IJB Audit & Risk Committee 05.11.25
Agenda Item: 5.2.3
Purpose: For Discussion

Western Isles Integration Joint Board

Internal Audit Annual Report 2024/25

May 2025

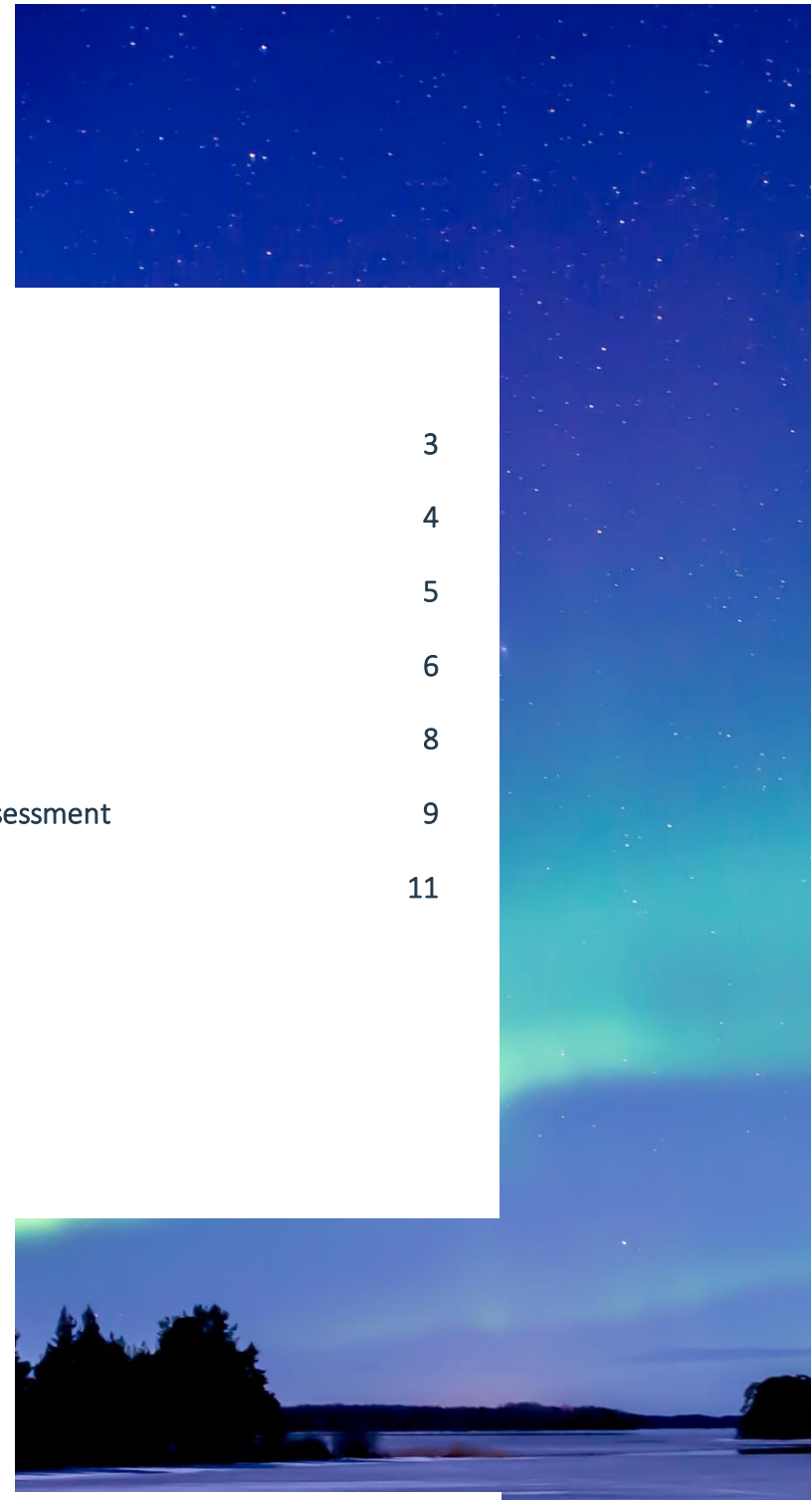


Table of Contents

Introduction

The Global Internal Audit Standards (GIAS) state that:

“The chief audit executive must communicate the results of internal audit services to the board and senior management periodically and for each engagement as appropriate.

The results of internal audit services can include

- Engagement conclusions.
- Themes such as effective practices or root causes.
- Conclusions at the level of the business unit or organisation.”
- To meet the above requirements, this Annual Report summarises our conclusions and key findings from the internal audit work undertaken at Western Isles Integration Joint Board (WI IJB) during the year ended 31 March 2025, including our overall opinion on WI IJB’s internal control system.

Acknowledgement

We would like to take this opportunity to thank all members of management and staff for the help, courtesy and co-operation extended to us during the year.

Overall internal audit opinion

Basis of opinion

As the Internal Auditor of the WI IJB, we are required to provide the Audit and Risk Committee with assurance on the whole system of internal control. In giving our 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 whole system of internal control.

In assessing the level of assurance to be given, we have taken into account:

- All reviews undertaken as part of the 2024/25 internal audit plan;
- Any scope limitations imposed by management;
- Matters arising from previous reviews and the extent of follow-up action taken including in year audits;
- Expectations of senior management, the Audit and Risk Committee and other stakeholders;
- The extent to which internal controls address the client's risk management /control framework;
- The effect of any significant changes in WI IJB objectives or systems; and
- The internal audit coverage achieved to date.

In my professional judgement as Chief Internal Auditor, sufficient and appropriate audit procedures have been conducted and evidence gathered to support the basis and the accuracy of the conclusions reached and contained in this report. The conclusions are based on the conditions as they existed at the time of the audit. The conclusions are only applicable for the entity examined. The programme of work undertaken and evidence gathered is compliant with the Global Internal Audit Standards and is sufficient to provide senior management with appropriate assurance from the work of internal audit.

Internal Audit Opinion

In our opinion, Western Isles IJB has a framework of governance, risk management and control that provides reasonable assurance regarding the effective and efficient achievement of objectives.

Azets

May 2025

Internal audit work performed

Scope and responsibilities

Management

It is management's responsibility to establish a sound internal control system. The internal control system comprises the whole network of systems and processes established to provide reasonable assurance that organisational objectives will be achieved, with particular reference to:

- risk management;
- the effectiveness of operations;
- the economic and efficient use of resources;
- compliance with applicable policies, procedures, laws and regulations;
- safeguards against losses, including those arising from fraud, irregularity or corruption; and
- the integrity and reliability of information and data.

Internal auditor

The Internal Auditor assists management by examining, evaluating and reporting on the controls in order to provide an independent assessment of the adequacy of the internal control system. To achieve this, the Internal Auditor should:

- analyse the internal control system and establish a review programme;
- identify and evaluate the controls which are established to achieve objectives in the most economic and efficient manner;
- report findings and conclusions and, where appropriate, make recommendations for improvement;
- provide an opinion on the reliability of the controls in the system under review; and
- provide an assurance based on the evaluation of the internal control system within the organisation as a whole.

Conformance with Global Internal Audit Standards

We confirm that our internal audit service conforms to the Global Internal Audit Standards. This is confirmed through our quality assurance and improvement programme, which includes cyclical internal and external assessments of our methodology and practice against the standards.

A summary of the results of our most recent external assessment is provided at Appendix 2.This EQA was undertaken in February 2023 against the 2017 International Internal Audit Standards (predecessor to GIAS).

Independence

GIAS require us to communicate on a timely basis all facts and matters that may have a bearing on our independence.

We can confirm that the staff members involved in each 2024/25 internal audit review were independent of WI IJB and their objectivity was not compromised in any way.

Planning process

Our strategic and annual internal audit plans are designed to provide the Audit and Risk Committee with assurance that WI IJB's governance, risk management and internal control system is effective in managing the key risks. The plans are therefore informed by WI IJB's risk management system and linked to the Strategic Risk Register.

The Strategic Internal Audit Plan was agreed in consultation with senior management and formally approved by the Audit and Risk Committee in June 2024.

The Annual Internal Audit Plan is subject to revision throughout the year to reflect changes in WI IJB's risk profile. The only change within the year was in relation to the focus of the Cyber Security review, which was amended to an advisory desktop review to consider any assurance gaps which may exist in relation to cyber security following the cyber incident within Western Isles Council.

We planned our work so that we have a reasonable expectation of detecting significant control weaknesses. However, internal audit can never guarantee to detect all fraud or other irregularities and cannot be held responsible for internal control failures.

Cover achieved

The 2024/25 Internal Audit Plan comprised 32 days of audit work and we completed the full programme. A comparison of actual coverage against the 2024/25 plan is attached at Appendix 1.

We confirm that there were no resource limitations affecting our ability to meet the full audit needs of the WI IJB and no restrictions were placed on our work by management.

We did not rely on the work performed by a third party during the period.

Reports

We prepared a report from each review and presented these reports to the Audit and Risk Committee. The reports are summarised in the table below.

Where relevant, all reports contained action plans detailing responsible officers and implementation dates. The reports were fully discussed and agreed with management prior to submission to the Audit and Risk Committee. We made no significant recommendations that were not accepted by management.

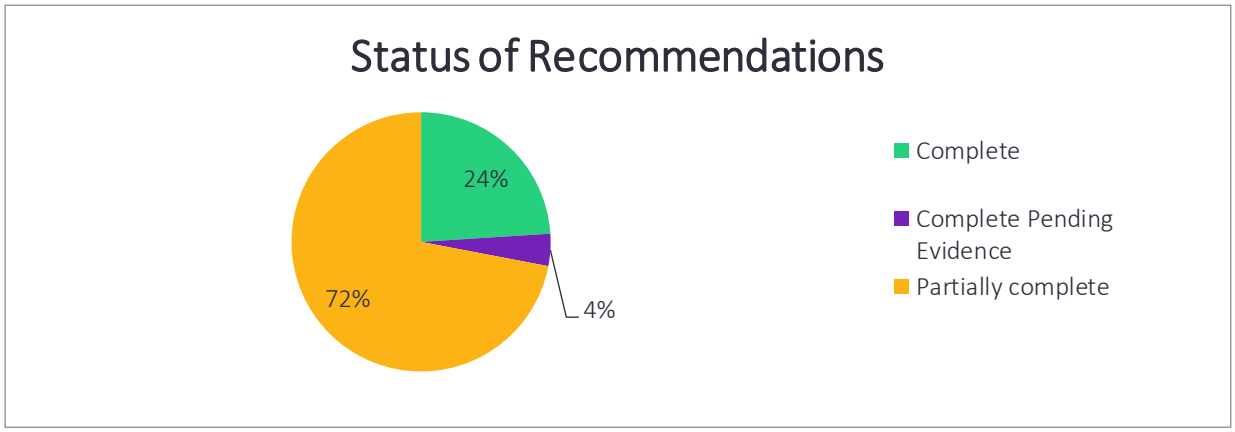
Summary of reports by control assessment and action grade

Review	Control objective assessment	No. of issues per grading				
		4	3	2	1	Advisory
Risk Management		-	1	5	-	1
Cyber Security	N/A due to the style of the report					

The audit definitions are outlined in Appendix 3.

Progress in implementing previous internal audit actions

Management have made limited progress in implementing agreed actions from internal audit reports. We reviewed the 25 actions on the action tracker and obtained sufficient evidence to close 6 (24%) actions. Of the 19 remaining actions, one (5%) is complete subject to the provision of evidence, and 18 (95%) are partially complete.



Key themes from audit work in 2024/25

Risk Management

We confirmed Western Isles Integration Joint Board (WIIJB) has an established Risk Management Strategy and Strategic Risk Register in place. Whilst the risk identification process is clear and structured in practice, it is not documented in the Risk Management Strategy or any other formal policy document. Further, we noted that the current risk appetite is not aligned to numerical scores making it challenging to consistently assess when a risk is exceeding appetite. We also identified the Risk Management Strategy states that risks should be monitored and escalated through governance structures, but does not explicitly document a formal escalation or de-escalation process. It also does not include a clear trigger mechanism for when a risk should be escalated or de-escalated.

Cyber Security

Our cyber security review has focused on what assurances the IJB can take from the Comhairle's Internal Audit report on lessons learned from the cyber security incident. We have also assessed where there may be gaps in assurance that the IJB will need to address in the future and whilst there are some gaps in assurance for the IJB, these are not regarded as significant.

Appendix 1 – Planned v actual days 2024/25

Ref and Name of report	Planned Days	Actual Days
Risk Management	10	10
Cyber Security	12	12
Follow Up	2	2
Audit needs assessment/annual plan preparation	1	1
Audit Committee Planning and Attendance	4	4
Contract management including liaison with external audit	2	2
Annual Internal Audit Report	1	1
Total	**32**	**32**

Appendix 2 – Summary of Quality Assurance Assessment

As part of our regular quality assessment procedures, we commissioned an external quality assessment (EQA) against the Institute of Internal Auditors (IIAs) International Professional Practices framework (IPPF) and, where appropriate, the Public Sector Internal Audit Standards (PSIAS).

We are pleased to disclose the outcome of this assessment as we believe it is important to provide you with assurance that the service you receive is of a high quality and fully compliant with internal audit standards. Outlined below are extracts from our most recent external quality assessment undertaken in February 2023.

External Quality Assessment summary

Executive Summary

I am pleased to report that there are no material governance, methodology or practical issues that are impacting Azets Risk Assurance's overall conformance with the Institute of Internal Auditors (IIAs) International Professional Practices framework (IPPF).

Internal Audit have achieved the highest level of conformance with the Standards, as well as the Definition, Core Principles, and the Code of Ethics, which form the mandatory elements of the IPPF, the global standard for quality in Internal Auditing. The Institute describe this as "Generally Conforms".

This is an excellent result and is based on an extensive EQA covering the team's approach, methodology, processes, and an extensive sample of engagement files. The EQA assessor is an experienced, former Chief Assurance Officer and current Audit Committee Chair.

Conformance Opinion

The IPPF/PSIAS includes the Mission and Definition of Internal Auditing, the Core Principles, Code of Ethics, and International Standards. There are 64 fundamental principles to achieve, with 118 points of recommended practice.

I am delighted to confirm that Azets Risk Assurance generally conform with 62 of these 64 fundamental principles. This is an excellent result. Furthermore, there are no areas of 'partial' or 'non-conformance' with any of the remaining fundamental principles.

The overall assessment resulting from the EQA is that Azets Risk Assurance "generally conforms to the International Professional Practices Framework". *The term "generally conforms" is used by the IIA to represent the highest level of achievement and performance.*

I include a summary of Azets Risk Assurance's conformance to these fundamental principles below. Overall, I believe that Azets Risk Assurance has achieved an excellent performance given the breadth of the IPPF, and the diverse work and activity the team undertakes.

Summary of IIA Conformance	Standards	N/A	Does not Conform	Partially Conforms	Generally Conforms	Total
Definition of IA and Code of Ethics	Rules of conduct				12	12

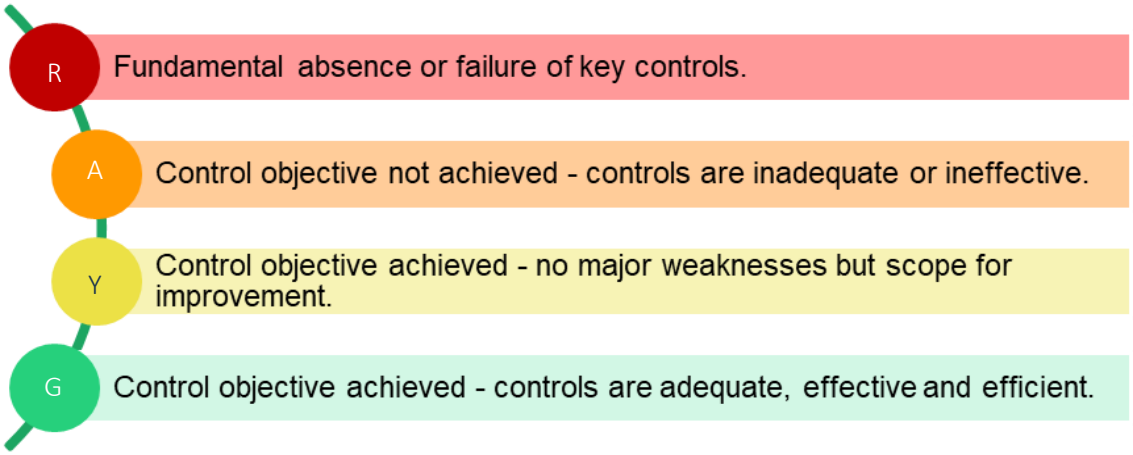
Purpose	1000 - 1130				8	8
Proficiency and Due Professional Care	1200 - 1230				4	4
Quality Assurance and Improvement Programme	1300 - 1322	1			6	7
Managing the Internal Audit Activity	2000 - 2130				12	12
Engagement Planning and Delivery	2200 - 2600	1			20	21
Total		2	0	0	62	64

Our response

The review identified a number of areas for future consideration to further enhance our internal audit practices. We welcome these findings and as such, a detailed action plan will be put into place to address the areas for further development.

Appendix 3 – Definitions

Control Objective Assessment Definitions



Management Action Prioritisation Definitions

4	•Very high risk exposure - major concerns requiring immediate senior attention that create fundamental risks within the organisation.
3	•High risk exposure - absence / failure of key controls that create significant risks within the organisation.
2	•Moderate risk exposure - controls are not working effectively and efficiently and may create moderate risks within the organisation.
1	•Limited risk exposure - controls are working effectively, but could be strengthened to prevent the creation of minor risks or address general house-keeping issues.