

<b>Requirement</b>	<b>GC</b>	<b>PC</b>	<b>DNC</b>	<b>Notes supporting assessment at 29<sup>th</sup> May 2020</b>
<b>Mission of internal audit</b>	Y			
<b>Definition of Internal Auditing</b>	Y			
<b>Core Principles</b>	Y			QAIP records the need to better demonstrate quality and continuous improvement
<b>Code of Ethics</b>	Y			Review of self-assessments to be undertaken to reflect remote working practices developed under covid-19
<b>1000 Purpose, Authority and Responsibility</b>	Y			All Charters will need to be reviewed in terms of access to records, building and staff and build in remote auditing protocols
<b>1100 Independence and Objectivity</b>	Y			
1110 Organisational Independence	Y			6 auditors have been re-deployed so there will need to be safeguards built in to ensure they do not audit areas they have been involved in
1111 Direct Interaction with the Board	Y			
1120 Individual Objectivity	Y			
1130 Impairment to Independence or Objectivity	Y			
<b>1200 Proficiency and Due Professional Care</b>	Y			
1210 Proficiency	Y			ICT audit resource is being trained up internally
1220 Due Professional Care	Y			
1230 Continuing Professional Development	Y			
<b>1300 Quality Assurance and Improvement Programme</b>	Y			Designed & implemented but needs updates on actions
<b>1310 Requirements of the Quality Assurance and Improvement</b>	Y			

<b>Programme</b>				
1311 Internal Assessments	Y			
1312 External Assessments	Y			EQA was completed in April 2018 'generally conforms'.
1320 Reporting on the Quality Assurance and Improvement Programme	Y			Needs to be re-imagined in terms of new normal
<b>1321 Use of 'Conforms with the International Standards for the Professional Practice of Internal Auditing'</b>	Y			
<b>1322 Disclosure of Non-conformance</b>	Y			
<b>4 Performance Standards</b>	Y			
<b>2000 Managing the Internal Audit Activity</b>	Y			
<b>2010 Planning</b>	Y			Planning for 2020-21 has been disrupted by the coronavirus. Investigating alternative planning approaches.
2020 Communication and Approval	Y			
2030 Resource Management	Y			Openly reported resource issues and plans during year
2040 Policies and Procedures	Y			Audit manual needs updating to incorporate remote working procedures
2050 Coordination	Y			
2060 Reporting to Senior Management and the Board	Y			
2070 External Service Provider and Organisational Responsibility for Internal Auditing	Y			I always inform City and Fire

2100 Nature of Work	Y			
2110 Governance	Y			
2120 Risk Management	Y			
2130 Control	Y			
2200 Engagement Planning	Y			
2210 Engagement Objectives	Y			Need a further understanding of Value for money criteria
2220 Engagement Scope	Y			Need a further understanding of significant consulting opportunities requirements especially in light of the change to 'quick response' audits
2240 Engagement Work Programme	Y			
2300 Performing the Engagement	Y			Adopting IIA principles and guidance on remote working
2310 Identifying Information	Y			
2320 Analysis and Evaluation	Y			Training on data analytics quarter 1 – should see more rollout
2330 Documenting Information	Y			
2340 Engagement Supervision	Y			
2400 Communicating Results	Y			
2410 Criteria for Communicating	Y			
2420 Quality of Communications	Y			
2421 Errors and Omissions	Y			

2430 Use of ‘Conducted in Conformance with the International Standards for the Professional Practice of Internal Auditing’	Y			
2431 Engagement Disclosure of Non-conformance	Y			
2440 Disseminating Results	Y			
2450 Overall Opinion	Y			
2500 Monitoring Progress	Y			
2600 Communicating the Acceptance of Risks	Y			

**Explanations of ‘conformance’**

**GC – “Generally Conforms”** means the assessor has concluded that the relevant structures, policies, and procedures of the activity, as well as the processes by which they are applied, comply with the requirements of the individual *Standard* or element of the Code of Ethics in all material respects. For the sections and major categories, this means that there is general conformity to a majority of the individual *Standards* or elements of the Code of Ethics, and at least partial conformity to the others, within the section/category. There may be significant opportunities for improvement, but these should not represent situations where the activity has not implemented the *Standards* or the Code of Ethics, has not applied them effectively, or has not achieved their stated objectives. As indicated above, general conformance does not require complete/perfect conformance, the ideal situation, “successful practice,” etc.

**PC – “Partially Conforms”** means the evaluator has concluded that the activity is making good-faith efforts to comply with the requirements of the individual *Standard* or element of the Code of Ethics, section, or major category, but falls short of achieving some major objectives. These will usually represent significant opportunities for improvement in effectively applying the *Standards* or Code of Ethics and/or achieving their objectives. Some deficiencies may be beyond the control of the activity and may result in recommendations to senior management or the board of the organisation.

**DNC – “Does Not Conform”** means the evaluator has concluded that the activity is not aware of, is not making good-faith efforts to comply with, or is failing to achieve many/all of the objectives of the individual *Standard* or element of the Code of Ethics, section, or major category. These deficiencies will usually have a significant negative impact on the activity’s effectiveness and its potential to add value to the organisation. These may also represent significant opportunities for improvement, including actions by senior management or the board.

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26<sup>th</sup> April 2019

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