

Within each component we consider the following:

#### **Objectives/requirements**

- developed based on those required by standards as well as those we have identified ourselves
- approved by members of the steering group and other members of the SLT.

#### **Risks**

- are identified based on inherent risk and likelihood using the firm's risk model and taxonomy
- risks agreed with the business owners and approved by the steering group.

#### **Responses to risks**

- identified including our structures, policies, processes and controls
- considering our reliance on the GTIL network and third parties
- including the systems and system controls that we rely on.

### **National Assurance Services (NAS)**

Within Audit, we have a range of quality processes that directly support our engagement teams which is supported by our NAS team. NAS is the centre of excellence for our specialists in audit and accounting. Providing support to the audit practice through the provision of training and guidance, a suite of working paper templates and audit software. We continue to adopt a culture of openness and encourage all members of the practice to consult with colleagues, NAS and other teams.

This sharing of knowledge and experience is key to the delivery of audit quality and is supported by specific requirements for teams to consult with NAS on key judgmental and complex issues. Our policies, processes and guidance support teams to ensure our audits, including group audits, comply with relevant requirements.

NAS is split into six areas to ensure we focus our skills appropriately:

- 1 Financial reporting – Gives support to teams on technical accounting and reporting matters including through the delivery of our “hot review” programme of the review of financial statements for certain active audits
- 2 Audit Professional Services (APS) – Provides the foundational technical auditing guidance, methodology and tools to enable audit teams to deliver high quality audits. The team's work includes providing timely technical support, guidance and training, developing and releasing new audit tools and methodologies as well as engaging with the global network on emerging audit issues
- 3 Quality Monitoring – Delivers the internal file review programme as well as undertaking thematic reviews and managing the GTIL review programme
- 4 Quality Support Team – The team undertakes reviews of our highest-risk engagements to provide support to the audit team and Engagement Quality Reviewer (EQR) during the audit
- 5 Audit Risk team – Provides risk management support to the practice. The team also manages the implementation and testing of the QMA
- 6 Root cause - Investigating the root cause of review findings, supporting the firm to develop better quality actions based on underlying causing of findings.

### **Data management**

Our Data office supports the firm in the provision of robust Data insights for the governance and operation of the firm. They also provide our frameworks and practices for data governance, data architecture and business insight. Our reporting to regulators uses this data along with the input from relevant specialists including our NAS team to ensure that we provide complete and accurate information. We have clear processes for reporting to our audit regulators depending on the nature of the reporting.

## Quality Management Evaluation (QME)

Our QME is the mechanism for our evaluation of our system of quality management (QMA) as required by paragraph 53 of ISQM 1. Our Chief Executive Officer is the individual assigned ultimate responsibility and accountability for the system of quality management.

The QME is an annual evaluation process which has four key phases. We performed our first QME during the year.



### 1 Update of the QMA

- update of objectives and requirements
- reassessment and identification of changes to risk and their ratings
- update of responses to risks
- firm risks are assessed to ensure, where appropriate, these are included in the QMA.



### 3 Evaluation of identified findings

- deficiencies are identified based on the definition in ISQM 1 paragraph 16
- findings are evaluated based on their severity and pervasiveness
- findings are given one of five ratings:

#### Not deficiencies

Strength – areas of excellence

Observation – Areas noted in the review that could be improved but do not reach the level of a deficiency

#### Deficiencies

Level 3 deficiency – A deficiency that is neither severe nor pervasive

Level 2 deficiency – A deficiency that is either severe or pervasive

Level 1 deficiency – A deficiency that is severe and pervasive

- where appropriate deficiencies are subject to root cause analysis
- all deficiencies are subject to action planning.



### 2 Testing of the QMA

- this is based on our audit methodology
- includes consideration of support from the wider network and other third parties
- each response to our risks was tested
- consideration was given to wider quality findings from internal and external reviews including regulatory reviews and internal control findings from the financial statements audit.
- testing was performed by a dedicated team lead by an experienced auditor
- self-certification was provided by key leaders within the QMA.



### 4 Reporting and opinion

- the results of the QME have been reported to:
  - i. QME Steering group
  - ii. David Dunckley /Malcolm Gomersall (CEO)
  - iii. the PIC
  - iv. the RAC
  - v. the AQB
  - vi. the Audit Leadership team.



### AFGC internal control review

During the year we have enhanced our key internal control process. The firm has 42 Internal Control Areas and our detailed key internal controls are linked to these. We undertake testing across each of these controls, this was conducted by:

- QME team
- Service line teams
- Central risk team

Actions resulting from findings are monitored for completion, the review is undertaken on an annual basis. The results are reported to the relevant business leadership as well as the RAC. This testing is separate from the work performed by our internal audit team.

### ISQM 1 Statement

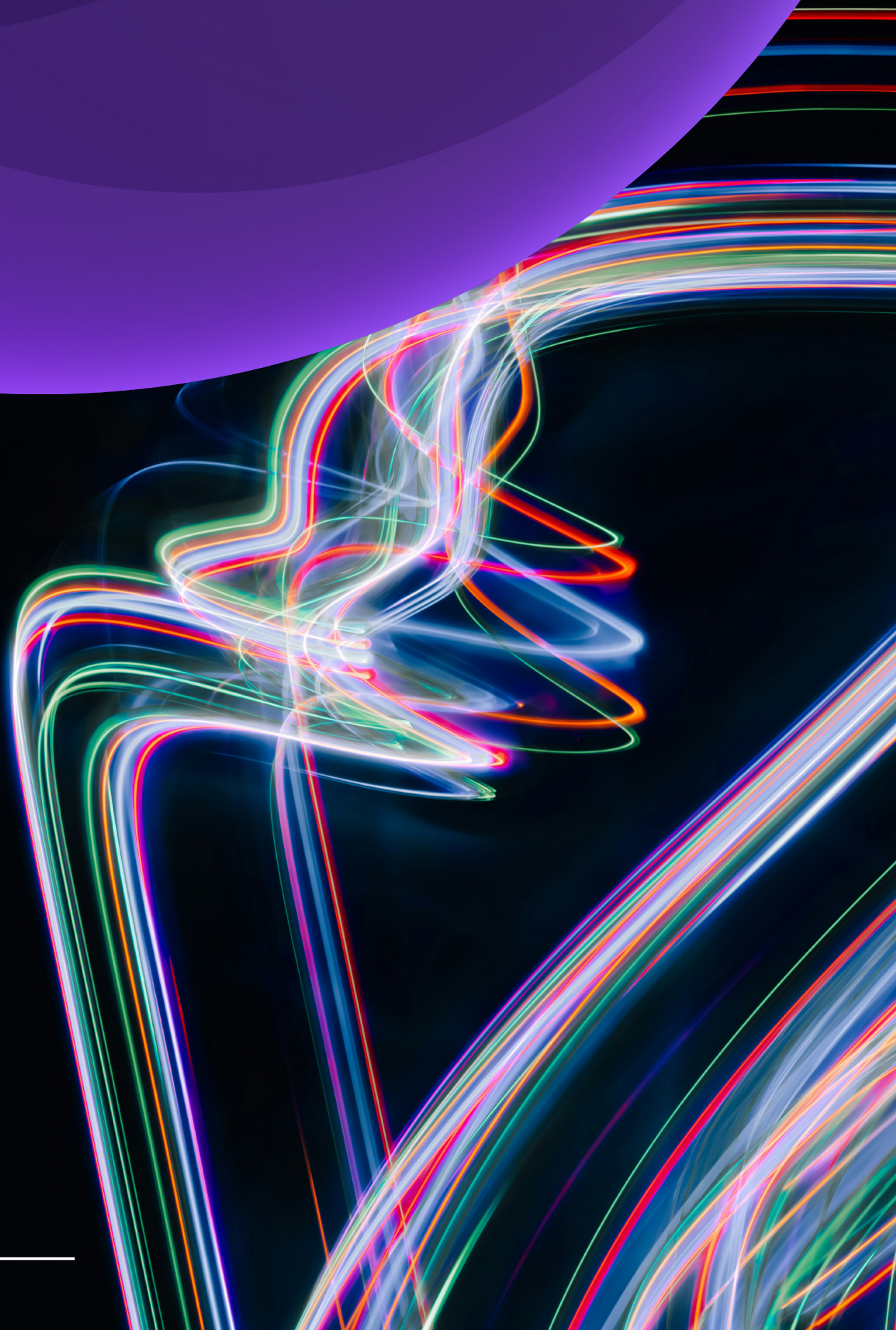
As required by ISQM 1, David Dunckley as the individual assigned ultimate responsibility and accountability for the system of quality management has evaluated our system "The QMA". The assessment has been completed as at 30 November 2023.

In early 2024 this assessment was extended to an evaluation as at 31 December 2023, this evaluation was performed by Malcolm Gomersall.

Based on these evaluations we can conclude that as at 30 November 2023 and 31 December 2023 the firm's system of quality management provides the firm with reasonable assurance that the objectives of the system of quality management are being achieved as required by the International Standard of Quality Management (UK) 1.



# Digital Audit Team



Grant Thornton is enhancing the quality of its audits through its investment in Digital solutions. This starts with the application of our LEAP global audit methodology, delivered on our new Leap audit engagement tool introduced in the year which replaces our previous audit software, Voyager.

We complement Leap by procuring high-quality third-party automation and analytics solutions, working with organisations that share our goal to deliver better audits. Where any gaps remain, we build and deploy our own in-house solutions to offer auditors innovative alternatives to traditional manual processes.

We cut complexity by providing practical methodology guidance on using digital solutions, delivering high quality training and launching intuitive out of the box solutions. Where work is more specialised, our dedicated support desk works with and will join audit teams as a specialist and troubleshoot problems.

With dedicated Methodology, Support, Innovation and Implementation teams, the Digital Audit team and Operations support our teams to deliver high quality audits.

**What we do:**

**Digital methodology**

- methodology for new digital products
- practical application guidance
- collaboration with audit support

**Digital support**

- run the support desk
- join audit teams as a specialist
- pitch and proactive audit support

**Digital innovation**

- developing new ideas
- maintaining Audit Analytics Appstore
- roll out app improvements

**Digital implementation**

- communicate and roll out products
- project management of key developments
- train the practice



## Our innovation approach

The pace of change of the technology landscape in which we operate is fast and our approach to the delivery of new solutions is agile to meet the changing demands. However, by focusing on audit quality at every stage of the development process, we implement robust solutions that can meet the needs of the practice and our clients:

- 1 **Ideation** – the best ideas often come from the team’s delivering audits and our internal network of auditors and Digital Champions initiate many of our most successful ideas. Every new idea undergoes an impact assessment at the outset to rate its impact on audit quality, and is further tested via our New Initiatives process with our Digital Hub and feasibility assessed by our IS team.
- 2 **Market assessment** – there is a growing market of technology businesses with innovative products that can benefit our profession – we assess each idea to decide if the appropriate approach is to buy from a third-party vendor or build in-house.
- 3 **Governance** – an idea can only go into development following approval from the Digital Governance group, a panel of audit partners led by our Head of Audit. Governance approval is sought at each major milestone to ensure that any solution developed meets the quality goals. Progress reports are delivered every two months to the firm’s Audit Quality Board.
- 4 **Development** – all solutions are developed using coding best practice under Grant Thornton’s Data Work Products Methodology. QMA documentation is produced as part of the development process to ensure focus is placed on quality throughout the build.
- 5 **Rollout** – once a solution is complete our dedicated Digital Implementation team will facilitate rollout through a standardised communication and training programme.
- 6 **Monitoring** – all solutions are internally reviewed to ensure quality control and to comply with the requirements of ISQM1. We prioritise continuous improvement by tracking usage, seeking feedback from the practice, going back into development to roll out improvements and where appropriate failing fast and retiring seldom used solutions.

## Artificial intelligence (AI)

Grant Thornton continues to successfully utilise AI on audits through use of machine learning algorithms that both classify data and generate analytics insights. During 2023 we have built on these foundations by adding generative AI capability for our auditors. Our new generative AI tool, “GTAssist” is a transformative platform that will both help our internal operations become more efficient and help us to anticipate and fulfil audit needs. It sits alongside a portfolio of other AI related investments that enable innovation, ensuring we continuously stay ahead of the curve to safely, responsibly and securely deliver the best value and quality.

## Other developments in 2023

- full and successful implementation of Grant Thornton’s new global audit software Leap
- we continue to expand the number of applications we use to support our audit teams in delivery of our audits, we currently have 39 applications (2022: 31)
- Enhancing “AAA” our dedicated AuditApp Store action engine for audit teams
- we have continued to enhance our cloud-based infrastructure.

# Ethics, independence and compliance



We expect our people to behave in a way that is professional, honest and trustworthy, complying with all applicable ethical and professional standards and legal and regulatory requirements, both in the UK and overseas, “doing what’s right, ahead of what’s easy.”

### Code of conduct

All our partners and people are required to comply with the fundamental principles for professional accountants. We do what is lawful, what is right and do not allow bias, self-interest or the undue influence of others to affect our professional judgement. These requirements are not new and are key to how our people work. We continue to focus on ensuring these principles are second nature. The principles form the background to our code of conduct which sets out the expectations of all our people and supports our wider purpose of “doing what’s right, ahead of what’s easy.”

Our CLEARR values (Collaboration, Leadership, Excellence, Agility, Responsibility and Respect) underpin our culture and how we do business – they are embedded throughout our firm and set the parameters of how we expect our people to behave with their colleagues, clients and the world at large.

While it cannot govern every possible situation the code is a key part of our wider stewardship, governance and risk management culture. The code is available to all on our [website](#).

Our Code of Conduct provides clarity on what’s expected of every single one of us as Grant Thornton people and as a firm based on:

- 1 We will each contribute towards creating a culture that is inclusive and sustainability-led; one where we treat each other with respect and trust and support each other to make the right choices.
- 2 We are driven by a total commitment to excellence and aim to deliver the highest quality of service to our clients, whilst meeting the expectations of our regulators and wider stakeholders.
- 3 We will always put the principles of integrity, objectivity, professional competence and due care, confidentiality and professional behaviour first.
- 4 We will share responsibility for protecting the firm’s reputation and put quality at the heart of everything we do. We will always strive to deliver work to the expected internal and external standards.

### Our People have a commitment to one another to:





## Policies, guidance and learning

We use our intranet to provide details of our policies, procedures and guidance as well as how to consult in relation to questions. This information covers all aspects of relevant regulatory requirements including those issued by the FRC, ICAEW, IESBA, SEC, CIOT, IPA, FCA and general legislation.

All our people are required to confirm their understanding and compliance with relevant ethical requirements and key policies on an annual basis. Regular training is given to refresh people of key topics and requirements for example, personal independence, provision of non-audit services, anti-money laundering and information protection.

All managers and above are required to maintain details of their investments and those of persons closely associated to them on our Global Independence System (GIS). This system also tracks the financial interests of the firm and its affiliates. Our new joiners are provided with access to and training relating to:

- our Code of Conduct
- detailed independence requirements, including expected behaviours and access to our policies and processes
- financial crime, data protection and information security.

## Conflicts of interest and relationships

If a potential conflict is identified at any stage of our work with a client, we engage with all relevant parties to obtain informed consent and implement procedures to adequately safeguard confidential information. These procedures consider any actual or perceived conflicts. Where necessary the relevant head of service line, the Ethics Function, the Ethics Partner and other member firms are consulted. All GTIL member firms utilise international relationship checks to identify potential conflicts of interest or independence issues across the network.

If it is not possible to adequately safeguard against the actual or perceived conflict to an extent that an objective, reasonable and informed third party would query our approach, we will not undertake one or more of the services. The final decision as to which if any service is provided, is ours, but these decisions are made with the involvement of the entity(s) concerned.

## Financial interests

The following are prohibited from having any direct or material indirect financial interest in an audited entity or the parent undertaking of any entity audited by Grant Thornton UK LLP, or in any publicly traded audited entity (or publicly traded parent of an audited entity) of a member firm of GTIL unless specific approval has been given where allowed under regulations:

- our partners
- our INEs and AQB non executive members
- other individuals who can bind the firm for example, employee Responsible Individuals (RIs) or local public audit Key Audit Partners (KAPs)
- covered persons as defined by the FRC. Broadly a person in a position to influence the conduct or outcome of an audit/other public interest assurance engagement, including certain persons with wider firm supervisory, management or other oversight responsibilities
- any persons closely associated with any of the above.

Partners and people may not have a material financial interest in any audited entity to which they personally provide professional services. Any financial interest outlined above, or deemed to create a conflict or independence threat, must be disposed of within ten working days.

### Supplier and third party relationships

As our independence requirements extend to our suppliers and our other business relationships or third-party relationships, we carry out checks before we enter new supplier contracts and other relationships. This is to identify if we perform any audit, or other public interest assurance engagements with the supplier or other party. If relationships are identified, consideration is given to any potential threat to independence. Risk based financial crime risk and third-party code of conduct checks are also undertaken for our suppliers.

### Gifts, hospitality and favours

Our people are not permitted to accept, or give audit clients, suppliers or third parties any gifts, favours or hospitality that might, or might be seen to, prejudice our integrity and objectivity in relation to our current or prospective clients.

Consideration is given not only to the monetary amounts but also non-monetary considerations for example, the nature, frequency, context and parties involved in this assessment. We have clear limits on what may be accepted or given as gifts, favours and hospitality – these are aligned to the requirements of the Ethical Standard. Above de minimis limits all gifts, favours or hospitality must be recorded in our systems and prior approval must be obtained from the Ethics Function and potentially the Financial Crime Team and SLT for certain activities.

### Client and engagement take-on

Our Beyond Compliance process provides a framework, prior to our detailed Acceptance or Continuance process for any audit, to consider the identity and characteristics of the clients we act for and the services that we provide, to ensure that we can be confident that they support our reputation. The process is designed to go “Beyond Compliance” to ensure we make the right Acceptance and Continuance decisions. Initial questions are used to focus on the characteristics, behaviours and values of potential and existing clients and how they relate to the values we hold as a firm. It also considers the services we propose to provide to clients to ensure that they are appropriate, that the risks can be managed and we have the skills to deliver the engagement.

As part of our Take-On procedures we consider various matters including client identification, legal structures, ownership, anti-money laundering, current business relationships, sanctions, other conflicts of interest or matters that could impact on our independence for any audits and other public interest assurance engagements.

Where the responses are not straightforward or when certain criteria are met the process is reinforced by consultation with more senior individuals and for the most challenging matters, we hold a Central Take-On Panel (CTOP). This is comprised of our senior leadership, who work to assess such opportunities. Within Audit there is an additional bid/no bid process for those entities that are not subject to CTOP but meet specific criteria.



Family tree research and creation



Client verification and due diligence checks



UK and international relationship checks



Specific consultations on proposed engagements



Support for our CTOP and wider Beyond Compliance process

## Audit specific matters

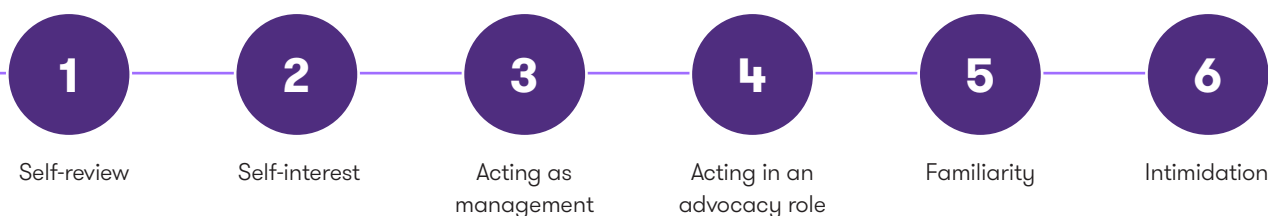
### Non-audit services (including other assurance services)

Prior to accepting any non-audit service to any audit client, approval must be received from the relevant audit engagement leader. This approval is only given after consideration of the permissibility of any service, the possible threats to our independence and the adequacy of any planned safeguards. Consultation with the Ethics Function is required in situations where there is increased complexity as to the permissibility of a service or the proposed safeguards.

Where required, the circumstances are communicated to the audit client's audit committee or those charged with governance and in the case of PIEs, non-audit services are subject to audit committee approval prior to commencement of work.

### Audit independence assessment

On each audit engagement, our teams make a full assessment of independence at the planning stage. This assessment is ongoing throughout the audit and considers both the firm and the audit team members independence. This assessment is made through consideration of the six key independence threats\*:



Specifically, in relation to familiarity we have detailed rules relating to engagement leader and team rotation. These rules are based on the relevant requirements for the specific audit, which in most cases is the FRC's Ethical Standard. On occasion we are required to specifically comply with other requirements for example IESBA and the SEC.

Nature of entity	Role	Term (years)	Cooling off (years)
PIE/other listed entities	Audit RI or KAP	5	5
PIE/other listed entities	EQR	7	5
PIE/other listed entities	Key partners involved in the Engagement	7	2
PIE/other listed entities	Other partners and people in senior position	7*	Subject to assessment of the threats and safeguards to independence
Non listed	All roles	10	2

\* Extensions subject to consultation with the Ethics Partner/Ethics Function and applicable safeguards.

On limited occasions we may utilise the exemptions within sections 3.14 and 3.15 of the FRC Ethical Standard. For our non-listed audits, an extension may be given for a limited period, to help maintain audit quality, after consultation and subject to appropriate safeguards.

From a firm's perspective we follow the relevant legislative requirements in respect of auditor rotation.

4. For definitions see Appendix K

## Support to teams

We have several functions that support our teams to ensure we meet relevant quality requirements.

### Take-On team

We have a centralised Take-On team to support our Acceptance and Continuance process. The team is responsible for undertaking key Take-On checks, on behalf of client facing teams. These occur at the time of acceptances and on an ongoing basis supporting the wider Beyond Compliance approach.

### Financial crime team

We are committed to preventing financial crime and maintain a zero tolerance towards any conduct involving financial crime. We have implemented policies and procedures with the primary objective of preventing our services being used by those who wish to commit crime. Our Financial Crime Team is led by our Money Laundering Reporting Officer, Steven Wilson. The team supports us in number of ways including:

- the development of our policies and processes including engagement risk categorisation
- assessment and oversight of our financial crime risks
- guidance and support for challenging audit situations
- training and education
- acting as our suspicious activity reporting channel.

### Regulation

The regulation team supports our compliance with the range of regulations that apply to us. These regulations cover both audit and non-audit services. The regulation team ensure that where necessary information and/or returns are required these are made.

### The Ethics Function

The Ethics Function is fundamental in supporting the practice to meet the requirements of the various independence standards including the FRC's Ethical Standard. The Ethics Function continues to provide support in the application of both external and internal guidance as well as providing consultation support, training and, where relevant, approval across the range of independence matters.

Overall, these support functions work with other teams to further support our audit and client facing teams in respect of complaints, data protection, training, assessment and documentation of our independence and regulatory compliance.

## INEs independence

We have considered the AFGC, the FRC's Ethical Standard, as well as what an objective, reasonable and informed third party would expect in establishing independence criteria for the appointment of our INEs. The PGB is a 'supervisory board' as envisaged by the FRC's Ethical Standard and, therefore, non executive members of the PGB and AQB are not partners or covered persons for the purposes of auditor independence. As a result, personal relationships and business or financial interests of the INEs do not bear directly on our independence as auditors.

However, we are mindful of the impact of public perception and so our INEs are not permitted in respect of any of the entities on our prohibited investments list to:

- be a director
- be a member of the audit committee
- hold a key management position
- hold a direct financial interest.

Prior to their appointment, INEs disclose any business interests they have and declare any conflicts that are apparent to them. We then assess the impact of these on our independence as auditors, as well as the INE's overall independence from the firm and its partners. On an ongoing basis, we require our INEs to disclose any potential conflicts as soon as they become apparent. This includes a quarterly confirmation process that they have no direct financial interests with any of our audits listed on our prohibited investments list. In addition, the INEs confirm their independence annually as part of our Annual Declaration process and any changes to their directorships and personal appointments are also confirmed.

# Monitoring

We have a range of review and monitoring processes at the audit level and across the firm. We utilise a range of Audit Quality Indicators (both firm wide and engagement specific) as well as presenting profession wide indicators in this document. We are also subject to external monitoring primarily by the FRC and the ICAEW (QAD).

### External monitoring

The FRC is the competent authority for the regulation and monitoring of audit firms in the UK. The FRC monitors the firm's audit quality directly in respect of our audits of PIEs. The ICAEW continues to have delegated authority from the FRC to inspect our quality in respect of other audits.

The FRC has continued to engage with us in a number of areas as part of their Audit Firm Monitoring and Supervision obligations including:

- engagement reviews undertaken by the Audit Quality Review (AQR) team
- review of firm-wide processes
- thematic reviews.

Our CEO, Head of Audit, Philip Johnson and Faried Chopdat as independent members of the AQB, and other members of the firm have met the FRC on several occasions during the year. In July 2023 the FRC announced that they would be moving the firm to Tier 2 for monitoring purposes, this would result in them "Perform less frequent inspections of PIE audits, moving to a three-year cycle of inspections and reporting on them within our Tier 2 and Tier 3 inspection and supervision report." We continue to work with the FRC and remain committed to maintaining a positive and regular dialogue with them.

The FRC also performs reviews in respect of certain public sector audits, for further details see "[Public sector audit – including local audit.](#)"

### FRC Annual report – overall assessment for corporate audits

*"We are pleased that the firm has maintained its focus on audit quality and for the second year in a row, 100% of the audits inspected were assessed as good or limited improvements required. These are very positive results and form part of a three year trend of improved inspection results compared to the 2019/20 and 2018/19 inspection cycles.*

*The firm's concerted effort and progress to improve audit quality continues to be very encouraging and we have seen improvements in the underlying culture, systems and processes that support audit quality. Never-the-less, to put these inspection results into perspective, there are likely to be other factors that have also contributed, such as our small sample size (to reflect the number of audits within the scope of the FRC) and the firm's approach of de-risking its audit portfolio.*

*The results from other measures of audit quality, covering a broader population and a larger sample of audits, were also positive. The results from the QAD, ... which is weighted toward higher risk and complex audits of non-PIE audits (within ICAEW scope), assessed 100% of the audits it graded as good or generally acceptable. QAD identified several good practices, including good use of the firm's data analytics tools in the audit of revenue. Over a similar period, the firm's internal quality monitoring process (covering both PIE and non-PIE audits) assessed 76% of audits as meeting its highest quality standard...*

*It is important that the firm maintains a strong focus on quality matters and, given such positive inspection results, guards against the risk of complacency. There is also a need for the firm to make achieving high quality easier for its auditors and this will require ongoing strategic focus and investment in systems and processes.*

### *In response to this year's findings, we will take the following actions:*

- *Perform less frequent inspections of PIE audits, moving to a three-year cycle of inspections and reporting on them within our Tier 2 and Tier 3 inspection and supervision report. This is primarily to reflect the size and risk of the firm's PIE portfolio compared to other large firms. Grant Thornton's improvements in audit quality have provided a base from which to grow its PIE portfolio*
- *Pay particular attention to the firm's internal quality monitoring process where, for every responsible individual, the firm reviews the quality of at least one completed audit each year. We have identified the frequency of this monitoring as good practice*
- *Monitor the implementation of the firm's new audit software and certain independence systems.*

### **Firm's response to the FRCs annual report**

Since the start of our Audit Investment Plan in 2019, we have continued to focus on each of the entities we audit, people, culture in audit, technology, methodology and monitoring. We believe that this year's AQR results (particularly when taken in conjunction with the prior two years results) demonstrate that the actions we continue to focus on are sustainably improving audit quality to a high level. Our reviews this year spanned a broad range of audits, from some of our largest listed entities to large private entities and, as with last year, not all of the files reviewed had the additional processes and reviews that our most complex audits benefit from. Since the start of our AIP, we have had (and continue to have) a robust approach to quality across both our PIE and non-PIE engagements with our quality initiatives being applied across our population of audits. We believe that our most recent QAD results included in this report (which were based on work performed in 2020 and 2021) show this as all nine graded files were grade 2 or above.

We continue our focus on our priority areas to drive strong quality although we recognise (as we stated last year) that, as a people profession reliant on professional judgement, there will always be instances where isolated issues may drive quality points on individual files and there is no way to eradicate that completely either now or going forward.

We take both the AQR and QAD review processes seriously and find the learnings extremely helpful in our continuous improvement journey. Results of our root cause analysis programme (which comprises both cold reviews and warm reviews) provide us with valuable learnings which we then build into future training and cultural activities we undertake to avoid complacency and to continue learning as a practice.

Our single quality plan is in place and represents the development from our AIP and Strategic Improvement Plan. We continue to evolve this as the market changes and as findings arise from both our reviews and other areas of our audit practice. In addition, our systems and processes to adopt ISQM1 are well established and on track for the first testing of those by December 2023.

Our work on audit culture remains of prime importance to us, as a firm, and we see having a strong culture of challenge within our audit practice as being a key element of performing high quality work across all the entities we audit. We note that page 28 (sic) of this report highlights ethical conduct around misconduct, including exam cheating, at certain firms – we absolutely concur that this is a matter of high importance and are pleased that we have not identified any such instances at Grant Thornton in the period. We continue to monitor and challenge our teams on this, including requiring self-certifications in advance of each assessment that the individual has taken the test on their own and without using any unpermitted consultations or the use of factors such as AI to assist them.

Our Audit Quality Board continues to work very effectively, providing support and challenge on key decisions made by the audit practice and helping shape our strategy going forward. Our two audit non executives provide strong governance and challenge as part of this process which aids our focus on delivering high quality audits.

We are delighted with the results of both our external reviews contained in this report, and particularly that over the last three years, all but one of our files reviewed (94%) have been grade 2 or above and will keep a strong focus on all quality related matters to ensure we continue to learn and evolve accordingly and as the market continues to evolve. We will continue to be committed to and invest in delivering high quality audits and to continuing our measured approach to building our portfolio of public interest audits going forward and are delighted with our sustained strong quality review results over the last three years which sets us up optimally for the future.”