



**STOCKPORT**  
METROPOLITAN BOROUGH COUNCIL

# **Internal Audit Service**

## **Internal Audit Plan 2025-26**

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**Distribution:** Audit Committee  
Corporate Leadership Team (CLT)

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## Executive Summary

1. The 2025/26 Internal Audit Plan has been developed as in previous years on a risk-based approach. However, the way in which the Plan will be delivered from April will encompass additional requirements from the new Global Internal Audit Standards (the standards) and accompanying Cipfa Code of Practice for the Governance of Internal Audit in Local Government. These will supersede the current Public Sector Internal Audit Standards to which the internal audit service meets.
2. The requirement to deliver robust, innovative, and agile independent assurance continues as the Council delivers on its priorities in 2025/26 and beyond, via the Council Plan, supported by the complementary One Stockport Borough Plan. Longer term assurance will also be required as the Council seeks to deliver on ambitious medium- and longer-term plans.
3. Again, and as in more recent years the Internal Audit Plan 2025/26 has been developed through close liaison with both the Corporate Leadership Team (CLT) and Senior Management to identify and evaluate key areas of risk. As a result of a range of key initiatives in 2024/25 to further embed internal audit into the organisation, the feedback from key stakeholders above in terms of suggested management audits has continued to increase. Whilst this is positive from an engagement perspective the delivery of all suggested work in 2025/26 becomes more difficult to fulfil. Therefore, the Audit Universe has been updated to take into account this feedback and is continually risk assessed. The resultant plan has allowed for appropriate coverage of key risk services so as to ensure that an independent opinion can be given on the effectiveness of risk management, control and governance processes at the end of the financial year. As in previous years this is delivered through the Head of Internal Audit Annual Opinion and Report.
4. The plan is deliberately designed to be fluid and agile and provides significant contingency and in-built flexibility. This is even more relevant in 2025/26 given the level of corporate engagement outlined in 3 above. This allows for changes to current identified key risks through to new and emerging risks, which will need to be evaluated during the course of the financial year. Flexibility will once again be a key attribute in delivering a value-added plan to the Council's key stakeholders.
5. The approved 2025/26 Internal Audit Plan will be revised on a six-monthly basis to take account of the Council's overall continuing changing business priorities and emerging risks currently posed. The aim is to target resources quickly and efficiently to emerging risk areas via robust risk management arrangements. As in previous years, any changes to the plan will be both discussed and reported to both CLT and the Audit Committee through the 2025/26 financial year.
6. In addition, new areas have and will continue to be considered where the scope and requirement of audit resource is not yet fully defined resulting in an additional allocation of flexible resource available for each directorate to address this. This includes, but is not solely restricted to, the MTFP Programme of Reform and the transformation projects that underpin this.

# 1. Introduction

1.1 This document summarises the results of Internal Audit's planning work. It sets out the details of the:

- Responsibilities and scope of Internal Audit.
- Internal Audit Planning Methodology.
- Characteristics of the 2025-26 Internal Audit Plan.
- Resourcing and delivery of the Council's Internal Audit service.
- Proposed programme of work for 2025-26 (the Audit Plan).

1.2 The Audit Plan for 2025-26 has been prepared in accordance with the new requirements of the new Global Internal Audit Standards and accompanying Cipfa Code of Practice for the Governance of Internal Audit in Local Government. These represent mandatory best practice for all internal audit service providers in the public sector from April 2025.

1.3 The Council has adopted the following definition of internal auditing:

*'Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes'.*

1.4 In accordance with new standards, the mission of internal audit is to 'enhance and protect organisational value by providing risk-based and objective assurance, advice and insight'. The work of internal audit is a key element in delivering the Council's strategic priority of reform and governance, but also supports the Council in achieving all the aims and objectives set out in the Stockport Council Plan 2025-26 and the One Stockport Borough Plan.

1.5 The standards require that the Internal Audit Service is delivered and developed in accordance with the Audit Strategy, supported by the Internal Audit Charter. The principal aims of the strategy are to communicate the contribution that Internal Audit makes to the Council achieving its objectives. This includes:

- Internal Audit objectives and outcomes.
- The development of a Risk Based Internal Audit Plan.
- How the Head of Internal Audit will form and evidence his/her opinion on the control environment.

- How Internal Audit's work will identify and address local and national issues of risk.
- How the service will be provided.
- The resources and skills required to deliver the Internal Audit Service.

- 1.6 The Internal Audit Charter provides the functional and organisational framework in which Internal Audit operates to best serve Stockport Council and to meet its professional obligations under the standards. In addition, the standards require the Head of Internal Audit, Risk and Insurance to prepare an annual risk-based internal audit plan, which takes into account the requirement to produce an annual internal audit opinion. This opinion statement will continue to be a key contributor to the Annual Governance Statement, which the Chief Executive and the Leader of The Council are required to sign off alongside the final accounts each year.
- 1.7 The work of internal audit is a key element in delivering the Council's strategic priority of reform and governance, but also supports the Council in achieving all the aims and objectives set out in the One Stockport Plan and the Stockport Council Plan 2025-26. The standards require that the Head of Internal Audit, Risk and Insurance must "establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals". They refer to the need for the plan to reflect the assurance framework, risk management arrangements and input from management and "the Board".

## 2. Responsibilities and Scope

### Responsibilities of internal audit

- 2.1 The internal audit function is responsible for:
- Reviewing and developing the Council's governance processes. Specifically, this includes:
    - Promoting appropriate ethics and values within the Council.
    - Supporting effective organisational performance management and accountability.
    - Communicating risk and control information to appropriate areas of the organisation.
    - Coordinating the activities of, and communicating information among, the Audit Committee, external audit, internal audit and management.
  - Evaluating the effectiveness of the Council's risk management processes and contributing to their improvement.
  - Assisting in the maintenance and development of an effective control environment by providing robust independent assurance over its operation.

2.2 In order to fulfil this requirement, Internal Audit is independent of all the activities of the Council. Internal Audit has the right of access to all information and records held by the Council and may seek explanations on any matters from any officer or Member of the Authority.

### **Responsibilities of management**

2.3 The establishment and maintenance of adequate control systems is the responsibility of management. Recommendations made by internal audit can reduce risk and improve systems of control. However, the implementation of audit recommendations cannot eliminate risk entirely.

### **Responsibilities of the Audit Committee**

2.4 In regard to internal audit, the Audit Committee is responsible for:

- Approving, but not directing, internal audit's strategy, plan and monitoring performance.
- Reviewing summary internal audit reports and the main issues arising and seeking assurance that action has been taken where necessary.
- Receiving and considering the Head of Internal Audit's annual report.

### **Responsibilities for fraud prevention and detection**

2.5 The primary responsibility for the prevention and detection of fraud rests with management. Management's responsibilities include creating an environment where fraud is not tolerated, identifying fraud risks, and taking appropriate actions to ensure that controls are in place to prevent and detect fraud.

2.6 It is not the role or responsibility of internal audit to detect fraud. However, internal audit will evaluate the potential for the occurrence of fraud in each assignment and how the Council manages the risk of fraud.

### **Scope of internal audit activities**

2.7 The scope of internal audit work includes:

- The entire control environment of the Council, comprising financial and non-financial systems.

- Reviewing controls that protect the interests of the Council in its dealings with partnerships in which the Council has an involvement.

2.8 Internal audit may also provide assurance services to parties outside the Council with the prior agreement of Audit Committee.

### 3. Internal Audit Planning Methodology

3.1 The approach to audit planning for 2025/26 has been conducted on a risk-based approach in line with the requirements of the standards and has been prepared following consultation with key stakeholders including senior management and Heads of Service to establish the key current and emerging risk areas faced across the Council. Further consideration has been given to:

- priority areas suggested by CLT, Senior and Middle Management.
- a review of the 2025/26 Council Plan and the One Stockport Borough Plan.
- a review of current strategic, portfolio, project and operational risks, in particular the areas identified within the Corporate Risk Register.
- other existing sources of assurance (for example, external audit, external regulators like Ofsted and the Care Quality Commission and other “second line of defence” assurance like risk management and compliance functions).
- results of previous internal audit work and cumulative audit knowledge and experience.
- known changes to the Council’s business, operations, programs, systems and controls.
- the requirement to ensure sufficient and wide-ranging coverage in order to provide a robust annual audit opinion.
- planned work from the 2024-25 Audit Plan that is still considered a priority.

### 4. Characteristics of the 2025-26 Internal Audit Plan

#### **Alignment of the Audit Plan to the Council’s Corporate Priorities and Corporate Risks**

4.1 The Audit Plan is presented in a way that shows how each planned review aligns with the current Council’s Corporate Priorities and corporate risks. Clearly a number of reviews will contribute to more than one priority/corporate risk. For presentational purposes the reviews have been listed under the priority/risk that is considered most clearly linked to that review area.

#### **Budgeted time allocations**

4.2 A budgeted time allocation has been set for each assignment included in the Audit Plan. It is accepted that the exact resource requirement for each assignment cannot be forecast with certainty. The plan therefore represents the best estimate of the way in which

the Council's internal audit resources will be deployed. The overall objective is to deliver the plan in line with approved Key Performance Indicators and to provide sufficient overall assurance to support the Annual Head of Internal Audit Opinion Report. CIPFA have provided recent guidance on this aspect and will be considered as part of this Annual Report.

### **Flexibility to incorporate emerging risks**

- 4.3 **The Audit Plan will be reviewed on a regular basis taking into account the current and expected future changes to the overall risk appetite of the Council and this will help to support the future direction of the Audit Plan by identifying high risk areas that require more immediate independent assurance. All changes and updates will be reported to the Corporate Leadership Team and the Audit Committee on a regular basis to allow for discussion and challenge on any proposed changes to the plan.**

## **5 Resourcing and Delivery of Internal Audit Plan**

### **Resource requirements**

- 5.1 The level of resource required to deliver an effective internal audit service to the Council has been assessed based on the need to provide adequate audit coverage of the Council's:
- Risk management and governance arrangements.
  - Front line services.
  - Support services.
  - Procurement and contract management activity.
  - Information management and data arrangements.
  - Key financial systems.
  - Anti-fraud and corruption arrangements.
  - Schools.
- 5.2 Account has also been taken of the need to be able to resource:
- Unplanned work which may arise during the year.
  - Follow up work to provide assurance that previously agreed recommendations are implemented.



- Provision of advice and consultancy to internal customers.

5.3 The 2025/26 Internal Audit Plan will be managed with a strategic lead and overview from the Head of Internal Audit, Risk and Insurance, complemented by an experienced and suitably qualified in-house team of five full-time auditors, one part-time auditor. Further resource around risk management, counter fraud, insurance, claims handling and highways inspections is now fully embedded within the wider Internal Audit, Risk Management and Insurance service. This helps to deliver opportunities of cross utilisation and flexible use of skills between the teams, as well as providing a source of flexible resource to assist in the delivery of the Audit Plan. Further work is currently ongoing with regards to supporting the team to deliver counter fraud reviews.

5.4 A resource calculation has determined the net number of days available to undertake audit work in the year 2025/26 as 820 days. This is based on:

- 30% of Head of Audit, Risk and Insurance resources representing the time spent on strategic audit management.
- A current internal audit structure of one CSS Audit Manager (80% of available time, 20% management time), one CSS Audit and Risk Manager (80% of available time and 20% of management time) supported by two full time CSS Senior Officers, one full time CSS Officer, and one part-time CSS Officer (80% available time).

5.5 The actual days required in the Internal Audit Plan 2025/26 is 885 days. The total net resource (820 days) was deducted from actual days required in the Plan and a difference of (65) days is evident. The difference (shortfall) will be made up by a combination of the following innovative approaches: -

- Development of data analytics using Power BI and as part of the continuous auditing approach (superseding the use of IDEA).
- Less days allocated to specific individual audit reviews (where specific risk environments are assessed as lower).
- Carry forward uncompleted work to the 2025/26 Audit Plan.

5.6 The resource calculations have been re-assessed in line with the changing work programme and these are set out in the table below.

2025/26	
<b>Resources available</b>	
Total available days <sup>1</sup>	1330
Less: Non-Chargeable time <sup>2</sup>	(210)
Less: Consultancy & Assurance work ( <i>Appendix B</i> )	(310)
Plus: Days purchased from Salford Computer Audit Services	10
<b>Net Days available for SMBC Internal Audit</b>	<b>820</b>
<b>Resources required</b>	
<b>Total planned days in the Internal Audit Plan</b>	<b>885</b>
<b>Difference of Resource Available to Resource Required</b>	<b>-65</b>

*Note 1: After deduction of annual leave, bank holidays and sickness provision, and includes 30% of Head of Internal Audit, Risk and Insurance time*

*Note 2: Staff training, administration, team & SMT meetings, external meetings. Increased provision for Power BI training included*

*Note 3: Difference of Resource Available to Resource Required (previous years) – (67) 20/21, (45) 21/22, (115) 22/23, (70) 23/24, (95) 24/25.*

## 6 Work Programme for 2025-26

6.1 The table below shows the revised planned days against each corporate outcome. Details are set out in Appendix A.

Area of review	2025/26 Planned Days
<b>Council Plan key priorities</b>	
Investment, regeneration and creating jobs	45
Education, Work and Skills	80
Wellbeing in neighbourhoods	65
Delivering for those who need it the most	215
Enabling programmes and cross cutting themes	265
In support of key priorities	
Other work in support of ALL priorities	175
<b>Other</b>	
Follow-ups	20
Completion of 2024-25 work	20
<b>Total Planned Days</b>	<b>885</b>

6.2 The Council continues to face significant current and emerging risks to the achievement of its overall objectives as highlighted in the Council Plan 2025/26. The inbuilt flexibility in the plan will allow for audit resources to be reallocated quickly and effectively to support work programmes and projects at the request of Corporate Leadership Team.

## 1. Investment, regeneration and creating jobs

Audit Review	Days	Risks context	Planned coverage	Priority/ Corporate Risk
Development planning services	15	The Council has statutory duties regarding development planning including planning applications. Significant changes in structure and processes have taken place and procurement of a new ICT system will be undertaken.	A post implementation review of systems and processes in the services to address key risks.	Medium <b>CR11</b>
Stockport Mayoral Development Corporation	10	The MDC is an entity that is required by statute to complete a range of annual returns that are subject to external audit review and need to be filed by a deadline.	Completion of Internal Control and Annual Governance Arrangements reports.	Medium <b>CR11</b>
Highways Maintenance	20	The significant investment programme has now concluded and maintenance budgets are now significantly lower. This may drive increased highways related claims if conditions deteriorate.	Review of risk based approach to planned maintenance and delivery of essential urgent works.	High <b>CR4</b>
<b>Total</b>	<b>45</b>			

## 2. Education, Work and Skills

Audit Review	Days	Risks context	Planned coverage	Priority/ Corporate Risk
Schools	30	The Council has just over 80 schools that are responsible for setting their own budgets and managing their finances. The frequency of school audit visits is determined by a risk assessment based on audit assurance ratings, change in Head teacher and business manager, financial position and any known governance issues.	A standard audit programme has been developed for school audits, which is tailored to each school as required.  Six establishments will be audited this year.  This will also include time for following up agreed action plans where a limited opinion assurance was given.	Medium <b>CR9a &amp; CR9b</b>
Expanded Childcare Policy <i>(This is also priority 4)</i>	15	A programme of work is underway to support the introduction of the new expanded funding entitlements for working parents of children aged 9 months to 3 years and increased access to wraparound childcare for all school aged children commencing from September 2024.  There are risks and challenges associated with this work programme.	We will review the arrangements to mitigate the risks and challenges of this work programme.	Medium <b>CR8</b>
EHCP Governance <i>(This is also priority 4)</i>	20	High demand, service under pressure, significant changes to systems and processes, financial issues.	We will review the governance and financial arrangements to minimise business risk around demand pressures and the costs associated with EHCPs.	High <b>CR8</b>
Academies – billing arrangements	15	Known issues regarding SLA and payments & invoices	A review of invoicing arrangements and debt recovery processes	Medium <b>CR8</b>
<b>Total</b>	<b>80</b>			

### 3. Wellbeing, prevention and neighbourhoods

Audit Review	Days	Risks context	Planned coverage	Priority/ Corporate Risk
Stockroom	20	This is a new operational service in the Town Centre	We propose to do an early support around funding of this service and then once the new service is embedded, an audit of the financial and management arrangement of the Stockroom.	Medium <b>CR11</b>
Parks and Open Spaces	15	The Council has significant greenspace assets that require a robust inspection and maintenance programme to ensure risks to the public are minimised.	Review of inspection and maintenance arrangements.	Medium n/a
Building Control	15	A small team that delivers an important and reputationally significant service. Team is vulnerable to recruitment and retention issues.	Review of key systems, skills and competencies and resilience planning and case management.	High <b>CR4</b>
Cemetaries and Crematorium	15	New in-house service after transfer of contract from external supplier. The Stockport Crematorium returned under full Council Control during 2024-25.	We will review the financial and operational arrangements over the management of the new in-house service.	Medium n/a
<b>Total</b>	<b>65</b>			

## 4. Supporting those who need it most

Audit Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
<b>Adults</b>				
Operation of AMHP Service	20	There are resourcing pressures on this essential service	Review of rota arrangements and casework managements systems and processes	High <b>CR10</b>
Waiting lists – effectiveness of new processes (Neighbourhoods)	15	The department has restructured and implemented new processes to combat waiting lists and case management.	Assurance that revised processes and teams structure are operating in practice.	High <b>CR7</b>
Community Deprivation of Liberty Safeguards (CDOLS)	15	CDOLS require a robust process for management and staff awareness of the need to identify potential restrictions applied in a community setting.	Assurance that revised processes and teams structures are operating effectively.	High <b>CR10</b>
Hospital Discharge process and data reporting	20	Accurate and timely data agreed by all parties is key to effective management of the discharge process.	Looking at the processes for preparing, reporting and actioning discharge data and interactions between NHS and SMBC staff and systems.	Medium <b>CR7</b>
<b>Children and Young People</b>				
Complex needs pathways for funding	15	High demand, more children presenting with complex needs, complexity of systems, processes and funding streams.	Provide independent assurance on effectiveness of new panel arrangements and decision-making processes.	High <b>CR8</b>
Children social care residential placements	20	There are continuing increases to numbers of looked after children resulting in further financial pressures. This continues to be a high spend area.	A review will be undertaken to provide assurance that the arrangements for placing looked after children are adequate and effective to meet objectives, minimise risk and deliver value for money. The specific scope will be agreed with client management.	High <b>CR8</b>

Audit Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
Post 18 accommodation	15	The Council is required to support post 18 previously looked after children into living arrangements.	We will review the management, contractual and financial arrangements to ensure risks are mitigated effectively.	High <b>CR8</b>
Early Help, Prevention & Alternative Delivery Models	20	Ongoing programme to develop Early Help and Prevention services to control demand and reduce the cost of placements when they do need to happen.	Scope of the review to be determined with client management.	High <b>CR8</b>
Internal childrens homes	20	The Council has a number of internal children homes which provides placements for looked after children. As part of the Recovery Programme, plans are in place to open children homes to provide more internal children home places to reduce costs associated with external placements.	Scope of the review to be determined with client management.	High <b>CR8</b>
Children Equipment & Adaptations Service	20	A number of services across Health, Education & Social Care provides equipment to children with disabilities and is funded jointly by health and education. This has been the subject of an ongoing project to streamline processes and funding streams.	A review of the management, financial and decision making arrangements in the service.	High <b>CR8</b>
<b>All Ages</b>				
Direct Payments	20	Identified by management as an area that needs a full understanding of how DPs are operating in practice following the new Policy from 2023.	Looking at the extent to which we have an effective strategy for delivery of Direct Payments to clients and operational arrangements in social work teams and Brokerage to deliver.	Medium <b>CR2</b>
Supported Families	15	Highlighted by management because the government's Supporting Families programme is being moved from the Department for Levelling Up Housing and Communities to the Department for Education.	A continuation of the current controls adopted as part of national guidelines.	Medium <b>CR8</b>
<b>Total</b>	<b>215</b>			



## 5. Enabling programmes

Area of Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
Right to Work checks	15	Employment risks around non UK residents	Compliance with Home Office requirements	Medium <b>CR14</b>
Salary sacrifice arrangements	15	Highlighted by management as arrangements and requirements with external interested parties (eg HMRC) increase overall risk.	A review of sufficiency of controls in place for key ss arrangements (eg car lease scheme).	Medium <b>CR2</b>
Contract management	20	New requirements as per Procurement Act Known issues around contract management arrangements	A review of current arrangements to identify compliance with new legislative changes and to ensure key risks are mitigated effectively	High <b>CR5</b>
Terrorism management	15	High risk due to changes required by introduction of Martyn's Law.	A review of processes to identify compliance with new legislative changes.	High <b>CR5</b>
Flooding – Response Management	20	Recurring issues around flooding Significant flooding has taken place recently and is an area that is increasing year on year.	A review of the wider Council response to managing floods in the Borough.	High <b>CR12</b>
Stockport Strategic Partner – Tameside	15	Stockport has been commissioned by the DfE to lead a strategic improvement partnership with Tameside. This follows from the role Stockport has played for some years, commissioned by the DfE, as a Partner in Practice supporting various LAs Children's Services to improve.	A high level review to provide assurance that the outcomes from the shared services programmes have been achieved	Medium <b>CR5</b>
Mobile device management	15	With increase in flexible working, there have been growth in mobile devices such as laptops, tablets,	Review of operational, financial and security arrangements over mobile devices.	Medium <b>CR3</b>

Area of Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
		smartphones. There are risks and challenges to ensure these are secure.		
ICT Service Desk	20	The service is undergoing structural changes, with new staff, processes and systems	A review of the new operational arrangements	Medium <b>CR3</b>
Cybersecurity (2 reviews)	25	Cybersecurity continues to be a significant risk to the Council and cyberattacks continue to change constantly in its complexity. Therefore this is a key area to remain abreast of developments and emerging risks.	Salford will be commissioned to provide a 10 day review of the technical aspects and the scope of this will be determined with the Head of Technology  We will provide assurance on controls and procedures in place to mitigate key risks which will be determined with the Head of Technology	High <b>CR3</b>
DSG Deficit	15	The DSG High Needs Block which is used to support children with Special Educational Needs (SEN) has significant budget pressures due to increasing demand within a challenged market with limited capacity and increasing complexity of children's requirements.	A review of the risk mitigation measures to address these issues.	High <b>CR2</b>
Commercial rental income collection	20	The Council maintains an extensive list of properties that it lets out. This brings in approximately £15million income a year. There are risks associated with the existing systems used for collecting income and the service is currently looking for replacement systems.	A follow up review and focus on financial and operational arrangements.	High <b>CR2</b>
Charging and Debt in Social Care	20	This is a high risk area around recovery of debt and the billing module in the Controcc system are underway to be implemented.	Post implementation review of the system to provide assurance the new billing module has addressed the risks.	High <b>CR2</b>

Area of Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
EDI Policy	15	Senior management recently conducted a council wide survey of employees regarding EDI matters. This has generated an action plan on addressing issues found from the survey	A review of the progress made against the agreed action plan to improve EDI arrangements within the Council.	Medium <b>CR14</b>
Radical Digital Strategy	20	The Council's Digital Strategy is framed around three interdependent pillars – Digital Communities, Digital Place and Digital Council. This seeks to bring together the work undertaken across the organisation and borough around digital skills, economy, inclusion, tele-care and independence, data, robust technical architecture and 21 <sup>st</sup> century customer expectations.  This is an ambitious project and thus carries many risks to achieving the plans set out in the strategy.	A review of the Council's arrangements to provide assurance that risks of not achieving the strategy are fully mitigated.	Medium <b>CR3</b>
Purchase / Prepayment cards	15	Rules around the use of purchasing cards in force throughout the Council – some issues have been reported	A compliance review of the arrangements including data analytics to provide assurance purchasing cards are used as originally intended	Low <b>CR2</b>
<b>Total</b>	<b>265</b>			

## 6. In support of ALL priorities

Audit Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
National Fraud Initiative	20	NFI matches data across organisations and systems to help public bodies identify anomalies which may signify fraudulent claims and transactions. The Council is required by law to participate in NFI.	Co-ordination and investigation of the data matches identified from the exercise.	High <b>CR2</b>
Counter fraud audit of Blue Badges	5	The Blue Badge scheme is a national initiative to help disabled people to park close to their destination, either as a passenger or driver. It is a criminal offence to misuse the badge and doing so can lead to a £1,000 fine.  Fraudulent use of Blue Badges prevents people in genuine need from accessing on-street parking where they need it most.	Counter fraud of arrangements to detect and prosecute misuse of blue badges.	Medium <b>CR2</b>
Performance Management	20	Revised business planning processes need to be aligned to objectives for services and individuals.	A review of performance management arrangements within Directorates.	High <b>CR1</b>
Highways / Estates Professional Services Framework	15	The PSF contract has an upcoming break clause in 2026	Review of the high level processes for work allocation, contractor review and performance management.	High <b>CR5</b>
Procurement Act – Position Statement (STAR joint audit work)	15	Failure to comply with new requirements of the Procurement Act expose the council to new regulatory/legal risks.	A review to determine the overall position of the Council allowing for preparation of new Act and support from STAR colleagues.	Medium <b>CR5</b>
Star Procurement – Real Living Wage arrangements	15	The Council has recently been accepted as a member of the Greater Manchester Good Employment Charter. The Good Employment Charter recognises organisations who are committed to the wellbeing of	As agreed at recent STAR HoIA meeting.  To review how key current and emerging risks are being managed. For example, the	Low <b>CR14</b>

Audit Review	Days	Risks context	Planned Coverage	Priority/ Corporate Risk
		<p>their colleagues, by pledging to pay the real living wage, engaging staff in key decisions and endorsing fair and flexible working conditions. Membership of the Charter places a broad range of corporate responsibilities on the Council as an employer including RLWA and equal pay arrangements.</p>	<p>obligation for the Council to meet the increasing costs as a result of the RLW continues to increase MTFP forecast expenditure pressure. Furthermore, the Council also needs to consider the implication of the RLW increases on its own workforce and potential costs of this and ensuring existing spinal pay point differentials between different pay grades are maintained.</p>	
<p>Management of Council buildings including Facilities Management contract</p>	<p>20</p>	<p>Key emerging risk relating to the ongoing quality of Council owned buildings. Issues around RAAC have raised profile of this area as a risk.</p>	<p>Review of processes and controls around the management of Council buildings including the facilities management contract.</p>	<p>High CR9B</p>
<p>Health and Safety (compliance/corporate responsibilities)</p>	<p>10</p>	<p>Health and safety requirements carry specific corporate responsibilities (both individually and collectively).</p>	<p>To review compliance with legislation and best practice in the event of a health and safety breach/incident.</p>	<p>Medium n/a</p>
<p>FOI requests</p>	<p>15</p>	<p>There is a requirement to comply with legislation when dealing with Freedom of Information requests.</p>	<p>To review compliance with legislation</p>	<p>Medium <b>CR6</b></p>
<p>Core financial systems</p>	<p>30</p>	<p>Core financial systems are fundamental systems which provide material figures for the Council's financial statements.</p>	<p>We will continue to review two financial systems each year.</p>	<p>Medium <b>CR2</b></p>
<p>Certification work (Ongoing)</p>	<p>10</p>	<p>Every year the Council receives grant funding for specific initiatives.  It is a requirement that the Head of Internal Audit signs a declaration to confirm that the conditions of funding have been complied with.</p>	<p>Annual review of key grants received to confirm expenditure is in line with grant terms and conditions.  This will also involve the annual review of charitable accounts to confirm income and expenditure presents a true &amp; fair view.</p>	<p>n/a</p>
<p><b>Total</b></p>	<p><b>175</b></p>			

**CONSULTANCY AND ASSURANCE WORK FOR INCLUSION IN 2025/26 INTERNAL AUDIT PLAN**

**APPENDIX B**

Review	Description	Days
Continuous auditing / monitoring	General resource element dedicated to continuous auditing and monitoring arrangements using Power BI	40
Consultancy / advisory	Consultancy resulting from requests for ad hoc advice on risk and control matters.	20
Project Development	A general and flexible contingency element equating to 15 days per Directorate. Advisory work in response to management requests for risk and control advice during key project implementation or system redesign.	45
Risk management arrangements	General resource element dedicated to facilitating risk management arrangements equating to 15 days per Directorate	45
Management reviews / investigations	Undertaking unplanned reviews or investigations as matters arise during the year or as directed by the Fraud & Irregularities Panel.	50
Specific projects	<p>This will involve risk consultancy support for the following:</p> <ul style="list-style-type: none"> <li>• Capital Board.</li> <li>• Workforce Development Group.</li> <li>• Academisation Programme and Traded Services.</li> <li>• MTFP Transformation Group.</li> <li>• Integrated Care System (Health &amp; Social Care Bill).</li> <li>• Debt Recovery Project.</li> </ul>	50
External Work – Academies x 3	<p>Academy trusts must have a programme of internal scrutiny to provide independent assurance to the board that its financial and non-financial controls and risk management procedures are operating effectively.</p> <p>Three academies have sourced Stockport Metropolitan Borough Council (SMBC) Internal Audit to provide assurance, advice, and support to help improve governance, risk, and control arrangements and to ensure compliance with the Academies Trust Handbook.</p> <p>The service receives an income stream from this activity.</p>	30

Review	Description	Days
Operation of Schools Sickness Management Scheme	Monthly independent checks on accuracy of claims from schools around sickness absence cover for teaching staff. The service receives an income stream from this activity.	30
<b>Total consultancy and assurance work</b>		<b>310</b>