



Walsall Council
Audit Committee – 17th February 2025
Internal Audit Strategy Update – Operational Plan 2025/26 and Charter – Draft

Date Prepared: January 2025

Strictly private and confidential

Contents

- 01 Introduction
- 02 Internal Audit Operational Plan 2025/26
- 03 Other Areas Considered during discussions
- 04 Updated Internal Audit Strategy 2025/26 – 2027/28
- 05 Definitions of Assurance Opinions and Recommendations
- 06 Internal Audit Charter

Disclaimer

This report (“Report”) was prepared by Forvis Mazars LLP at the request of Walsall Council and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The Report was prepared solely for the use and benefit of Walsall Council and to the fullest extent permitted by law Forvis Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk. Please refer to the Statement of Responsibility in this report for further information about responsibilities, limitations and confidentiality.

01

Section 01

Introduction

Introduction

The Internal Audit Strategy (the Strategy) is used to direct Internal Audit resources to those aspects of the organisation that are assessed as generating the greatest risk to the achievement of its objectives. This is subject to review and update on at least an annual basis to ensure it meets the needs of Walsall Council, including taking account of any areas of new and emerging risk within the Strategic Risk Register. The purpose of this document is to provide the Audit Committee with a further update of the Strategy and the proposed 2025/26 Internal Audit Plan (the Plan) for consideration and approval.

In considering the document, the Audit Committee is asked to consider:

- whether the balance is right in terms of coverage and focus;
- whether key areas have been captured that would be expected; and
- whether there are any significant gaps.

How the 2025/26 Plan was prepared is set out in **Section 02**. This section also sets out the proposed Plan along with a proposed high-level scope for each review.

The updated Internal Audit Strategy for 2025/26 to 2027/28 is set out in **Section 04**.

From September 2023, we harmonised the gradings across our Public and Social Sector clients to allow for better benchmarking within the sector. **Section 05** includes the definition for the assurance levels and recommendation gradings.

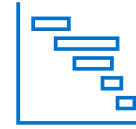
In addition, we are also seeking approval from the Audit Committee for the Internal Audit Charter in **Section 06**, which we request on an annual basis.

Scope and Purpose of Internal Audit



IA's Role

The purpose of internal audit is to provide the Council, through the Audit Committee, and management, with an independent and objective opinion on risk management, control and governance and their effectiveness in achieving Walsall Council's agreed objectives.



IA Plan

Completion of the internal audits proposed in the 2025/26 Plan should be used to help inform Walsall Council's statement on the effectiveness of internal control within its annual report and accounts



Objective

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 also has an independent and objective consultancy role to help line managers improve risk management, governance and control



Charter

We have included our Internal Audit Charter in Section 06. The Charter sets out terms of reference and serves as a basis for the governance of Walsall Council's IA function, establishing our purpose, authority, responsibility, independence and scope, in accordance with the Chartered Institute of Internal Auditor's (IIA) standards.

02

Section 02

Internal Audit Operational Plan 2025/26

Preparing the Strategy Update and Operational Plan for 2025/26

As part of our approach, it is important we consider Walsall Council's strategic priorities, as well as the key strategic risks identified, as we seek to align our risk-based approach accordingly. In preparing the Strategy update, the following activities have been undertaken:

A review of the outcomes of 2024/25 internal audit work

Consideration of the latest assessment of risks facing Walsall Council, as detailed in the latest Strategic Risk Register

Consideration of areas which are not necessarily high risk (such as core operational controls), but where the work of internal audit can provide a tangible input to assurance

Consideration of the results of internal audit across our wider client base

Meetings between Forvis Mazars, Executive Directors, Directors, Heads of Service and CMT throughout January 2025 to discuss the draft plan.

This section includes the proposed 2025/26 Plan. This also includes a proposed high-level scope for each review which will be revisited as part of the detailed planning for each review. Fieldwork dates for each of the audits, including presentation of finalised reports at future dates for Audit Committee meetings have been proposed for discussion and approval with the Council's management.

The Plan will be reassessed on a continual basis in light of emerging risks (including issues identified by Internal Audit). Should this result in a need for significant revisions, the plan will be revised and presented for re-approval to the Audit Committee.

Our professional judgement has been applied in assessing the level of resource required to carry out the audits identified in the strategic cycle. This includes consideration of the complexity of the system, volume and frequency of transactions, sources of assurance and the audit approach to the area under review.

Recommendations made as part of our work will be subject to on-going review as part of our Follow up Audit approach.

Internal Audit Operation Plan 2025/26

An overview of the Internal Audit Operational Plan 2025/26 is set out below.

Proposed Summary Operational Plan				
Audit Area	Estimated Days	Scope	Risk Register / Risk Type	Target Start Date
Core Financial Systems				
Main Accounting	10	Covering the adequacy and effectiveness of controls including access controls, journals, virements etc	Key Financial System	Q3 (November 2025)
Accounts Payable	10	Covering the adequacy and effectiveness of controls over the payment of creditor invoices.	Key Financial System	Q3 (December 2025)
Accounts Receivable	10	Covering the adequacy and effectiveness of controls over the raising and receipt of debtor invoices and payments.	Key Financial System	Q3 (November 2025)
Medium Term Financial Planning	8	Covering the adequacy and effectiveness of controls in respect of medium-term financial planning.	Key Financial System	Q2 (September 2025)
Council Tax / NNDR	15	Covering the adequacy and effectiveness of controls including liabilities, billing, cash collection, recovery and accounting. Covering the adequacy and effectiveness of controls including Business Rate Retention Scheme, liabilities, billing, cash collection, recovery and accounting.	Key Financial System	Q2 (August 2025)
Housing Benefits & Local Council Tax Support	10	Covering the adequacy and effectiveness of controls including new claims, size criteria, benefit caps, amendments, backdated benefits, payments and reconciliations.	Key Financial System	Q2 (September 2025)
Payroll & Pensions Admin	10	Covering the adequacy and effectiveness of controls over starters, leavers, amendments, etc.	Key Financial System	Q4 (January 2026)

Internal Audit Operation Plan 2025/26

An overview of the Internal Audit Operational Plan 2025/26 is set out below.

Proposed Summary Operational Plan				
Audit Area	Estimated Days	Scope	Risk Register / Risk Type	Target Start Date
Adult Social Care				
Reablement	10	To be discussed with management	SRR 4b, ASC 11	
Domestic Violence Strategy Implementation	10	To be discussed with management	SRR 4b	
Public Health	10	To be discussed with management	SRR 14, ASC 28	
Children's Services				
Residential Placements	10	Covering adequacy and effectiveness of controls in place over demand forecasting, placement monitoring & reviews, budget monitoring and management reporting.	SRR 4a, CS 2	Q2 (September 2025)
Elective Home Education	10	Covering adequacy and effectiveness of controls in place to monitor children educated outside of school, including School Attendance Orders.	SRR 4a, CS 5	Q1 (May 2025)
Special Guardianship Orders	10	Covering adequacy and effectiveness of controls in place over assessment of suitability of applicant, provision of Special Guardian support services, financial support and reviews.	SRR 4a, CS 5	Q3 (November 2025)
Supporting Families	16	Covering adequacy and effectiveness of controls in place over eligibility, payments and achievement of progress measures.	SRR 4a	Q1-4

Internal Audit Operation Plan 2025/26

An overview of the Internal Audit Operational Plan 2025/26 is set out below.

Proposed Summary Operational Plan				
Audit Area	Estimated Days	Scope	Risk Register / Risk Type	Target Start Date
Economy, Environment & Communities				
Prevent	10	Covering adequacy and effectiveness of the Council's Prevent processes, including compliance with legal duties.	SRR 6, EEC 7	Q1 (May 2025)
Emergency Planning	10	Covering adequacy and effectiveness of the Council's arrangements for Emergency Planning.	SRR 10	Q1 (June 2025)
Corporate Landlord Compliance	10	Covering adequacy and effectiveness of the Council's arrangements for managing and maintaining property across the Council.	SRR 7	Q3 (September 2025)
Programme Assurance - Middlemore Lane HWRC	10	Covering adequacy and effectiveness of project management processes and preparation for new Waste Management regulations.	SRR 1, EEC 4	Q3 (October 2025)
Resources & Transformation				
Blue Badges	10	Covering adequacy and effectiveness of the Council's arrangements for assessment and enforcement.	SRR 4b, SRR 7	Q1 (April 2025)
Conflicts of Interest	10	Covering adequacy and effectiveness of the Council's controls for managing and publishing Member and Officer declarations.	SRR 12, RT 12	Q4 (January 2026)
Exempt Accommodation	10	Covering adequacy and effectiveness of the Council's arrangements for monitoring exempt accommodation including approval of providers in accordance with regulatory standards.	SRR 4b, R&T 7	Q3 (December 2025)

Internal Audit Operation Plan 2025/26

An overview of the Internal Audit Operational Plan 2025/26 is set out below.

Proposed Summary Operational Plan				
Audit Area	Estimated Days	Scope	Risk Register / Risk Type	Target Start Date
Strategic Risks				
Procurement	10	Covering adequacy and effectiveness of the Council's corporate approach to procurement, including new procurement regulations.	SRR 3, RT 7	Q4 (February 2026)
Climate Change Strategy	10	Covering controls in place over management of actions and reporting requirements.	SRR 11	Q3 (October 2025)
Partnership Governance	10	Covering adequacy and effectiveness of controls in place to maintain effective partnership relationships and outcomes.	SRR 3	Q1 (June 2021)
Transformation Programme	16	Covering adequacy and effectiveness of controls in place over transformation projects. Specific area to be determined.	SRR 2	Q4 (January 2026)
Other Assurance Methods				
Schools	100	To provide the Chief Finance Officer with adequate assurance over standards of financial management and the regularity and probity of spend.	Operational / Financial	Q1-3
IT Audits	25	Covering Benefit Realisation and Statutory Reporting.	Operational / Business Change	Q3
Grant Sign off work	10	Annual Sign Offs – to be determined separately	Financial	All

Internal Audit Operation Plan 2025/26

An overview of the Internal Audit Operational Plan 2025/26 is set out below.

Proposed Summary Operational Plan				
Audit Area	Estimated Days	Scope	Risk Register / Risk Type	Target Start Date
Other Assurance Methods continued				
NFI	10	Internal Audit will work with the Council and assist with data match reviews.	All	Q1-4
Governance / Risk Management	10	Focussing on core Governance arrangements across the council including Council Plan and covering Risk Management at a strategic and operational level. Including Member/Officer training and/or workshops.	All	All
Management and Reporting Activities				
Follow Up	20	Follow-up of all High and Medium priority recommendations made in final reports issued.		All
Management and Control	65	Including attendance at Audit Committee		All
Total	500			
Contingency days (to be used if required)	20			

03

Section 03

Other areas considered during discussions

Other areas discussed in conversations

During the planning meetings, other audits were considered for inclusion in future years,

Directorate	Auditable Area
Economy, Environment & Communities	Cohesion Strategy
	EE&C Health & Safety and Wellbeing
	Road Infrastructure
	High Level Project Management Arrangements
	Licensing (inclusion in 2026/27 plan)
	Waste Management Recycling Targets (inclusion in 2026/27 plan)
Children’s Services	SEND
	Families First for Children (Pathfinder)
Resources & Transformation	Recruitment & Selection (inclusion in 2026/27 plan)
	One Source System Development
	Whistleblowing (inclusion in 2026/27 plan)

04

Section 04

Updated Internal Audit Strategy 2025/26 – 2027/28

Updated Internal Audit Strategy 2025/26 – 2027/28

Following planning conversations, the strategy for 2025/26 – 2027/28 has been updated.

Strategic Risks	Auditable Area	Previous audits					Strategy	
		2021/22	2022/23	2023/24	2024/25	2025/26	Indicative 2026/27	Indicative 2027/28
SRR 1 – Threats to the Economic Growth of Walsall are not identified and mitigated, together with opportunities for sustainable growth being missed.	Walsall & Bloxwich Town Deal				TBC		✓	
	Planning & Building Control			Limited			✓	
	Planning Applications / S106 Planning Obligations	Limited	Moderate					✓
	Growth Deal	Advisory	Advisory	Advisory				
	Asset Management	Moderate					✓	
	Programme Assurance			Limited		10		
SRR 2 – Transformation and Continuous Improvement does not achieve the outcomes and benefits required to ensure that available resources are directed to deliver the greatest outcomes for the community.	Walsall Proud Programme	Limited	Moderate					
	Transformation Programme		Limited			16	✓	✓
SRR 3 – Partnership relationships with other sectors and our major suppliers fail to deliver on shared objectives and therefore outcomes for the community.	Contract Management	Limited					✓	
	Partnerships					10		✓
	Procurement		Limited			10		✓
SRR 4a – The Council is unable to maintain statutory service standards to support the most vulnerable in society.	Supporting Families	Advisory	Advisory	Advisory	Advisory	16		
	Care Leavers				TBC			

Updated Internal Audit Strategy 2024/25 – 2026/27 (continued)

Strategic Risks	Auditable Area	Previous audits					Strategy		
		2021/22	2022/23	2023/24	2024/25	2026/27	Indicative 2025/26	Indicative 2027/28	
SRR4a continued	Elective Home Education					10			
	SEND						✓		
	School Non-Attendance Penalties				TBC				
SRR 4b – Adult Safeguarding – delays in responding to safeguarding concerns in a timely way due to levels of demand and unpredictability.	Reablement					10			
	Occupational Health				TBC				
	Direct Payments				TBC				
	Domiciliary Care		Substantial						
	ASC Charging Policy			Moderate					
	Early Intervention			Moderate					
	Temporary / Exempt Accommodation		Limited			10			
	SRR 5 – External changes in Political and / or legislative environment including ongoing impact of cost-of-living pressures	Illicit Tobacco & Vapes				TBC			
		Trading Standards							✓
		Licensing						✓	
RIPA		Substantial							
SRR 6 – Lack of community cohesion and resilience placing increased pressure on public sector resources	Nighttime Economy			Moderate					
	Bereavement Services				TBC				
	Community Safety						✓		

Updated Internal Audit Strategy 2024/25 – 2026/27 (continued)

Strategic Risks	Auditable Area	Previous audits					Strategy	
		2021/22	2022/23	2023/24	2024/25	2025/26	Indicative 2026/27	Indicative 2027/28
SRR 6 continued	Prevent					10		
SRR 7 – Financial Resilience of the council is impacted by the failure to achieve the savings required or manage demand pressures to enable a balanced budget and Medium-Term Financial Plan to be delivered.	Core Financial Systems	Moderate	Moderate	Moderate	Moderate	73	✓	✓
	Federation Schools Governance		Limited	Moderate				
SRR 8 – Risk of Cyber Security Attacks	Cyber Security	Moderate					✓	
	Key Security Controls				Limited			
SRR 9 – Threats in relation to failing to comply with the legal obligations and duties of the UK General Data Protection Regulations, the Data Protection Act 2018 and relevant legislative requirements.	Information Governance	Moderate						
	Information Rights		Moderate					
SRR 10 – Business Continuity Management – failure to deliver key services in the event of significant business interruption, including services delivered by contractors and partners.	Business Continuity	Limited					✓	
	Emergency Planning					10		
	IT Disaster Recovery							✓
SRR 11 – Climate Change – failure to achieve climate change objectives.	Climate Emergency Action Plan / Climate Change Strategy		Limited			10		

Updated Internal Audit Strategy 2024/25 – 2026/27 (continued)

Strategic Risks	Auditable Area	Previous audits				Strategy		
		2021/22	2022/23	2023/24	2024/25	2025/26	Indicative 2026/27	Indicative 2027/28
SRR 12 – Significant failure of Governance – a breakdown in governance to merit formal external intervention either from auditors or central government	Governance & Risk Management	Advisory	Advisory	Advisory	Advisory	10	✓	✓
SRR 14 – Inability to improve Health outcomes in Walsall.	Governance Arrangements for Monitoring PH Outcomes	Limited				10	✓	✓
	Internal Governance and Oversight of PH Contracts		Moderate					
SRR 15 – Workforce.	Staff Recruitment and Retention						✓	
	Staff wellbeing / engagement							✓
	Secondments / Acting up Arrangements	Moderate						
	Payroll and Pensions	Moderate	Substantial	Substantial	TBC	10	✓	✓
	Workforce Strategy			Moderate				
	Organisational Development Strategy				TBC			

05

Section 05

Definitions of Assurance Opinions and Recommendations

Definitions of Assurance Opinions and Recommendations

Assurance Opinions

From September 2023, we harmonised the gradings across our Public and Social Sector clients to allow for better benchmarking with the sector. This was launched through our new report template.

Definitions of Assurance Levels	
Substantial Assurance	The framework of governance, risk management and control is adequate and effective.
Moderate Assurance	Some improvements are required to enhance the adequacy and effectiveness of the framework of governance, risk management and control.
Limited Assurance	There are significant weaknesses in the framework of governance, risk management and control such that it could be or could become inadequate and ineffective.
Unsatisfactory Assurance	There are fundamental weaknesses in the framework of governance, risk management and control such that it is inadequate and ineffective or is likely to fail.

Recommendation gradings

We introduced the following recommendation grading approach to align it with the approach utilised by the Government Internal Audit Agency and enable further benchmarking of the number of recommendations raised per audit area across our wider public and social sector client base.

Definitions of Recommendations		
High (Priority 1)	Significant weakness in governance, risk management and control that if unresolved exposes the organisation to an unacceptable level of residual risk.	Remedial action must be taken urgently and within an agreed timescale.
Medium (Priority 2)	Recommendations represent significant control weaknesses which expose the organisation to a moderate degree of unnecessary risk.	Remedial action should be taken at the earliest opportunity and within an agreed timescale.
Low (Priority 3)	Recommendations show areas where we have highlighted opportunities to implement a good or better practice, to improve efficiency or further reduce exposure to risk.	Remedial action should be prioritised and undertaken within an agreed timescale.

06

Section 06

Internal Audit Charter

Internal Audit Charter

The Internal Audit Charter sets out the terms of reference and serves as a basis for the governance of Walsall Council's Internal Audit function. It sets out the purpose, authority and responsibility of the function in accordance with the Global Internal Audit Standards (GIAS) of the IIA and the Application Note: Global Internal Audit Standards in the UK Public Sector, produced by CIPFA. The Charter will be reviewed and updated annually by the Head of Internal Audit.

Nature and Purpose

Walsall Council is responsible for the development of a risk management framework, overseen by the Audit Committee, which includes:

- Identification of the significant risks in the operations and allocation of a risk owner to each;
- An assessment of how well the significant risks are being managed; and
- Regular reviews by the Corporate Management Team and the Audit Committee of the significant risks, including reviews of key risk indicators, governance reports and action plans, and any changes to the risk profile.

A system of internal control is one of the primary means of managing risk and consequently the evaluation of its effectiveness is central to Internal Audit's responsibilities.

Walsall Council's system of internal control comprises the policies, procedures and practices, as well as organisational culture that collectively support the Council's effective operation in the pursuit of its objectives. The risk management, control and governance processes enable the Council to respond to significant business risks, be these of an operational, financial, compliance or other nature, and are the direct responsibility of the Corporate Management Team. The Council needs assurance over the significant business risks set out in the risk management framework. In addition, there are many other stakeholders, both internal and external, requiring assurance on the management of risk and other aspects of the Council's business. There are also many assurance providers. The Council should, therefore, develop and maintain an assurance framework which sets out the sources of assurance to meet the assurance needs of its stakeholders.

Internal Audit is defined by the Institute of Internal Auditors' International Professional Practices Framework (IPPF) as '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 carries out assurance and consulting activities across all aspects of the Council's business, based on a programme agreed with the Audit Committee, and coordinates these activities via the assurance framework. In doing so, Internal Audit works closely with risk owners, and the Corporate Management Team.

In addition to providing independent assurance to various stakeholders, Internal Audit helps identify areas where the Council's existing processes and procedures can be developed to improve the extent with which risks in these areas are managed; and public money is safeguarded and used economically, efficiently and effectively. In carrying out its work, Internal Audit liaises closely with the Corporate Management Team and management in relevant departments.

The independent assurance provided by Internal Audit also assists the Council to report annually on the effectiveness of the system of internal control included in the Annual Governance Statements.

Authority and Access to Records, Assets and Personnel

Internal Audit has unrestricted right of access to all Walsall Council's records and information, both manual and computerised, and other property or assets it considers necessary to fulfil its responsibilities. Internal Audit may enter business property and has unrestricted access to all locations and officers where necessary on demand and without prior notice.

Any restriction (management or other) on the scope of Internal Audit's activities will be reported to the Audit Committee.

Internal Audit is accountable for the safekeeping and confidentiality of any information and assets acquired in the course of its duties and execution of its responsibilities.

Internal Audit will consider all requests from the external auditors for access to any information, files or working papers obtained or prepared during audit work that has been finalised, and which external audit would need to discharge their responsibilities.

Internal Audit Charter (continued)

Responsibility

The Head of Internal Audit is required to provide an annual opinion to Walsall Council, through the Audit Committee, on the adequacy and the effectiveness of the Council's risk management, control and governance processes.

In order to achieve this, Internal Audit will:

- Coordinate assurance activities with other assurance providers as needed (such as the external auditors) such that the assurance needs of the Council, regulators and other stakeholders are met in the most effective way
- Evaluate and assess the implications of new or changing systems, products, services, operations and control processes.
- Carry out assurance and consulting activities across all aspects of the Council's business based on a risk-based plan agreed with the Audit Committee. Provide the Council with reasonable, but not absolute, assurance as to the adequacy and effectiveness of the key controls associated with the management of risk in the area being audited.
- Issue periodic reports to the Audit Committee and the Corporate Management Team summarising results of assurance activities.

- Assist, when requested, in the investigation of allegations of fraud, bribery and corruption within the Council and notifying management and the Audit Committee of the results.
- Assess the adequacy of remedial action to address significant risk and control issues reported to the Audit Committee. Responsibility for remedial action in response to audit findings rests with line management.

There are inherent limitations in any system of internal control and thus errors or irregularities may occur and not be detected by Internal Audit's work.

When carrying out its work, Internal Audit will provide line management with comments and report breakdowns, failures or weaknesses of internal control systems together with recommendations for remedial action.

However, Internal Audit cannot absolve line management of responsibility for internal controls.

Internal Audit will support line managers in determining measures to remedy deficiencies in risk management, control and governance processes and compliance to the Council's policies and standards and will monitor whether such measures are implemented on a timely basis.

The Audit Committee is responsible for ensuring that Internal Audit is adequately resourced and afforded a sufficiently high standing within the organisation, necessary for its effectiveness.



Contact

Forvis Mazars

Sarah Knowles

Engagement Manager

Tel: +44 7917 084 604

Sarah.Knowles@mazars.co.uk

Peter Cudlip

Partner

Tel: +44 7810 528 518

email@mazars.co.uk

Statement of Responsibility

We take responsibility to Walsall Council for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Forvis Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or reply for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk.

Registered office: 30 Old Bailey, London, EC4M 7AU, United Kingdom. Registered in England and Wales No 0C308299.