



Committee and Date

Pension Committee

13th September 2024

Item

Public

**THIRD LINE OF ASSURANCE: INTERNAL AUDIT OUTTURN REPORT
FOR SHROPSHIRE COUNTY PENSION FUND 2023/24**

**Responsible
Officer**

Barry Hanson

e-mail: Barry.hanson@shropshire.gov.uk Telephone: 07990086409

1.Synopsis

This report provides the Committee with a summary of the work undertaken by Internal Audit for the year ended 31st March 2024 and provides the Chief Audit Executive's year end opinion on the Fund's internal control environment.

2.Executive Summary

This annual report provides members with details of the work undertaken by Internal Audit for the year ended 31 March 2024. It reports on progress against the annual audit plan agreed with the Head of Pensions. It also provides the Chief Audit Executive's opinion on the overall adequacy and effectiveness of the organisation's governance, risk management, and control processes when considering the Public Sector Internal Audit Standards or Guidance, as required by the Accounts and Audit Regulations 2015.

Final performance has been good with 100% of the plan being delivered.

Six good assurances were made in 2023/24. A total of ten recommendations have been made in the five audit reports related to the year for Shropshire County Pension Fund. No significant or fundamental recommendations have been raised in 2023/24.

In addition to the six internal audit reports issued to Shropshire County Pension Fund, we have also completed non-assurance work regarding Cyber Security actions.

In February 2022 Audit Services facilitated a Cyber Analysis workshop. Actions were agreed during the workshop that aimed to improve the overall cyber control environment within the Pension Service. As part of the agreed plan for 2023/24 Audit Services have obtained an update from management on the position of the agreed actions.

Based on the work undertaken and Pension Fund management responses received; the Pension Fund's governance, risk management and internal control processes are sound and working effectively and the Chief Audit Executive can deliver a substantial year end opinion on the Fund's internal control environment for 2023/24.

3. Decisions

The Committee are asked to consider and endorse, with appropriate comment;

- a) Performance against the Audit Plan for the year ended 31 March 2024.
- b) The Chief Audit Executive's substantial year end opinion on the Fund's internal control environment for 2023/24 is based on the work undertaken, and Pension Fund management responses received.

REPORT

4. Risk Assessment and Opportunities Appraisal

- 4.1 The delivery of a risk based Internal Audit Plan is an essential part of ensuring probity and soundness of the Pension Fund's financial, governance and risk management systems and procedures and is closely aligned to the risk register. The Plan is delivered in an effective manner; where Internal Audit independently and objectively examines, evaluates and reports on the adequacy of the control environments as a contribution to the proper economic, efficient and effective use of resources. It provides assurances on the governance, risk management and internal control systems, by identifying areas for improvement or potential weaknesses and engaging with management to address these in respect of current systems and during system design. Failure to maintain robust internal controls create an environment where poor performance, fraud, irregularity and inefficiency can go undetected leading to financial loss and reputational damage.

- 4.2 The recommendations contained in this report are compatible with the provisions of the Human Rights Act 1998 and the Accounts and Audit Regulations 2015.
- 4.3 There are no direct environmental, equalities or climate change consequences of this proposal.
- 4.4 Internal Audit customers are consulted on the service that they receive, feedback from which is included in this report and continues to be positive.

5. Financial Implications

- 5.1 The Internal Audit plan is delivered within approved budgets; the work of Internal Audit contributes to improving the efficiency, effectiveness and economic management of the Pension Fund.

6. Climate Change Appraisal

- 6.1 This report does not directly make decisions on energy and fuel consumption; renewable energy generation; carbon offsetting or mitigation; or on climate change adaption. However, the work of the Committee will look at these aspects relevant to the governance, risk management and control environment.

7. Background

- 7.1 This report is the culmination of the work of the Internal Audit team during 2023/24 and seeks to:
 - Provide an opinion on the adequacy of the risk management, control and governance arrangements;
 - Inform the review of an effective Internal Audit by providing performance data against the plan.
 - Confirm to the Pension Committee that the Audit service has been delivered free from interference throughout the year.
- 7.2 The requirement for Internal Audit derives from local government legislation, including section 151 of the Local Government Act 1972 which requires the Pension Fund to plan for the proper administration of its financial affairs. Proper administration includes Internal Audit. More specific requirements are detailed in the Accounts and Audit Regulations 2015, in 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”.

- 7.3 The Public Sector Internal Audit Standards (PSIAS) define the scope of the annual report on internal audit activity. The annual report must incorporate an annual internal audit opinion on the overall adequacy and effectiveness of the organisation’s framework of governance, risk management and control. This annual report provides information to support that assessment and that an effective Internal Audit is established at Shropshire County Pension Fund, in accordance with the requirements of the 2015 Accounts and Audit Regulations. The Internal Audit Service is provided by Shropshire Council. In December 2021, a report to Shropshire Council Audit Committee confirmed that following an external review by Chartered Institute of Public Finance Accountants (CIPFA), it was concluded that Shropshire Council Internal Audit Services fully conforms to the requirements of the PSIAS. In addition to the external review, in July 2024, an annual paper was presented to Shropshire Council’s Audit Committee which provides assurance on the effectiveness of the Internal Audit service, against the PSIAS. Shropshire County Pension Fund can take assurance from both reports.
- 7.4 Internal Audit operates a strategic risk based plan. The plan is reviewed each year to ensure that suitable audit time and resources are devoted to reviewing the more significant areas of risk, this results in a comprehensive range of audits undertaken in the year, to support the overall opinion on the control environment.

Annual Internal Audit Opinion from Internal Audit Work undertaken during 2023/24

- 7.5 It is the responsibility of Shropshire County Pension Fund to develop and maintain the internal control framework. In undertaking its work, Internal Audit has a responsibility under the Public Sector Internal Audit Standards to deliver an annual internal audit opinion and report. The annual internal audit opinion will conclude on the overall adequacy and effectiveness of the Pension Fund’s framework of governance, risk management and internal control. This opinion plays a key part in enabling the Pension Committee to deliver their annual assurance statement to stakeholders.
- 7.6 The results of individual audits, when combined, form the basis for the overall opinion on the adequacy of the Pension Fund’s internal control systems. No system of internal control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give that absolute assurance. The work of Internal Audit is

intended only to provide reasonable assurance on governance, risk management and controls based on the work undertaken. In assessing the level of assurance to be given, I have considered:

- The work undertaken on the fundamental systems. Whilst identifying ten areas where minor improvement can be made, identified no significant material weaknesses that the Service has control over that could result in a material misstatement in the Pension Fund's accounts and reliance can be placed upon the systems.

7.7 These assurances are provided on the basis that management carry out the actions they have agreed in respect of the recommendations made to address any weakness identified and improvements suggested.

7.8 ***Based on the work undertaken and Pension Fund management responses received; the Pension Fund's governance, risk management and internal control processes are sound and working effectively and the Chief Audit Executive can deliver a substantial year end opinion on the Fund's internal control environment for 2023/24.***

Key Assurances provided during 2023/24

7.9 Audit assurance opinions are awarded on completion of audit reviews reflecting the efficiency and effectiveness of the controls in place, opinions are graded as follows:

Good	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is a sound system of control in place which is designed to address relevant risks, with controls being consistently applied.
Reasonable	Evaluation and testing of the controls that are in place confirmed that, in the areas examined, there is generally a sound system of control but there is evidence of non-compliance with some of the controls.
Limited	Evaluation and testing of the controls that are in place performed in the areas examined identified that, whilst there is basically a sound system of control, there are weaknesses in the system that leaves some risks not addressed and there is evidence of non-compliance with some key control.
Unsatisfactory	Evaluation and testing of the controls that are in place identified that the system of control is weak and there is evidence of non-compliance with the controls that do

exist. This exposes the Council to high risks that should have been managed.

Audit assurance opinions delivered in 2023/24

Audit	Opinion	Direction of Travel
Corporate Governance	Good	No Change
Risk Management	Good	No Change
Pension Fund Monitoring	Good	No Change
Investment Managers Internal Control Reports	Good	No Change
Pensions Administration	Good	No Change
Altair Application	Good	Not Applicable*

*Comparable audit not delivered in prior year.

7.10 A summary of the six final audit reports issued in 2023/24 are listed at **Appendix A**.

7.11 Audit recommendations are also an indicator of the effectiveness of the Pension Fund's internal control environment and are rated according to their priority:

Best Practice (BP)	Proposed improvement, rather than addressing a risk.
Requires Attention (RA)	Addressing a minor control weakness or housekeeping issue.
Significant (S)	Addressing a significant control weakness where the system may be working but errors may go undetected.
Fundamental (F)	Immediate action required to address major control weakness that, if not addressed, could lead to material loss.

7.12 A summary of the level of assurance for each fundamental review area together with the number of recommendations made is shown in the table below.

7.13 A total of ten recommendations have been made in the six audit reports issued in the year; these are broken down by audit area in the table below.

Audit opinion and recommendations made on 2023/24 audits

System	Level of Assurance Given	Number of Recommendations made				Total
		BP	RA	S	F	
Corporate Governance	Good	0	0	0	0	0
Risk Management	Good	0	0	0	0	0
Pension Fund Monitoring	Good	0	1	0	0	1
Investment Managers Internal Control Reports	Good	0	0	0	0	0
*Pensions Administration	Good	0	6	0	0	6
Altair Application	Good	0	3	0	0	3
Totals		0	10	0	0	10
Percentage		0%	100%	0%	0%	

* Note that the Pensions Administration and the Pensions Administration Transfers in and out audits were presented as one amalgamated report.

- 7.14 Six good assurances were issued during the financial year. Where required positive responses have been received by management and will be followed up next year to determine whether satisfactory action has been taken.
- 7.15 The Internal Audit team has achieved 100% of the plan which is in line with its target.
- 7.16 It is management's responsibility to ensure accepted audit recommendations are implemented within an agreed timescale. No recommendations have been rejected in the year by management.
- 7.17 All ten of the recommendations made were rated as 'requires attention' designed to add value to the high level of controls in place and reflecting a low level of risk. This reflects the experience and diligence of the staff in the team, with no significant or fundamental recommendations resulting from the audits performed.

Audit Performance

- 7.18 Audit Performance is demonstrated by measuring achievement against the plan, ensuring compliance against the Public Sector Internal Audit Standards (PSIAS), and evaluating improvements made over the last twelve months. A public report of effectiveness against the PSIAS is made annually to the Shropshire Council, June Audit Committee. Shropshire Council Audit Service are also externally reviewed every five years for compliance with the PSIAS and passed the review undertaken by CIPFA in December 2021. The

effectiveness of Internal Audit is further reviewed directly by customers as they provided responses to surveys sent out after each audit.

Reporting

7.19 All Internal Audit work is reviewed by a principal auditor to ensure it complies with Internal Audit's standards and that the recommendations made are supported by the work undertaken before any audit reports are issued. This is a fundamental part of ensuring audit quality and that clients receive reports which are both informative, useful and add value to their work processes and procedures.

7.20 All audit assignments are subject to formal feedback to management. Draft reports are issued to the managers responsible for the area under review for agreement to the factual accuracy of findings and recommendations. After agreement, a formal implementation plan containing management's agreed actions and comments is issued to relevant officers. Follow up reviews capture evidence of implementation of recommendations.

Quality Assurance/Customer Feedback Survey

7.21 A customer feedback survey form is sent out with all audits completed. These provide feedback on the quality of audit service in relation to several areas, which are shown in the table below.

7.22 The surveys are part of ensuring the work meets our client expectations and that the quality of audit work is maintained. Five survey forms were returned; the results are identified in the table below.

Customer Feedback Survey Forms - percentage of excellent and good responses

Item Being Scored	2023/24
Pre-audit arrangements	100%
Post-audit briefing	100%
Audit coverage/scope of the audit	100%
Timeliness of production of report	100%
Accuracy and clarity of report	100%
Practicality of recommendations	100%
Professionalism of approach, competence	100%

Communication skills, pleasant manner	100%
Timeliness of audit to your business process	100%
Number of forms returned	5

7.23 The results are pleasing and used to inform the training and development of auditors in their role.

7.24 In addition to surveys, regular meetings are held with the Head of Pensions and the Scheme Administrator which allow any performance issues to be reviewed at that time. Internal Audit have continued to introduce new Auditors to the Pension Fund to ensure that Auditors can be rotated in line with the Public Sector Internal Audit Standards (PSIAS) and that Internal Audit are able to continue to offer a professional high-quality service going forward. The information received from surveys is used both to improve techniques overall within the team and at annual performance appraisals to identify future development focus relating to individual skills or competences.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Pension Fund Internal Audit Plan
Public Sector Internal Audit Standards
Accounts and Audit Regulations 2015

Cabinet Member (Portfolio Holder) N/A

Local Member - N/A

Appendices

Appendix A - Summary of Findings from Pension Fund Audit Reports 2023/24

APPENDIX A

Summary of Findings from Pension Fund Audit Reports 2023/24

1. ***Pension Fund Investment Managers Monitoring*** - This area is reviewed on an annual basis reviewing Pension Fund Investments using established documentation and testing.

The audit concentrated on key controls in the following areas:

- Previous audit recommendations have been implemented.
- Investment of the fund complies with statute, regulations and any restrictions specified.
- Appropriate control is exercised over fund managers.
- Transactions undertaken by Fund Managers are independently recorded and verified.
- Appropriate accounting entries are made and fund balances are reflected in the accounting system.
- Relevant management information is provided to strategic management.
- Information is secure and satisfactorily controlled.
- Information Governance and cyber risks are managed in accordance with current best practice and an agreed policy.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

One previous recommendation was followed up as part of the audit and was assessed as in progress. This has been repeated as the one recommendation made in 2023/24. Management provided a positive response to the recommendation.

Assurance Level: Good

2. ***Pensions Administration (Including Transfers in and out)*** – This area is reviewed on an annual basis. The audit concentrated on the following objectives:

- The recommendations made in the previous audit have been implemented.
- The Officers responsible for administering the fund have sufficient resources, skills and access to policies and procedures to process transactions and manage the fund.
- In accordance with regulations, if a new employee is required to join the scheme they are identified promptly and recorded accurately as members.
- The contributions received to the fund including, those from employees and employers are recorded accurately and promptly.

- The benefits which are paid are calculated correctly and paid to eligible persons. Any changes to payments are appropriately authorised and processed correctly.
- Pension payments made through the payroll are processed accurately, in a timely manner and are authorised appropriately.
- Fund members leaving the scheme have their deferred pension recorded accurately and any payments made from the scheme to leavers, other than normal pensions, are accurate and appropriately authorised.
- The transfers in and out of the scheme are calculated correctly, actioned promptly and authorised appropriately.
- The administrative costs associated with the scheme are in accordance with the budget and any costs due to the fund are recovered accurately and promptly.
- The ledger control accounts associated with the scheme are reconciled accurately and on a regular and timely basis.
- There is an appropriate process in place to ensure all complaints are actioned in accordance with the Internal Dispute Resolutions Policy.
- The management and performance information is accurate, timely and relevant.
- The personal data held is processed in a secure and controlled manner in line with internal policy and legislation.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

Three previous recommendations were followed up as part of the audit. Good progress has been made with two recommendations assessed as implemented and another assessed as in progress. This has been repeated as one of the six recommendations made in 2023/24. Management have provided positive responses to all recommendations.

Assurance Level: Good

3. ***Investment Fund Managers Internal Control Reports*** - This annual review provides assurance on the security and management of the Pension Funds' investments, based upon the information provided in AAF 01/06, SOC1 and SSAE16 reports, which are subject to External Audit review. In addition, there are some fund managers who are not required to produce these reports and tailored self-assessment questionnaires are sent to them for completion. The review is performed after the financial year end, when the most up to date reports are available. Reports are reviewed in the first instance by Treasury staff, who seek explanations of any areas where there appear to be weaknesses or concerns in the reports. Following the receipt of these responses, the reports are subject to a second, independent, review by Internal Audit. Audit work concentrated on the following objectives.

- The most recent internal control reports have been received for all fund managers who are required to produce SOC1, SSAE16 or AAF01/06 reports.
- Fund Managers have confirmed there are adequate systems of internal control in place at any third party back-office service providers used in relation to Shropshire County Pension Fund.
- Fund Managers have confirmed that they maintain comprehensive procedure notes.
- Fund Managers have confirmed that they have appropriate insurance arrangements in place with adequate liability cover.
- Internal Control Questionnaires have been completed by the Fund Managers who are not required to produce control reports.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

There were no recommendations.

Assurance Level: Good

4. ***Risk Management*** - The audit looks to ensure there are appropriate risk management processes in place in respect of the Pension Fund. It concentrated on the following objectives:

- Risks arising from business strategies and activities are identified and prioritised and management and the Pensions Committee have determined the level of risk acceptable to the organisation.
- Risk mitigation activities are designed to reduce, or otherwise manage, risk at levels that were determined to be acceptable to management and the Pensions Committee.
- Ongoing monitoring activities are conducted to periodically reassess risk and the effectiveness of controls to manage risk.
- The Pensions Committee and management receive periodic reports of the results of the risk management process.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

There were no recommendations.

Assurance Level: Good

5. ***Corporate Governance***— The audit looks to ensure there are appropriate governance processes in place in respect of the Pension Fund. It concentrated on the following objectives:

- The Pensions Committee has met the roles and responsibilities as defined in CIPFA best practice guidelines (Oct 2013).
- The Governance of the Pension Fund is in line with the Pension Regulators Code of Practice issued in April 2015.
- The Pensions Committee and Board receive updates on relevant upcoming changes to legislation.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

No recommendations were raised in this review.

Assurance Level: Good

6. ***Altair Application Audit*** – As part of the approved internal audit plan for 2023/24 Audit Services have undertaken a review of the Altair application. Audit work concentrated on the following objectives:

- To ensure that the System complies with all external legislation and regulations.
- To ensure the system and administrative processes are adequately documented.
- To ensure that the application authentication and authorisation mechanisms are secure.
- To ensure that users have received the required training.
- To ensure that application parameter data is correct, updated in a timely manner and access is restricted.
- To ensure that data is accurately input, and the authenticity of the data input is subject to validation processes.
- To ensure that data is processed in a timely manner and controls are in place to ensure that completeness and accuracy of processing is maintained.
- To ensure that output is secure, accurate and reaches the intended recipient in a timely manner.
- To ensure that there are continuity processes in place to ensure system availability.
- To ensure that management/Audit trails are in place.
- To ensure that clear procedures are in place for the authorisation of changes and system changes are applied by appropriately qualified staff
- To ensure that interfaces with the system are secure, efficient and effective.
- To ensure that cloud (Software as a Service) contract performance and security management arrangements are in place.

Evaluation and testing of the controls that are in place confirmed that there is a sound system of control in the areas examined.

There were three recommendations made in the audit. Management have provided positive responses to all recommendations.

Assurance Level: Good

7. *Summary of non-assurance work*

Cyber Security

A cyber analysis workshop was undertaken on 16 February 2022. The main focus was to complete a gap analysis based on the self-assessment completed by the Pensions service late 2021 as documented with the AON LGPS Cyber scorecard. Actions were agreed during the workshop that aimed to improve the overall cyber control environment within the Pension Service. As part of the agreed plan for 2023/24 Audit Services have obtained an update from management on the position of the agreed actions. Key developments have been IGLOO reporting, the use of SharePoint for secure distribution of documentation and the cloud hosting of Altair. This review has been conducted in accordance with the Public Sector Internal Audit Standards. No Internal Audit assurance is offered as these are management assurances provided by Pensions management on the implementation of the actions identified in 2022. Twenty actions were identified and agreed in April 2022. Six of these remain outstanding and the other fourteen have been implemented.