



Support measures for businesses and individuals in the context of the COVID-19 crisis – Support measures taken by the Brussels-Capital Region, the French Community Commission and the Common Community Commission

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FULL REPORT (FR)

7

What we assessed and why

In March 2020, the Belgian National Security Council implemented a public health strategy to curb the spread of COVID-19, together with complementary socio-economic measures to support affected businesses and individuals. The Court of Audit carried out a cross-cutting audit of all socio-economic support measures adopted by federal and regional authorities. The audit covered the implementation, monitoring and evaluation of these measures, as well as the organisation of both the regulatory framework and checks on the proper granting of aid.

The three Brussels authorities are the Brussels-Capital Region, the Common Community Commission and the French Community Commission. These authorities adopted 73 measures, worth an estimated €390 million. These measures focus mainly on the economy and employment, but also covered healthcare and social care.

We assessed seven support measures for Brussels, selecting those that, in our view, posed a higher implementation risk.

What we found

While a consultation and coordination system was set up between the various public authorities to manage the public health crisis, no such system was created to manage the socio-economic aspects. The lack of systematic consultation and coordination led to a lack of consistency between support measures at the different levels of government. It also increased the risk of excessive or insufficient support.

The three Brussels governments and their administrations focused in particular on consultation between the parties involved.

The decision-making context was unusual in its urgency. This was due to the need to ensure the continuity of public services and provide a swift, substantial response to the socio-economic consequences of pandemic management. The exceptional circumstances were exacerbated by



the sometimes limited knowledge of needs, combined with considerable demands from certain professional organisations.

The legislative process was adapted to create the flexibility needed to handle the crisis. In particular, this resulted in the granting of special powers to the three Brussels governments.

The Brussels ministerial offices and public administrations often provided innovative solutions. They established effective, consistent processes as a matter of urgency. The automation of checks and the use of authentic sources saved time, benefiting both public services and their beneficiaries, and reduced the risks associated with manual checks on operations.

However, information sharing between administrations and between entities was sometimes limited, especially across different levels of government. The reliability of the data used to make award decisions varied. In some cases, temporary unavailability of data may have led to longer administrative processes or even unjustified refusals of aid.

There were sometimes weaknesses in checks preceding the granting of aid. Some were based on declarations, which reduced their effectiveness. Consequently, there was a risk of aid duplication. The planned ex-post checks had not yet been completed at the time of the audit.

Not all the measures achieved their objectives. In addition, some measures had counterproductive effects, particularly concerning unequal treatment of beneficiaries or a lack of proportionality.

Lastly, the monitoring of measures was largely decentralised, with the exception of budgetary monitoring. This approach restricted oversight by the Brussels governments. They were unable to monitor measures with no budgetary impact and lacked an overview of the implementation of the measures and their impact over time.

What we concluded

The Brussels-Capital Region, the Common Community Commission and the French Community Commission reacted quickly to the COVID-19 pandemic by taking a number of socio-economic support measures following the adoption of health measures by the Federal Government.

In order to properly address our findings, we made a number of recommendations on the inventory, coordination, development, regulatory framework, control, monitoring, and evaluation of socioeconomic support measures.