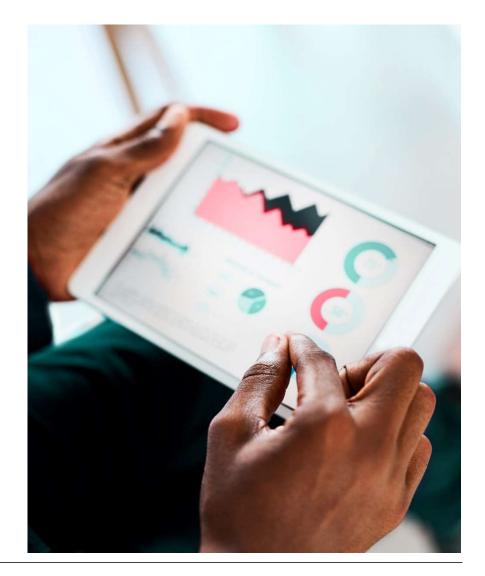


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## **SUMMARY**

2018 - 2022	Total H M		L		Com	Complete		In progress		Overdue		Not Due	
	Recs				up	н	M	н	М	н	М	Н	М
2021/22													
Risk management	3	-	3	-	3	-	-	-	3	-	-	-	-
Main financial systems	5	-	2	3	2	-	1	-	1	-	-	-	-
Capital projects	1	-	1	-	1	-	-	-	-	-	-	-	1
Partnerships	2	-	2	-	2	-	-	-	1	-	1	-	-
IT data breaches	4	-	4	-	4	-	3	-	-	-	1	-	-
Building control	2	-	2	-	2	-	1	-	-	-	1	-	-
Planning	3	-	3	-	3	-	3	-	-	-	-	-	-
Homelessness	4	-	3	1	3	-	3	-	-	-	-	-	-
Section 106 agreements	2	2	-	-	2	-	-	2	-	-	-	-	-
2020/21													
Procurement and contract management	6	-	4	2	4	-	4	-	-	-	-	-	-
Disaster recovery and business continuity	1	-	1	-	1	-	-	-	-	-	1	-	-
Cyber security	4	-	3	1	3	-	3	-	-	-	-	-	-
Environment - Street cleaning, fly tipping and enforcement	6	2	4	-	6	-	-	-	-	-	-	2*	4*
Licensing	7	2	4	1	6	-	-	-	-	-	-	2*	4*

2018 - 2022	Total			L	To follow	Com	plete	ln pr	ogress	Overdue		Not Due	
	Recs				up	Н	M	Н	М	Н	М	Н	М
2019/20													
Trade waste	2	-	1	1	1	-	1	-	-	-	-	-	-
2018/19													
PCI/DSS Compliance	5	1	4	-	5	1	4	-	-	-	-	-	-
Total	57	7	41	9	48	1	23	2	5	-	4	4	9

<sup>\*</sup> These recommendations are due but are marked here as not due as they are being followed up separately in a new audit of the service in 2022/23

#### 4

### **SUMMARY**

Of the 196 high and medium priority recommendations raised over the period 2018 to 2022, 172 have been closed, seven are in progress, four are overdue and 13 are not yet due or not included in the follow up. We have confirmed with reference to evidence and through discussions that six recommendations have been completed/closed since our last follow up report.

Six high priority recommendations are outstanding, two of which are being monitored by the Council (relating to \$106 agreements) and four of which are not included in the follow up as they are being reaudited in 2022/23.

#### 2021/22

Of the 24 high or medium priority recommendations raised in 2021/22, seven are in progress (including the two high priority recommendations relating to S106 agreements), three are overdue and one is not yet due.

#### 2020/21

Of the 49 high or medium priority recommendations raised in 2020/21, one is overdue and 12 are not included in the follow up. The 12 not included in the follow up include six Licensing recommendations (two of which are high priority) and six Steet cleaning, fly-tipping and enforcement recommendations (two of which are high priority) which are being followed up by new audits of the services (including sample testing) as part of the 2022/23 internal audit plan.

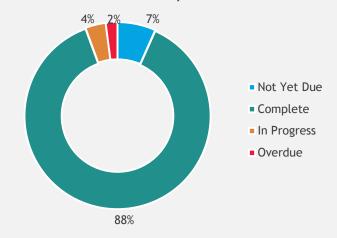
#### 2017/18 TO 2019/20

Of the 123 high or medium priority recommendations raised in 2017/18 to 2019/20, none are outstanding.

#### REQUIRED AUDIT & SCRUTINY COMMITTEE ACTION:

We ask the Audit and Scrutiny Committee to note the progress against the recommendations.

#### 2018 - 2022 Cumulative implementation





### RECOMMENDATIONS: COMPLETE SINCE LAST FOLLOW UP REPORT

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2018/19 - PCI/DSS Compliance	<ul> <li>18/19 PCI/DSS rec 5:</li> <li>A policy should be developed, which sets out how the Council will manage PCI DSS compliance activities and the policy should be reviewed on a regular basis. The policy should include but not be limited to:</li> <li>Assignment of roles and responsibilities for ensuring that the Council is PCI DSS</li> </ul>	Medium	Tim Huggins (ICT Manager)	September 2019 June 2020	Management update: The policy has been developed.
				September 2020	Storage of data in within the information security policies and management of data is part of the GDPR training.  A new learning portal is in place and mandatory PCI training for
				October 2020	specific staff dealing with card payment processing is being rolled out in January 2023.
	<ul> <li>Procedures for staff that are responsible for taking card payments</li> </ul>			December 2020 March 2021	Internal audit comment:  Internal Audit was previously satisfied from review of the policy dated November 2019 that these elements have been included.
	<ul> <li>The Council's security strategy in relation to the storage, processing and transmission of credit card data</li> </ul>			August 2021	Recommendation now closed following receipt of evidence of the new learning portal.
	<ul> <li>A set of instructions for detecting, responding to and limiting the effects of an information security event.</li> </ul>			<del>October</del> <del>2021</del>	
				<del>June 2022</del>	
	The Council should develop and disseminate suitable procedure notes for staff, to ensure that working practices are compliant.  Appropriate training should be provided on PCI			<del>September</del> <del>2022</del>	
				December 2022	
	DSS requirements to all members of staff dealing with card payments.			Closed	

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2019/20 - Trade Waste	19/20 TW rec 1:	Medium	Mike Dun	March 2020	Management update:
waste	a) Actively search and identify possible		(Trade Waste Officer)	March 2021	This action is on hold as we are still focussing on ensuring we are
	opportunities/events available to promote the trade waste service, ensuring that the market audience is understood prior to			<del>September</del> <del>2022</del>	meeting the needs of our current clientele in terms of the collection of residual waste and the relatively new recycling collection service.
	attending events to ensure they are aligned with the service's target market.			<del>June 2023</del>	
	anglied with the service's target market.			Closed	
	Liaise with the business rates team to ensure that trade waste leaflets with fee information are distributed as part of the annual business rates information packs.			October 2019	A leaflet was drawn up that promotes the services of the Business Waste Team and was delivered in March along with the NDR
				February 2020	demand to all businesses in Brentwood.
				Closed	
	c) Liaise with the food safety team to identify new businesses that may require			October 2019	Staff issues and the adverse impact of Corona Virus making this activity difficult at the moment. All efforts going on existing
	trade waste services.			February 2020	client base to protect it.
				Closed	
	d) Undertake cold-calling of local businesses			Ongoing	As per part a above.
	in the borough to attract new customers.			March 2021	
				March 2022	Internal audit comment:
				September	Parts b and c were previously closed.
				<del>2022</del> June 2023	Parts (a) and (d) now closed by Internal Audit following discussion with the Director of Environment in which it was agreed that
				Closed	these actions are not currently priorities for the service.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2020/21- Cyber Security	<ul> <li>a) The Council should establish a cyber security awareness programme for all staff and implement the approach that is planned to raise awareness for Members and senior management.</li> <li>b) Training completion should be monitored and there should be a record of all the training that has been provided and completed.</li> </ul>	Medium	Tim Huggins (ICT Manager)	July 2021 October 2021 April 2022 June 2022 September 2022 February 2023 Closed	Management update:  Joint cyber training is arranged with Rochford District Council for Jan/Feb 23. In addition, the Council's new learning portal provides staff have access to various blogs and knowledge articles regarding the latest scams and phishing attacks.  The learning portal provides full monitoring and reporting functions for courses.  Internal audit comment:  Recommendation closed following receipt of information available on the learning portal.
2021/22 - IT Data Breaches	<ul> <li>a) The Council should develop an IG training programme, which includes basic IG training for everyone, including new starters, annual refresher training and additional training for key staff groups or roles. Furthermore, training completion should be monitored and there should be a record of all the training that has been provided and completed.</li> <li>b) A comprehensive training needs analysis should be completed and approved by IGG. The training needs analysis should then be annually reviewed and updated against the continuously evolving industry regulations and best practices to ascertain if staff have been appropriately trained.</li> </ul>	Medium	Tim Huggins (ICT Manager)	December 2021 June 2022 September 2022 March 2023 Closed	Management update:  The Council already has embedded processes for new starters to carry out information governance training before they start.  A new learning portal is in place and this includes mandatory GDPR training for all staff that is being rolled out from January 2023. Staff members are being notified of the course and given a time scale to complete. Managers will be notified of the changes and will need to provide support in ensuring this is completed.  Internal audit comment:  Recommendation closed following receipt of information available on the learning portal.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021/22 -	21/22 PLN rec 1	Medium	Caroline Corrigan	May 2022	Management update:
Planning	The Council should ensure that it has clear staff guidance for reviewing and assessing planning applications and that it carries out periodic reviews of the guidance (e.g. annually) to ensure that it remains up to date and reflects the latest requirements. An updated Handbook should continue to cover at a minimum:		(Corporate Manager Planning Development Management)	September 2022 December 2022 Closed	An Officer handbook has been produced. This is a live document which will be constantly updated, especially when new officers join the Council as they will be best placed to point out any missing information.  Internal audit comment:  Recommendation closed following receipt of the Officer Handbook.
	• The role of Councillors and Officers				
	Planning advice				
	<ul> <li>Declaration of interests in planning applications</li> </ul>				
	Officer reports to Committee				
	<ul> <li>Committee site visits</li> </ul>				
	<ul> <li>Lobbying</li> </ul>				
	<ul> <li>Public speaking at Committees</li> </ul>				
	<ul> <li>Decisions contrary to Officer recommendation/Development Plan</li> </ul>				
	Regular review of planning decisions				
	• Complaints.				
2021/22 -	21/22 PLN rec 2	Medium	Caroline	May 2022	Management update:
Planning	The Planning team should put in place a Declaration of Interests register to log any conflicts of interest where a Planning Officer		Corrigan (Corporate Manager	September 2022	Guidance on declaring interests has been included in the new Officer Handbook and a log will be kept of declared interests.
	has been assigned a planning application from		Planning Development	<del>December</del> <del>2022</del> Closed	Internal audit comment:
	an applicant they have a connection with.		Management)		Recommendation closed following receipt of the Officer Handbook.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021/22 - Homelessness	<ul> <li>21/22 HLN rec 4:</li> <li>The Council should review the KPIs that it reports to SLT as well as the Environment, Enforcement and Housing Committee in respect of homelessness, rough sleeping and temporary accommodation.</li> <li>Consideration should be given to inclusion of the following KPIs:</li> <li>The number of homelessness cases received as a cumulative total in the year and for the month</li> <li>The number of homelessness cases by case type i.e. prevention, relief, triage and decision</li> <li>The number of open and closed homelessness cases</li> <li>% of cases where the 56 day rule has been met</li> <li>Number of rough sleepers in the borough</li> <li>Number of referrals made via StreetLink.</li> </ul>	Medium	Angela Abbott (Corporate Manager - Housing Needs and Delivery)	January 2022 June 2022 September 2022 December 2022 Closed	Management update:  A suite of proposed KPIs and Service Standards has been prepared, which includes the KPIs recommended by the audit.  A report went to the December 22 Housing Committee for approval to increase the number of KPIs that are reported to future Committees. Further KPIs are reviewed in the Housing Management team meetings.  Internal audit comment:  Recommendation closed following receipt of the Housing Committee report.

### **RECOMMENDATIONS: IN PROGRESS**

These recommendations have been marked as In Progress as they have not been implemented by their original date; a revised date has been provided.

AUDIT	RECOMMENDATIONS MADE	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021-22 - S106 agreements	<ul> <li>S106 rec 1:</li> <li>a) The Council should identify an appropriate function to take central ownership of s106 agreements. This team should then lead on all aspects of s106 arrangements, including negotiating the agreements with developers and monitoring them from planning consent through to delivery.</li> <li>b) The function should ensure that there are sufficient mechanisms in place to liaise with developers, to monitor progress of developments. Progress meetings with the developers should be implemented, taking account of the size of developments and anticipated speed of progress.</li> <li>c) The function should also liaise with Finance to ensure invoices are issued accurately and in a timely manner.</li> <li>d) A central s106 agreement register/tracker should be put in place where all aspects of the s106 agreements can be recorded and monitored, including progress against trigger points and the status of any payments. This tracker should be owned by the responsible function recommended above and should be reported to each of the teams involved in the management of s106 agreements (Planning, Housing, Finance and Legal) on a regular basis (quarterly as a minimum) with each of the teams being required to provide updates as appropriate.</li> </ul>	High	lan Winslet (Strategic Director, Housing and Regeneration)  Steve Summers (Strategic Director) and Julian Higson (Interim Director Housing)	January 2023 February 2023	Management update:  A new structure for strategic housing is at design stage. The new structure includes a new post of Policy and Enabling Officer which will have multifunctional responsibility for Policy, Registered Provider and major application developer relations and related forums. The post will be the single point of contact for Section 106 agreements as they relate to affordable housing and lead/co-ordinator for all commuted sums held. The post holder will be the single organisational liaison point for affordable housing Section 106 with Planning, Finance and Legal. Given the significance identified in the audit, consideration will be given to accelerating the appointment of this post in advance of the wider Housing Department restructure.  A new tracker will be developed and held and co-ordinated within the strategic housing function. This will be reported regularly to the new Housing Committee at an interval agreed with the Chair.  However, the previous Director responsible for these recommendations left the Council before Christmas. The responsibility has been passed to the Council's Strategic Director and will be reviewed with the Interim Director of Housing to ensure this is the right way forward. This will be completed by the end of February 2023.  Internal audit comment:  Recommendation remains open.

AUDIT	RECOMMENDATIONS MADE	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021-22 - S106 agreements	Responsibility for the recording, allocation and monitoring of s106 contributions to the capital programme should be clearly assigned and communicated to a team or individual within the Council, who should own the process for ensuring contributions are utilised on appropriate projects in a timely manner and prior to any contributions becoming repayable to the developers.	High	lan Winslet (Strategic Director, Housing and Regeneration) Steve Summers (Strategic Director) and Julian Higson (Interim Director Housing)	January 2023 February 2023	Management update:  A new 'Section 106 officer panel' will be set up, led by an appropriate functional director, which will be populated by a representative from housing, communities, open space and environment together with finance and legal. The panel will 'own' the section 106 list of contributed sums, identify opportunities for their use and ensure that none are required to be returned. Governance and reporting arrangements for this panel will be agreed in line with the Council's constitution.  The responsibility for this recommendation has been passed to the Council's Strategic Director and will be reviewed with the Interim Director of Housing by the end of February 2023.  Internal audit comment:  Recommendation remains open.
2021/22 - Partnerships	21/22 PART rec 2:  The Senior Leadership Team should ensure that an Annual Performance Assessment is completed by the partnership leads for all partnerships. Reminders should be put in place before the annual deadline to ensure this is completed in a timely manner.	Medium	Kim Anderson (Corporate Manager Communities, Leisure and Health)	<del>July 2022</del> March 2023	Management update:  At the Council's next Extended Leadership Team meeting all Corporate Managers that are the leads for the partnerships on the register will have to complete an annual performance review.  This will be completed in March 2023.  Internal audit comment:  Recommendation remains open.
2021/22 - Main Financial Systems	21/22 MFS rec 1:  When requesting approval of loans, the e-mail request should explicitly set out all the key facts about each loan that demonstrates that it meets the requirements of the Treasury Management Strategy in terms of risks and affordability.	Medium	Alistair Greer (Principal Accountant - Financial reporting)	September 2022 January 2023 April 2023	Management update:  Officers are continuing to develop processes for implementing this proposal. Implementation of this recommendation has been delayed by changes in the management structure of the finance team, and the target implementation date is now April 2023.  Internal audit comment:  Recommendation remains open.

AUDIT	RECOMMENDATIONS MADE	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021/22 - Risk Management	<ul> <li>21/22 RSK rec 1:</li> <li>a) Management should review the content of the previous risk management training provided (in person and online), decide the best format for the training going forward and determine which staff need to receive the training.</li> <li>b) Training completion rates should be monitored closely and reported to senior management on a periodic basis to ensure any low levels of completion are addressed.</li> </ul>	Medium	Sue White, (Risk and Insurance Officer)	December 2022 March 2023	Management update: The e-learning module will be reviewed, together with a review of staff that require training. This action remains in progress. Internal audit comment: Recommendation remains open.
2021/22 - Risk Management	21/22 RSK rec 2: Risk Officers and senior Management should review how risks are recorded in the risk registers to ensure they adequately define the cause, uncertain event (the risk) and consequence of each risk. Where risks recorded by a particular risk owner are identified as inadequately documented then further training should be provided to them.	Medium	Sue White, (Risk and Insurance Officer)	December 2022 March 2023	Management update:  Discussed at ELT meeting on 13th June and details of the risks without sufficient documentation has been sent to Risk Owners. These will then be discussed with relevant risk owners.  This action remains in progress.  Internal audit comment:  Recommendation remains open.
2021/22 - Risk Management	<ul> <li>21/22 RSK rec 2:</li> <li>a) The risk officer and senior management should monitor actions taken against risks and ensure that risk owners clearly document what actions have been taken to support reductions in risk scores.</li> <li>b) Staff should be sufficiently trained to understand how strengthening internal controls can have a direct impact on mitigating risks.</li> </ul>	Medium	Sue White, (Risk and Insurance Officer)	December 2022 March 2023	Management update:  A guide to Risk Controls and Treatments has been sent out to Risk Owners and further training will be provided.  This action remains in progress.  Internal audit comment:  Recommendation remains open.

### **RECOMMENDATIONS: OVERDUE**

These recommendations have been marked as overdue as they have exceeded their original and revised implementation dates by at least once. Therefore, they have now missed at least two revised implementation dates.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021/22 - Building Control	<ul> <li>21/22 BC rec 2:</li> <li>The service should request the Council's ICT department and third-party provider to enable functionality that allow management to download reports from the system which closely monitor progress against ISO and statutory KPIs. There should be reports that show: <ul> <li>Application date and date approved or rejected versus the ISO and statutory completion date requirements</li> <li>All current active applications being worked on</li> <li>All rejected applications within a specified timeframe</li> <li>All approved applications within a specified timeframe.</li> </ul> </li> <li>The Council should also liaise with the system service provider to ensure that the completion deadline dates are precisely calculated on the system.</li> </ul>	Medium	Gary Price- Sampson (Building Control Team Leader)	June 2022 October 2022 December 2022 February 2023	Management update:  A system to advise on decision dates still needs to be developed, however this is not currently a KPI within the LABC ISO system we operate. It will be a most useful tool and will continue to be pursued / developed. This is a 'loop hole' likely to be closed out by the LABC ISO system at some date as the statutory decision dates are the indicator of ultimate failure, rather than the LABC 'self set' KPIs. Information on these ultimate failures is currently collected manually by us.  This action currently remains in progress.  Internal audit comment:  Recommendation remains open.
2021/22 - Partnerships	<ul> <li>21/22 PART rec 1:</li> <li>a) The Council should ensure that the Partnership Checklist is completed in all cases and held centrally. Consideration should be given to retrospectively completing the checklist for the Community Safety Partnership.</li> </ul>	Medium	Kim Anderson (Corporate Manager Communities, Leisure and Health)	September 2022 December 2022 February 2023	Previous management update:  A Teams site has been created and documents have been uploaded, which the Corporate Leadership Team and the Extended Leadership Team can access. The Corporate Manager that is the lead for the Community Safety Partnership has retrospectively completed the checklist.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
	b) The Partnerships Register should clearly indicate the risk level for all partnerships listed and the gaps in the register should be completed retrospectively.				The Partnership Register is currently being updated to provide the risk level for each of the partnerships. This is due for completion by end of February 2023.
	<ul> <li>The Council's Partnership Register should include a hyperlink to the completed Partnership Checklist.</li> </ul>				The Partnership Register is currently being updated to include a hyperlink to the completed Partnership Checklist. This is due for completion by end of February 2023. The Partnership lead is working with IT to create the content and links for the webpage.
					Internal audit comment:
					Recommendation remains open until full completion can be evidenced. Moved from 'In progress' to 'Overdue'.
2020/21 -	20/21 DRBC rec 1:	Medium	Sue White, (Risk and Insurance Officer)	October 2021 June 2022	Management update:
Disaster Recovery and Business Continuity	Management should perform a training needs analysis to identify and assess the level and type of training required by all members of staff with regards to business continuity and disaster recovery and should develop a mandatory training programme that is based upon these requirements. Training delivery methods could include, but not be limited to, the exercise types suggested in Appendix I in our report. Attendance should be recorded and monitored and training records should be maintained for audit purposes.				The training was provided in May 2022.
					Officers are considering a One Team approach to emergency
				September 2022	planning and business continuity with Rochford District Council and liaison between the two councils has commenced regarding
				December 2022 September 2023	plans to start developing the new joint Business Continuity Plan. A new format for the plan has been developed which is similar to that which both Councils currently use but incorporates learning
					from the pandemic.  Due to these changes, there has been no testing of BC Plans to
					date, although the Council has considered how each Council would respond should there be any power outages.
	Furthermore, Management should conduct a formally documented test of its business continuity and disaster recovery arrangements and should put arrangements in place to test them on a routine basis or following a significant change to the Council's operations. The results of the tests should be reported to Senior Management and any issues identified should be resolved in a timely manner.				The Council is registered with Gov.uk Notify and IT has successfully used this method of communication on a number of occasions to inform staff when there is an IT issue.
					The Council has considered how each Council would respond should there be any power outages.
					Internal audit comment:
					First part of the recommendation previously closed by Internal audit. However, second part of recommendation regarding a test of business continuity arrangements remains open.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2021/22 - IT Data Breaches	a) Management should review and update the Council's Data Protection policy and Data Breach policy to ensure that it remains in compliance with the UK GDPR requirements and they are relevant to the Council's needs and in line with the Council's strategic objectives. b) The Data Breach policy should include detailed procedures for reporting a data breach. This should include but not be limited to:  Defining roles and responsibilities Description of type of personal data breach Steps taken in case of a breach Risk assessments and escalations Containment and recovery Contact details of the DPO, or other point of contact Measures taken to evaluate and mitigate any possible breaches Breach notifications to the ICO Training and awareness Monitoring and reporting compliance c) The revised policies should be approved and communicated to members of staff and arrangements should be put in place for reviewing the policies on an annual basis.	Medium	Tim Huggins (ICT Manager)	January 2022 June 2022 September 2022 December 2023 February 2023	Brentwood Council has gone into partnership with Evalian to support the Council's statutory requirements for Data Protection. As part of this a full gap analysis will be conducted for Data Protection including but not limited to Policies, Processes for Data Protection and Data Breaches. Following this a formal remediation action plan will be developed and actions implemented. This work will support the newly formed Information Governance (IG) Group in their role around information Governance, and the contract will be monitored by the Corporate Manager - IT & Service Improvement.  The current Data Breach Policy is available. There is outstanding work to review and update. Due to a large number of subject access requests (SARs), the resources that were arranged for this work have been needed to carry out statutory obligations around the SARs. The Council is looking at how this work can be funded.  a) Reviewing of Information Governance policies is part of the role for the IG group and therefore this action will be coordinated by the group working with appropriate officers and partners.  b) In addition to above - the group will review the recommendations as part of its action plan. Once the suggestions have been reviewed the agreed ones will be included.  c) Agreed this is normal practice and will be published in document library and formal communication will be shared with all staff, and also including other IG activities such as training and awareness. Regular reviewing of IG policies is part of the roles and responsibilities of the newly formed IG group and will be undertaken.  This remains outstanding and we are working with Evalian to provide resource and project management to carry out the Gap Analysis.  Internal audit comment:  Recommendation remains open until completion can be fully evidenced.

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