

External Quality Assessment of Conformance to the Public Sector Internal Audit Standards

Wokingham Borough Council's Internal Audit and Investigations Service

Final Report

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Wokingham Borough Council's Internal Audit and Investigations Service

Table of contents

Section	Title	Page
1	Introduction	3
2	Background	3
3	Validation process	3
4	Opinion	4
5	Areas of full conformance	6
6	Areas of partial conformance	11
7	Areas of no conformance	11
8	Survey results	11
9	Issues for management action	11
10	Definitions	13
11	Disclaimer	14
	Appendix A - Summary of survey results	15

1. Introduction

1.1 Internal audit within the public sector in the United Kingdom is governed by the Public Sector Internal Audit Standards (PSIAS), which have been in place since 1st April 2013 (revised 2016 and 2017). All public sector internal audit services are required to measure how well they are conforming to the standards. This can be achieved through undertaking periodic self-assessments, external quality assessments (EQA), or a combination of both methods. However, the standards state that an external reviewer must undertake a full assessment or validate the internal audit service's own self-assessment at least once in a five-year period.

2. Background

- 2.1 The Internal Audit and Investigations Service provides internal audit and consultancy services to Wokingham Borough Council, and for the period covered by the self-assessment, some of the planned audits for Bracknell Forest Council, Rushmoor Borough Council and Hart District Council under Section 113 agreements. The Chief Audit Executive is the council's Head of Internal Audit and Investigations. She is supported by a team of 4.6 FTE senior auditor posts, 1 FTE audit apprentice post and 1 FTE corporate investigator post. At the time of the EQA, one senior audit post, the audit apprentice post and the corporate investigator post were all vacant, although the service has started a recruitment exercise for the audit apprentice and corporate investigator posts. The Head of Internal Audit and Investigations is delaying advertising the vacant senior auditor post until the other recruitment exercises have closed. This is to provide her with the funding option of employing more than one audit apprentice should the opportunity arise.
- 2.2 The Head of Internal Audit and Investigations is an experienced internal audit professional who is a CCAB accountant (CIPFA) and a Chartered Internal Auditor. All of the Senior Auditors are experienced internal audit professionals and three hold relevant professional and academic qualifications.
- 2.3 From an operational perspective, the Internal Audit and Investigations Service is part of Wokingham Borough Council's Resources and Assets Directorate, with the Head of Internal Audit and Investigations reporting to the Assistant Director Governance who is the council's Monitoring Officer. The Head of Internal Audit and Investigations regularly meets with the Chair of the Audit Committee (monthly), the Chief Executive, and the Monitoring Officer. All work provided under the section 113 agreements for the other three authorities takes the form of delivering part of their respective audit plans with all outputs being reported directly to the relevant Head of Internal Audit at those authorities.
- 2.4 The Internal Audit and Investigations Service has been operating under PSIAS since its launch in 2022, and this is the second external quality assessment (EQA) that they have commissioned, the previous one being in 2018 when they were part of a shared service with the Royal borough of Windsor and Maidenhead. This EQA was also undertaken by CIPFA.
- 2.5 Internal Audit and Investigations have an audit manual that provides the auditors with a comprehensive guide to all aspects of performing an internal audit or consultancy assignment. The service uses standard templates for all terms of reference, engagement working papers, testing schedules, and audit reports, with completed documents retained in the service's dedicated network drive. Supervision of the engagements takes place at every stage of the process and is recorded on the appropriate documentation.
- 2.6 There is a quality assurance process in place that includes internal and external quality assessments of the service, reviews of live engagements, and final clearance of all completed reports by the Head of Internal Audit and Investigations, all of which feed into

the Internal Audit and Investigations Service's Quality Assurance and Improvement Programme (QAIP).

3. Validation Process

- 3.1 This validation of the service's self-assessment comprised a combination of a review of the evidence provided by internal audit; a review of a sample of completed internal audits; a survey that was sent to and completed by a range of stakeholders; and interviews with key stakeholders, using MS Teams. The interviews focussed on determining the strengths and weaknesses of internal audit and assessed the service against the four broad themes of purpose and positioning; structure and resources; audit execution; and impact.
- 3.2 The Internal Audit and Investigations Service provided a comprehensive range of documents that they used as evidence to support their self-assessment, and these were available for examination prior to and during this validation review. These documents included the:
 - self-assessment against the standards;
 - quality assurance and improvement plan (QAIP);
 - evidence file to support the self-assessment;
 - the audit charter;
 - · the annual report and opinions
 - the audit plan and strategy;
 - audit procedures manual;
 - a range of documents and records relating to the team members;
 - progress and other reports to the Audit Committee.

All the above documents were examined during this EQA.

- 3.3 The main phase of the validation process was carried out during the week commencing 10 July 2023, with further work and interviews undertaken during the following weeks. This phase of the EQA involved a review of a sample of audit files and interviews with a wide sample of key stakeholders. Overall, the feedback from the interviewees was positive with clients valuing the professional, knowledgeable, and objective way the Internal Audit and Investigations Service delivered their services.
- 3.4 A survey was sent to a range of key stakeholders and the results analysed during the review. Details of the survey findings have been provided to the Head of Internal Audit and Investigations and a summary table has been included in this report.
- 3.5 The assessor reviewed examples of completed audits, to confirm his understanding of the audit process used at the council, and to determine how Internal Audit has applied the PSIAS and LGAN in practice.

4. Opinion

It is our opinion that the self-assessment for the Wokingham Borough Council's Internal Audit and Investigations Service is accurate, and we therefore conclude that they FULLY CONFORMS to the requirements of the Public Sector Internal Audit Standards and the CIPFA Local Government Application Note.

4.1 The table below shows the Internal Audit and Investigations Service's level of conformance to the individual standards assessed during this external quality assessment:

Standard / Area Assessed	Level of Conformance
Mission Statement	Fully Conforms
Core principles	Fully Conforms
Code of ethics	Fully Conforms
Attribute standard 1000 – Purpose, Authority and Responsibility	Fully Conforms
Attribute standard 1100 – Independence and Objectivity	Fully Conforms
Attribute standard 1200 – Proficiency and Due Professional Care	Fully Conforms
Attribute standard 1300 – Quality Assurance and Improvement Programmes	Fully Conforms
Performance standard 2000 – Managing the Internal Audit Activity	Fully Conforms
Performance standard 2100 – Nature of Work	Fully Conforms
Performance standard 2200 – Engagement Planning	Fully Conforms
Performance standard 2300 – Performing the Engagement	Fully Conforms
Performance standard 2400 – Communicating Results	Fully Conforms
Performance standard 2500 – Monitoring Progress	Fully Conforms
Performance standard 2600 – Communicating the Acceptance of Risk	Fully Conforms

5. Areas of full conformance with the Public Sector Internal Audit Standards

5.1 Mission Statement and Definition of Internal Audit

The mission statement and definition of internal audit from the PSIAS are included in the audit charter

5.2 Core Principles for the Professional Practice of Internal Auditing

The core principles, taken as a whole, articulate an internal audit function's effectiveness, and provide a basis for considering the organisation's level of conformance with the attribute and performance standards of the PSIAS.

The clear indication from this EQA is that the core principles are embedded in Internal Audit's procedures and working methodologies and they are a very competent, experienced, and professional service that conforms to all ten elements of the core principles.

5.3 Code of Ethics

The purpose of the Institute of Internal Auditors' code of ethics is to promote an ethical culture in the profession of internal auditing, and is necessary and appropriate for the profession, founded as it is on the trust placed in its objective assurance about risk management, control, and governance. The code of ethics provides guidance to internal auditors and in essence, it sets out the rules of conduct that describe behavioural norms expected of internal auditors and are intended to guide their ethical conduct. The code of ethics applies to both individuals and the entities that provide internal auditing services.

The clear indication from this EQA is that the Internal Audit and Investigations Service conforms to the code of ethics, and this is embedded in their procedures, and their audit methodologies. The code of ethics is part of their overarching culture and underpins the way the service operates.

5.4 Attribute Standard 1000 – Purpose, Authority and Responsibility

The purpose, authority and responsibility of the internal audit activity must be formally defined in an internal audit charter, consistent with the Mission of Internal Audit and the mandatory elements of the International Professional Practices Framework (the core principles for the Professional Practice of Internal Auditing, the code of ethics, the standards, and the Definition of Internal Auditing). The internal audit charter must be reviewed regularly and presented to senior management and the audit panel for approval.

There is an audit charter in place, and this is reviewed on an annual basis. We reviewed this document and found it to be comprehensive and well written and contains all the elements that the PSIAS expects to be included in an audit charter. We are satisfied that the Internal Audit and Investigations Service conforms to attribute standard 1000 and the LGAN.

5.5 Attribute Standard 1100 – Independence and Objectivity

Standard 1100 states that the internal audit activity must be independent, and internal auditors must be objective in performing their work.

The need for independence and objectivity is an integral part of any Internal Audit and Investigations Service's culture. The Head of Internal Audit and Investigations reports in her own name directly to the Senior Management Team and to the Audit Committee at Wokingham Borough Council. She has regular meetings with the Chair of the Audit Committee, the Chief Executive, and the Assistant Director – Governance (the

Monitoring Officer). All employees declare any potential impairment to their independence or objectivity on an annual basis.

We have reviewed the Internal Audit and Investigations Service's procedures and their standard documentation; their quality assurance and improvement plan; and a small sample of completed audits. We have also reviewed their reporting lines and their positioning within the organisation. The Head of Internal Audit and Investigations does not have responsibilities for any functions other than Internal Audit and Investigations.

We are satisfied that the Internal Audit and Investigations Service conforms with attribute standard 1100 and the LGAN.

5.6 Attribute Standard 1200 – Proficiency and Due Professional Care

Attribute standard 1200 requires the internal audit services' engagements are performed with proficiency and due professional care, having regard to the skills and qualifications of the staff, and how they apply their knowledge in practice.

It is evident from this EQA that the Internal Audit and Investigations Service has a professional, experienced, and suitably qualified workforce. The Head of Internal Audit and Investigations is an experienced internal audit professional who is a CCAB accountant (CIPFA) and a Chartered Internal Auditor. All the Senior Auditors are experienced internal audit professionals and three hold relevant professional and academic qualifications.

The Standards require Internal Audit and Investigations Services to consider the use of data analytics when performing their audit reviews. The service makes extensive use of the functionality in MS Excel and the core software applications in use within the council. They have also started to make use of the functionality in the Power BI application. Specialist data analytics software, such as IDEA and ACL, have been considered but the cost of these applications has been deemed to be too high for the additional benefits they offer over and above MS Excel. One of the Senior Auditors is proficient in using Excel for data analytics although all the Team members are able to use Excel and the reporting functionality within the council's core systems.

Notwithstanding the above, there is an opportunity to further broaden the use of data analytics by making use of external sources of data for benchmarking purposes, such as the local authority data held in the CIPFA statistics and 'Nearest Neighbour Model' applications, which the council should already have access to. These are now adaptable tools that should not be overlooked, particularly when auditors are preparing the terms of reference for audits, as benchmarking can highlight areas where there may be scope to add value to the council's operations, or at least challenge the current thinking. We have included this as an advisory action for management to consider in section 9 of this report.

It is evident from this review that the council has an experienced Internal Audit and Investigations Service that the Team members perform their duties with due professional care. We are therefore satisfied that the Internal Audit and Investigations Service complies with attribute standard 1200 and the LGAN.

5.7 Attribute Standard 1300 – Quality Assurance and Improvement Programmes

This standard requires the Head of Audit to develop and maintain a quality assurance and improvement programme that covers all aspects of the internal audit activity.

The Internal Audit and Investigations Service has developed an effective quality assurance process which feeds into their quality assurance and improvement programme that ensures engagements are performed to a high standard. Supervision of audit engagements is carried out at all stages and recorded throughout the audit process. The service uses post audit client satisfaction surveys for the audits they

undertake but do not currently carry out an annual client survey, which they have already identified as a future enhancement to their processes and included this on their QAIP action plan. In addition to the quinquennial EQA, the service carries out annual self-assessments of their conformance to the standards, and the LGAN, and also to the five principles from the CIPFA guidance the 'Role of the Head of Internal Audit'. All these feed into the service's quality assurance and improvement plan (QAIP). At the time of the EQA, updates on completing the actions in the QAIP were not being made to the Audit Committee. The service has already identified this as an issue and included it on their QAIP action plan. The audit reports do not currently state that the audit has been carried out in accordance with the requirements of the PSIAS. Again, they have identified this as an issue and included an action on the QAIP action plan. As the Head of Internal Audit and Investigations is already aware of these matters, we have not included them in section 9 of this report.

We have examined the supporting evidence provided by the Internal Audit and Investigations Service during this EQA and, we are satisfied that they conform to attribute standard 1300 and the LGAN.

5.8 Performance Standard 2000 – Managing the Internal Audit Activity

The remit of this standard is wide and requires the Chief Audit Executive to manage the Internal Audit activity effectively to ensure it adds value to its clients. Value is added to a client and its stakeholders when internal audit considers their strategies, objectives, and risks; strives to offer ways to enhance their governance, risk management, and control processes; and objectively provides relevant assurance to them. To achieve this, the Chief Audit Executive must produce an audit plan and communicate this and the Service's resource requirements, including the impact of resource limitations, to senior management and the Audit Committee for their review and approval. The Chief Audit Executive must ensure that internal audit's resources are appropriate, sufficient, and effectively deployed to achieve the approved plan.

The standard also requires the Chief Audit Executive to establish policies and procedures to guide the internal audit activity, and to share information, co-ordinate activities and consider relying upon the work of other internal and external assurance and consulting service providers to ensure proper coverage and minimise duplication of efforts.

Last, but by no means least, the standard requires the Chief Audit Executive to report periodically to senior management and the audit committees on internal audit's activities, purpose, authority, responsibility, and performance relative to its plan, and on its conformance with the code of ethics and the standards. Reporting must also include significant risk and control issues, including fraud risks, governance issues and other matters that require the attention of senior management and/or the audit committee.

The Internal Audit and Investigations Service has a comprehensive audit manual in place that covers all aspects of their operations. They have developed comprehensive planning processes that take into consideration the council's risks and objectives; the risk management and governance frameworks; the council's objectives and priorities; any other relevant and reliable sources of assurance that are available; key issues identified by managers during planning meetings; the service's own risk and audit needs assessments; and any emerging risks identified through horizon scanning and networking with other organisations. The service produces a comprehensive combined risk-based audit plan and strategy that is aligned to the council's objectives and is designed to provide the council with relevant assurance on their governance, risk management and control frameworks. The audit plan is reviewed and approved by the Senior Management Team and the Audit Committee.

Details of the completed audits, together with regular updates on the progress being made on delivering the audit plan and the performance of the Internal Audit and Investigations Service, are reported regularly to senior management and the audit committee. An annual report and opinion are also issued at the end of the year and presented to senior management and the audit committee.

The clear indication from this EQA is that the Internal Audit and Investigations Service is managed effectively and conforms to standard 2000 and the LGAN.

5.9 Performance Standard 2100 – Nature of Work

Standard 2100 covers the way the internal audit activity evaluates and contributes to the improvement of the organisation's risk management and governance framework and internal control processes, using a systematic, disciplined and risk-based approach.

This is the approach adopted by the Internal Audit and Investigations Service and is embedded in their working methodologies. During this EQA, we reviewed a sample of completed audits and examined them to see if they conformed to standard 2100, the LGAN and Internal Audit and Investigations' own methodologies. We found that all the sample audit files examined during the EQA complied with all three.

The clear indication from this EQA is that the Internal Audit and Investigations Service conforms to performance standard 2100 and the LGAN.

5.10 Performance Standard 2200 – Engagement Planning

Performance standard 2200 requires internal auditors to develop and document a plan for each engagement, including the engagement's objectives, scope, timing, and resource allocations. The plan must consider the organisation's strategies, objectives, and risks relevant to the engagement.

The service has an audit manual and robust supervision processes in place that include engagement planning that meets the requirements of the PSIAS. From the sample of audits that we examined during the EQA, we found that they all conformed to standard 2200, the LGAN, and the service's own audit procedures, and we therefore conclude that Internal Audit and Investigations conforms to performance standard 2200 and the LGAN.

5.11 Performance Standard 2300 – Performing the Engagement

Performance standard 2300 seeks to confirm that internal auditors analyse, evaluate and document sufficient, reliable, relevant, and useful information to support the engagement results and conclusions, and that all engagements are properly supervised.

As we have mentioned above, the Internal Audit and Investigations Service has an audit manual, sound supervision arrangements, and quality assurance processes in place that meet the requirements of the standards. We reviewed the evidence provided in support of the service's self-assessment, together with a sample of audit files to see if they conformed to the standards, and the Internal Audit and Investigation Service's own working methodologies. We found that all the evidence we examined conformed to the standards and the service's own procedures and methodologies. The service has identified that they do not currently have their own document retention policy in place, relying instead on the main policy for the council.

We therefore conclude that Internal Audit and Investigations conforms to performance standard 2300 and the LGAN.

5.12 Performance Standard 2400 – Communicating Results

This standard requires internal auditors to communicate the results of engagements to clients and sets out what should be included in each audit report, as well as the annual report and opinion. When an overall opinion is issued, it must take into account the

strategies, objectives and risks of the clients and the expectations of their senior management, the audit committee and other stakeholders. The overall opinion must be supported by sufficient, reliable, relevant, and useful information. Where an internal audit function is deemed to conform to the PSIAS, reports should indicate this by including the phrase "conducted in conformance with the International Standards for the Professional Practice of Internal Auditing".

The service's procedures and supervision processes cover the communication of results of individual audits and meet the requirements of the PSIAS. During the EQA we reviewed the evidence provided in support of the service's self-assessment and the audit reports issued for a sample of audits to establish if they conformed to the standards. We found that all the evidence we examined conformed to the standards and Internal Audit and Investigations' own procedures and methodologies.

We also reviewed the progress and annual reports presented to the Audit Committee and found that these also conformed to the standards and the service's own internal procedures.

We have however identified three good practice enhancements that could be made to the annual report. The first relates to the inclusion of a statement to confirm that there have not been any impairments to the independence and objectivity of the Head of Internal Audit and Investigations, or Internal Audit and Investigations as a whole during the year that has just ended.

The second relates to the inclusion of a section in the report setting out where Internal Audit and Investigations has added value to the council during the year just ended.

The third relates to the inclusion of a disclaimer and limitations of use statement in each report. An example of such a statement would be "This report is confidential and has been prepared solely for use by officers named on the distribution list and, if requested, the council's External Auditor and its Audit Committee to meet legal and professional obligations. It would therefore not be appropriate for this report or extracts from it to be made available to third parties and it must not be used in response to FOI or data protection enquiries without the written consent of the Head of Internal Audit and Investigations. We accept no responsibility to any third party who may receive this report, in whole or in part, for any reliance that they may place on it".

We have included three advisory actions in section 9 of the report relating to these observations. Notwithstanding the above, we have concluded that the Internal Audit and Investigations Service conforms to performance standard 2400 and the LGAN.

5.13 Performance Standard 2500 - Monitoring Progress

There is a comprehensive follow-up process in place, the objective of which is to monitor the client's progress towards the implementation of agreed actions. The results of the follow-up reviews are reported to the Audit Committee. From this EQA, it is evident that the Internal Audit and Investigations Service conforms to performance standard 2500 and the LGAN.

5.14 Performance Standard 2600 – Communicating the Acceptance of Risk

Standard 2600 considers the arrangements which should apply if the Head of Internal Audit and Investigations has concluded that managers have accepted a level of risk that may be unacceptable to the organisation. Situations of this kind are expected to be rare, consequently, we did not see any examples of this during this review. From this EQA, it is evident that the Internal Audit and Investigations Service conforms to performance standard 2600 and the LGAN.

6. Areas of partial conformance with the Public Sector Internal Audit Standards and the CIPFA Local Government Application Note

6.1 There are no areas of partial conformance with the Public Sector Internal Audit Standards or the CIPFA Local Government Application Note.

7. Areas of non-conformance with the Public Sector Internal Audit Standards and the CIPFA Local Government Application Note

7.1 There are no areas of non-conformance with the Public Sector Internal Audit Standards or the CIPFA Local Government Application Note.

8. Interviews with Key Stake Holders and Survey results

8.1 Overall, the results of the interviews with the key stakeholders were positive with the interviewees valuing the professionalism and quality of the services provided by Internal Audit and Investigations. A similar picture emerged from the survey where the respondents valued the services provided by Internal Audit and Investigations. There were no 'do not agree' responses to any of the statements in the survey. The number of survey responses received was low with just three completed surveys returned, however we have noted that some of the people that were sent surveys to complete were also interviewed during the EQA and expressed their views on the service during the interviews. The detailed findings from the survey have been shared with the Head of Internal Audit and Investigations and a summary of the survey results is included in this report at Appendix A.

9. Issues for management action

9.1 From our review of the service's self-assessment we have identified five advisory issues that management should consider. Four relate to the operation of the service and not their conformance to the standards, and one is a generic issue relating to the future of the PSIAS for the Head of Internal Audit and Investigations to consider. These are all set out in the table below:

Issues for management action	Priority
Internal Audit and Investigations should consider using the local authority data held in the CIPFA statistics and 'Nearest Neighbour Model' applications, which the council should already be able to access. These are now adaptable tools that should not be overlooked, particularly when preparing audit terms of reference as they can highlight areas where there may be scope to add value to the council.	Advisory
The audit charter confirms that there are no impairments to the independence of the Head of Internal Audit and Investigations or the Internal Audit and Investigations Service although we have noted that this is not reinforced in the annual report. As the annual report looks back on	Advisory

Issues for management action	Priority
the year just finished, whereas the audit charter and plan are designed to look forward, it is suggested as good practice to confirm whether there have been any impairments to independence during the year.	
Consider the inclusion of a section in the report setting out where Internal Audit and Investigations has added value to the council during the year just ended.	Advisory
Consider including a disclaimer and limitations of use statement in each report. An example of such a statement would be "This report is confidential and has been prepared solely for use by officers named on the distribution list and, if requested, the council's external auditor and its audit committee to meet legal and professional obligations. It would therefore not be appropriate for this report or extracts from it to be made available to third parties and it must not be used in response to FOI or data protection enquiries without the written consent of the Head of Internal Audit and Investigations. We accept no responsibility to any third party who may receive this report, in whole or in part, for any reliance that they may place on it".	Advisory
Management should continue to be mindful of the recent consultation on revising the Institute of Internal Auditors Global IPPF which is incorporated into the PSIAS, and any changes to the standards arising from the consultation that may affect the service's future conformance to the standards. It is, therefore, suggested that the Head of Internal Audit and Investigations continues to keep a watching brief on the developments to the standards and how this may impact the service in the medium term.	Advisory

The co-operation of the Head of Internal Audit and Investigations in providing the information requested for the EQA, is greatly appreciated. Our thanks also go to the Chair of the Audit Committee and the key stakeholders that made themselves available for interview during the EQAs and/or completed the survey.

Ray Gard, CPFA, FCCA, FCIIA, DMS

6 September 2023

10. Definitions

Level of Conformity	Description	
Fully Conforms	The internal audit service complies with the standards with only minor deviations. The relevant structures, policies, and procedures of the internal audit service, as well as the processes by which they are applied, at least comply with the requirements of the individual standards, the element of the code of ethics, and the local government application note in all material respects. This means that there is general conformance to the individual standards, elements of the code of ethics, or the local government application note.	
Partially Conforms	The internal audit service is endeavouring to deliver an effective service however, they are falling short of achieving some of their objectives and/or generally conforming to a majority of the individual standards, elements of the code of ethics, or the local government application note and at least partial conformance to the others. There will usually be significant opportunities to improve the delivery of effective internal audit, and enhance conformance to the standards, elements of the code of ethics, and/or the local government application note. The internal audit service may be aware of some of these opportunities and the areas they need to develop. Some identified deficiencies may be beyond the control of internal audit and may result in actions for senior management or the board of the organisation to address.	
Does Not Conform	The internal audit service is not aware of; not making efforts to comply with; or is failing to achieve many/all of the individual standards, elements of the code of ethics, or the local government application note. These deficiencies will usually have a significant adverse impact on internal audit's effectiveness and its potential to add value and are likely to represent significant opportunities for improvement to internal audit. Some identified deficiencies may be beyond the control of internal audit and may result in recommendations to senior management or the board of the organisation.	

Action Priorities	Criteria	
High priority	The internal audit service needs to rectify a significant issue of non-conformance with the standards. Remedial action to resolve the issue should be taken urgently.	
Medium priority	The internal audit service needs to rectify a moderate issue of conformance with the standards. Remedial action to resolve the issue should be taken, ideally within a reasonable time scale, for example six months.	

Low priority	The internal audit service should consider rectifying a minor issue of conformance with the standards. Remedial action to resolve the issue should be considered but the issue is not urgent.	
Advisory	These are issues identified during the course of the EQA that do not adversely impact the service's conformance with the standards. Typically, they include areas of enhancement to existing operations and the adoption of best practice.	

11. Disclaimer

This report has been prepared by CIPFA at the request of the Wokingham Borough Council, and the terms for the preparation and scope of the report have been agreed with them. The matters raised are only those that came to our attention during our work. Whilst every care has been taken to ensure that the information provided in this report is as accurate as possible, we have only been able to base findings on the information and documentation provided to us. Consequently, no complete guarantee can be given that this report is necessarily a comprehensive statement of all the issues that exist with their conformance to the Public Sector Internal Audit Standards that exist, or of all the improvements that may be required.

The report was prepared solely for the use and benefit of Wokingham Borough Council's Internal Audit and Investigations Service, including the officers and elected Members of the council, and to the fullest extent permitted by law, CIPFA accepts no responsibility and disclaims all liability to any other third party who purports to use or rely, for any reason whatsoever on the report, its contents, conclusions, any extract, and/or reinterpretation of its contents. Accordingly, any reliance placed on the report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk.



