

INTERNAL AUDIT CHARTER



CONTENTS

1	PURPOSE.....	1
2	SCOPE.....	1
3	POLICY STATEMENT	1
	Introduction	1
	Internal audit purpose	2
	Role	2
	Authority	2
	Professionalism.....	2
	Organisation.....	3
	Independence and objectivity.....	3
	Nature and scope of work	4
	Responsibilities	4
	Reporting and monitoring.....	5
	Quality assurance and improvement program	6
	Evaluation of performance	6
	Relationship with other assurance providers	7
4	RESPONSIBILITIES	7
	Compliance, monitoring and review.....	7
	Reporting.....	7
	Records management.....	7
5	DEFINITIONS	7
6	RELATED LEGISLATION AND DOCUMENTS.....	7
7	FEEDBACK.....	7
8	APPROVAL AND REVIEW DETAILS.....	8

1 PURPOSE

- 1.1 This Charter formally defines the purpose, authority, responsibility, and reporting relationships of the internal audit function at CQUniversity.

2 SCOPE

- 2.1 This Charter applies to all areas and employees of CQUniversity and its controlled entities.

3 POLICY STATEMENT

Introduction

- 3.1 The University Council has established the internal audit function as a key component of the University's governance framework.
- 3.2 This Charter provides the framework and authority for the conduct of the internal audit function in the University and has been approved by the Council on the recommendation of the Audit, Risk and Finance Committee.

Internal audit purpose

- 3.3 Internal auditing is an independent, objective assurance and consulting function designed to add value and improve the University's operations. It helps the University accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of the University's, risk management internal control, and governance processes (The Institute of Internal Auditors, [International Professional Practices Framework](#) (IPPF)).

Role

- 3.4 The mission of internal audit is to enhance and protect organisational value by providing stakeholders with risk-based, objective, and reliable assurance, advice, and insight (IPPF).
- 3.5 Internal audit provides an independent and objective review and advisory service to:
- provide assurance to the Council, and Audit, Risk and Finance Committee, that the University's financial and operational systems and controls, reporting processes and activities, designed to manage the University's risks and achieve the University's objectives, are operating in a compliant, efficient, effective, economic and ethical manner, and
 - assist management in improving the University's business performance.
- 3.6 The internal audit function responsibilities are defined in this Charter, which is approved by Council.
- 3.7 In the performance of its activities, internal audit will play an active role in:
- developing and maintaining a culture of accountability, integrity, adherence to high ethical standards, and consistency with all of the defined University's values
 - facilitating the integration of controls and risk management into day-to-day business activities and processes, and
 - promoting a culture of cost-consciousness and self-assessment.

Authority

- 3.8 Internal audit work is undertaken under the authority and oversight of the Audit, Risk and Finance Committee.
- 3.9 The internal audit function, with strict accountability for confidentiality and safeguarding records and information, is authorised full, free, and unrestricted access to any and all functions, premises, assets, personnel, records and other documentation and information necessary to enable Internal Audit to fulfil its responsibilities in line with its approved Internal Audit Plan and relevant to the performance of engagements. The internal audit function will also have free and unrestricted access to Council, and the Audit, Risk and Finance Committee, with appropriate notice.
- 3.10 Management and employees are obligated to contribute to internal audit work professionally and constructively, and the implementation of management action plans in response to improvement opportunities and recommendations contained in internal audit reports. All employees are expected to assist and facilitate the internal audit activity in fulfilling its roles and responsibilities.
- 3.11 Management may request internal audit services in response to emerging business issues or risks. Internal audit will attempt to satisfy these requests, subject to the assessed level of risk, availability of resources, consideration of other internal audit priorities, and endorsement of the Manager Internal Audit. Any higher level of assessed risk will be referred to the Chair, Audit, Risk and Finance Committee for endorsement.

Professionalism

- 3.12 The internal audit function will adhere to the mandatory guidance provided in the IPPF, published by the Institute of Internal Auditors: the Core Principles, Definition of Internal Auditing, Code of Ethics, and International Standards.

- 3.13 Conformance with the mandatory guidance, constitutes fundamental requirements, for the professional practice of internal auditing and for the principles for which to evaluate the effectiveness of the internal audit function's performance. The Manager Internal Audit is responsible for maintaining an up-to-date risk-based internal audit methodology that aligns with good practices promoted by the internal audit profession.
- 3.14 The internal audit function will adhere to IPPF strongly recommended guidance: Position Papers, Implementation Guides/Practice Advisories and Supplemental Guidance as applicable to the individual review being undertaken.
- 3.15 In addition, the internal audit function will adhere to the University's policy documents, [Code of Conduct](#), defined values, and the University's Internal Audit Procedures Manual.

Organisation

- 3.16 All internal audit employees report to the Manager Internal Audit, who reports administratively to the Vice-Chancellor and President (through the Director Office of the Vice-Chancellor and President), and functionally to the Audit, Risk and Finance Committee.
- 3.17 The Audit, Risk and Finance Committee will:
- review, and recommend to Council for approval the Internal Audit Charter
 - review, and recommend to Council for approval the internal audit strategy annually
 - review, and recommend to Council for approval the risk-based internal audit plan, including any significant changes to the plan
 - receive communications from the Manager Internal Audit on the results of audits, internal audit function's performance and other important matters
 - have appropriate input regarding the appointment or removal of the Manager Internal Audit, and
 - make appropriate inquiries of management and the Manager Internal Audit to determine whether there is inappropriate scope or resource limitations that impede the ability of the internal audit activity to execute its responsibilities.
- 3.18 The Manager Internal Audit will communicate and interact directly with the Audit, Risk and Finance Committee, including at least annually, executive sessions without management present, and between Committee meetings as appropriate.
- 3.19 Administrative reporting includes:
- administration of internal audit function's policy documents
 - budgeting and management accounting
 - provision of corporate services including office accommodation, computers, and equipment
 - human resource administration, and
 - internal communications and information flows.
- 3.20 The Manager Internal Audit will meet regularly with the Vice-Chancellor and President, with meetings scheduled at a minimum, bi-annually. Right of direct access by the Manager Internal Audit to the Vice-Chancellor and President is preserved, with appropriate notice, for any time the Manager Internal Audit believes it to be warranted.

Independence and objectivity

- 3.21 Internal audit is required to be independent and objective, with independence essential to its effectiveness.
- 3.22 The internal audit function will remain free from interference by any element within the University, including matters of audit selection, scope, procedures, frequency, timing, or report content to permit maintenance of a necessary independent and objective mental attitude. The strength of Internal Audit comes from it being independent of management.

- 3.23 Internal auditors will have no direct operational responsibility or authority over any of the operations reviewed. Internal audit has no responsibility for the management of business activities, or for development or implementation of operational systems or procedures. They will not implement internal controls, develop procedures, install systems, prepare records, or engage in any other activity that would impair judgement.
- 3.24 Internal auditors will exhibit the highest level of professional objectivity in gathering, evaluating, and communicating information about the activity or process being examined. Internal auditors will make a balanced assessment of all the relevant circumstances and not be unduly influenced by their own interests or by others in forming judgements and conclusions.
- 3.25 The Manager Internal Audit will confirm to the Audit, Risk and Finance Committee, at least annually, the organisational independence of the internal audit function. Internal auditors must have an impartial, unbiased attitude and avoid any conflict of interest, actual or perceived.
- 3.26 Internal auditors must declare any potential, actual or perceived conflicts of interests. Any declared conflicts will be managed in accordance with [Conflicts of Interest Policy and Procedure](#), within the context of the internal audit function and taken into account in the allocation of resources to applicable audits to avoid any conflicts, in accordance with the guidance provided by the Institute of Internal Auditors.

Nature and scope of work

- 3.27 The scope of internal audit work embraces the wider concept of corporate governance and risk, recognising that controls exist within the University to manage risks and promote effective and efficient governance and performance, to achieve the University's stated strategy and objectives.
- 3.28 Internal Audit services may include:
- assurance services – objective examination of evidence for the purpose of providing an independent assessment of risk management, control, and governance processes, or
 - advisory services – advisory and related client activities, the nature and scope of which are agreed upon with the client and which are intended to add value and improve business operations.
- 3.29 The types of internal audit work at the University are:
- internal audit services with a compliance, financial or performance improvement focus
 - management initiated reviews where business areas within the University may request internal audit services, usually in response to an issue or an emerging risk, or
 - multi-stage audit projects at key milestones for University projects.
- 3.30 The scope and coverage of internal audit work is not limited in any way, and may cover any University activity, operations, and programs, including controlled and non-controlled organisations.

Responsibilities

- 3.31 Internal Audit will support the University by:
- aligning internal audit strategy and planning with the University's strategic plan, objectives, and risks
 - assessing the established controls/risk treatments that contribute to the achievement of the University's strategic and operational objectives
 - evaluating and facilitating continuous improvement recommendations on the University's governance processes
 - monitoring and evaluating the effectiveness of risk management processes, and where appropriate, contribute to improvement of the risk management framework
 - assisting the organisation in maintaining effective controls by evaluating their effectiveness and efficiency and by promoting continuous improvement; and sharing these insights with other areas within the University
 - evaluating the reliability and integrity of information and systems, established to ensure compliance with those policies, plans, procedures, contracts, laws, and regulations which could have a significant impact on the University.

- evaluating operations, programs, or allocation of resources to assess whether are effective, efficient, economic, ethical, and properly authorised and to ascertain whether results are consistent with established objectives and goals, and whether the operations or programs are undertaken as planned
- reviewing the means of safeguarding assets and, as appropriate, verify the existence of such assets
- promoting a continuous improvement culture, consider best practice guidance and share insight within the University
- evaluating and assessing significant merge/consolidation functions; and new or changing services, processes, operations, and control processes; coincident with their development, implementation, and/or expansion, and
- assisting in the investigation and reporting of significant risk exposures and control issues, including fraud and corruption risks, governance issues, or other significant matters and notify management and the Audit, Risk and Finance Committee of the results.

3.32 The responsibilities of the internal audit function include, but not limited to:

- identifying and maintaining the University's audit universe, in response to changes in the University's business risks, operations, programs, systems, and controls, including input from senior management and the Audit, Risk and Finance Committee
- developing a flexible audit plan using appropriate risk-based methodology, considering any risks or control concerns identified by management, and submit that plan to Council, through the Audit, Risk and Finance Committee, for review and approval
- considering the scope of work of other assurance providers, internal and external, as appropriate, for the purpose of providing optimal audit coverage to the University efficiently and effectively
- implementing the audit plan, as approved, including where appropriate, any special evaluations, tasks or projects requested by management or the Audit, Risk and Finance Committee
- performing consulting services, beyond the internal audit function's assurance services, to assist management in meeting its objectives. Examples may include facilitation, process design, training, and advisory services. Any consulting services undertaken must be reported to the Audit, Risk and Finance Committee at its next meeting
- keeping the Audit, Risk and Finance Committee informed of emerging trends and successful practice in internal auditing
- maintaining professional audit employees with sufficient knowledge, skills, experience, and professional certifications to meet the requirements of this Charter, and
- annually reviewing this Charter, modifying as appropriate, and submitting to the Audit, Risk and Finance Committee for review and recommendation to Council.

Reporting and monitoring

- 3.33 A written report will be issued by the Manager Internal Audit at the conclusion of each internal audit engagement containing recommendations for improvement and will be distributed to the appropriate parties. A copy of each internal audit report will be provided to the Audit, Risk and Finance Committee as part of the agenda at the next regularly scheduled meeting.
- 3.34 The internal audit report will include management's responses and/or endorsed action taken or to be taken in regard to specific findings and recommendations. Management's responses should include a responsible person and a timetable for anticipated completion of action to be taken.
- 3.35 If management's responses to any finding is not considered adequate, internal audit will consult with management of the function being reviewed and attempt to reach a mutually agreeable resolution. If an agreement is not reached, the internal audit function will pursue the matter through channels to appropriate levels of management and, if required, the Audit, Risk and Finance Committee for resolution.
- 3.36 Internal audit will establish and maintain a system to monitor progress by management to implement internal audit and external audit recommendations, together with recommendations contained in reports by other relevant external and regulatory bodies.

- 3.37 Management will provide updates on a quarterly basis on progress to implement audit recommendation action plans.
- 3.38 Internal audit will follow-up and obtain evidence that audit recommendation action plans are effectively implemented by management before recommending closure to the Audit, Risk and Finance Committee.
- 3.39 The Manager Internal Audit, will liaise closely with the Chair of the Audit, Risk and Finance Committee and issue periodic reports to the Audit, Risk and Finance Committee to provide an update on:
- a summary of results of audit activities
 - implementation status of agreed internal audit recommendations, agreed external audit, and other relevant external and regulatory body recommendations, and
 - the internal audit function's performance, including key performance indicators, progress to plan; including any explanation of any significant deviations.

Quality assurance and improvement program

- 3.40 Internal audit will maintain a Quality Assurance and Improvement Program that covers all aspects of the internal audit function.
- 3.41 The program will include a regular evaluation of the internal audit function's conformance with the Definition of Internal Auditing and the Standards, and an evaluation of whether internal auditors apply and demonstrate the Core Principles and Code of Ethics. An annual statement on compliance with mandatory guidance contained in the IPPF will be provided to the Audit, Risk and Finance Committee.
- 3.42 The program also assesses the efficiency and effectiveness of the internal audit function, identifies opportunities for improvement and provides an opportunity to undertake benchmarking against recognised best practice.
- 3.43 The Quality Assurance and Improvement Program must include the following:
- internal assessments
 - ongoing monitoring of the performance of the internal audit function, and
 - periodic reviews performed through self-assessment or by other persons within the University with sufficient knowledge of internal audit practices, and
 - external assessments conducted at least once every five years by a qualified, independent reviewer or review team from outside the University.
- 3.44 Internal audit is encouraged to develop and maintain mutually beneficial relations with counterparts in other organisations, thought leaders, relevant professional bodies, and networks with a view to exchange information on:
- internal audit good practices, and
 - emerging corporate governance, risk management and assurance issues.

Evaluation of performance

- 3.45 Internal audit performance will be evaluated, and the results reported to the Audit, Risk and Finance Committee. This will include:
- results of the Quality Assurance and Improvement Program, and
 - feedback from management of areas where internal audit services have been performed. Feedback will be provided by questionnaire.
- 3.46 Feedback on internal audit performance will be sought annually from members of the Audit, Risk and Finance Committee.

Relationship with other assurance providers

- 3.47 The University adopts the three lines of defence integrated assurance model to allocate responsibilities for risk management and control, recognising that:
- 1st line of defence – Management has ownership, responsibility, and accountability for assessing, controlling, and mitigating risks.
 - 2nd line of defence – Risk management facilitates and monitors implementation of effective risk management practices and assists risk owners in reporting adequate risk-related information up and down the organisation.
 - 3rd line of defence – Internal audit will, through a risk-based approach, provide assurance to the Audit Committee and management, on how effectively the University assesses and manages its risks, including the manner in which the first and second lines of defence operate. Internal audit does not absolve management and staff from any of their risk management and control responsibilities.
- 3.48 Internal Audit will establish and maintain an open relationship with the external auditor and other internal and external assurance providers. Internal Audit will plan its activities to ensure adequacy of overall assurance coverage, and to minimise duplication of assurance effort across the University.

4 RESPONSIBILITIES

Compliance, monitoring and review

- 4.1 The Director Office of the Vice-Chancellor and President and the Manager Internal Audit are responsible for guiding the implementation of this Charter.
- 4.2 The Audit, Risk and Finance Committee is responsible for monitoring compliance with this Charter.

Reporting

- 4.3 No additional reporting is required.

Records management

- 4.4 Employees must manage records in accordance with the [Records Management Policy and Procedure](#). This includes retaining these records in a recognised University recordkeeping information system.
- 4.5 University records must be retained for the minimum periods specified in the relevant [Retention and Disposal Schedule](#). Before disposing of any records, approval must be sought from the Records and Privacy Team (email records@cqu.edu.au).

5 DEFINITIONS

- 5.1 Terms not defined in this document may be in the University [glossary](#).

6 RELATED LEGISLATION AND DOCUMENTS

[Financial Accountability Act 2009](#) (Qld)

[Financial and Performance Management Standard 2019](#) (Qld)

[International Professional Practices Framework](#) (IPPF) (Institute of Internal Auditors)

7 FEEDBACK

- 7.1 Feedback about this document can be emailed to policy@cqu.edu.au.

8 APPROVAL AND REVIEW DETAILS

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