

## **GOVERNANCE, AUDIT, RISK MANAGEMENT AND STANDARDS COMMITTEE**

### **1. Statement of purpose**

- 1.1 The Governance, Audit, Risk Management and Standards Committee is a key component of Harrow Council's corporate governance. It provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards.
- 1.2 The purpose of the committee is to provide independent assurance to the members of the adequacy of Harrow Council's governance, risk management and control frameworks and oversees the financial reporting and annual governance processes. It oversees internal audit and external audit, helping to ensure efficient and effective assurance arrangements are in place. It also acts as the Standards Committee.
- 1.3 The Governance, Audit, Risk Management and Standards Committee has the following powers and duties:

### **2. Governance**

- 2.1 To review the council's corporate governance arrangements against the good governance framework, including the ethical framework and consider the local code of governance.
- 2.2 To review the Annual Governance Statement (AGS) prior to approval and consider whether it properly reflects the risk environment and supporting assurances and legal and financial advice, taking into account internal audit's opinion on the overall adequacy and effectiveness of the council's framework of governance, risk management and control.
- 2.3 To monitor the progress of agreed actions to close significant governance gaps.
- 2.4 To consider the council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
- 2.5 To consider the council's framework of assurance and ensure that it adequately addresses the risks and priorities of the council.
- 2.6 To review the governance and assurance arrangements for significant partnerships.

### **3. Risk Management**

- 3.1 To review the Council's risk management strategy.
- 3.2 To monitor the effective development and operation of risk management in the council via the review of the Council's Corporate Risk Register on a regular basis.

- 3.3 To monitor progress in addressing risk-related issues reported to the committee.

#### **4. Countering Fraud and Corruption**

- 4.1 To review the assessment of fraud risks and potential harm to the council from fraud and corruption.
- 4.2 To monitor the counter-fraud strategy, actions and resources and the Council's approach to tackling fraud and corruption and promote an anti-fraud culture.
- 4.3 To review and approve the annual Corporate Anti-Fraud Team Plan.
- 4.4 To consider reports from the Head of Internal Audit/ Corporate Anti-Fraud Manager on the Corporate Anti-Fraud Team's performance at mid-year and at year-end.

#### **5. Internal audit**

- 5.1 To approve the internal audit charter and support the independence of Internal Audit.
- 5.2 To review proposals made in relation to the appointment of external providers of internal audit services and to make recommendations.
- 5.3 To approve the risk-based internal audit plan, including internal audit's resource requirements, the approach to using other sources of assurance and any work required to place reliance upon those other sources.
- 5.4 To approve significant interim changes to the risk-based internal audit plan and resource requirements.
- 5.5 To make appropriate enquiries of both management and the Head of Internal Audit to determine if there are any inappropriate scope or resource limitations.
- 5.6 To consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing of the Head of Internal Audit.
- 5.7 To approve and periodically review safeguards to limit such impairments.

- 5.8 To consider reports from the Head of Internal Audit on internal audit's performance at mid-year and year-end, including the performance of external providers of internal audit services.<sup>1</sup>
- 5.9 To consider Red and Red/Amber assurance reports and summaries of specific internal audit reports as requested.
- 5.10 To contribute to the Quality Assurance Improvement Programme and in particular, to the external quality assessment of internal audit that takes place at least once every five years.
- 5.11 To consider the report on the effectiveness of internal audit contained within the AGS.
- 5.12 To provide free and unfettered access to the GARMS Committee Chair for the Head of Internal Audit, including the opportunity for a private meeting with the committee.

## **6. External audit**

- 6.1 To support the independence of external audit through consideration of the external auditor's annual assessment of its independence and review of any issues raised by Public Sector Audit Appointments (PSAA).
- 6.2 To consider the external auditor's annual letter, relevant reports and the report to those charged with governance.
- 6.3 To consider specific reports as agreed with the external auditor.
- 6.4 To comment on the scope and depth of external audit work and to ensure it gives value for money.
- 6.5 To advise and recommend on the effectiveness of relationships between external and internal audit and other inspection agencies or relevant bodies.

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<sup>1</sup> These will include:

- a) updates on the work of internal audit including key findings, issues of concern and action in hand as a result of internal audit work
- b) annual report on the results of the internal audit Quality Assurance Improvement Programme (QAIP)
- c) statement of the level of conformance with the Public Sector Internal Audit Standards (PSIAS) and reports on instances where the internal audit function does not conform to the PSIAS, considering whether the non-conformance is significant enough that it must be included in the AGS.
- d) The opinion on the overall adequacy and effectiveness of the council's framework of governance, risk management and control together with the summary of the work supporting the opinion – these will assist the committee in reviewing the AGS.
- e) the level of management response to internal audit recommendations and progress on implementation of recommendations and to recommend action where internal audit recommendations are not being implemented.
- f) the action taken where the Head of Internal Audit has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions.

- 6.6 To scrutinise/comment on the External Audit plan and fees.
- 6.7 To monitor progress against the External Audit plan and receive summaries of audit work completed and key recommendations.
- 6.8 To review the management response to external audit recommendations and progress on implementation of recommendations.
- 6.9 To recommend action where external audit recommendations are not being implemented.

## **7. Financial reporting**

- 7.1 To review the annual statement of accounts prior to approval and satisfy themselves that appropriate steps have been taken to meet statutory and recommended professional practices. Specifically to:
- review the narrative report to ensure consistency with the statements and the financial challenges and risks facing the authority in the future
  - review whether the narrative report is readable and understandable by a lay person
  - review the key messages from each of the financial statements and evaluating what that means for the authority in future years
  - monitor trends and review for consistency with what is known about financial performance over the course of the year
  - review the suitability of accounting policies and treatments
  - seek explanations for changes in accounting policies and treatments
  - review major judgemental areas, eg provisions or reserves
  - seek assurances that preparations are in place to facilitate the external audit.
- 7.2 To consider the external auditor's report to those charged with governance on issues arising from the audit of the accounts.

## **8. Treasury Management**

- 8.1 To review the Treasury Management strategy and monitor progress on treasury management in accordance with CIPFA codes of practice.

## **9. Health & Safety**

- 9.1 To review the Council's Health and Safety arrangements and oversee progress on Health and Safety.

## **10. Accountability arrangements**

- 10.1 To report to those charged with governance on the committee's findings, conclusions and recommendations concerning the adequacy and effectiveness of their governance, risk management and internal control

frameworks, financial reporting arrangements, and internal and external audit functions.

- 10.2 To report to full council on an annual basis on the committee's performance in relation to the terms of reference and the effectiveness of the committee in meeting its purpose.
- 10.3 To publish an annual report on the work of the committee.

## **11. Standards**

- 11.1 Promoting and maintaining high standards of conduct by Councillors, co-opted members and "church" and parent governor representatives.
- 11.2 Assisting Councillors, co-opted members and "church" and parent governor representatives to observe the Members' Code of Conduct.
- 11.3 Advising the Council on the adoption or revision of the Members' Code of Conduct.
- 11.4 Monitoring the operation of the Members' Code of Conduct.
- 11.5 Developing and recommending local protocols to the Council to supplement the Members' Code of Conduct.
- 11.6 Enforcing local protocols and applying sanctions in respect of breaches as appropriate.
- 11.7 Advising, training or arranging to train Councillors, co-opted members and "church" and parent governor representatives on matters relating to the Members' Code of Conduct.
- 11.8 Granting dispensations to Councillors, co-opted members and "church" and parent governor representatives from requirements relating to interests set out in the Members' Code of Conduct.
- 11.9 To keep under review and amend, as appropriate, the Protocol on Councillor/Officer Relations.
- 11.10 To keep under review the Officer Code of Conduct and, after consultation with unions representing staff, make recommendations to Council for amendment or addition.
- 11.12 To receive reports and keep a general overview of probity matters arising from ombudsman investigations, Monitoring Officer reports, reports of the Chief Financial Officer and Audit Commission.
- 11.13 To have oversight of the Council's Whistleblowing Policy.
- 11.14 To agree the policy for decisions on payments to those adversely affected by Council maladministration (under section 92 Local Government Act 2000).

- 11.15 To establish sub-committees and working groups to deal with complaints that a member or a co-opted member has failed to comply with the Council's Code of Conduct.
- 11.16 To consider any application received from any officer of the Authority for exemption from political restriction under Sections 1 and 2 of the Local Government and Housing Act 1989 in respect of the post held by that officer and may direct the Authority that the post shall not be considered to be a politically restricted post and that the post be removed from the list maintained by the Authority under Section 2(2) of that Act.
- 11.17 Upon the application of any person or otherwise, consider whether a post should be included in the list maintained by the Authority under Section 2(2) of the 1989 Act, and may direct the Authority to include a post in that list.
- 11.18 On referral from the Monitoring Officer, to decide whether to take action against a member for breach of the Code of Conduct and if so, to decide what action should be taken.

**12. Membership rules:**

- 12.1 An Elected Mayor, the Leader or a member of the Executive may not be Members;
- 12.2 The Chair of the Committee must not be a Member of the Executive;
- 12.3 The appointment of co-opted/independent members can be considered;
- 12.4 The Independent Persons are not members of GARMS and shall be invited to meetings only if there is a Standards item on the agenda.