

## **GOVERNANCE AND AUDIT COMMITTEE**

Minutes of a Hybrid meeting held on 23<sup>rd</sup> June, 2025.

The Committee agenda is available [here](#).

The recording of the meeting is available [here](#).

Present: Councillors: G. Ball, M.J. Hooper, J. Protheroe and N.J. Wood; and G. Chapman, M. Evans and N. Ireland (Lay Members).

Also present: Councillors I. G. John (Cabinet Member for Leisure, Sport and Wellbeing) and E. Williams (Cabinet Member for Social Care and Health).

### **101 ANNOUNCEMENT –**

Prior to the commencement of the business of the Committee, the Democratic and Scrutiny Services Officer read the following statement: “May I remind everyone present that the meeting will be live streamed as well as recorded via the internet and this recording archived for future viewing”.

### **102 APPOINTMENT OF CHAIR –**

**RESOLVED – T H A T** G. Chapman (Lay Member) be appointed Chair for the current Municipal year.

### **103 APPOINTMENT OF VICE-CHAIR –**

**RESOLVED – T H A T** N. Ireland (Lay Member) be appointed Vice-Chair for the current Municipal year.

### **104 APOLOGY FOR ABSENCE –**

These were received from Councillor E. Goodjohn.

### **105 MINUTES –**

**RESOLVED – T H A T** the minutes of the meeting held on 24<sup>th</sup> March, 2025 be approved as a correct record.

### **106 DECLARATIONS OF INTEREST –**

No declarations of interest were received.

## 107 CORPORATE CONCERNS AND COMPLAINTS POLICY REVIEW (REF) –

The report presented by the Operational Manager - Customer Relations and approved by Cabinet, made amendments to the Corporate Concerns and Complaints Policy following the recent light touch review and had been referred to the Governance and Audit Committee for consideration.

Amendments made to the Policy following the review were limited and sought to improve clarity of information and to ensure that contact details were up to date. There had been no changes to the processes and procedures for managing complaints.

The Council adopted the Welsh Government's Model Corporate Concerns and Complaints Policy in July 2013. Complainants who remained unsatisfied after Stages 1 and 2 of the Policy could refer their complaint to the Public Service Ombudsman for Wales (PSOW) and as that process remained unchanged, the Council's adoption of the same remained the case.

Although the guidance had not changed and the process for dealing with complaints remained unaltered, regular review of the Policy was required for the following reasons:

- Continuous Improvement: Updating the Policy could help reflect lessons learned and enhance effectiveness.
- Relevance and Clarity: As the Council developed roles, procedures and contact points may change. Regular reviews kept the Policy accurate, clear and relevant to current operations.
- Citizen Trust and Transparency. A well-maintained Policy demonstrated to residents that the Council valued feedback and took complaints seriously, building trust and improving relationships.

The purpose of the Policy was to ensure that complainants' experiences were consistent and that a fair response was given to raising concerns and complaints with all Council services.

In April 2022 the Council implemented the Unacceptable Actions by Citizens and Social Media Policies. As a result of the most recent "light touch" review of the Policy:

- Additional information had been added in relation to handling of Welsh Language Complaints.
- To ensure that citizens had easy access to effective and timely resolution to their complaint, signposting information had been added for accessing complaint types not included in the Corporate Concerns and Complaints Policy, such as Social Services.
- Based on feedback from the Public Services Ombudsman for Wales, the 'What Constitutes a Complaint' section and what was not included had been updated and clarified.

No.

- An appendix had been added detailing alternative ways complaints processes could be accessed.

N. Ireland (Vice-Chair) referred to page 8 of the policy which outlined learning lessons being considered by the management team, and he queried whether a 6 monthly summary was sufficient. In response, the Operational Manager - Customer Relations advised that due to the number of complaints summary updated were being reported to the Strategic Leadership Team on a quarterly basis. In addition, real time information was available to managers specific to their own service area via a dashboard.

N. Ireland also queried whether there was enough narrative in the policy to show how the Council intended to learn from complaints.

Councillor J. Protheroe commented on the 26% of complaints that were wrongly categorised, whether that was because they sat outside the policy or by definition. It was important for residents to be made aware whether their complaint was actually a complaint. The Operational Manager - Customer Relations stated that all complaints would be reviewed in the first instance to ensure that it related to the policy, and it would then be referred to the relevant service area.

G. Chapman (Chair) stated that the policy was well written but did require some amendments has highlighted by N. Ireland and Councillor Protheroe.

Subsequently, it was

RESOLVED – T H A T the views of the Governance and Audit Committee in relation to the policy be referred to Cabinet. The comments relating to the following:

- For further clarity to be added in relation to the regularity of complaints being reported to the Strategic Leadership Team which would be on a quarterly basis rather than six monthly.
- That narrative be included to outline within the policy how the Council would learn from complaints received.
- For narrative to be included within the policy to outline what was a complaint and how the Council would address identified areas for improvement.

#### Reason for decision

Having regard to the contents of the report and discussions at the meeting.

#### 108 CORPORATE RISK: QUARTER 4 UPDATE (DCR) –

The report provided Members with an overview of the Corporate Risk Register for Quarter 4 (April 2024-March 2025). The report also reflected the Strategic Leadership Team's (SLT) consideration of the recommendations made by the Committee following the quarter 3 period relating to several of the risks contained within the Corporate Risk Register.

No.

The Corporate Risk Register had a total of twelve identified risks with one risk scoring very high, four risks scoring high, five risks scoring medium/high, and two risks scoring medium.

There had been an increase in the Delivery of Major Regeneration Projects risk following a re-evaluation of this risk and the impact of external delays extending project timelines. The remaining risks had remained static during the quarter.

There were four risks on the Register that were forecast to increase over time. These were: Information and Cyber Security, Climate Change and Nature Emergency, Social Care Demand and Capacity and Physical Assets.

Councillor M. Hooper commented on the lack of language used within the report and the likely catastrophic impacts associated with some risks. Councillor Hooper also queried the viability of some of the Council's major regeneration projects, such as the Barry Marina and the perceived lack of foresight. In reply, the Operational Manager - Corporate Strategy and Insight stated that the way issues are reported can be looked into particularly around the full impacts and what the Council were doing to mitigate risks. Regarding Barry Marina, it was important to consider that the project appeared on the Council's risk register last year when some issues were identified following a review.

N. Ireland (Vice-Chair) asked for clarification of the risk scoring matrix and particularly in relation to two risks, the Information Cyber Security risk and the transition from the Welsh Community Care Information System (WCCIS) risk, both of which had control effectiveness scores of four, yet, the residual risk score was only coming down for the Information Security risk from 12 to 9 and 16 to 9 for WCCIS. The Operational Manager stated the issue of clarity and the risk scoring matrix, would be taken away and opportunities to engage with Committee members would be considered.

M. Evans referred to recent cyber attacks against large companies and councils and he asked whether those sorts of attacks were considered as part of the Council's Information Security risk. The Operational Manager confirmed that the Council was digitally very aware in terms of the attacks that had happened on other organisations and the impact on other local authorities. Briefings had been provided to SLT and other officers in terms of the implications and the safeguards that needed to be in place.

G. Chapman (Chair) commented that a further update on major regeneration projects would be provided in the next quarterly update report, but there was another issue in relation to the level of public information available and the legal costs from the tendering for the demolition of the former Aberthaw power station, which would have a direct impact on the amount available for other regeneration or investment projects being pursued by the Cardiff Region City Deal.

The Chair also raised a concern regarding contract over runs and over spends for some major regeneration projects where the costs had doubled from initial estimates, so it was something that the Committee needed to monitor.

No.

There being no further queries or comments, the Committee

RESOLVED –

- (1) T H A T the response to Cabinet’s resolutions following consideration for referred comments from the Governance and Audit Committee (Annex B), be noted.
- (2) T H A T Quarter 4 position of corporate risks (April 2024-March 2025) outlined in the Risk Summary report (Annex A), be noted.
- (3) T H A T the comments of the Governance and Audit Committee be referred to Cabinet for its consideration. The comments relating to the following:
  - Concern regarding the risks associated with the delivery of major regeneration projects such as Barry Marina.
  - Issues regarding the Cardiff Region City Deal and the impact of the legal settlement relating to Aberthaw power station.
  - Contract over runs and over spends for some projects where the costs had doubled from initial estimates.

Reason for decision

(1,2 & 3) Having regard to the contents of the report and discussions at the meeting.

109 VALE OF GLAMORGAN COUNCIL SETTING WELL-BEING OBJECTIVES  
EXAMINATION (DCR) –

As part of the Council’s annual audit work programme for 2024/25, the Auditor General for Wales undertook an examination that considered the extent to which the Council had applied the sustainable development principle in shaping the setting of its well-being objectives. The report’s key findings were detailed in (Appendix A).

The examination sought to provide assurance on the extent to which the Council had acted in accordance with the sustainable development principle when setting its well-being objectives and to identify opportunities for the Council to further embed the principle when setting well-being objectives in future.

The examination was timed with the development of the Council’s new Corporate Plan (Vale 2030) and carried out in real time. That enabled Audit Wales to observe the key phases of the process, gain insight, audit evidence, and provide interim feedback that helped improve subsequent phases of work.

Audit Wales concluded that, ‘The Council had applied the sustainable development principle to shape the setting of its well-being objectives including effective use of data, alignment with financial plans and a strong approach to involvement’.

No formal recommendations had been made in relation to the examination.

No.

Governance and Audit Committee members were asked to consider the contents of the report with any recommendations and comments being referred to Cabinet for their oversight.

Councillor M. Hooper commented that he considered there to be a disconnect between a positive report such as this and the lived experiences for residents of the Vale. The Council also had to be careful to ensure that it was undertaking work to solve some of the issues for the most vulnerable of people.

Subsequently, it was

RESOLVED –

(1) T H A T the findings from Audit Wales' examination of the extent of the Council's application of the sustainable development principle in setting its well-being objectives, be noted.

(2) T H A T report be referred to Cabinet for its oversight.

#### Reasons for decisions

(1&2) Having regard to the contents of the report and discussions at the meeting.

#### 110 VALE OF GLAMORGAN COUNCIL ANNUAL AUDIT SUMMARY 2024 (DCR) –

The report presented the Auditor General Wales' Annual Audit Summary for the Vale of Glamorgan Council, outlining work completed since the last Audit Summary, issued in May 2024.

The contents of the Council's Annual Audit Summary 2024 (Appendix A) were positive. A number of recommendations had been made in relation to both local (5) and national audit work (12) undertaken during the period as part of the Auditor General's duties.

Recommendations for local reviews included Commissioning (3), Financial Sustainability (2), and Urgent and Emergency Care: Flow out of Hospital (comprising Cardiff & Vale UHB, Cardiff Council and Vale of Glamorgan Council (7).

No recommendations were issued in relation to the setting of well-being objectives review. The Assurance and Risk Assessment review considered the Council's arrangements to secure value for money in the use of its resources and would inform future audit plans for the Council.

In relation to both local and national reports published during the period, consideration had been given by relevant council services to the findings contained within the reports as they have been published, and where appropriate actions had been incorporated within the Council's regulatory tracker throughout the year.

Progress against the external regulatory actions were monitored via the

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Strategic Insight Board, Strategic Leadership Team, Governance and Governance and Audit Committee and Cabinet as work to address them progresses.

Progress against the Council's regulatory actions were also monitored by Audit Wales colleagues throughout the year as part of the Annual Regulatory Plan.

Councillor M. Hooper raised delays to the signing off the accounts for the Cardiff Region City Deal, which formed an update as part of the Governance and Audit Committee meeting agenda on 17<sup>th</sup> February, 2025. Councillor Hooper queried whether there was any indication as to when the City Deal accounts would be finalised. In response, the Head of Finance/Section 151 Officer advised that the deadline for submission for the draft statement of accounts was 30<sup>th</sup> June, and the Council was (at the date of the meeting) still waiting for the draft accounts for the City Deal, and so the Council was in discussion with Audit Wales and other Councils about how the accounts should be presented.

Further the query raised by Councillor Hooper, M. Jones (Audit Wales) stated that he was aware of recent recruitment and changes that would hopefully assist with the preparation of the City Deal accounts. It was also important to recognise that as the projects supported by the City Deal gained traction, the material impact of the City Deal accounts on the constituent Councils would increase. Therefore, the use of estimated accounts had to be carefully considered.

G. Chapman (Chair) stated that the update provided back in February indicated that there were many complicated issues to overcome, and so it was important for those issues to be addressed by the City Deal as a matter of priority. It was therefore agreed for the concerns of the Governance and Audit Committee to be referred to Cabinet, and for the Chair to write on behalf of the Committee, to the Auditor General for Wales, to express concerns around the delays in the finalisation of the City Deal accounts. The matter would also be raised at a meeting of the Section 151 Officers.

Subsequently it was

RESOLVED –

(1) T H A T the contents of the Vale of Glamorgan Council's Annual Audit Summary 2024 report, be noted.

(2) T H A T a comments of the Governance and Audit Committee be referred to Cabinet for its consideration. The comments relating to the following:

- Concern in regard to the delays around the finalisation of the accounts for the Cardiff Region City Deal, which also impacted upon the finalisations of the statement of accounts for the Vale of Glamorgan Council.

(3) T H A T the Chair of the Governance and Audit Committee writes to the Auditor General for Wales to express the Committee's concern of the delays in finalisation the accounts for the Cardiff Region City Deal, which should be produced in a more timely manner.

No.

Reasons for decisions

(1&2) Having regard to the contents of the report and discussions at the meeting.

(3) To express concerns to the Auditor General of the delays in finalising accounts for the Cardiff Region City Deal

111 Q4 AUDIT WALES WORK PROGRAMME UPDATE 2024/25 – VALE OF GLAMORGAN COUNCIL (DCR) –

The purpose of the report was to present to the Q4 update of Audit Wales's work programme as aligned to the Vale of Glamorgan Annual Audit Plan 2024.

Appendix A outlined Q4 progress on Audit Wales's work programme and timetable.

In relation to financial audit work, the Council's statement of accounts 2023/24 had been completed with an unqualified audit opinion provided. Planning work has commenced for the audit of the 2024/25 Accounts consulting with the Council's Section 151 Officer and audit work would start once the signed Statement of Accounts was received, which was anticipated on 31st October 2025.

In relation to 2023/24 performance audit work, final reports had been issued on the thematic reviews of Commissioning, Financial Sustainability, and Planning Service's Governance arrangements and Setting Well-being Objectives.

Assurance & Risk Assessment work for 2024/25 remained ongoing following a workshop with the Strategic Leadership Team on 4th February 2025. The local review of the Council's complaints arrangements was ongoing.

A number of local government national studies were planned for 2024/45, and fieldwork was underway on the reviews of Temporary Accommodation, and Capital Planning in Local Government. The review of Children's Services was currently being scoped.

Having considered the report, it was

RESOLVED –

(1) T H A T the contents of the report be noted.

(2) T H A T the report be referred to Cabinet for its oversight.

Reason for decisions

(1&2) Having regard to the contents of the report and discussions at the meeting.



No.

112 AUDIT WALES: VALE OF GLAMORGAN COUNCIL AUDIT PLAN 2025 (DCR) –

The purpose of the report was to present to the Vale of Glamorgan Council Audit Plan 2025, which was attached at Appendix A.

The Audit Plan for 2025 which, sets out the Auditor General's statutory responsibilities and the work that will be undertaken by the Audit Wales team across financial, performance and other statutory audits throughout the year.

Councillor M. Hooper commented on the importance of linking the review of scrutiny arrangements with an internal review on the effectiveness of the Council's hybrid meetings solution.

The Chair, G. Chapman, referred to page 9 and Significant Financial Statement risks and page 13 and the South East Wales Corporate Joint Committee (SEWCJC) which stated that the SEWCJC transactions and balances were also becoming increasingly complex and therefore there was a risk of material misstatement in the Council's financial statement. That was something that required careful consideration.

Subsequently it was

RESOLVED –

- (1) T H A T the contents of the report be noted.
- (2) T H A T the report be referred to Cabinet for its oversight.

Reason for decisions

(1&2) Having regard to the contents of the report and discussions at the meeting.

113 ANNUAL INTERNAL AUDIT REPORT 2024/25 (HRIAS) –

The report provided the Head of Internal Audit's Annual Opinion on the Council's control environment in relation to governance, risk management and internal control.

It also informed the Governance and Audit Committee of the work and performance of Internal Audit for the Financial Year 2024-25. The information was provided to comply with the Public Sector Internal Audit Standards.

It was highlighted that:

- 85% of the 2024-25 Internal Audit Plan was achieved against a target of 80%.
- 94% of assurance opinions were either Substantial or Reasonable.
- There were only 3 Limited Assurance opinions.

No.

Appendix A contained the Annual Internal Audit Report 2024-25 which detailed Internal Audit's performance, opinions and recommendations made during the year which assist in forming the Head of Internal Audit's Annual Opinion on the Council's overall control environment.

From the work undertaken during the financial year 2024-25 and considering other sources of assurance, the Head of Internal Audit's annual opinion on the adequacy and effectiveness of the Council's framework of governance, risk management and control for 2024-25 was one of 'Reasonable Assurance'.

Those audits that provided an audit opinion during the year were listed in Annex 1, the detailed position against the audit plan was at Annex 2, Annex 3 was the recommendation monitoring position statement and Annex 4 was the questionnaire issued after the completion of each audit.

N. Ireland referred to the Internal Audit Charter later on in the agenda which talked about the Head of Internal Audit annual reports, including information on the quality assurance improvement programme. N. Ireland asked for clarification as to whether that information was included in the report. N. Ireland also queried the satisfaction survey rate. In reply, the Head of Regional Internal Audit Service advised that reference to the quality assurance programme was not in the report per se, but there was reference to the self-assessment which was undertaken on an annual basis and to the external assessments which were completed back in 2022/23. The contents of future reports would be reviewed.

With regard to the survey satisfaction rate, the Head of Service advised that it did include responses to all questions, which were fed into an algorithm that calculated the percentages for each question. If any question received less than a 90% satisfaction rate, then that would be investigated in more detail.

Councillor Protheroe referred to the Limited Assurance Opinion report for the Tender Evaluation & Award Follow Up - Building Services audit, and queried why the position remained unchanged. Councillor Protheroe also queried why the audit was only focussed on tendering and she asked why it did not look at the process from beginning, i.e. from advertising and notices etcetera. The Head of Service advised a second consecutive Limited Assurance Opinion had been issued as at the 31<sup>st</sup> March, 2025. There was the intention to conduct a follow up review as part of the audit work plan for 2025/26. It was noted that progress had been reported with more substantial assurances provided by the service area with bespoke training having been provided to managers. An audit visit was planned for Quarter 2 which would look at the control environment.

In terms of the whole process around procurement, that would be risk assessed within the Council's audit plan process, and which would have considered some concerns that were identified a few years ago in a particular service area, so it was more appropriate to concentrate our audit resources on a particular area moving forward.

Councillor M. Hooper commended the graduate audit trainees for finishing their examinations and offered congratulations to them. Councillor Hooper also

No.

commented on the importance of ensuring that the audit review into hybrid committee meetings was conducted during the year.

N. Ireland commented that it was positive to see the satisfaction return rate increasing and also endorsed Councillor Hoopers comments about the graduates completing their exams and it was also good to see the breadth of technical skills and experiences studied which would help the service to develop.

There being no further queries or comments, the Committee

RESOLVED –

(1) T H A T the Annual Internal Audit Report for the 2024-25 financial year including the Head of Internal Audit's Annual Opinion on the adequacy and effectiveness of the Council's framework of governance, risk management and internal control contents of the report and the progress made against the Internal Audit Risk Based Plan 2024/25 be noted.

(2) T H A T the staff of the Audit Team be congratulated for their hard work and for congratulations be sent to those staff members that have completed their qualifications.

#### Reason for decisions

(1&2) Having regard to the contents of the report and discussions at the meeting.

#### 114 REGIONAL INTERNAL AUDIT SERVICE CHARTER 2025-26 (RIAS) –

The reported provided that the Regional Internal Audit Service (RIAS) Charter establishes the position of internal audit activity within each Council along with reporting lines. It was a formal document that defined the purpose, authority and responsibility of internal audit activities.

The Head of Internal Audit was responsible for reviewing the Charter and presenting it to each Council's Governance and Audit Committee annually for review and approval in line with the Global Internal Audit Standards (GIAS).

One of the key roles which demonstrated the Governance and Audit Committee's oversight was the approval of the Internal Audit Charter.

The Regional Internal Audit Service (RIAS) Charter had been reviewed for 2025-26 to ensure it reflected the requirements of the new Global Internal Audit Standards (GIAS) and that it remained applicable to all partners involved in the RIAS.

The GIAS came into effect in the public sector in the UK from 1st April 2025; they replaced the Public Sector Internal Audit Standards. The GIAS would be complemented by CIPFA's Application Note and Code on the Governance of Internal Audit.

No.

N. Ireland queried the definition of 'the board' on page 3 and asked whether further clarification was required in relation to the Governance and Audit Committee providing the internal audit function. In addition, N. Ireland referred to resources and proficiency and training for auditors, and he asked whether it would be useful to add in new training standards requirements such as 6 monthly ethics training. Finally, N. Ireland suggested that it may also be useful to be more explicit in terms of the staff having more responsibility to engage with the audit review process. In response, the Head of the Regional Internal Audit Service stated that the term 'board' reflects language used by the GIAS, which for the Council was the Governance and Audit Committee. The definition would be reviewed for next years report, as would narrative in relation to training and the responsibility for staff to engage.

Subsequently, it was

RESOLVED – T H A T the Regional Internal Audit Service Charter for 2025-26 as attached at Appendix A be approved.

#### Reason for decision

Having regard to the contents of the report and discussions at the meeting.

#### 115 INTERNAL AUDIT ANNUAL STRATEGY AND RISK BASED PLAN 2025-26 (HRIAS) –

In line with the Global Internal Audit Standards, the Head of Internal Audit must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals. The risk-based audit plan should cover the Council's overall control environment including risk, governance and internal controls as far as practicable.

Consideration of the Regional Internal Audit Service's Audit Strategy and Annual Risk Based Plan was one of the Governance and Audit Committee's key responsibilities.

The proposed Internal Audit Strategy for 2025-26 was attached at Appendix A and the Annual Risk Based Plan for 2025-26 is attached at Appendix B to the report.

The Strategy demonstrated how the Internal Audit Service would be delivered and developed in accordance with its Terms of Reference. The Strategy would be reviewed and updated annually.

The plan provides the Committee with an overview of the work to be undertaken which would provide sufficient coverage to be able to provide an opinion at the end of 2025-26.

Councillor M. Hooper referred to the internal reviews hybrid meetings and the scrutiny changes, and he queried whether there would be any crossover between the two plus a crossover with the external scrutiny review being planned by Audit Wales. In response, the Deputy Head of the Regional Internal Audit Services

No.

advised that both reviews had been carried forward into the new plan, and there would be dialogue with Audit Wales so that the reviews could complement each other rather than duplicate each other's work.

N. Ireland queried whether the scope of the hybrid meeting review would include all Committee meetings. In response, the Deputy Head of Service advised that the scope of the review was wide and would include the range of Committees. All stakeholders would be considered, for example through the completion of a survey.

N. Ireland asked whether there was any way that the Committee could receive any form of guidance of which audits over the year are likely to be completed or pushed back. The Deputy Head of Service stated that the plan in front of the Committee was based on resources and what was hoped to be achieved. The audit target was 80% of reviews to be completed but there were many variables that were unknown at this stage. Information would be relayed to the Committee as best as it could be.

M. Evans queried progress of the audit into Additional Learning Needs. In reply, the Deputy Head of Service stated that as a review of that had been undertaken by Estyn, it was deemed that sufficient coverage had been provided. The Director of Learning and Skills considered that there were other areas of priority for the audit team to look at. The Head of the Regional Internal Audit Service added that the issues around Additional Learning Needs related to funding and capacity as opposed to the control environment.

There being no further comments or queries, the Committee

RESOLVED – T H A T the draft Internal Audit Strategy (Appendix A) and draft Annual Risk Based Audit Plan for 2025-26 (Appendix B) be approved.

#### Reason for decision

Having regard to the contents of the report and discussions at the meeting.

#### 116 FORWARD WORK PROGRAMME 2025/26 (HRIAS) –

The Governance and Audit Committee had several core functions and responsibilities within its remit.

It received reports and presentations throughout the year to enable it to carry out those core functions and responsibilities effectively and to provide it with confidence in the financial governance of the Authority.

To enable the Committee to provide that assurance and to ensure it was covering its range of responsibilities, a Forward Work Programme was presented at each meeting, setting out the reports to be presented at future meetings, for approval or amendment, as necessary.

The Forward Work Programme (FWP) for 2025/26 was at Appendix A.

No.

The Committee agreed that an update in relation to the City Deal Accounts would be moved forward from February to October. In addition there would also be an update report on the Tender Evaluation & Award Follow Up - Building Services audit

The Committee also requested a decision/action tracking record to be presented on a regular basis, which would be progress by Democratic Services.

Subsequently, it was

RESOLVED – T H A T the schedule of items for the next meeting on 21<sup>st</sup> July, 2025 be endorsed.

Reason for decision

Having regard to the contents of the report and discussions at the meeting.