



**INTERNAL AUDIT ANNUAL PLAN 2023-24 &
STRATEGIC PLAN 2023-26**

MALDON DISTRICT COUNCIL

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CONTENTS

	Page
Audit Risk Assessment	87
Mapping your Strategic Risks	89
Mapping Your CRR to the Strategic Plan	91
Operational Plan 2023/24	93
Strategic Plan 2023 - 2026	97
Appendix I - IA Charter	101

AUDIT RISK ASSESSMENT

Background

Our risk-based approach to Internal Audit uses the Council's own risk management process and risk register as a starting point for audit planning as this represents the client's own assessment of the risks to it achieving its strategic objectives. We obtain input from all Directors and key staff within the Council order to bring together a full plan which will be presented at the February Performance, Governance and Audit (PGA) Committee. Additionally, we will use our own sector expertise to identify potential risks.

The extent to which we can rely on management's own perception of risk largely depends on the maturity and effectiveness of the Council's own risk management arrangements. In estimating the amount of audit resource required to address the most significant risks, we have also sought to confirm that senior management's own assessment of risk accurately reflects the Council's current risk profile.

Planned approach to internal audit 2023/24

The indicative Internal Audit programme for 2023/24 is shown from page 8, with an indicative strategic plan for 2023 - 2026 shown from page 12. We will keep the programme under continuous review during the year and will introduce to the plan any significant areas of risk identified by management during that period.

The plan is set within the context of a multi-year approach to internal audit planning, such that all areas of key risks would be looked at over a three-year audit cycle. In setting the number of days in the plan we have assumed that the control environment within the Council's will improve as we work with you to address the issues you have.

Individual audits

When we scope each review, we will reconsider our estimate for the number of days needed to achieve the objectives established for the work and to complete it to a satisfactory standard in light of the control environment identified within the Council. Where revisions are required, we will obtain approval prior to commencing fieldwork.

In determining the timing of our individual audits, we will seek to agree a date which is convenient to the Council, and which ensures availability of key management and staff.

Variations to the Plan

We review the three-year strategic plan each year to ensure we remain aware of your ongoing risks and opportunities. Over the coming pages we have mapped your key risks along with the audit work we are undertaking, demonstrating we are focussing on your most important issues.

As such our strategic audit programme follows the risks identified during our planning processes and confirmed via discussions with the Executive Directors.

OUR NEXT GEN INTERNAL AUDIT APPROACH

Our new and innovative Next Gen approach to internal audit ensures you maximise the potential added value from BDO as your internal audit provider and the expertise we bring from our dedicated Public Sector Internal Audit team and wider BDO specialist teams.

The Next Gen approach has allowed us to move away from the traditional approach of compliance auditing, transitioning in to delivering a healthy mix of assurance that is forward looking, flexible and responsive and undertaken in partnership with yourselves. The key components to this approach are outlined below and underpin our proposed plan coverage:

Core assurance

Reviews of fundamental finance and operational systems to provide assurance that core controls and procedures are operating as intended.

Soft controls

Reviews seek to understand the true purpose behind control deficiencies and provide a route map to enhance their effectiveness.

Future focused assurance

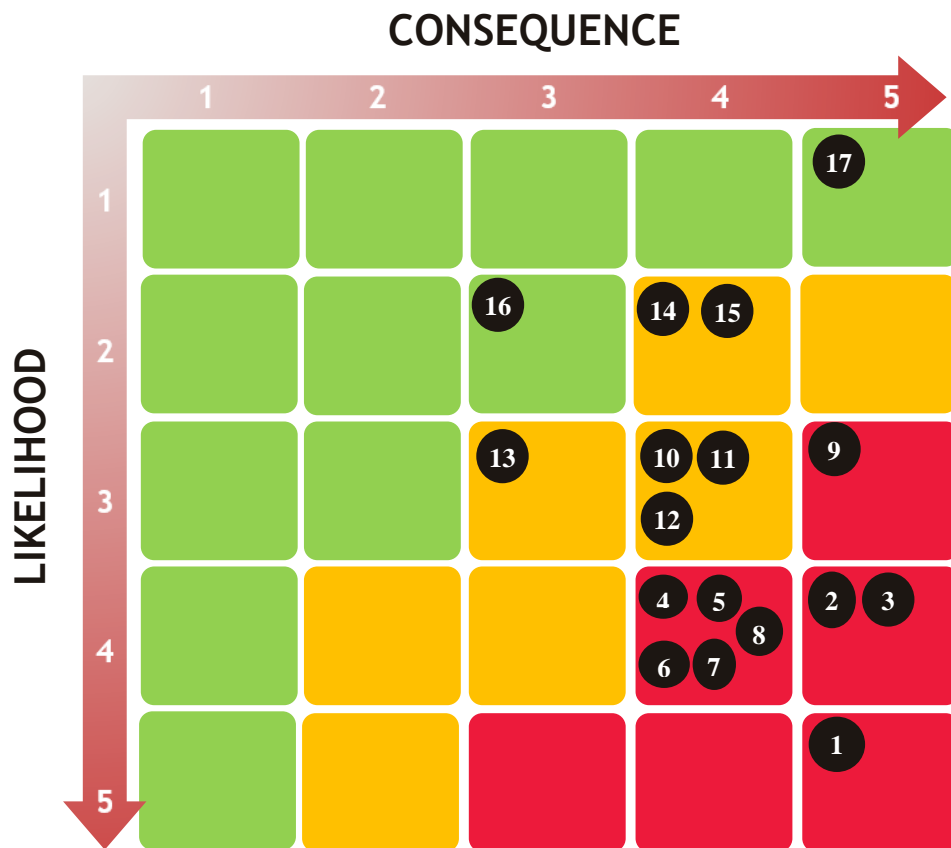
Rather than wait for implementation and then comment on identified weaknesses, we will work with you in an upfront / real time way.

Flexible audit resource

Undertake proactive work across the Council, perhaps in preparation for regulatory reviews or change management programmes.



MAPPING YOUR STRATEGIC RISKS



Ref	Strategic Risks from your CRR	Score
1	R7: Failure to maintain a 5-year supply of housing land	25
2	R8: Failure to meet the affordable housing need	20
3	R15: Failure to plan and deliver balanced budgets over the medium term	20
4	R5: Failure to deliver the required infrastructure to support development arising from the LDP	16
5	R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service (ie, planners)	16
6	R29: Failure to deliver services as a result of Covid-19	16
7	R31: Resources and operating staffing structure is not sufficient for resilience	16
8	R33: Lack of Temporary Accommodation & Social Housing to cope with demand	16
9	R9: Failure to have a co-ordinated approach to supporting inward investment and maximising business rates growth	15
10	R4: Failure to influence Community Safety Partners to address the key areas of public concern (including rural crime) and the negative impact of crime	12
11	R10: Failure to develop jobs to support the growing population	12
12	R11: Failure to protect personal or commercially sensitive data	12
13	R32: Failure to manage the operational impact of the cost-of-living crisis	9

14	R2: Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population	8
15	R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population	8
16	R13: Failure to manage impact of organisational change	6
17	R1: Failure to safeguard children and vulnerable adults	5

MAPPING YOUR CRR TO THE STRATEGIC PLAN

Ref	Strategic Risks from your CRR	2023/24	2023 - 2026
1	R7: Failure to maintain a 5-year supply of housing land		Local Development Plan
2	R8: Failure to meet the affordable housing need		Affordable Housing and Housing Needs
3	R15: Failure to plan and deliver balanced budgets over the medium term	Main Financial Systems Housing Benefits	Main Financial Systems Capital and Commercial Project Management
4	R5: Failure to deliver the required infrastructure to support development arising from the LDP	S106	Local Development Plan
5	R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service ie., planners)	Workforce Management	Recruitment and Retention
6	R29: Failure to deliver services as a result of Covid-19		Business Continuity and Disaster Recovery
7	R31: Resources and operating staffing structure is not sufficient for resilience	Sickness and Absence Management EDI	Recruitment and Retention
8	R33: Lack of Temporary Accommodation & Social Housing to cope with demand	Homelessness and Temporary Accommodation	Affordable Housing and Housing Needs
9	R9: Failure to have a co-ordinated approach to supporting inward investment and maximising business rates growth		Capital and Commercial Project Management
10	R4: Failure to influence Community Safety Partners to address the key areas of public concern (including rural crime) and the negative impact of crime		
11	R10: Failure to develop jobs to support the growing population		

12	R11: Failure to protect personal or commercially sensitive data		Wireless Network Security GDPR
13	R32: Failure to manage the operational impact of the cost-of-living crisis		
14	R2: Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population		Health and wellbeing
15	R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population		Affordable Housing and Housing Needs
16	R13: Failure to manage impact of organisational change		Business Continuity and Disaster Recovery
17	R1: Failure to safeguard children and vulnerable adults		Safeguarding

We note not all risks have reviews against them. The Council have a large volume of identified risks and our audit plan is constrained. We will monitor these risks and flexibly adapt our audit plan as appropriate and if required to cover these risks. We also note managements own actions seek to mitigate these risks.

INTERNAL AUDIT OPERATIONAL PLAN 2023/24

Area	Days	Timing	Description of the Review	Reason for Inclusion
CORE				
Main Financial Systems	20	Q4	Detailed review to include GL controls, system interfaces, journals, as well as cyclical audits of debtors, creditors, payroll, budgetary control, treasury management, council tax and NNDR.	This is a mandatory element of the internal audit programme and forms a key component of the Head of Internal Audit opinion. We undertake a rotational set of reviews covering the Council's key financial systems.
Equality, Diversity, and Inclusion	20	Q2	Review to assess how the Council has ensured there is a commitment to EDI across the organisation, including tone from the top, governance structures, strategy, and use of data (including both workforce and service design considerations)	Ever increasing area of focus and attention with significant reputational risk.
Sickness and Absence Management	20	Q4	To review the sickness absence management process and assess whether the Council have adequate controls and triggers in place to monitor and manage sickness absence effectively. We will also assess measures undertaken by the Council to enable staff to return to work quickly.	Last review undertaken in 2018 and key risks on the CRR related to resourcing.
Fraud	20	Q2	This review will assess the Council's fraud arrangements to ensure robust controls and reporting arrangements are in place	National risk to all organisations due to the increasing number of frauds carried out

Workforce Management	15	Q3	Review of the internal processes for HR. This could include areas such as workforce planning, appraisals and training and assess if the People and Workforce Development Strategy has been implemented effectively. We will work with the Council at the time of the review to identify the area that would be of most benefit to them.	R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service ie., planners)to deliver services as a result of Covid-19
Total	95			

Area	Days	Timing	Description of the Review	Reason for Inclusion
OPERATIONAL				
Homelessness and Temporary Accommodation	15	Q3	This audit will review how the Council manages its homelessness and temporary accommodation responsibilities and how effective these arrangements are	<ul style="list-style-type: none"> Homelessness Reduction Bill places new responsibilities on Councils to support individuals R33: Lack of Temporary Accommodation & Social Housing to cope with demand
Climate Change and Sustainability	20	Q3	Review of all Council policies and overall strategies to set, approve and achieve environmental aims as well as steps to identify and reduce the area's carbon footprint and activities to provide a safe and clean environment.	<ul style="list-style-type: none"> Increased risk following the COP26 and the Environment Bill receiving Royal Ascent in November 2021 Specific requirements for local authorities in relation to street tree felling and tackling air quality
Licensing	15	Q1	Review of processes in place to ensure there are sufficient controls	Specific investigations completed at other Councils stemming from a lack of robust controls around licensing, carrying significant reputational risk.

			over the management of issuing and maintaining licences and whether there are appropriate controls in place to ensure effective recovery of fee income	
Management of s106 Funds	15	Q4	The purpose of the audit is to review and assess the effectiveness of the management of Section 106 funds. This includes the collection against the legal agreements and whether the split approach to holding S106 funds awaiting expenditure is robust enough for transparency of commitment of commuted sums.	<ul style="list-style-type: none"> • National risk for all local authorities given the importance of housing and commercial development • Large reputational impact where Councils do not have sound arrangements to meet Planning Inspectorate and internal procedure and Member/public expectations • Often a tension area between management and Members in authorities which can have a wider impact on relationships
HMRC Employment Status	10	Q1	The purpose of the review will be to assess if the designated employment status of individuals given by the Council, and the evidence behind that designation, is appropriate	The recent request by HMRC's Employment Status & Intermediaries ("ESI") team requires all Local Authorities to assess the employment status of individuals working for the Council
Housing Benefits	15	Q2	Assessment of benefit cases against evidence retained on systems to evaluate whether cases are legitimate and sufficient evidence was received and protocols followed as well and whether reporting of information in this area is appropriate.	Universal credit has been deferred by Government however still uncertainty over the programme and what this means
Total	90			

Area	Days	Description of the Review
Planning, Reporting, and Follow-up		
Follow Up Work	10	Assessment and reporting of recommendations raised.
Audit Management	20	Creation of audit plan, meeting with Executive Directors, PGA.
Contingency	5	
Total	35	
Overall Total	220	

INTERNAL AUDIT STRATEGIC PLAN 2023-2026

Area	2023/24	2024/25	2025/26	Description of the Review
Main Financial Systems	20	20	20	Detailed review to include GL controls, system interfaces, journals, as well as cyclical audits of debtors, creditors, payroll, budgetary control, treasury management, council tax and NNDR.
HMRC Employment Status	10			The purpose of the review will be to assess if the designated employment status of individuals given by the Council, and the evidence behind that designation, is appropriate
Corporate Governance			20	Review of the operation of the newly established Committee Structure to ensure that it is fit for purpose and delivering the outcomes required by the District.
Capital and Commercial Project Management		20		Review of significant capital and commercial projects, to include the planning, funding, delivery and the approach to project management to ensure there is sufficient due diligence and that projects are delivered in line with expectations.
Housing Benefits	15			Assessment of benefit cases against evidence retained on systems evaluating whether cases are legitimate and sufficient evidence was received and protocols followed as well and whether reporting of information in this area is appropriate.
Building Control		15		Review of the effectiveness of the Council's approach to and delivery of change to the Building Control service.
Recruitment and Retention		20		To assess the monitoring, reporting and oversight of recruitment i.e. how management judge the success of the Council's overall processes and take action to continuously improve as well

				as steps taken to retain staff and how staff feedback is received and reviewed.
Procurement and Contract Management		20		To consider the adequacy and effectiveness of arrangements for contract management and procurement, assessing whether arrangements are robust and transparent and that effective relationships are maintained with key partners.
Sickness and Absence Management	20			To review the sickness absence management process and assess whether the Council have adequate controls and triggers in place to monitor and manage sickness absence effectively. We will also assess measures undertaken by the Council to enable staff to return to work quickly.
GDPR		15		The purpose of the audit is to provide assurance over the design and operation of the controls in place to comply with the requirements of the General Data Protection Regulations. The risk of non-compliance with the GDPR, may lead to financial penalties and reputational damage
IT Asset Management		20		The purpose of this audit is to provide assurance that the Council has maintained a full and complete asset register for IT equipment. The audit will also assess whether the lifecycle of hardware, including servers, tablets and laptops/PCs has been considered in the IT Strategy and decision-making regarding replacement equipment is future focused
Climate Change & Sustainability	20			Review of all Council policies and overall strategies to set, approve and achieve environmental aims as well as steps to identify and reduce the areas carbon footprint and activities to provide a safe and clean environment.
Management of Property			20	This audit will focus on the Council's arrangements for ensuring property is managed effectively and efficiently, following up on recommendations made in the previous review.

Homelessness and Temporary Accommodation	15			This audit will review how the Council manages its homelessness and temporary accommodation responsibilities and how effective these arrangements are
Local Development Plan			20	Review of the implementation of the Local Development Plan and consistency with other Council strategic needs assessments
Management of s106 Funds	15			The purpose of the audit is to review and assess the effectiveness of the management of Section 106 funds.
Business Continuity and Disaster Recover		15		Review Council arrangements for the overall Business Continuity and Disaster Recovery Plan including how this Plan interacts with local service plans and whether there is adequate oversight that these all remain up-to-date, regularly assessed, and tested.
Fraud	20			This review will assess the Council's fraud arrangements to ensure robust controls and reporting arrangements are in place
Safeguarding			20	Follow up of previous internal audit to review of the Council's policies and arrangements to ensure the safeguarding of children and vulnerable adults.
Affordable Housing and Housing Needs			20	Review of how effectively the Council is managing its strategy around provision of social housing and developing the private rented sector, following up on recommendations made in the previous review.
Workforce Management	15			Review of the internal processes for HR. This could include areas such as workforce planning, appraisals and training and assess if the People and Workforce Development Strategy has been implemented effectively. We will work with the Council at the time of the review to identify the area that would be of most benefit to them.
Health and Wellbeing		20		The review will assess the health and wellbeing initiatives in place to support staff across the Council We will consider how the success of initiatives is monitored, where it is reported and how staff feedback is considered
IT Governance			15	The purpose of this audit is to provide assurance over the adequacy and

				effectiveness of the Council's IT governance arrangements
Flood Management			15	Review of the Council's relationships with the Lead Local Flood Authority and other organisations to manage respective responsibilities over the risk of surface water flooding.
Licensing	15			Review of processes in place to ensure there are sufficient controls over the management of issuing and maintaining licences and whether there are appropriate controls in place to ensure effective recovery of fee income
Waste and Recycling			15	To review the management and operational activities of the Council's refuse and kerbside waste collection service
Equality, Diversity and Inclusion	20			Review to assess how the Council has ensured there is a commitment to EDI across the organisation, including tone from the top, governance structures, strategy, and use of data (including both workforce and service design considerations)
Health and Safety		20		The purpose of the audit is to provide assurance over the design and operational effectiveness of the controls relating to the application of health and safety policies and practices across the Council.
Wireless Network Security			20	The purpose of this review is to appraise the design and effectiveness of the Councils' procedures for identifying vulnerabilities and controlling the security of their wireless network infrastructure.
Planning, Reporting and Follow Up				
Follow up	10	10	10	Assessment and reporting of recommendations raised.
Management Time	20	20	20	Creation of audit plan, attendance at PGA.
Contingency	5	5	5	
Total	220	220	220	

APPENDIX I

Internal Audit Charter - Role and Scope of Internal Audit

Purpose of this charter

This charter is a requirement of Public Sector Internal Audit Standards (PSIAS).

The charter formally defines internal audit's mission, purpose, authority and responsibility. It establishes internal audit's position within Maldon District Council and defines the scope of internal audit activities.

Final approval resides with the Board, in practice the charter shall be reviewed and approved annually by management and by the PGA on behalf of the board of Maldon District Council.

Internal audit's mission

Internal audit's mission is to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

Standards of internal audit practice

To fulfil its mission, internal audit will perform its work in accordance with PSIAS, which encompass the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF): Definition of Internal Auditing, Code of Ethics, and International Standards for the Professional Practice of Internal Auditing.

Internal audit definition and role

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.

Internal audit acts primarily to provide the PGA with information necessary for it to fulfil its own responsibilities and duties. Implicit in internal audit's role is that it supports management to fulfil its own risk, control and compliance responsibilities. The range of work performed by internal audit is set out in PSIAS and not repeated here.

Internal audit's scope

The scope of internal audit activities includes all activities conducted by Maldon District Council. The Internal Audit Plan sets out those activities that have been identified as the subject of specific internal audit engagements.

The provision of assurance services is the primary role for internal audit in the UK public sector. This role requires the chief audit executive to provide an annual internal audit opinion based on an objective assessment of the framework of governance, risk management and control.

Assurance engagements involve the objective assessment of evidence to provide an independent opinion or conclusions regarding an entity, operation, function, process, system or other subject matter. The nature and scope of the assurance engagement are determined by internal audit.

Consulting engagements are advisory in nature and are generally performed at the specific request of management, with the aim of improving governance, risk management and control and contributing to the overall opinion. The nature and scope of consulting engagement are subject to agreement with management. When performing consulting services, internal audit should maintain objectivity and not assume management responsibility.

Effective internal audit

Our internal audit function is effective when:

- It achieves the purpose and responsibility included in the internal audit charter
- It conforms with the Standards
- Its individual members conform with the Code of Ethics and the Standards
- It considers trends and emerging issues that could impact the organisation.

The internal audit activity adds value to Maldon District Council (and its stakeholders) when it considers strategies, objectives and risks, strives to offer ways to enhance governance, risk management and control processes and objectively provides relevant assurance.

We will agree with you an audit plan for a total number of days activity. Once agreed, we will turn this into a cash budget which we will work to, in order to ensure that you have certainty around the fees you will pay us.

Independence and internal audit's position within Maldon District Council

To provide for internal audit's independence, its personnel and external partners report to the Head of Internal Audit, who reports functionally to the PGA. The Head of Internal Audit has free and full access to the Chair of the PGA. The Head of Internal Audit reports administratively to the Director of Finance who provides day-to-day oversight.

The appointment or removal of the Head of Internal Audit will be performed in accordance with established procedures and subject to the approval of the Chair of the PGA.

The internal audit service will have an impartial, unbiased attitude and will avoid conflicts of interest. The internal audit service is not ordinarily authorised to perform any operational duties for Maldon District Council.

In the event that internal audit undertakes non-audit activities, safeguards will be agreed to ensure that independence or objectivity of the internal audit activity are not impaired. This might include a separate partner review of the work or a different team undertaking the work. Approval of the arrangements for such engagements will be sought from the PGA prior to commencement.

In the event that internal audit provides assurance services where it had previously performed consulting services, an assessment will be undertaken to confirm that the nature of the consulting activity did not impair objectivity and safeguards will be put in place to manage individual objectivity when assigning resources to the engagement. Such safeguards will be communicated to the PGA.

Internal audit must be free from interference in determining the scope of internal auditing, performing work and communicating results. Should any interference take place, internal audit will disclose this to the PGA to discuss the implications.

Internal audit's role in fraud, bribery and corruption

Management, not internal auditors are responsible for the prevention and detection of fraud, bribery and corruption. Auditors will, however, be alert in all their work to risks and exposures that could allow fraud or corruption as well as seeking to identify indications that fraud and corruption may have been occurring. Audit procedures alone, even when performed with due professional care, cannot guarantee that fraud and corruption will be detected. In the event that internal audit suspect a fraud, this will be referred to appropriate management in the first instance and then the PGA.

Access to records and confidentiality

There are no limitations to internal audit's right of access to Maldon District Council officers, records, information, premises, or meetings which it considers necessary to fulfil its responsibilities.

When the auditors receive confidential information about your affairs it shall at all times be kept confidential, except as required by law or as provided for in regulatory, ethical or other professional pronouncements applicable. All information will be maintained in line with appropriate regulations, for example the General Data Protection Regulations 2018.

Coordination and reliance with other assurance providers

In co-ordinating activities internal audit may rely on the work of other assurance and consulting service providers.

A consistent approach is adopted for the basis of reliance and internal audit will consider the competency, objectivity, and due professional care of the assurance and consulting service providers. Due regard will be given to understanding of the scope, objectives and results of the work performed by other providers of assurance and consulting services.

Where reliance is placed upon the work of others, internal audit is still accountable and responsible for ensuring adequate support for conclusions and opinions reached by the internal audit activity.

Internal audit's commitments to Maldon District Council

Internal audit commits to the following:

- working with management to improve risk management, controls and governance within the organisation
- performing work in accordance with PSIAS
- complying with the ethical requirements of PSIAS
- dealing in a professional manner with Council staff, recognising their other commitments and pressures
- raising issues as they are identified, so there are no surprises and providing practical recommendations
- liaising with external audit and other regulators to maximise the assurance provided to Maldon District Council
- Reporting honestly on performance against targets to the PGA.

Internal audit performance measures and indicators

The tables on the right contain some of the performance measures and indicators that are considered to have the most value in assessing the efficiency and effectiveness of internal audit.

The PGA should approve the measures which will be reported to each meeting and / or annually as appropriate. In addition to those listed here we also report on additional measures as agreed with management and included in our Progress Report.

Quality assurance and improvement programme

As required by PSIAS an external assessment of the service will be performed at least every five years. BDO also has an internal quality assurance review process in place, which takes place annually. This is performed by a separate team independent to the internal audit team.

The results of internal and external assessments will be communicated to the PGA as part of the internal audit annual report, along with corrective action plans.

Table One: Performance measures for internal audit

Measure / Indicator
<i>Audit Coverage</i> Annual Audit Plan delivered in line with timetable Actual days are in accordance with Annual Audit Plan
<i>Relationships and customer satisfaction</i> Customer satisfaction reports - overall score at average at least 3.5 / 5 for surveys issued at the end of each audit. Annual survey to PGA to achieve score of at least 70% External audit can rely on the work undertaken by internal audit (where planned)
<i>Staffing and Training</i> At least 60% input from qualified staff
<i>Audit Reporting</i> Issuance of draft report within 3 weeks of fieldwork `closing` meeting Finalise internal audit report 1 week after management responses to report are received. 90% recommendations to be accepted by management Information is presented in the format requested by the customer.

Audit Quality

High quality documents produced by the auditor that are clear and concise and contain all the information requested.

Positive result from any external review

Management and staff commitments to Internal Audit

The management and staff of Maldon District Council commit to the following:

- Providing unrestricted access to all of Maldon District Council's records, property, and personnel relevant to the performance of engagements
- Responding to internal audit requests and reports within the agreed timeframe and in a professional manner
- Implementing agreed recommendations within the agreed timeframe
- Being open to internal audit about risks and issues within the organisation
- Not requesting any service from internal audit that would impair its independence or objectivity
- Providing honest and constructive feedback on the performance of internal audit

Management and staff performance measures and indicators

The following three indicators are considered good practice performance measures but we go beyond this and report on a suite of measures as included in each PGA progress report.

Table Two: Performance measures for management and staff

Measure / Indicator
<i>Response to Reports</i> Audit sponsor to respond to terms of reference within one week of receipt and to draft reports within two weeks of receipt
<i>Implementation of recommendations</i> Audit sponsor to implement all audit recommendations within the agreed timeframe
<i>Co-operation with internal audit</i> Internal audit to confirm to each meeting of the PGA whether appropriate co-operation has been provided by management and staff

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