residents Serious damage to built assets	Long term or permanent damage to natural environment Severe loss of environmental amenity Major loss of built asset	Widespread severe impairment or loss of ecosystem functions across species and landscapes, irrecoverable environmental damage Long term major negative impact on amenity Complete loss of significant built asset
Financial	The lessor of: • <2% over service/project budget, OR • Up to \$100K one off loss or reduction in recurrent budget	The lessor of: • 2-5% over service/project budget, OR • \$100K-\$1M one off loss or reduction in recurrent budget One off minor variation to service budget	The lessor of: • 5-10% over service/project budget, OR • \$1-2M recurrent reduction in budget One off loss of \$3-5M Loss may impact beyond current FY	The lessor of: • 10-20% over service/project budget, OR • \$2-3M recurrent reduction in budget One off loss of \$5-10M Multiple FYs impact	The lessor of: • >20% over service/project budget, OR • >3M recurrent reduction in budget One off loss of \$10M or more
People	No injuries Negligible effect on peoples' wellbeing /personal safety Localised complaints by staff/no impact on morale	First aid treatment Minor negative impact on wellbeing and personal safety of members of the public Complaints requiring internal investigation and resolution only	Medical treatment, some lost time of workers Medium term negative impact on wellbeing and personal safety of large number of the public Short term impact on morale of staff	Injuries requiring hospitalisation of <3 days Ongoing negative impact on wellbeing and personal safety of large number of the public Widespread impact on morale	Fatality or permanent major disability Long term, major negative impact on the wellbeing and personal safety of significant number of people

Consequence Type	Negligible	Minor	Moderate	Major	Catastrophic
Legal and Compliance	Breach of standards/guidelines Opportunistic fraud/corruption incident involving a single person	Minor legal issues or non-compliances Breach of Policy One off claims or legal matters resolved through routine procedures, technical breach of regulations Opportunistic fraud/corruption incident involving more than a single person	Serious breach with investigation Ongoing legal issue that Council has not or cannot adequately address Premediated fraud/corrupt activities	Breaches of legislation resulting in fines, major legal action over extended period Successful prosecution of senior executive Multiple insurance claims	Significant prosecution and fines; very serious litigation Repeated major breaches Successful class action Penalties imposed resulting in the imprisonment of senior management
Operational Service Delivery	Usual scheduled interruptions Unscheduled interruptions <4hrs Little to no impact to service	Some Council service activities disrupted for up to 2 days Minor interruption to service with localised inconvenience Strategic Risk – Minor adjustment to extent or timing of current CSP	Key service activities disrupted for between 2 and 20 days Customer impact up to 48 hrs Strategic Risk – Amendment to CSP, consideration of organisational restructure and/or moderate reduction in staff levels (5-25%).	Key service activities disrupted for between 20 and 60 days Customer impact 7 to 14 days Strategic Risk – Complete change to CSP, significant organisational restructure and/or significant reduction in staff levels (>25%)	Key service activities disrupted for over 60 days Major interruption to delivery of all or most services for >14 days
Image and Reputation	One off insignificant adverse local media or public complaints	Heightened concerns from narrow group of residents Some media* concern	Concern from broad section of residents Major local media* coverage though short duration	Significant adverse media at State level Significant & well publicised outcry from residents, long life story	Significant public outcry involving large numbers of non-residents as well as residents Sustained negative State media* coverage Damage to reputation and trust that takes many years to repair

Version control

Version #	Summary of changes made	Date changes made
1.0	Adopted Charter per new guidelines published November 2023	21/03/2024