



Setting the standards **together**



Chartered Institute of
Internal Auditors

External Quality Assessment (EQA)

Report for:

DARTFORD
BOROUGH COUNCIL


Sevenoaks
DISTRICT COUNCIL

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approved reviewer for
The Chartered Institute of Internal Auditors
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1.1 Background and Scope

The Dartford and Sevenoaks Internal Audit Partnership's Internal Audit function comprises an inhouse team of seven, supported by co-sourcing arrangements with the professional services company, Mazars.

The Audit Manager (CAE) reports functionally to the Audit Board at Dartford Borough Council (DBC) and the Audit Committee at Sevenoaks District Council (SDC). The Audit Manager is line managed by SDC's S151 Officer.

Two experienced Lead Auditors assist the Audit Manager. Team members include two long-serving Auditors, a Trainee Auditor and an Audit Administrator at the time of this review.

The Dartford and Sevenoaks Internal Audit Partnership previously had an external quality assessment (EQA) in 2015, undertaken by PWC. We are delighted that the Dartford and Sevenoaks Internal Audit Partnership have commissioned us to undertake this current EQA.

Our review included a thorough validation of the Dartford and Sevenoaks Internal Audit Partnership's own self-assessment, several interviews with key stakeholders, as well as a survey sent to a further 37 managers across both organisations. We received 24 survey responses, a rate of 65%. Our overall conclusions differed only very slightly to the team's self-assessment.

Given the pandemic, we conducted this EQA remotely.

1.2 Key Achievements

The Dartford and Sevenoaks Internal Audit Partnership continues a change journey initiated a few years ago. This has included a

restructuring in 2019-20, staff turnover and the arrival of the Audit Manager and two Lead Auditors at intervals over the last twelve months. While the new management team continue to bed in, they are taking firm steps to establish a professional internal audit service, one that is becoming significantly more valued by the key stakeholders we spoke to during this EQA review.

The governance framework over the team is mature, with established Audit Board and Audit Committee oversight, regular meetings, reporting and performance monitoring. The pandemic has hampered relationship-building with key stakeholders, but engagement is increasingly effective.

The Dartford and Sevenoaks Internal Audit Partnership undertake a range of diverse assurance and consulting engagements. Key stakeholders particularly praised the team's recent, timely, professional and insightful work on organisational responses to COVID-19. Mazars supplies more specialist, technical IT audits and these have also been well-received.

We also received positive responses to our questions about the team and its services from the key stakeholders we interviewed. Individuals particularly welcomed the greater professionalism, gravitas, communications, experience and energy of the new Audit Manager and Lead Auditors. Key stakeholders felt confidence in their abilities, skills and reporting. Our survey results were also predominantly favourable. Individual comments were supportive of the refreshed team, with relatively few areas for improvement expressed.

The Audit Manager places high - and appropriate - emphasis on ensuring the reliability and quality of internal audit work.

The Dartford and Sevenoaks Internal Audit Partnership develop and deliver an annual risk-based audit plan. Key stakeholders felt engaged in the design of this. The Partnership document progress and the Audit Manager reports this at regular Audit Board and Audit Committee meetings. Internal audit delivery has continued throughout the pandemic, particularly at SDC.

The Audit Manager actively monitors performance, reviews success against KPIs, and has implemented appropriate engagement-level quality assurance checks, enabled through their TeamMate Audit Management Software application.

We believe that the supporting operational, engagement-level procedures, documentation and associated templates are broadly fit for purpose. The Dartford and Sevenoaks Internal Audit Partnership have detailed these in a variety of key documents.

1.3 EQA Assessment Conclusion

The Dartford and Sevenoaks Internal Audit Partnership conforms with the majority of the Standards, as well as the Definition, Core Principles and the Code of Ethics, which form the mandatory elements of the Public Sector Internal Audit Standards (PSIAS) and the Institute of Internal Auditors' International Professional Practices Framework (IPPF), the globally recognised standard of quality in Internal Auditing.

To summarise, we are pleased to report that the Dartford and Sevenoaks Internal Audit Partnership are good in their:

- Reflection of the Standards
- Quality Assurance and Improvement Programme

We believe that the Dartford and Sevenoaks Internal Audit Partnership are satisfactory in their:

- Focus on performance, risk and adding value

Finally, we consider that the Dartford and Sevenoaks Internal Audit Partnership needs improvement in their:

- Coordinating and maximising assurance
- Operating with efficiency

The need to consider how best to rely on and coordinate with other assurance providers remains an emerging area of internal audit, and assurance practice. It depends as much on the nature and effectiveness of the other assurance providers as it does on internal audit. The Dartford and Sevenoaks Internal Audit Partnership were considering their approach to assurance mapping at the time of this EQA review. We support this.

The Audit Manager, Lead Auditors and several key stakeholders recognise that all team members must deliver a greater volume of high-quality, insightful work to add real value and deliver the professional service they wish as efficiently as possible. This does not happen consistently enough at the present time.

In addition to the conformance recommendations, there is scope for improvement in several other areas as summarised in Section 3.3 below. We regard these as mainly 'housekeeping' rather than significant points of concern.

It will be appropriate for the function to say in reports and other literature, once it has addressed the issues raised, that it "conforms to the IIA's professional standards".

1.4 Conformance Opinion

The mandatory elements of the IPPF include the Definition of Internal Auditing, Code of Ethics, Core Principles and International Standards. There are 64 fundamental principles to achieve with 118 points of recommended practice. We assess against the principles.

It is our view that the Dartford and Sevenoaks Internal Audit Partnership conforms to 51 of these principles, with partial conformance on seven principles and one 'does not conform' assessment. We have marked five principles as 'not relevant' as they do not apply to inhouse internal audit teams, or relate to situations that have not occurred to date.

Overall, we believe this reflects a **partial level of conformance** with the PSIAS and IPPF given the related standards and identified issues.

This represents a reasonable level of achievement given the challenges of recent years, and one that mirrors what we have seen with a number of public and private sector organisations we have reviewed. However, there are some clear areas for improvement and we are pleased to report that the Audit Manager has already identified many of these.

We summarise this in the table below:

Summary of Conformance	Standards	Generally Conforms	Partially Conforms	Does not conform	Not relevant	Total
Definition of IA and Code of Ethics	Rules of conduct	12				12
Purpose	1000 - 1130	8				8
Proficiency and Due Professional Care (People)	1200 - 1230	3	1			4
Quality Assurance and Improvement Programme	1300 - 1322	5			2	7
Managing the Internal Audit Activity	2000 - 2130	9	1	1	1	12
Performance and Delivery	2200 - 2600	14	5		2	21
Total		51	7	1	5	64

2.1 Area for improvement - Standard 1220

Attribute Standard 1220 states that, “Internal auditors must apply the care and skill expected of a reasonably prudent and competent internal auditor. Due professional care does not imply infallibility.”

We agree with the Audit Manager’s ‘partially conforms’ opinion here. The Chartered IIA’s Risk in Focus 2021 Survey has once again identified cyber risk as the number one risk facing organisations at the present time. Mazars has delivered technical ICT auditing under contract to date. Given the prevalence and criticality of ICT to every organisation, the Audit Manager should consider how best to develop greater inhouse ICT audit capability, knowledge and understanding, thereby (gradually) reducing reliance on the external provider. The Audit Manager has already recognised the need to enhance the use of data analytics across the team. They will also review and update the Audit Manual to explicitly reinforce key unit practices and to enhance conformance with these. We support these initiatives to enhance the team’s due professional care.

Recommendation	Response & action date
<p>1 The Audit Manager should develop a Data Analytics and ICT audit strategy, to encourage the upskilling of team members and the greater, more systematic employment of data analytics to enhance the reliability of assurance over the increasing volumes of data, information and associated systems. This could form one key element of the planned Audit Strategy.</p>	<p>Agreed. The draft Strategy will be prepared by September 2021(including identification of potential costs) and shared with the s151 officers for agreement of any additional funds required, specifically for training. ‘Continual’ assurance using analysis of data will be trialled as part of the 2020/21 Plans.</p>
<p>2 The Audit Manager should review and update the Dartford and Sevenoaks Internal Audit Partnership’s Audit Manual, adding in further detail, where necessary, to set and demonstrate team expectations more explicitly.</p>	<p>Agreed. The manual will be updated by September 2021. Responsibility has been allocated to a team member to then maintain up to date.</p>

2.2 Area for improvement - Standard 2050

Performance Standard 2050 states that, “The chief audit executive should share information, coordinate 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.”

We agree with the Audit Manager's 'does not conform' opinion here. The internal audit team does not formally coordinate its work with other assurance providers and does not routinely place reliance on the work of internal bodies at the present time. The Audit Manager is keen to develop an effective approach to assurance mapping during 2021. We support this.

Recommendation	Response & action date
3 The Audit Manager should continue to develop a robust, reliable and value-adding approach to assurance mapping and reliance, to enhance team efficiency and effectiveness.	Agreed. Early discussions are taking place with managers as part of the 2021/22 planning process and specific pieces of assurance mapping (for example in IT) will form part of the 2021/22 IA Plans. A basis for reliance will be developed.

2.3 Area for improvement - Standard 2110

Performance Standard 2110.A1 states that, "The internal audit activity must evaluate the design, implementation, and effectiveness of the organisation's ethics-related objectives, programmes, and activities". Performance Standard 2110.A2 states that, "The internal audit activity must assess whether the information technology governance of the organisation supports the organisations strategies and objectives".

The internal audit team have not undertaken explicit engagements evaluating the design, implementation, and effectiveness of the organisations' ethics-related objectives, programmes, and activities, or of IT governance.

Recommendation	Response & action date
4 The Audit Manager should consider how best to cover emerging areas of stakeholder required assurance through potential audits of culture and ethics, as well as IT Governance, in future periodic plans.	Agreed. This will be considered as part of the 2021/22 planning process and more specific audits will be on the Plans from April 2021. It will then be considered as part of all future periodic planning processes.

2.4 Area for improvement - Standard 2300 et al

Performance Standard 2300 states that, "Internal auditors must identify, analyse, evaluate, and document sufficient information to achieve the engagement's objectives".

We accept the Audit Manager's 'partially conforms' opinion here and our file reviews confirmed that there are inconsistencies in the quality of the recorded internal audit work, its effectiveness and evidential completeness. Given the (small) size of the Dartford and Sevenoaks Internal Audit Partnership, we believe that every team member must focus on delivering high quality, insightful, evidence-based internal

audit work to agreed time, cost and quality criteria. This work must be consistently recorded in TeamMate, in line with the agreed audit methodology, and be of sufficient quality to ensure appropriate review and consistent conformance with the PSIAS. We support the Audit Manager's ongoing efforts to improve this and to actively manage the performance and delivery of each team member.

Recommendation	Response & action date
5 The Audit Manager must continue to enhance the Partnership's engagement and delivery practices, thereby ensuring the delivery of professional and reliable assurance, impactful reporting, added value and insight.	Agreed. There are several specific actions that sit below this recommendation including skills gap analysis, training, objective setting, reflective practices as part of the QAIP, performance monitoring and identification of individual support needs. I expect to be able to demonstrate improvement over the course of the 2021/22 financial year.
6 The internal audit team's retention schedule should be reviewed and updated.	Agreed. This will be completed by 31 May 2021.

2.5 Area for improvement - Standard 2420

Performance Standard 2420 states that, "Communications must be accurate, objective, clear, concise, constructive, complete, and timely". We agree with the Audit Manager's 'partially conforms' opinion here and concur that there are inconsistencies in the quality and timeliness of internal audit reporting. For too many engagements, the elapsed time from start to finish is particularly lengthy and team members have considerably exceeded their agreed time budgets. As a result, the Partnership is not as efficient and effective as it needs to be. We support the Audit Manager's ongoing efforts to improve this and to actively manage the performance and delivery of team members.

Recommendation	Response & action date
7 The Audit Manager should enhance the quality and timeliness of internal audit communications and reporting, while reducing the elapsed time on internal audit engagements.	Agreed. This is linked to the actions in 5 above and improvement should be demonstrated during 2021/22. In addition, meaningful KPIs will be developed, assurance levels will be amended and I will incorporate suggestions set out in Opportunities C and F.

2.6 Area for improvement - Standard 2450

Performance Standard 2450 states that, “When an overall opinion is issued, it must take into account the strategies, objectives, and risks of the organisation; and the expectations of senior management, the board and other stakeholders. The overall opinion must be supported by sufficient, reliable, relevant and useful information.”

We agree with the Audit Manager’s ‘partially conforms’ opinion here and concur that the Annual Audit Opinion approach, template and narrative should be reviewed and updated to help add greater insight and value to key stakeholders.

Recommendation

Response & action date

- | Recommendation | Response & action date |
|--|--|
| 8 The Audit Manager should review and update the approach to delivering the Annual Audit Opinion and associated reporting. | Agreed. I will amend the approach for the July 2021 Annual Opinions. |

The Chartered Institute regards conformance to the IPPF as the foundation for effective internal audit practice. However, our EQA reviews also seek feedback from key stakeholders and we benchmark each function against the diversity of professional practice seen on our EQA reviews and other interviews with heads of internal audit, summarised in an internal audit maturity matrix.

We then interpret our findings into suggestions for further development based upon the wide range of guidance published by the Chartered Institute of Internal Auditors.

It is our aim to offer advice and a degree of challenge to help internal audit activities continue their journey towards best practice and excellence.

In the following pages we present this advice in three formats:

- A SWOT analysis to recognise the accomplishments of the team and to highlight potential threats and opportunities for development. [\(See 3.1\)](#)
- A matrix describing the key criteria of effective internal audit, highlighting the level the Dartford and Sevenoaks Internal Audit Partnership has achieved and the potential for further development, recognising that effective internal audit goes further than purely conformance with internal auditing standards. [\(See 3.2\)](#)
- A series of improvement opportunities and suggestions which the internal audit team could use as a basis for an action plan. [\(See 3.3\)](#)

3.1 SWOT Analysis

What works well (Strengths)

The Audit Manager and Lead Auditors are experienced, work well together and key stakeholders increasingly respect - and have confidence - in their insight and capabilities

Key stakeholders have particularly valued recent internal audit work on organisational responses to COVID-19 and cyber security

The recently drafted Quality Assurance and Improvement Programme is clear, concise and effective

Our stakeholder survey responses highlight strengths in team independence and objectivity, professionalism, communications and management

What could be done better (Weaknesses)

In-house ICT internal audit, data analytics capability and expertise is limited; although this is procured from Mazars, the team should seek to develop further skills in these areas

Assurance mapping, coordination and reliance - where appropriate - should be progressed

Too many internal audit engagements exceed their budgeted days and exceed their delivery target dates. This must be addressed

More uniform use of the TeamMate Audit Management Software and more consistent compliance with the agreed internal audit processes would free up management time for undertaking greater value-adding assurance and advisory activity

What could deliver further value (Opportunities)

A move to six monthly or quarterly periodic planning may encourage more agility and relevance in reviewing emerging risks

An overarching Audit Strategy, with consideration of data analytics and ICT auditing, integrated with the results of the QAIP and team development needs, could usefully drive Partnership improvement priorities over the next three years

The Annual Audit Opinion Report could deliver more insight, while engagement-level templates, such as the Audit Brief and Audit Report, could be reviewed, streamlined and updated

What could stand in your way (Threats)

Loss of key staff, most obviously the Audit Manager and/or Lead Auditors could threaten service resilience and delivery

Inefficient audit engagement delivery could prevent the Partnership from truly becoming the critical friend of choice and delivering objective, impactful assurance and advice on the subjects that really matter to key stakeholders

Further pandemic-generated disruption could impact service delivery and threaten the Audit Manager's ability to deliver an annual opinion

3.2 Internal Audit Maturity Matrix

Assessment	IIA Standards	Focus on performance, risk and adding value.	Coordination and maximising assurance	Operating with efficiency	Quality Assurance and Improvement Programme
Excellent	Outstanding reflection of the IIA Standards, in terms of logic, flow and spirit. Generally Conforms in all areas.	IA alignment to the organisation's objectives risks and change. IA has a high profile, is listened to and is respected for its assessment, advice and insight.	IA is fully independent and is recognised by all as a 3rd line. The work of assurance providers is coordinated with IA reviewing reliability of.	Assignments are project managed to time and budget using tools/techniques for delivery. IA reports are clear, concise and produced promptly.	Ongoing efforts by IA team to enhance quality through continuous improvement. QA&IP plan is shared with and approved by AC.
Good	The IIA Standards are fully integrated into the methodology – mainly Generally Conforms.	Clear links between IA engagement objectives to risks and critical success factors with some acknowledgement of the value-added dimension.	Coordination is planned at a high level around key risks. IA has established formal relationships with regular review of reliability.	Audit engagements are controlled and reviewed while in progress. Reporting is refined regularly linking opinions to key risks.	Quality is regarded highly, includes lessons learnt, scorecard measures and customer feedback with results shared with the AC.
Satisfactory	Most of the IIA Standards are found in the methodology with scope to increase conformance from Partially to Generally Conform in some areas.	Methodology requires the purpose of IA engagements to be linked to objectives and risks. IA provides advice and is involved in change, but criteria and role require clarity.	The 3 lines model is regarded as important. Planning of coordination is active and IA has developed better working relationships with some review of reliability.	Methodology recognises the need to manage engagement efficiency and timeliness, but further consistency is needed. Reports are informative and valued.	Clear evidence of timely QA in assignments with learning points and coaching. Customer feedback is evident. Wider QA&IP may need formalising.
Needs improvement	Gaps in the methodology with a combination of Non-conformances and Partial Conformances to the IIA Standards.	Some connections to the organisation's objectives and risks but IA engagements are mainly cyclical and prone to change at management request.	The need to coordinate assurance is recognised but progress is slow. Some informal coordination occurs but reviewing reliability may be resisted.	Multiple guides that are slightly out of date but form a consistent and coherent whole. Engagements go beyond deadline and a number are deferred.	Q control not consistently embedded across the function. QA is limited / late or does not address root causes.
Poor	No reference to the IIA Standards with significant levels of non-conformance.	No relationship between IA engagements and the organisation's objectives, risks and performance. Many audits are ad hoc.	IA performs its role in an isolated way. There is a feeling of audit overload with confusion about what various auditors do.	Lack of a defined methodology with inconsistent results. Reports are usually late with little perceived value.	No evidence of ownership of quality by the IA team.

3.3 Improvement Opportunities

This section of the report details additional feedback and observations which, if addressed, could strengthen the impact of Internal Audit. These observations are not conformance points but support Internal Audit's ongoing development.

These suggestions do not require a response; they will not form part of any subsequent follow up if undertaken.

Opportunity A

Internal Audit Charters - We support the Audit Manager's intention to review and update the Internal Audit Charters.

Suggestion: We believe that any update should explicitly set out the nature and scope of internal audit's whistleblowing role and responsibilities, as well as briefly referencing the Nolan Principles. Once finalised, the Audit Manager should seek and obtain appropriate approval for the revised Internal Audit Charters from the Audit Board and Audit Committee.

Opportunity B

Audit Strategy - We support the Audit Manager's intention to develop an Audit Strategy for the Partnership.

Suggestion: We believe that an overarching Audit Strategy, with consideration of data analytics and ICT auditing, integrated with the results of the QAIP and team development needs, could usefully drive Partnership improvement priorities over the short, medium and long term.

Furthermore, the Audit Manager could usefully commission further external assessments more frequently than the minimum of 'once every five years', in line with best practice. This will help reinforce the importance of a culture of continuous improvement in the Partnership, its activities and in its outlook as well as providing a timelier review of progress following this current exercise.

Opportunity C

Engagement Templates - We support the Audit Manager's intention to review and update key engagement templates, such as the Audit Brief and Audit Report, to better meet stakeholder needs.

Suggestion: We believe that the current templates contain some unnecessary detail and the Audit Manager could usefully streamline these to aid busy readers. Many internal audit teams are making greater use of colour, graphics, photographs, charts and root cause analysis to add greater insight and impact, while reducing narrative. Some internal audit teams are also including a summary of the number of recommendations and their criticality on the coversheet to aid the busy reader. Finally, many internal audit teams make greater use of active rather than passive tense, which leads to clearer reporting.

Opportunity D

Periodic Planning - the move to a more flexible and responsive periodic planning, engagement allocation and delivery model is increasingly appropriate for the current volatile and changing environment.

Suggestion: Many internal audit teams have moved to a rolling six monthly or quarterly (rather than annual) periodic plan. We believe that this helps ensure that new business teams, innovative or revised services, emerging areas of risk and changing partner and client governance, strategies and delivery models are adequately covered in these periodic internal audit plans. This would help ensure the team remain insightful, proactive, and future-focused, providing professional assurance over new and emerging areas of organisational risk.

Opportunity E

Remote working and the future - what the internal audit working environment of the future will look like is unclear. The extent to which a mixed economy of office and remote working is here to stay is uncertain. Whatever happens, pressure on the team's key stakeholders, managers and staff is likely to increase, available time will decrease and this may challenge aspects of the internal audit process and the development of effective relationships.

Suggestion: We believe that the Audit Manager could usefully undertake a short, lessons learned review of what has worked well over the last nine months, where improvements are required, what the key 'ways of working' learning points are. They could also consider how the Dartford and Sevenoaks Internal Audit Partnership approach, ethos and methodology may need to adapt to ensure stakeholder buy-in, effective relations, the acceptance of the need for internal audit engagements and the timely implementation of any ensuing actions, in a changed and challenging environment.

Opportunity F

Elapsed time on internal audit engagements - We have mentioned this earlier, but include suggestions for improvement below. There is a long, elapsed time from start to finish for many of the engagements. We do not believe that there is a single reason for this, but the Partnership's economy, efficiency and effectiveness would be improved if elapsed time was reduced. More agile ways of working could help reduce this.

Suggestion: We believe that the Audit Manager could usefully revisit the Partnership's engagement delivery to better assess the root causes of delays, and pilot solutions. Potential solutions may certainly include employing a more agile 'site audit' approach and mindset on some engagements, deploying task-based teams on specific engagements (rather than solo personnel), closer engagement with the audit client to ensure availability for short duration intense engagements, or undertaking additional identical audits using the same team members across both client organisations, to increase pace and efficiency.

We have used the following rating scale in this report:

Overall Audit Grading

Generally Conforms (GC)	<p>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 conformance to a majority of the individual Standards or elements of the Code of Ethics, and at least partial conformance to the others, within the section/category. There may be significant opportunities for improvement, but these must 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.</p>
Partially Conforms (PC)	<p>The assessor 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.</p>
Does Not Conform (DNC)	<p>The assessor 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. They may also represent significant opportunities for improvement, including actions by senior management or the board.</p>

Often, the most difficult evaluation is the distinction between general and partial. It is a judgement call keeping in mind the definition of general conformance above. The reviewer must determine if basic conformance exists. The existence of opportunities for improvement, better alternatives, or other successful practices does not reduce a "generally conforms" rating.

Stakeholder Interviews

We interviewed the following individuals as part of the review. We also sent stakeholder surveys to 37 senior managers. We received 24 completed survey responses, a good response rate given the pandemic situation at the time of our review. We have shared the anonymised survey results with the Head of Internal Audit.

Stakeholders	Title / position
Nick Chapman	Assistant Environmental Health Manager (Shared)
Peter Dosad	Head of Housing (Dartford)
Martin Goodman	Head of Legal and Democratic Services (Sevenoaks)
Cllr David Hammock	Chair of the Audit Board (Dartford)
Sarah Martin	Strategic Director (Internal Services) (Dartford)
Cllr Philip McGarvey	Chair of the Audit Committee (Sevenoaks)
Pav Ramewal	Chief Executive (Sevenoaks)
Adrian Rowbotham	Chief Officer Finance and Trading (Sevenoaks)

Internal Audit team	Title / position
Francesca Chivers	Audit Manager (CAE)
Jo Herrington	Lead Auditor
Ian Wiltshire	Lead Auditor

Acknowledgement

We would like to thank the Internal Audit team for their time, assistance and support during this review and all those who took part in the review for their co-operation together with their open and honest views.

Feedback from stakeholder interviews and surveys

Working with the business

“The new team are a breath of fresh air, and although it’s early days - further complicated by COVID-19, I feel that Audit will become even more integral to what the services do as time goes forward.” Stakeholder Survey feedback.

“The internal audit service has changed a lot - it is much more engaging than it was previously.” Stakeholder interview.

“Friendly approachable people who understand that managers are under extreme time pressures and they work around that as much as possible.” Stakeholder Survey feedback.

“IA are good at building working relationships with managers.” Stakeholder Survey feedback.

“Working with internal audit was a really positive experience. Every dealing with audit has been robust and fair.” Stakeholder interview.

“The internal audit service is inefficient - the audits take too long.” Stakeholder interview.

“They are always very professional and approachable.” Stakeholder Survey feedback.

Communication

“The audit reporting process was smooth and I was fully engaged in reviewing the draft report.” Stakeholder interview.

“The team has had some new good managers and audit staff in the past few years and standards have improved dramatically. The processes seem much slicker and more efficient. Communications with me and my staff are really good.” Stakeholder Survey feedback.

“Fran, Jo and Ian have a really strong customer service ethos - they are winning people over.” Stakeholder interview.

“Now managers can go to internal audit for advice.” Stakeholder interview.

Internal audit plans and coverage

“Good visibility of the internal audit annual plan meant that I knew that the two internal audits were coming.” Stakeholder interview.

“The time it takes some staff to complete audits is excessive and therefore reduces the benefit of the audit as too much time has passed. This is both the number of days spent on an audit and the time from start to finish.” Stakeholder Survey feedback.

“I felt fully consulted on the audit timescales and scope.” Stakeholder interview.

“Audits are now branching out into areas which could bring real value to the organisation and affect key issues such as customer service and value for money.” Stakeholder Survey feedback.

Value

“I have found internal audit really invaluable to help us improve our service delivery.” Stakeholder Survey feedback.

“The work on COVID-19 has been at a different level to what we have seen previously - it was excellent and added real value.” Stakeholder interview.

“Overall, my experience with the internal audit team has been extremely positive and I have appreciated their feedback on the areas they have looked at.” Stakeholder Survey feedback.

“Some staff have worked at SDC/DBC for many years and the audit reports do not always show the benefit of that experience.” Stakeholder Survey feedback.

“Fran has created a level of professional etiquette around the service that I have not seen before.” Stakeholder interview.

“As a shared service, it would be useful to understand any lessons we can learn from Sevenoaks where they may do something different to us and vice versa.” Stakeholder Survey feedback.

“They have the nucleus of a great team, one with real ambition.” Stakeholder interview.

“Overall, I think the audit team are doing a fantastic job that is well respected and people welcome the opportunity for service reviews etc. so efficiencies can be identified and improvements made.” Stakeholder Survey feedback.

Disclaimer: John Chesshire undertook this review in December 2020 and January 2021 on behalf of the Chartered Institute of Internal Auditors. This report provides management and the Audit Board at Dartford Borough Council and the Audit Committee at Sevenoaks District Council with information about Internal Audit as of that date. Future changes in environmental factors and actions taken to address recommendations may have an impact upon the operation of Internal Audit in a manner that this report cannot anticipate.

Considerable professional judgment is involved in evaluating. Accordingly, it should be recognised that others could draw different conclusions. We have not re-performed the work of Internal Audit or aimed to verify their conclusions. This report is provided on the basis that it is for your information only and that it will not be quoted or referred to, in whole or part, without the prior written consent of the Chartered Institute of Internal Auditors.

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