



Annual Internal Audit Report and Opinion

2024/25

1. Introduction and context

- 1.1 This report outlines the audit work carried out by the Internal Audit Service for the year ended 31st March 2025.
- 1.2 Internal audit is an independent, objective assurance and consulting activity designed to add value and improve the organisation's operations. Internal audit helps the organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, internal control, compliance and governance processes.
- 1.3 Internal audit is a statutory requirement for local authorities, in accordance with:
 - Section 151 of the Local Government Act 1972 – which requires every local authority to make arrangements for the proper administration of its financial affairs and to ensure that one of the officers has responsibility for the administration of those affairs; and
 - The Accounts and Audit Regulations 2018 (England) – which state that “A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance”.
- 1.4 The Council's internal audit service has been delegated to North Northamptonshire Council and is led by the Chief Internal Auditor, employed by North Northamptonshire Council. Internal audit independence is achieved by reporting lines which allow for unrestricted access to the Chief Executive, Corporate Leadership Team (which includes the Section 151 Officer), and the Chair of the Audit Committee. Internal auditors have no direct operational responsibility or authority over any of the activities audited and the Internal Audit Charter sets out how independence and objectivity is maintained and evidenced.
- 1.5 The Internal Audit Standards require the Chief Internal Auditor to provide an annual opinion, based upon and limited to the work performed, on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control (i.e. the organisation's system of internal control). This is achieved through a risk-based plan of work, which should provide a reasonable level of assurance, subject to the inherent limitations described below and set out in Appendix 1 and takes into account other sources of assurance, as appropriate. The opinion does not imply that Internal Audit has reviewed all risks relating to the organisation.
- 1.6 As such, the Annual Report contains:
 - the Internal Audit opinion on the overall adequacy and effectiveness of the Council's governance, risk and control framework (i.e. the control environment);
 - a summary of the audit work from which the opinion is derived and any work by other assurance providers upon which reliance is placed; and
 - a statement on the extent of conformance with the Standards.

2. Chief Internal Auditor's Opinion 2024/25

2.1 Based upon the work undertaken by Internal Audit during the year, the Chief Internal Auditor's overall opinion on the Council's system of internal control is set out below:

I am satisfied that sufficient internal audit work has been undertaken to inform an opinion on the adequacy and effectiveness of governance, risk management and internal control for 2024/25. In giving this opinion, it should be noted that assurance can never be absolute. The most that the internal audit service can provide is reasonable assurance that there are no major weaknesses in the system of internal control.

It is my opinion that **Good Assurance** can be given over the adequacy and effectiveness of the Council's control environment for 2024/25 – see definition of assurance opinions in section 4.1 of this report. This control environment comprises of the system of internal control, governance arrangements and risk management. Any limitations over this opinion are detailed and explained further below.

Financial control

Controls relating to the Council's key financial systems which were reviewed during the year were all concluded to be operating at a level of Moderate Assurance or above, with 92% of opinions given being of Good or Substantial Assurance.

Assurance over the outsourced revenues and benefits service has been provided in the form of internal audit reports issued for the Anglia Revenues Partnership shared service. These have all resulted in assurance opinions of 'Adequate / Reasonable' or 'Good / Substantial'.

Risk management

The Council's structures and processes for identifying, assessing and managing risk have remained generally consistent during 2024/25. The Risk Register has been presented to the Audit Committee during the financial year.

Internal control

For the audits completed by the Internal Audit service in 2024/25, 100% of the opinions given in relation to the control environment and compliance have been of at least Moderate Assurance. There have been no reports issued with an opinion of 'high' organisational impact. Of the audits completed by the Internal Audit service, 73% of opinions were of 'Substantial' or 'Good'.

The audit plan coverage had targeted areas of known risk and was informed through consultation with senior management and the Audit Committee. Key areas of risk for the Council during 2024/25 have related to the medium-term financial strategy, the bereavement centre project, staff recruitment and retention and regulatory compliance. The audit plan coverage sought to provide assurances in these areas, as appropriate.

Of the agreed management actions due for implementation during 2024/25, 96% had been completed during the year.

There have been no incidences during 2024/25 where the internal audit team have highlighted a fundamental risk or weakness and management have sought to accept the risk, rather than agree an appropriate action.

Internal Audit has not been made aware of any further governance, risk or internal control issues which would reduce the above opinion. No systems of controls can provide absolute assurance against material misstatement or loss, nor can Internal Audit give that assurance.

- 2.2 The basis for this opinion is derived from an assessment of the individual opinions arising from assignments undertaken throughout the year from the risk-based Internal Audit plan. Assurances from other sources have also been taken into consideration, where appropriate.
- 2.3 The assessment has taken account of the relative materiality of areas highlighted for improvement and management's progress in addressing any control weaknesses.

3. Summary of findings

- 3.1 All final reports have agreed action plans, dates and responsible officers, where required. The audit opinions arising from the work of Internal Audit are summarised in Table 1, split by assurance area.

Table 1 – Summary of audit opinions 2024/25:

Area	Substantial	Good	Moderate	Limited	No
Financial systems	6	5	1	-	-
Key corporate controls and policies	-	3	3	-	-
Risk based audits	1	6	1	-	-
Revenues and benefits (Anglia Revenues Partnership)	-	1	3	-	-
Total	7	15	8	-	-
Summary	23%	50%	27%	%	-
Summary (2023/24) for comparison	18%	35%	44%	3%	

- 3.2 The Internal Audit team's work has been targeted upon areas of identified risk and has sought to support service areas in identifying and prioritising areas for improvement.

4. Review of audit coverage

Audit opinion on individual audits

- 4.1 The Committee is reminded that the following assurance opinions were assigned during 2024/25, in accordance with the Internal Audit Charter:

Table 2 – Assurance categories:

Level of Assurance	Design of control environment definition	Compliance definition
Substantial	There is a sound system of internal control to support delivery of the objectives.	The control environment is operating as intended with no exceptions noted which pose risk to delivery of the objectives.
Good	There is generally a sound system of internal control, with some gaps which pose a low risk to delivery of the objectives.	The control environment is generally operating as intended with some exceptions which pose a low risk to delivery of the objectives.
Moderate	There are gaps in the internal control framework which pose a medium risk to delivery of the objectives.	Controls are not consistently operating as intended, which poses a medium risk to the delivery of the objectives.
Limited	There are gaps in the internal control framework which pose a high risk to delivery of the objectives.	Key controls are not consistently operating as intended, which poses a high risk to the delivery of the objectives.
No	Internal Audit is unable to provide any assurance that a suitable internal control framework has been designed.	Internal Audit is unable to provide any assurance that controls have been effectively applied in practice.

- 4.2 All individual reports represented in this Annual Report are final reports. As such, the findings have been agreed with management, together with the accompanying action plans.

Summary of audit work

- 4.3 Table 3 details the assurance levels resulting from all audits undertaken in 2024/25 and the date of the Committee meeting at which the outcome of the audit was presented.

- 4.4 All completed assignments have been delivered in accordance with the agreed audit planning records and provide assurance in relation to the areas included in the specified scope.

Table 3 – Summary of finalised audit opinions 2024/25:

Audit Area	Design of Control Environment	Compliance	Org Impact	Committee Date
Financial systems – providing assurance that the Council has made arrangements for the proper administration of its financial affairs				
Bank reconciliation	Good (Green)	Moderate (Amber)	Low (Green)	April 2025
Accounts Payable	Substantial (Green)	Good (Green)	Low (Green)	July 2025
Accounts Receivable	Good (Green)	Good (Green)	Low (Green)	July 2025
Payroll	Substantial (Green)	Substantial (Green)	Low (Green)	April 2025
Treasury management	Substantial (Green)	Substantial (Green)	Low (Green)	April 2025
Medium term financial strategy	Good (Green)	Substantial (Green)	Low (Green)	February 2025
Key corporate controls and policies				
Decision making and delegations	Moderate (Amber)	Good (Green)	Medium (Amber)	November 2024
UK Shared Prosperity Fund	Good (Green)	Good (Green)	Low (Green)	February 2025
Procurement compliance	Moderate (Amber)	Moderate (Amber)	Medium (Amber)	July 2025
Risk based audits				
Major project – bereavement centre	Good (Green)	Good (Green)	Low (Green)	February 2025
Supporting vulnerable people	Substantial (Green)	Good (Green)	Low (Green)	November 2024
Housing allocations and homelessness	Moderate (Amber)	Good (Green)	Low (Green)	July 2025
Planning service review	Good (Green)	Good (Green)	Low (Green)	July 2025

Audit Area	Design of Control Environment	Compliance	Org Impact	Committee Date
Revenues and Benefits – delivered by Anglia Revenues Partnership				
Business rates	Adequate / Reasonable			July 2025
Enforcement	Good / Substantial			July 2025
Recovery of Council Tax and Housing Benefit Overpayments	Adequate / Reasonable			July 2025
Council Tax Billing, Housing Benefit and Local Council Tax Reduction Scheme	Adequate / Reasonable			July 2025

- 4.5 Audit outcomes have been reported to the Audit Committee during the 2024/25 financial year, as finalised.

Implementation of agreed management actions

- 4.6 Internal Audit follow up on progress made against all agreed actions arising from completed assignments to ensure that they have been fully and promptly implemented. Internal Audit trace follow up action on a regular basis and report updates at every Audit Committee meeting.
- 4.7 A total of 22 agreed actions have been implemented by officers during 2024/25, which represents 96% of the actions which were due for implementation.
- 4.8 Details of the implementation rate for the agreed management actions during 2024/25 are provided in Table 4, as at 31st March 2025.

Table 4 - Implementation of agreed management actions due in 2024/25:

	'High' priority	'Medium' priority	'Low' priority	Total
Agreed and implemented	1	17	4	22 (96%)
Agreed and due within last 3 months , but not implemented	-	-	-	-
Agreed and due over 3 months ago , but not implemented	-	1	-	1 (4%)
Total	1	18	4	23
Agreed and not yet due for implementation	1	1	1	3

Other sources of assurance

- 4.9 In April 2024, the Council achieved certification for the Public Sector Network (PSN) Code of Connection (CoCo) compliance. CoCo compliance requires local authorities to document how their information technology meets the requirements, which were adapted from the global ISO27001 standard. Submission for the certification requires evidence of recent penetration testing of the Council's network and satisfactory resolution of vulnerabilities exposed.

5. Performance

- 5.1 It is important that Internal Audit demonstrates its value to the organisation. The service provides assurance to management and Members via its programme of work and also offers constructive support and advice to assist the Council in new areas of work.
- 5.2 Since 1st April 2022, the Council's internal audit service has been delegated to North Northamptonshire Council. During this year, a number of successful recruitment campaigns have resulted in the appointment of auditors from a variety of backgrounds which will serve to strengthen the depth and breadth of the team. The team have built effective working relationships with service areas and seek to continue to build upon the positive feedback and reputation built to date.
- 5.3 The Internal Audit service has issued reports on **100%** of the assignments from the 2024/25 Audit Plan.
- 5.4 In order to seek feedback on the quality of the internal audit work, customer satisfaction surveys are issued following the conclusion of audit assignments. The feedback received on audits delivered during the 2024/25 year is summarised in table. Of the feedback received 93% rated the elements of the service as either 'good' or 'outstanding'. Overall, 64% of responses rated the service as 'outstanding'.

Table 5 – Customer satisfaction survey results

Aspects of audit assignments	Outstanding	Good	Satisfactory	Poor	N/A
Design of assignment	8	3	-	-	-
Communication during assignments	8	3	-	-	-
Quality of reporting	8	2	1	-	-
Quality of recommendations	4	3	2	-	-

Internal Audit contribution in wider areas

- 5.5 Key additional areas of Internal Audit contribution to the Council in 2024/25 are set out in Table 6:

Table 6 – Internal Audit contribution

Area of Activity	Benefit to the Council
Rolling risk register reviews.	Providing the Audit Committee with assurances over the content of risk register entries and risk management arrangements. This also gives Internal Audit an insight into the risks identified and areas where assurance is needed.

Area of Activity	Benefit to the Council
Ad hoc advice and assistance.	Assistance with ad-hoc queries and advice. Raising the profile of Internal Audit with service leads to increase the effectiveness of the service.
Sharing advice and fraud alerts.	Pro-active counter fraud support and learning from other authorities.
Maintaining a fraud reporting mailbox to enable concerns to be raised directly with Internal Audit.	Supporting the Council in its Counter Fraud strategy and reinforcing a zero-tolerance culture.
Support for the development on new processes and systems - providing “critical friend” advice to ensure that effective controls are built in at the outset.	Supporting the Council to strengthen its control environment at the earliest opportunity.
Maintaining good working relationships with External Audit.	Maximising value of audit resources.

Professional Standards

5.6 The Public Sector Internal Audit Standards (PSIAS) were adopted by the Chartered Institute of Public Finance and Accountancy (CIPFA) from April 2013. The standards are intended to promote further improvement in the professionalism, quality, consistency and effectiveness of Internal Audit across the public sector.

5.7 The objectives of the PSIAS were to:

- Define the nature of internal auditing within the UK public sector;
- Set basic principles for carrying out internal audit in the UK public sector;
- Establish a framework for providing internal audit services, which add value to the organisation, leading to improved organisational processes and operations; and
- Establish the basis for the evaluation of internal audit performance and to drive improvement planning.

5.8 Since 1st April 2022, the Internal Audit service has been delegated to North Northamptonshire Council and a Quality and Improvement Plan is overseen by the current Chief Internal Auditor to support ongoing development, in line with the Standards. Assessment against the Standards has been embedded in the delivery of the service and ongoing development work.

5.9 From April 2025, the Global Internal Audit Standards have been adopted and the Internal Audit service has updated templates and ways of working to align with these Standards, as required.

- 5.10 Under the professional standards, an external assessment must be completed at least every five years. An external assessment was commissioned and took place in February 2025 and the full report has been shared with the Audit Committee. The external assessor concluded that the Internal Audit service had 'generally conformed' with the relevant standards during 2024/25, the highest rating available, providing assurance over the basis for this annual opinion. The report also provided guidance for the service on areas for further development to ensure alignment with the requirements of the Global Internal Audit Standards. This informs the basis for the Quality Assurance and Improvement Plan and strategy for the year.
- 5.11 The Chief Internal Auditor can confirm that there has been no evidence of impairment of the independence of the Internal Audit team during 2024/25 and no auditors have reviewed systems/controls which they have been responsible for delivering. Every member of the Internal Audit team completes an annual declaration of any interests which could present a conflict of interest and confirmation of acceptance of the code of ethics.

Appendix 1: Limitations

Limitations inherent to the Internal Audit's work:

Internal Audit work has been performed subject to the limitations outlined below:

Opinion

The opinion is based solely on the work undertaken as part of the agreed internal audit plan. There might be weaknesses in the system of internal control that we are not aware of because they did not form part of our agreed annual programme of work, were excluded from the scope of individual internal audit assignments or were not brought to our attention. As a consequence management and the Audit Committee should be aware that our opinion may have differed if our programme of work or scope for individual reviews was extended or other relevant matters were brought to our attention.

Internal control

Internal control systems, no matter how well designed and operated, are affected by inherent limitations. These include the possibility of poor judgment in decision-making, human error, control processes being deliberately circumvented by employees and others, management overriding controls and the occurrence of unforeseeable circumstances.

Future periods

Our assessment of controls relating to the areas audited is for the period 1st April 2024 to 31st March 2025. Historic evaluation of effectiveness may not be relevant to future periods due to the risk that:

- The design of controls may become inadequate because of changes in operating environment, law, regulation or other; or
- The degree of compliance with policies and procedures may deteriorate.

Responsibilities of management and internal auditors

It is management's responsibility to develop and maintain sound systems of risk management, internal control and governance and for the prevention and detection of irregularities and fraud. Internal audit work should not be seen as a substitute for management's responsibilities for the design and operation of these systems.

We endeavour to plan our work so that we have a reasonable expectation of detecting significant control weaknesses and, if detected, we shall carry out additional work directed towards identification of consequent fraud or other irregularities.

However, internal audit procedures alone, even when carried out with due professional care, do not guarantee that fraud will be detected, and our examinations as internal auditors should not be relied upon to disclose all fraud, defalcations or other irregularities which may exist.

This report has been prepared solely for the use of councillors and management of East Cambridgeshire District Council. Details may be made available by internal audit to specified

external organisations, including external auditors, but otherwise the report should not be used or referred to in whole or in part without prior consent. No responsibility to any third party is accepted as the report has not been prepared and is not intended for any other purpose. The matters raised in this report are only those that came to our attention during the course of our work – there may be weaknesses in governance, risk management and the system of internal control that we are not aware of because they did not form part of our work programme, were excluded from the scope of individual audit engagements, or were not brought to our attention.