

# TEWKESBURY BOROUGH COUNCIL

**Minutes of a Meeting of the Audit and Governance Committee held at the Council Offices, Gloucester Road, Tewkesbury on Wednesday, 24 July 2019 commencing at 2:00 pm**

## **Present:**

Chair	Councillor V D Smith
Vice Chair	Councillor H C McLain

## **and Councillors:**

K J Cromwell, P A Godwin, P D McLain, H S Munro and P E Smith

### **A&G.3 ANNOUNCEMENTS**

- 3.1 The evacuation procedure, as noted on the Agenda, was advised to those present.
- 3.2 The Chair indicated that he had accepted an urgent item of business in accordance with Council Procedure Rule 26 as set out in the Council's Constitution. This would be considered at Agenda Item 17 – Depot Services Working Group.

### **A&G.4 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS**

- 4.1 Apologies for absence were received from Councillors C M Cody and L A Gerrard. There were no substitutes for the meeting.

### **A&G.5 DECLARATIONS OF INTEREST**

- 5.1 The Committee's attention was drawn to the Tewkesbury Borough Council Code of Conduct which was adopted by the Council on 26 June 2012 and took effect from 1 July 2012.
- 5.2 There were no declarations made on this occasion.

### **A&G.6 MINUTES**

- 6.1 The Minutes of the meetings held on 28 March and 28 May 2019, copies of which had been circulated, were approved as correct records and signed by the Chair.

### **A&G.7 AUDIT COMMITTEE WORK PROGRAMME**

- 7.1 Attention was drawn to the Audit and Governance Committee Work Programme, circulated at Pages No. 12-17, which Members were asked to consider.
- 7.2 The Head of Corporate Services indicated that the Work Programme was quite substantial and the Committee would be busy over the course of the next year. He advised that the Counter Fraud Unit was working on an updated Anti-Fraud and Corruption Policy which would be brought to the Committee in December and the Work Programme would be updated accordingly.

- 7.3 It was  
**RESOLVED** That the Audit and Governance Committee Work Programme be  
**NOTED.**

#### **A&G.8 COUNTER-FRAUD UNIT REPORT**

- 8.1 Attention was drawn to the report of the Head of Finance and Asset Management, circulated at Pages No. 18-26, which provided assurance over the counter fraud activities of the Council. Members were asked to consider the annual update from the Counter Fraud Unit and make comments as necessary.
- 8.2 The Counter Fraud Manager advised that a new work plan had been produced for 2019/20, attached at Appendix 1 to the report, with a focus on reducing corruption in public procurement which was a big financial risk. Staff awareness training was also being arranged and a similar session had been organised for Members in October. It was noted that the Council Tax Reduction Scheme was now fully embedded - the Counter Fraud Unit investigated alleged fraud and abuse in relation to that scheme as well as acting as a single point of contact for the Department for Work and Pensions. In addition, the Unit would be carrying out a National Fraud Initiative (NFI) data match review in Revenues and Benefits and would be developing its work on public protection enforcement.
- 8.3 A Member welcomed the presentation to Members which had been organised for October and indicated that this might also be useful for Town and Parish Councils. The Head of Corporate Services advised that it might be possible to add something the Agenda for the next Town and Parish Council seminar in November. It was subsequently  
**RESOLVED** That the annual update on the work of the Counter Fraud Team be **NOTED.**

#### **A&G.9 EXTERNAL AUDITOR'S AUDIT FINDINGS**

- 9.1 Attention was drawn to Grant Thornton's report, circulated at Pages No. 27-56, which set out the audit findings for the Council for 2018/19. Members were asked to consider the report.
- 9.2 The representative from Grant Thornton explained that the report highlighted the key findings from its audit of the Council's financial statements for the year ended 31 March 2019 and its review of the Council's value for money arrangements. Under the National Audit Office Code of Practice, Grant Thornton was required to report whether, in its opinion, the Council's financial statements represented a true and fair view of its financial position and income and expenditure for the year, and whether they had been prepared in accordance with the Chartered Institute of Public Finance and Accountancy (CIPFA) code of practice on local authority accounting and the Local Audit and Accountability Act 2014. The key headlines were set out at Page No. 29 of the report and she was pleased to report that the final statement accounts process had gone very smoothly this year. In terms of the findings, a small number of issues had been identified but none related to a material amount and there were no concerns in terms of being able to issue an unqualified opinion on the accounts. At the time of writing the report, there were a small number of areas where work was ongoing, as set out at Page No. 40 of the report, but it was noted that these had now been concluded and the management letter of representation was the next item on the Agenda. A final review of the Statement of Accounts would be undertaken prior to it being signed off and she extended her thanks to the Head of Finance and Asset Management and his team for their hard work and co-operation.

9.3 In terms of value for money, it was noted that an 'except for' conclusion had been issued in 2017/18; however, Grant Thornton was satisfied with the level of preparation made in response to the recommendations arising from that and would be pleased to issue a clean opinion this year. The key findings from the audit were summarised at Page No. 33 of the report and showed that three issues had been identified, although none were material. In terms of fees and charges, testing had shown that some income was related to the following year and should have been allocated as a receipt in advance and, when extrapolated, this had given a projected major error. Additional testing was carried out in order to reduce the extrapolated error and no further errors had been identified, therefore it was not a material concern. With regard to the cash flow statement, a few errors had been identified which had led to it being reviewed by management and subsequently being reinstated. There was one item that could not be reconciled and, whilst not significant, it did need to be brought to the Council's attention. Members were advised that the third issue related to a longstanding court case dealing with age discrimination in the judges and firefighters pension schemes. The government had applied to the Supreme Court for permission to appeal the ruling but that had been unsuccessful. The ruling around age discrimination would have implications for the Local Government Pension Scheme and the Council's actuary had been working on a best estimate in order to see the potential impact on the authority. At this point in time it was thought that the impact on Tewkesbury Borough Council would be in the region of £174,000, although that would be refined over the coming months. Given its size, Officers did not want to make an adjustment and Grant Thornton was not minded to either. An action plan was included at Page No. 46 of the report which management had responded to accordingly.

9.4 A Member indicated that he had been concerned that the impact on the pension scheme might be more significant and the representative from Grant Thornton stressed that the exact amounts were very unclear but an exercise had been carried out based on the worst case scenario of 3.2% which had been adjusted to the specific circumstances of the authority; she did not want to give the impression that £174,000 was the definitive figure. The Chair thanked the external auditors and the Council's Finance Team on behalf of the Committee and it was

**RESOLVED** That Grant Thornton's audit findings 2018/19 be **NOTED**.

#### **A&G.10 LETTER OF REPRESENTATION**

10.1 Attention was drawn to the Section 151 Officer's Letter of Representation on the financial statements for the year ended 31 March 2019, which had been circulated at Pages No. 57-63. Members were asked to approve the letter.

10.2 The Head of Finance and Asset Management advised that, as the Section 151 Officer, he was required to write a Letter of Representation to the external auditors which outlined the principles on which the accounts were based and confirmed compliance with the law and the level of information provided to Grant Thornton to complete the audit, as well as disclosing any fraudulent activity that may have taken place. The contents of the letter, attached at Appendix 1 to the report, had been agreed with Grant Thornton and formal approval was sought from the Committee.

10.3 Accordingly, it was

**RESOLVED** That the Letter of Representation be **APPROVED** and signed by the Section 151 Officer.

**A&G.11 STATEMENT OF ACCOUNTS 2018/19**

- 11.1 The report of the Head of Finance and Asset Management, circulated at Pages No. 64-153, attached the Statement of Accounts for 2018/19 which Members were asked to approve.
- 11.2 The Finance Manager drew attention to Page No. 65, Paragraph 2.0 of the report which summarised the financial position of the Council as at 31 March 2019 and showed a surplus of £2.7M against budget which included earmarked reserved and planning obligations for which there was no budget. She indicated that Members had gone through the accounts in detail during a training session prior to the Committee meeting but she would be happy to answer any further questions.
- 11.3 It was  
**RESOLVED** That the Statement of Accounts for 2018/19 be **APPROVED**.

**A&G.12 EXTERNAL AUDITOR'S FEE LETTER 2019/20**

- 12.1 Attention was drawn to Grant Thornton's fee letter, circulated at Pages No. 154-156, which set out the proposed fee for 2019/20, together with the scope and timing for the work. Members were asked to consider the fee letter.
- 12.2 The representative from Grant Thornton advised that the external auditors were required to formally write to local authorities each year to set the fee for the next audit. The Public Sector Audit Appointments Ltd (PSAA) was responsible for setting the scale fee as the result of a national procurement exercise which was undertaken every five years to award contracts to auditors. The scope of the work was not proposed to change for 2019/20 and the scale fee for Tewkesbury Borough Council was £34,589 which was the same as 2018/19. Any requirement to vary the fee would be reported to the Committee.
- 12.3 A Member indicated that he was pleased the fee remained much lower than in previous years and the representative from Grant Thornton advised that the fee had reduced by around two-thirds over the last 10 years. It was subsequently  
**RESOLVED** That the Grant Thornton fee letter 2019/20 be **NOTED**.

**A&G.13 INTERNAL AUDIT MONITORING REPORT**

- 13.1 The report of the Head of Corporate Services, circulated at Pages No. 157-172, was the final monitoring report of the financial year and summarised the work undertaken by the Internal Audit team since the last Committee. Members were asked to consider the audit work completed and the assurance given on the adequacy of the internal controls operating in the systems audited.
- 13.2 The Head of Corporate Services advised that the full details of the work undertaken were attached at Appendix 1 to the report and gave the opinion in relation to audits on the project management framework and Ubico health and safety. A list of audit recommendations that were due to be followed-up could be found at Appendix 2 to the report; of the 10 recommendations followed-up during the period, seven had been implemented, two partially implemented and one was yet to be implemented. Appendix 3 to the report gave an overview of the status of the Internal Audit Plan 2018/19.
- 13.3 With regard to the audit of the project management framework, Members were advised that this had been in place for four years and incorporated a range of documents and guidance on how key corporate projects should be managed, for example, refurbishment of the Public Services Centre, the new leisure centre etc. It was recommended that the guidance be reviewed to ensure it was up-to-date and

reflected the latest risk management strategy and General Data Protection Regulation (GDPR) privacy and retention guidelines. All project documentation was stored on Sharepoint and could be accessed by all relevant Officers. A limited audit opinion had been issued in terms of the operation of the framework e.g. training, ensuring completeness of documents etc. This was overseen by the Corporate Services Officer but testing had shown that, whilst the key documentation was in place, underlying supporting documentation, such as privacy impact assessments, was not consistently available. With regard to the Sharepoint system, assurance was obtained that this was being maintained but risk registers had not been completed for every project which was not compliant with the Council's corporate risk management strategy. Although the vast majority of corporate projects were identified through the framework, it was recommended that the Corporate Services team go through all service plans to ensure all potential projects were identified so that delivery could be overseen. It was noted that the framework set out clear criteria for defining a project and the Programme Board was well-established and was providing adequate challenge. It was recommended that projects where the overall status was 'green' should also be reviewed by the Board to ensure that status was accurate. A Member noted that a limited opinion had been issued and he presumed that would be addressed going forward. In response, the Head of Corporate Services confirmed that the recommendations arising from the audit were set out in the final column of the table at Appendix 1 to the report and a report would be taken to Programme Board by the end of October to set the benchmark. He provided assurance that his team was already working on updated guidance documents for projects and, as with all audits, this would be followed-up in due course to give assurance that all recommendations had been implemented. A Member questioned whether sufficient attention was being paid to risk and the Head of Corporate Services advised that external project management had been brought in for some of the high profile, more complex projects so he was satisfied it was being adequately considered in those instances; it was the less significant projects that needed to be sharpened up. In response to a query as to whether Officers understood what they needed to do, Members were informed that it was intended to hold a training session for all Operational Managers as they tended to lead projects in their teams. He provided assurance that the Programme Board would be making sure that risk registers were included as and when projects came forward.

- 13.4 Members were advised that a satisfactory level of control had been found to be operating in the audit of Ubico health and safety monitoring. The Head of Corporate Services explained that there was a raft of governance around Ubico including the Environmental Services Partnership Board (ESPB), quarterly Management Team updates, monthly management reports, biannual reports to the Overview and Scrutiny Committee and an annual health and safety report to the Audit and Governance Committee. A restructure of the company in 2018 had resulted in the creation of a Head of Compliance post to help foster a health and safety environment and ensure the relevant risk assessments were in place. Following this, Ubico had achieved the International Standard for Health and Safety which gave good assurance health and safety was being adequately addressed. It was noted that Ubico worked with the Head of Community Services, the Grounds Maintenance Project Officer and the Joint Waste Team Officer to review operational activities on a regular basis e.g. crew checks etc. and they also had a relationship with the Council's Health and Safety Officer. There were recommendations in respect of risk assessment and safe systems of working to further improve monitoring, and for Ubico to undertake regular health and safety checks on bring sites that were open to the public which would then give a full picture and ensure that all assessments that should be in place were in place. A Member queried whether risk assessments were specific, as he was aware that a lot of companies tended to use generic assessments, and was advised that they were generally robust but there was a need to ensure that everyone used the same systems. With regard to a query in respect of a recent accident, Members were informed that

accidents should be reported within 24 hours and a detailed report would follow which should be received by the Client Monitoring Officer. The Head of Corporate Services indicated that it was probably too early to know the outcome but he provided assurance that a report would be taken to the ESPB setting out the risks and controls in place along with any recommendations.

- 13.5 Attention was drawn to Appendix 2 to the report and Members were advised that all recommendations due to be followed-up had been followed-up. One recommendation in respect of commercial waste had not been implemented and the Chief Executive had now requested a meeting of key officers to resolve the issues which had meant that some people continued to receive a service despite no longer paying for it. There were two amber recommendations which had been partially implemented: a review of the trade waste services was currently underway and a report would be presented to the Overview and Scrutiny Committee in January 2020 on the long term sustainability of the service; and a draft corporate retention schedule had been produced and was due to be presented to the GDPR Information Group next month for sign-off.
- 13.6 Having considered the information provided, it was  
**RESOLVED** That the Internal Audit Plan Monitoring Report be **NOTED**.

#### **A&G.14 INTERNAL AUDIT ANNUAL REPORT 2018/19**

- 14.1 Attention was drawn to the report of the Head of Corporate Services, circulated at Pages No. 173-181, which provided Members with a summary of the internal audit work undertaken in 2018/19, together with an opinion on the overall adequacy and effectiveness of the organisation's control environment. Members were asked to consider the report and the assurance that, overall, the Council's framework of governance, risk management and control was generally effective and, where concerns had been identified, there had been a positive management response.
- 14.2 Members were advised that the Public Sector Internal Audit Standards (PSIAS) required the Council to produce an annual internal audit opinion and report which could be used by the organisation to inform its Annual Governance Statement. The audit plan took a risk-based approach and was informed by governance-related work; work on fundamental financial systems; work of a service-based nature; corporate improvement work; follow-up work; and consultancy and advice. Page No. 175, Paragraph 2.2 of the report gave an overview of the audits undertaken during the year and it was noted that one audit was outstanding in relation to ICT disaster recovery which would be completed during the first half of 2019/20. Paragraph 2.3 of the report set out the corporate improvement work that had been carried out. A key area of assurance work that was of particular importance to management and Members was the follow-up of internal audit recommendations and a number of days were allocated within the plan for this work. It was noted that the team was also represented on key corporate groups such as the 'Keep Safe, Stay Healthy' Group.
- 14.3 The structure of the Internal Audit team was outlined at Page No. 176, Paragraph 3.0 of the report, and Members were informed that team comprised two part-time employees and one full-time employee with one undertaking a senior role. This resource was deemed appropriate, sufficient and was effectively deployed to achieve the plan. As defined in the Internal Audit Charter, the team had remained organisationally independent during 2018/19 and internal audit sat independently within the Council. The Head of Corporate Services reported directly to the Chief Executive so had free and unfettered access and, if necessary, could also have access to the Chair of the Audit and Governance Committee. With regard to the independence of the Head of Corporate Services, it was not uncommon for the internal audit strategic lead to also have operational responsibility for service areas.

The Head of Corporate Services explained that he had a wide managerial remit including ICT, Customer Services, Human Resources and Policy and Communications. In cases where an audit was undertaken in any of those areas, he could give assurance that all audit opinions were exercised objectively and with integrity so that the opinions issued were open, transparent and accurate.

- 14.4 Members were advised that an independent assessment of internal audit activity had been undertaken in November 2017, as required by PSIAS, and implementation of recommendations arising from that review had been the focus for improvement during the course of 2018/19. The majority of these had been delivered and reported to the Committee as set out at Page No. 177, Paragraph 4.2 of the report, and the outcome of the review had been formally reported at the last Audit Committee meeting. It was noted that a review of the Council's risk management arrangements had been undertaken during the year which had led to the approval of a new Risk Management Strategy and implementation of a new corporate risk register which would be presented later in the meeting. This was a positive outcome for internal audit and days had been allocated within the 2019/20 Internal Audit Plan to monitor the risks and give assurance it was being effectively managed.
- 14.5 The opinion on the overall adequacy of the control environment was based upon, and limited to, activities audited during the year. A total of 36 opinions had been given, 13 of which were 'good', 15 'satisfactory' and eight 'limited'. It was not unexpected to conclude a 'limited' or 'unsatisfactory' level of control given the variety and complexity of systems, procedures and services operated by the Council so it was pleasing to note that no 'unsatisfactory' opinions had been issued in 2018/19. The eight limited opinions were detailed at Page No. 178, Paragraph 6.3 of the report and these would be followed-up during the year; some had already been implemented, for instance, garden waste stock control of sticker licences. It was noted that two of the risk areas were included within the Annual Governance Statement which would be considered under the next Agenda Item. A total of 55 recommendations had been made with five categorised as high risk, 31 as medium risk and 18 as low risk. The team had followed-up 80 recommendations, 44 of which had been implemented, 15 partially implemented and 21 not yet implemented. New implementation dates had been agreed for all outstanding recommendations and they would be followed-up in accordance with those dates. Members were advised that no incidents of fraud, theft, corruption or whistleblowing had been reported during the year.
- 14.6 A summary of audit performance during the year was included at Page No. 180, Paragraph 8.1 of the report which showed that 93.75% of planned audits had been completed; 80% of audits had been completed within time; and client satisfaction, derived from a survey at the end of each audit, was generally positive. In terms of the overall audit opinion for the year, given the complexities of the Council's control environment there would always be areas identified by internal audit that required improvement; however, the internal audit opinions issued during the year demonstrated that, overall, the Council's governance, risk management and control environment was generally sound. Where areas of concern had been identified there had been a positive management response and all recommendations subject to follow-up by internal audit had been followed-up and reported to the Audit and Governance Committee at the appropriate time.
- 14.7 It was
- RESOLVED** That the internal audit annual report be **NOTED**.

**A&G.15 ANNUAL GOVERNANCE STATEMENT 2018/19**

- 15.1 The report of the Corporate Governance Group, circulated at Pages No. 182-196, attached, at Appendix 1, the Council's Annual Governance Statement 2018/19 which Members were asked to approve.
- 15.2 The Borough Solicitor explained that the Accounts and Audit Regulations 2015 required local authorities to conduct a review, at least once a year, of the effectiveness of its systems of internal control and include an Annual Governance Statement reporting on the review with any published Statement of Accounts. The Annual Governance Statement should normally be approved at the same time, or prior to, the Statement of Accounts. The draft Annual Governance Statement for 2018/19 was attached at Appendix 1 to the report and identified four Significant Governance Issues that required improvement, set out in the table at Page No. 194. The four areas identified were: Community Infrastructure Levy (CIL) governance arrangements; Ubico financial governance; serious crime framework key policy review; and Local Code of Corporate Governance. Progress against implementing the proposed actions would be monitored by the Audit and Governance Committee.
- 15.3 It was
- RESOLVED** That the Annual Governance Statement 2018/19 be **APPROVED.**

**A&G.16 CORPORATE RISK REGISTER**

- 16.1 The report of the Head of Corporate Services, circulated at Pages No. 197-217, asked Members to consider the risks contained within the corporate risk register and assurance that the risks were being effectively managed.
- 16.2 Members were advised that the corporate risk register was a high-level tool which helped management to consider what the corporate risks were and how they were being managed. The scoring was based on three stages: gross risk score – the inherent risk without any mitigating controls in place; current risk score – the assessed risk after the application of controls; and target risk scores – proposed risk score by applying future controls in the current risk score was deemed to be too high. The format of the register was commonly used throughout local government and, whilst there was no statutory requirement to have a register in place, it was seen as good practice and helped the Audit and Governance Committee to gain assurance that risks were being effectively managed. The register in its current format had first been presented at Audit Committee in December 2018 and the template included a 'comment' box below each risk which provided updates on the status of the risk. Key actions arising since the register had last been presented to the Committee were outlined at Page No. 201, Paragraph 3.1 of the report and particular attention was drawn to the risk in respect of cyber security as the Cabinet Office had now issued the certificate to confirm Public Sector Network compliance so that risk had been minimised. With regard to the waste partnership, it was noted that a report had been taken to the Overview and Scrutiny Committee the previous day and a Depot Services Working Group had been established accordingly – the Audit and Governance Committee would be considering that report later in the meeting. Initial discussions had taken place regarding the relocation of the Swindon Road depot and fraud awareness training had been arranged for Members, as had been reported earlier in the meeting. The Head of Corporate Services advised that a new risk had been added to the register by the Corporate Management Team in respect of the Garden Town project and that was shown in bold at Appendix 1.

16.3 A Member drew attention to Paragraph 2.2 of the report which asked the Committee to consider whether the register was complete and if any risks were missing. He felt it was right to include Brexit as a potential risk and suggested there was a need to consider the international impact in the context of the upcoming American election in terms of the Council's financial position which could be significant. The Borough Solicitor felt this was a fair point and indicated that it could be picked up the next time the Corporate Management Team reviewed the risk register.

16.4 It was

**RESOLVED** That the risks and mitigating controls within the Corporate Risk Register be **NOTED**.

#### **A&G.17 INTERNAL AUDIT QUALITY ASSURANCE AND IMPROVEMENT PROGRAMME**

17.1 Attention was drawn to the report of the Head of Corporate Services, circulated at Pages No. 218-228, which attached, at Appendix 1, the quality assurance and improvement programme. Members were asked to consider the contents of the programme.

17.2 Members were advised that, in accordance with standard 1300 of the Public Sector Internal Audit Standards (PSIAS), it was necessary to develop and maintain a quality assurance and improvement programme that covered all aspects of internal audit activity. This programme was attached at Appendix 1 and included internal audit Key Performance Indicators (KPIs) at Pages No. 226-227. A summary of the improvement actions identified was included at Page No. 228 which was essentially an action plan for this financial year. Actions outstanding from the peer review in 2017 were annotated with an asterisk and related to the establishment of an audit manual to support internal processes; undertaking an audit of the risk management framework; and undertaking an ICT risk assessment. Other actions related to supporting one of the team to achieve a recognised internal audit qualification; looking at feasibility of new income streams through the implementation of a training programme for other internal auditors; providing training to new Members of the Audit and Governance Committee; carrying out a management survey to ensure the value of internal audit was being maximised; undertaking an assurance mapping exercise; and reviewing audit documentation and processes including intranet and website pages. It was intended to bring the programme to the Audit and Governance Committee on an annual basis going forward.

17.3 It was

**RESOLVED** That the contents of the quality assurance and improvement programme be **NOTED**.

#### **A&G.18 AUDIT AND GOVERNANCE COMMITTEE ANNUAL REPORT 2018/19**

18.1 Attention was drawn to the report of the Head of Corporate Services, circulated at Pages No. 229-242, which attached, at Appendix 1, the Audit Committee Annual Report 2018/19 for approval.

18.2 The Head of Corporate Services explained that the Terms of Reference of the Audit and Governance Committee required the production of an annual report in order to demonstrate the broad range of issues that the Committee had considered and reviewed throughout the year. Following approval of the report, it would be presented to Council by the Chair of the Committee. It was subsequently

**RESOLVED** That the Audit and Governance Committee Annual Report 2018/19 be **APPROVED**.

**A&G.19 DEPOT SERVICES WORKING GROUP**

19.1 Attention was drawn to the report of the Head of Community Services, circulated separately, which informed Members that the Overview and Scrutiny Committee had resolved to establish a Depot Services Working Group at its meeting on 23 July 2019. The Committee was asked to appoint a Member of the Audit and Governance Committee to sit on that Group in accordance with the Terms of Reference attached at Appendix A to the report.

19.2 Members were advised that the approved Terms of Reference for the Depot Services Working Group set out that the Group would comprise nine Members of the Council to include six Members of the Overview and Scrutiny Committee, one Member of the Audit and Governance Committee and the Lead Members for Clean and Green Environment and Finance and Asset Management. It was therefore necessary for the Audit and Governance Committee to appoint a Member to sit on the Group to enable it to commence its work.

19.3 It was

**RESOLVED** That Councillor V D Smith be appointed to the Depot Services Working Group.

The meeting closed at 3:14 pm