



## RUSHMOOR BOROUGH COUNCIL

# LICENSING, AUDIT AND GENERAL PURPOSES COMMITTEE

*to be held as a Virtual Meeting on  
Thursday, 28th May, 2020 at 6.30 pm*

**To:**

Cllr S.J. Masterson (Chairman)  
Cllr Mara Makunura (Vice-Chairman)

Cllr Sophia Choudhary  
Cllr A.K. Chowdhury  
Cllr A.H. Crawford  
Cllr Veronica Graham-Green  
Cllr Christine Guinness  
Cllr A.J. Halstead  
Cllr L. Jeffers  
Cllr Prabesh KC  
Cllr Jacqui Vosper

**STANDING DEPUTIES**

Cllr Sue Carter  
Cllr C.P. Grattan  
Cllr T.W. Mitchell

Enquiries regarding this agenda should be referred to the Committee Administrator,  
Marion Young, Democratic and Customer Services, Tel. (01252 398827) or email  
[marion.young@rushmoor.gov.uk](mailto:marion.young@rushmoor.gov.uk).

# **A G E N D A**

1. **MINUTES – (Pages 1 - 4)**

To confirm the Minutes of the Meeting held on 23rd March, 2020 (copy attached).

2. **STATEMENT OF ACCOUNTS 2018/19 - UPDATE – (Pages 5 - 8)**

To consider the Executive Head of Finance's Report No. FIN2016 (copy attached) on audit progress for the Council's Statement of Accounts 2018/19 since the last Committee meeting on 23rd March, 2020.

3. **INTERNAL AUDIT - AUDIT UPDATE – (Pages 9 - 16)**

To consider the Audit Manager's Report No. AUD 20/04 (copy attached), which describes the work carried out by Internal Audit for quarter 4 and the changes required to deliverables due to the current Covid-19 situation.

4. **INTERNAL AUDIT - AUDIT OPINION – (Pages 17 - 32)**

To consider the Audit Manager's Report No. AUD 20/05 (copy attached), which sets out the Internal Audit coverage, findings and performance for 2019/20 and presents the Audit Manager's overall assurance opinion on the adequacy and effectiveness of the Council's framework of governance, risk management and control environment. The Report also covers the self-assessment carried out against the Public Sector Internal Audit Standards (PSIAS) and the progress on the Quality and Assurance Improvement Plan (QAIP) for the year.

5. **APPOINTMENTS 2020/21 – (Pages 33 - 42)**

(1) **Outside Bodies –**

To consider the appointment of representatives to outside bodies. A list of those bodies on which the Council is represented, which includes details of proposed nominations for 2020/21, is attached.

(2) **Appointments and Appeals Panels –**

To confirm that the Head of Democracy, Strategy and Partnerships is authorised to make appointments to Appointments and Appeals Panels in accordance with the membership criteria set out in the Officer Employment Procedure Rules in the Constitution.

(3) **Licensing Sub-Committee –**

To confirm the Members of the Licensing Sub-Committee for the 2020/21 Municipal Year on the basis of five Members (Proposed: 3 Con: 2 representatives of other groups).

**(4) Licensing Sub-Committee (Alcohol and Entertainments) –**

To confirm that the Head of Democracy, Strategy and Partnerships is authorised to make appointments from the membership of the Licensing, Audit and General Purposes Committee in accordance with the procedure agreed by the Committee at its meeting on 21st May, 2009 and detailed in the Licensing Sub-Committee (Alcohol and Entertainments) Hearings Protocol and Procedure.

**(5) Constitution Working Group –**

To appoint a cross-party Constitution Working Group for 2020/21 with terms of reference to include arrangements for virtual working, approach to training, and embedding of provisions. The appointments to be made on the basis of six Members including two Cabinet Members, the Chairman of the Licensing, Audit and General Purposes Committee, and representatives of other groups.

**PUBLIC PARTICIPATION AT MEETINGS**

Members of the public may ask to speak at the meeting on any of the items on the agenda by writing to the Committee Administrator at the Council Offices, Farnborough by 5.00 pm three working days prior to the meeting.

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# LICENSING, AUDIT AND GENERAL PURPOSES COMMITTEE

Meeting held on Monday, 23rd March, 2020 at the Council Offices, Farnborough at 7.00 pm.

## **Voting Members**

Cllr S.J. Masterson (Chairman)  
Cllr L. Jeffers (Vice-Chairman)

Cllr J.B. Canty  
Cllr M.S. Choudhary  
Cllr A.K. Chowdhury  
Cllr Christine Guinness  
Cllr Prabesh KC  
Cllr Jacqui Vosper

Apologies for absence were submitted on behalf of Cllr Veronica Graham-Green, Cllr A.J. Halstead and Cllr P.F. Rust.

## **36. MINUTES**

The Minutes of the meeting held on 27th January, 2020 were approved and signed by the Chairman.

## **37. STATEMENT OF ACCOUNTS 2018/19 - UPDATE**

The Committee received the Executive Head of Finance's Report No. FIN2011 which provided Members with audit progress for the Council's Statement of Accounts for 2018/19 since the last meeting on 27th January, 2020, and included a revised timetable for the completion of the audit and provision of the audit opinion.

The Executive Head of Finance explained that discussions with Ernst & Young (EY) had taken place to resolve all outstanding audit issues and that EY had largely been able to conclude their audit work and had issued the Council with a draft Audit Results Report. As this Report contained a number of adjustments to the accounts, these needed to be updated by officers and re-submitted to EY. EY would then need to undertake a review of the revised set of accounts and verify that all material changes had been made to the financial statements. Given this ongoing process and the likelihood of further minor delays due to the current Covid-19 situation, it was proposed that, in order to finalise the Statement of Accounts process and receive the external Auditor's Report, authority was delegated to the Chairman and to the Executive Head of Finance to approve formally and certify the audited Statement of Accounts and receive the External Auditor's Report from EY. Members would be provided with a copy of the final draft documents in advance to give them a limited opportunity to ask questions and seek clarification on matters identified in the report.

**RESOLVED:** That, subject to Members of the Committee being provided with a copy of the audited Statement of Accounts and the Audit Results Report in advance, the Chairman of the Committee and the Executive Head of Finance be authorised to approve formally and certify the audited Statement of Accounts 2018/19 and to receive the External Auditor's Report.

38. **ANNUAL AUDIT PLAN 2020/21**

The Committee considered the Audit Manager's Report No. AUD20/02 which set out the annual internal audit plan for 2020/21. The plan provided a framework for the use of audit resources to ensure they were focussed on activities that would enable the Audit Manager to provide an overall assurance of the internal control environment.

Members were advised of the methodology for compiling audit coverage, including the risk universe and risk criteria, as updated in January 2020 and as set out more fully in the Report. Heads of Service had been consulted on the risk areas which were high risk on the audit universe to ensure that these were appropriate to be reviewed within the financial year and to highlight any areas of concern within their services.

The Committee noted that the audit plan would include a review of key financial systems on a three-year rolling basis, adjusted for any significant system developments or identified weaknesses. Other areas of coverage were based on various risk factors developed by Internal Audit with input from Heads of Service.

The Report outlined the first six months' work, selected from the higher risk areas, and highlighted that these were subject to review due to the changing needs of the organisation or resource availability. It was acknowledged that the first review would also need to take account of the ongoing Covid-19 situation and its impact on expected deliverables. An update would be provided at the next meeting.

The Committee noted that there was currently a vacant full-time auditor post. Currently, the work of this post was being carried out by contract auditors.

**RESOLVED:** That the Internal Audit Plan for 2020/21, as set out in the Audit Manager's Report No. AUD20/02, to be monitored and updated on a rolling quarterly basis, be approved.

39. **ANNUAL GOVERNANCE STATEMENT - UPDATE**

The Committee considered the Audit Manager's Report No. AUD 20/03, which set out the work carried out since the previous update to the Committee in November 2019 towards the implementation of the actions defined within the Annual Governance Statement (AGS).

It was noted that the Accounts and Audit Regulations 2015 required the Council to prepare and publish an AGS in order to report publicly on the extent to which the Council complied with its Local Code of Corporate Governance, including how the

Council had monitored the effectiveness of arrangements in the year and on any planned changes to governance arrangements in the coming year.

The Committee was advised that, given the complex nature of some of the actions, particularly around the review of the Constitution and financial regulations, a number of deadlines had not been met, notwithstanding that progress had continued to be made on actions since the last update to the Committee in November 2019. The AGS for 2019/20 would be reported to the Committee at its meeting scheduled for May 2020 and would detail any actions from the 2018/19 AGS which were to be carried forward.

**RESOLVED:** That the progress towards the implementation of the actions detailed within the Council's Annual Governance Statement be noted.

#### 40. **CONSTITUTION REVIEW**

The Committee considered the Head of Democracy, Strategy and Partnerships' Report No. DSP2002, which set out the draft updated Constitution in full for recommendation to the Council. It was noted that at its meeting on 27th January, 2020, the Committee had received an update on progress on the review and had considered and endorsed the draft updated Standing Orders for the Regulation of Business.

It was noted that the Council had a responsibility to monitor its Constitution and ensure it was kept up to date. To this effect, updates were made on a regular basis, with those made in 2018 reflecting changes to the governance structure and the last significant review carried out in 2013 had reflected the provisions contained in the Localism Act 2011, the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, and other general updates. However, since the Constitution was first prepared in 2001, no changes to the fundamental structure of the document had taken place and the review underway was to ensure that it reflected current working arrangements and supported the Council's aim to be a more agile and flexible organisation in the future through its transformation and modernisation programme. It was noted that the governance structure approved in 2018 had not been subject to this review.

The Committee was advised that a cross-party Constitution Review Group had met on a number of occasions during autumn/winter 2019 to consider key documents that formed part of the Constitution and the Group's comments and action notes were contained in Appendix 2 to the Report. It was noted that wider consultation had also been carried out with the Corporate Leadership Team, the Leader of the Council (in respect of matters relating to executive decision making) and with a representative from the Local Government Association with expertise on Council Constitutions.

The Committee considered the summary of proposed updates, as outlined in Appendix 1. Areas where significant updates were proposed, included:

- Part 3 – Scheme of Delegation for Executive Matters: revisions have been made to improve clarity around responsibilities for executive decision-making and to

enable increased opportunities for some quicker decision-making. It also includes governance arrangements for new bodies such as Rushmoor Development Partnership and Rushmoor Homes Ltd and clarifies the general powers of officers in the Corporate Leadership Team.

- Part 4 – Procedure Rules and Part 5 – Codes and Protocols: revisions have been made to ensure consistency with the rest of the Constitution, with the addition of a new Mayoral Protocol, new Guidance for Members using social media linked to the Code of Conduct for Councillors and the inclusion of the ICT Acceptable Use Policy.

In discussion, a Member raised his concern about the proposed additional text in paragraph 10 of Part 5 – Selection of the Mayor and Deputy Mayor. In particular, it was suggested that the proposal for the Chief Executive to seek views on the proposed candidates should not be supported because the selection process already ensured respect and support of Members and the amendment was too broad and open to abuse. It was also questioned whether the process would be transparent and suggested it should not be brought in until May 2022. Following discussion, the Committee voted to retain the change and not to delete it.

**RESOLVED:** That:

- (i) the draft Constitution incorporating the revisions summarised in Appendix 1 be endorsed for recommendation to the Council for implementation with effect from the Annual Council Meeting;
- (ii) the Head of Democracy, Strategy and Partnerships, in consultation with the Chairman of the Licensing, Audit and General Purposes Committee, be authorised to make further minor changes to the draft revised Constitution in advance of the report to the Council; and
- (iii) the Leader of the Council, in consultation with the Head of Democracy, Strategy and Partnerships, be authorised to make any further amendments to the Scheme of Delegation for Executive Matters required to finalise the document for Council.

The meeting closed at 8.00 pm.

CLLR S.J. MASTERSON (CHAIRMAN)

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LICENSING, AUDIT & GENERAL  
PURPOSES COMMITTEE  
28 MAY 2020

EXECUTIVE HEAD OF FINANCE  
REPORT NO: FIN2016

## STATEMENT OF ACCOUNTS 2018/19 – UPDATE 4

### **SUMMARY:**

The purpose of this report is to inform Members of audit progress for the Council's Statement of Accounts for 2018/19 and provision of the audit opinion since the meeting on 23 March 2020. The Committee is reminded that the deadline for issuing a final set of audit statements of accounts and audit opinion of 31 July 2019 was not met.

### **RECOMMENDATION:**

It is recommended that the Committee notes the current position regarding the Statement of Accounts and Audit Opinion.

## **1 INTRODUCTION**

- 1.1 The Council published a draft statement of account 2018/19 on 31 May 2019. The Council is required under regulation to obtain an independent external audit opinion on the true and fair nature of the statement of accounts. Following provision of the external audit opinion, the relevant Council Committee (being Licencing, Audit and General Purposes Committee) is required to approve the accounts and publish both the approved set of accounts and the audit opinion by 31 July 2019.
- 1.2 As reported to the committee at the meetings on 29 July 2019, 23 September 2019 and 23 March 2020, the Council's external auditor opinion was not due to be received until after the statutory deadline of 31 July 2019. At the meeting in September, members were informed that the delay in the opinion being issued was largely due to material changes in the valuation of the depot and the impact of the McCloud judgement on the Council's pension fund liability.
- 1.3 In terms of context, it is worth noting that there were 208 public bodies (Councils, Fire and Rescue, Police and other LG bodies) that did not receive an auditor opinion by 31 July 2019 – as compared to 64 at the same point the previous year.
- 1.4 This report provides members with an update on progress made since March 2020.

### **3 PROGRESS SINCE MARCH 2020**

- 3.1 Members will be aware from the meeting in March 2020 that the Council's external auditors had largely concluded their audit work and had issued a draft Audit Results Report.
- 3.2 A number of adjustments were required to the financial statement, which required a subsequent review of the final Statement of Accounts by Ernst & Young (EY) to ensure that all material changes had been made before issuing their final opinion.
- 3.3 At the meeting on 23 March 2020, it was agreed that "subject to Members of the Committee being provided with a copy of the audited Statement of Accounts and the Audit Results Report in advance, the Chairman of the Committee and the Executive Head of Finance be authorised to approve formally and certify the audited Statement of Accounts 2018/19 and to receive the External Auditor's Report."
- 3.4 However, in response to the Covid-19 pandemic, a temporary moratorium on the issuing of audit opinions was put in place by EY on 24 March 2020. Whilst this was lifted in April 2020, EY needed to consider whether Covid-19 gave rise to a Post Balance Sheet Event (PBSE) and posed a going concern risk before an audit opinion could be issued.
- 3.5 Officers have been working through these considerations and have provided EY with information concerning the impact of Covid-19 on the Council's finances and a statement from the Executive Head of Finance concerning the financial standing of the Council. This is currently being reviewed by EY. It is expected that the final Statement of Accounts and Audit Opinion will be received in early June.
- 3.6 Therefore, it is proposed that the delegation approved by the committee at their meeting in March is removed. The Accounts and Audit Opinion will then be considered by the committee at their next scheduled meeting.

### **4 2019/20 STATEMENT OF ACCOUNTS AND AUDIT TIMINGS**

- 4.1 In response to Covid-19, deadlines for the completion and publication of the 2019/20 accounts have been relaxed recognising the possible disruption to relevant authorities caused by the spread of coronavirus.
- 4.2 The table below sets out the changes made to the deadlines, as set out in the Accounts and Audit (Coronavirus) (Amendment) Regulations 2020 which came into force on 30 April 2020.

<b>Action</b>	<b>Deadline as set out in Accounts and Audit Regulations 2015</b>	<b>Revised Deadline as set out in Accounts and Audit (Coronavirus) (Amendment) Regulations 2020</b>
Draft Accounts completion	31 May	31 August
Public Inspection period	First 10 working days of June of the financial year immediately following the end of the financial year to which the statement relates	First 10 working days of September of the financial year immediately following the end of the financial year to which the statement relates
Publication of Accounts	31 July	30 November

## 5 CONCLUSION

- 5.1 The Council and External Auditors will work together to achieve an audit opinion within the coming days, although this may be subject to some further delay given the current moratorium on signing any audit opinion by EY.
- 5.2 It is worth reassuring members that the additional time taken is not due to errors, omissions or matters concerning the quality of the final accounts.

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## LICENSING, AUDIT AND GENERAL PURPOSES COMMITTEE

AUDIT MANAGER 28<sup>th</sup> MAY 2020  
REPORT NO. AUD 20/04

## INTERNAL AUDIT – AUDIT UPDATE

**SUMMARY:**

This report describes the work carried out by Internal Audit for quarter 4 and the changes required to deliverables due to the current Covid-19 situation.

**RECOMMENDATION:**

Members are requested to:

- i. Note the audit work carried out in quarter 4, including the work slipped from quarter 3.
- ii. Note the update to the expected deliverables for quarter 1 & 2.
- iii. Endorse the expected deliverables for quarter 1 & 2

**1 Introduction**

1.1 This report is to provide Members with:

- An overview of the work completed by Internal Audit to date for Q4 2019/20.
- A schedule of work expected to be delivered Q1 and Q2 2020/21.
- Changes to deliverables for Q1 and Q2.
- Covid-19 impact on the audit plan

**2 Audit work – Q4 19/20**

2.1 The following audit work has been carried out within quarter 4:

Work	Status
<b>Audit findings – Appendix A of this report</b>	
Taxi Licensing – fees and processing records	A <i>limited assurance</i> opinion has been given to this area. Findings are detailed within Appendix A.
<b>Audit work in progress</b>	
Building Control Partnership	The draft report is currently being reviewed by the Director at Hart Council as the report deals with elements related to the partnership with Hart Council. This report will be reported at the Committee meeting in July.
Treasury Management	The draft report is currently being reviewed by the Finance Manager and will be reported at the Committee meeting in July.
Estates Management &	The work relating to this audit has been completed

Commercial Letting	and the draft report is currently being reviewed by the Chief Executive, Head of Finance and Head of Regeneration & Property. The findings will be reported at the Committee meeting in July.
Capital Project (Ski Slope maintenance)	The draft report is currently being reviewed by the Principle Contracts Mangers and Property and Estates Manager and will be reported at the Committee meeting in July.
Capital Programme Management	The draft report is currently being reviewed by the Finance Manager and will be reported at the Committee meeting in July.
PCI DSS	The draft report is currently being reviewed by the Head of Finance Manager and will be reported at the Committee meeting in July.
SANGS/ S106	The draft report is currently being reviewed by the Head of Economy, Planning and Strategic Housing and will be reported at the Committee meeting in July.
Housing Company/ RDP set up	Testing has commenced.
Petty Cash	Testing has commenced.

### 3 Covid-19 impact

- 3.1 Due to the current Covid-19 situation audit have been providing assistance with the assurance work around the payment of the grants to businesses and providing general advice to the organisation. Due to the change in priority of work this has required adjustments to be made to the previously communicated deliverables for quarter 1 and 2. The updated deliverables are detailed within Section 4 below.
- 3.2 In addition, this may also result in changes to the areas in which audits are carried out in 2020/21, to provide different assurances not previously anticipated when developing the audit plan for 20/21. Although, any changes will be communicated to the Committee as and when required.
- 3.3 Furthermore, the Annual Governance Statement (AGS) was due to be presented to the Committee in May. The Council is required by the Accounts and Audit Regulations 2015 to prepare and publish an Annual Governance Statement, to report publicly on the extent to which we comply with our own local Code of Corporate Governance. Due to the current situation the deadline date for the completion of this statement has been extended. Therefore, this will now be presented to the Committee at the meeting in July.

### 4 Expected deliverables for Q1 and Q2 2020/21

- 4.1 The work expected to be delivered in quarter 1 and 2 is detailed within the table below. As with the previous quarter, these audits can be subject to change due to the changing needs of the organisation or resource availability. An update will be provided at the July meeting.

<b>Service</b>	<b>Audit/ follow up/descriptor</b>	<b>Expected</b>
Operations	Car Park Income Reconciliation - <i>Consultancy days planned to offer advice around the reconciliation process for car park income.</i>	Q2 2020/21
Operations	Car Park PCNs - <i>A review of the process in place for issuing, collecting and enforcing PCNs for on and off-street parking.</i>	
Legal	Legal system set up – <i>A review of the setup of the new Legal system to ensure that appropriate controls and access has been applied.</i>	
ICT, Facilities & Project Services	External Tenants within the Council Offices– <i>A review of the agreements in place with the external tenants and the management of them. The number of tenants within the Council offices has recently increased.</i>	

Regeneration & Property	Council Property Maintenance – <i>A review of the process for identifying maintenance required on Council property and ensuring this is appropriately planned and budgets in place.</i>	
ICT, Facilities & Project Services	Application Patch Management – <i>A review of the patch management process in place for system applications to ensure that system patches required to reduce system vulnerabilities are promptly implemented.</i>	
Finance	Purchase Ledger – <i>A key financial system review.</i>	

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**HEAD OF SERVICE:** David Stanley, Executive Head of Financial Services

**References:** *Internal Audit – Audit Plan* report, presented to the Committee on the 23<sup>rd</sup> March 2020

<https://democracy.rushmoor.gov.uk/ieListDocuments.aspx?CId=166&MIId=666&Ver=4>



## AUDIT FINDINGS ON ONE ITEM: TAXI LICENSING – FEES AND PROCESSING RECORDS

<b>Audit Title 1</b>	<b>Taxi Licensing – fees and processing records</b>
<b>Year of Audit</b>	2019/20
<b>Assurance given</b>	<b>Limited</b> – <i>Minimal controls designed to achieve the system/function/process objectives, are in place. Significant improvements are required if key controls are to be established.</i>
<b>Overview of area</b>	<p>A review of the taxi licensing fees and processing records was required as some errors had been identified by the team which suggested that the incorrect fee amount had been charged for some applications.</p> <p>The system for taxi licensing is largely manual with limited automation, as a result this opens the process up to human errors. Out of the 580 applications reviewed 286 of these had errors. The follow errors were identified (<i>it should be noted that some applications had more than one error</i>):</p> <ul style="list-style-type: none"> <li>• 187 errors were identified where the information had not been correctly recorded on the system.</li> <li>• 187 errors were identified where the information had not been obtained e.g. application form not fully completed or signed.</li> <li>• 46 financial errors, which amounted to a shortfall of £1,450.16</li> </ul> <p><i>Management comment:</i>  <i>We recognise that the current systems and processes for Taxi Licensing are open to human error, due to the lack of automation available with the systems that we are working on. The errors identified have been corrected as far as possible, and changes have been made to the documents, processes and performance monitoring of the work to reduce the likelihood of errors, and to identify errors sooner. Longer term, we are reviewing the way that licences are processed, with a view to improving the technology to allow for more automation, therefore reducing the likelihood of human error, whilst improving the service to customers. We are undergoing continuous review, and where errors are identified, consideration is given to any process or system change that could be implemented to reduce the likelihood of the same error occurring. Since implementing this, we have seen a reduction in the error rate on the cases which are reviewed.</i></p>

Priority	Key findings	Management response and agreed action	Action by who and when
<b>High</b>	<p>Due to the manual nature of inputting the data into the system this has highlighted a number of human errors. Ranging from not recording payments which have been made against accounts, to the incorrect amount being inputted and charged. Options should be considered to see if elements of the system could be more automated to minimise the potential for errors and have a more efficient process.</p> <p><i><b>Risk:</b> Having limited automation within the system will increase the risk of human errors occurring, which may not be promptly identified.</i></p>	<p>We recognise that the current systems and processes for Taxi Licensing are open to human error, due to the lack of automation available with the systems that we are working on. The errors identified have been corrected as far as possible, and changes have been made to the documents, processes and performance monitoring of the work to reduce the likelihood of errors, and to identify errors sooner. Longer term, we are reviewing the way that licences are processed, with a view to improving the technology to allow for more automation, therefore reducing the likelihood of human error, whilst improving the service to customers. We are undergoing continuous review, and where errors are identified, consideration is given to any process or system change that could be implemented to reduce the likelihood of the same error occurring. Since implementing this, we have seen a reduction in the error rate on the cases which are reviewed.</p>	<p>Shelley Bowman, <i>Principal Licensing Officer</i></p> <p>Ongoing</p>
<b>Medium</b>	<p>Checks are currently not carried out on officers work therefore errors are not identified unless issues arise which highlight the error. Due to the</p>	<p>Weekly checks have been introduced and any errors identified are corrected by the officer. A checklist</p>	<p>Shelley Bowman, <i>Principal Licensing Officer</i></p>

	<p>manual human reliance within the process random checks should be carried out to ensure that errors are promptly identified and corrected.</p> <p><i><b>Risk:</b> If checks are not carried out then errors may go undetected.</i></p>	<p>has also been introduced for all new drivers which is completed by the case officer and checked/signed off by another member of team before the licence is granted.</p>	<p>Implemented</p>
<b>High</b>	<p>This review identified a number of errors which have been recorded. These should be corrected where possible.</p> <p><i><b>Risk:</b> If errors are not corrected then the data held within the system will not be appropriate.</i></p>	<p>The errors, where possible, have been corrected by the officers.</p>	<p>Shelley Bowman, <i>Principal Licensing Officer</i></p> <p>Implemented</p>
<b>Low</b>	<p>The application forms appeared not to be fully completed however it was due to them being out of date as not all the data on the application form is now relevant and therefore is not required to be completed. The application form should be updated.</p> <p><i><b>Risk:</b> If the application form is not updated to only collect relevant information that is required to be collected then it may appear incomplete or unnecessary data may be collected.</i></p>	<p>The application form has been updated to remove the unused sections.</p>	<p>Shelley Bowman, <i>Principal Licensing Officer</i></p> <p>Implemented</p>
<b>Medium</b>	<p>It was not clear what amount should be charged for the sticking fee as the amount changed part way through the year. However, it was not clear what date the new amount was applicable from. A record of when the amount changed should be held to ensure that the correct amounts are being charged especially as this amount is manually inputted onto the system and therefore could be open to human error.</p>	<p>The amount for the sticking kit has been added to the website with all other fees so that there is no confusion, and will be updated on 1<sup>st</sup> April each year in accordance with the time that the supplier changes their costs.</p>	<p>Shelley Bowman, <i>Principal Licensing Officer</i></p> <p>Implemented</p>

	<i><b>Risk:</b> Without knowing the periods that the charges are applicable from and to makes it unclear if the correct amount has been charged for these periods.</i>		
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<b>Priority key for way forwards</b>	
High priority	A fundamental weakness in the system/area that puts the Authority at risk. To be addressed as a matter of urgency.
Medium priority	A moderate weakness within the system/area that leaves the system/area open to risk.
Low priority	A minor weakness in the system/area or a desirable improvement to the system/area.

**INTERNAL AUDIT – AUDIT OPINION****Summary:**

This report sets out the Internal Audit coverage, findings and performance for 2019/20 and presents the Audit Manager's overall assurance opinion on the adequacy and effectiveness of the Council's framework of governance, risk management and control environment.

It also covers the self-assessment carried out against the Public Sector Internal Audit Standards (PSIAS) and the progress on the Quality and Assurance Improvement Plan (QAIP) for the year.

**Recommendations:**

Members are requested to:

- I. Note the coverage of assurance obtained across the Council to allow the Audit Opinion to be formulated.
- II. Note the level of internal control assessed in 19/20 through opinion-based audit assurance work.
- III. Note the Audit Opinion given for 19/20.
- IV. Endorse the Performance Indicators for the internal audit activity for 20/21.
- V. Note the self-assessment exercise against the Public Sector Internal Audit Standards and the areas of non-conformance with the standards, and
- VI. Endorse the Quality and Assurance Improvement Plan for 19/20 shown in Appendix C, which details areas of improvement to reduce the areas where the audit activity does not conform to the PSIAS standards.

**1 Introduction**

- 1.1 In accordance with the Accounts and Audit (England) Regulations 2015, the Audit Manager is required to report, on an annual basis, on the overall adequacy and effectiveness of Rushmoor Borough Council's framework of governance, Risk Management and control.
- 1.2 The report in Appendix A sets out the internal audit work carried out within 2019/20 and the coverage of work carried out to enable the Audit Manager to form this opinion.
- 1.3 Furthermore, annually the Audit Manager is required to carry out a self-assessment on the internal audit activities conformance with the Public Sector Internal Audit Standards (PSIAS) and communicate this to the Licensing, Audit and General Purposes Committee. The report details the outcome of the self-assessment carried out.

- 1.4 The internal audit plan was approved by this Committee on the 6<sup>th</sup> June 2019. Subsequent changes to the audit plan have been communicated within the regular audit update reports.

## 2 Audit Opinion

- 2.1 The report within Appendix A details the areas of assurance obtained in order to form the audit opinion. In assessing the level of assurance to be given for 19/20, the opinion is based on:
- written reports on all internal audit work completed during the course of the year (assurance & consultancy);
  - results of any follow up exercises undertaken in respect of previous years' internal audit work;
  - the results of work of other review bodies where appropriate for example PSN certification;
  - The counter-fraud work carried out by the Corporate Investigations Team;
  - the quality and performance of the internal audit service and the extent of compliance with the Standards
  - NFI data match checks
  - Participation on the corporate governance group.
  - Mitigations in place to minimise the risks identified within the Corporate risk register.

## 3. Conclusion

- 3.1 Rushmoor Borough Council's framework of governance, risk management and management control is **reasonable** and assurance work undertaken has demonstrated controls to be working in practice.
- 3.2 Where weaknesses have been identified through internal audit review, we have worked with management to agree appropriate corrective actions and a timescale for improvement.
- 3.3 The key areas of non-compliance for the PSIAS, are due to not having:
- An external assessment carried out on the audit activity – *This is due to be carried out every 5 years. However, the cost and resource time required to have this assessment carried out is not seen of benefit at this moment but will be re-evaluated next year.*
  - In place performance targets - *These have been put in place for 2019/20 as detailed within section 5 of Appendix A and shown as an action within the improvement plan in Appendix 3.*
  - Up to date policies and procedures – *Due to other higher priority work these were not updated within 19/20 but have been included as an action within the improvement plan in Appendix 3.*
  - Reviewed the Council's Ethics related objectives, programmes and activities. – *An ethics related audit was scheduled to be carried out in 19/20 but due to other higher priority work it was not completed and will be finalised in 20/21.*

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**HEAD OF SERVICE:** David Stanley, Executive Head of Financial Services

**References:** *Public Sector Internal Audit Standards (2013)*  
<http://www.cipfa.org/policy-and-guidance/standards/public-sector-internal-audit-standards>

## ANNUAL REPORT AND AUDIT OPINION 2019/20

### 1. Introduction

- 1.1 The Internal Audit plan for 2019/20 was presented to and approved by the Licensing, Audit & General Purposes Committee on the 6<sup>th</sup> June 2019. The following report and appendices set out:
- The internal audit coverage, findings and performance for 2019/20
  - The Audit Manager's opinion on the overall adequacy and effectiveness of the Council's internal control framework, which can be used to inform the Council's governance statement.
  - The result of the Public Sector Internal Audit Standards (PSIAS) self-assessment for 2019/20.
  - The performance against the agreed Quality Assurance and Improvement Plan (QAIP) for 2019/20
  - The Quality Assurance and Improvement plan (QAIP) for the internal audit service for 2020/21.

### 2. Role of Internal Audit

- 2.1 The requirement for an internal audit function in local government is detailed within the Accounts and Audit (England) Regulations 2015 which states that a relevant body must:

*'Undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.'*

- 2.2 The standards for 'proper practices' in relation to internal audit are laid down in the Public Sector Internal Audit Standards 2016 [*the Standards*]. The role of internal audit is best summarised through its definition within the Standards, as an:

*'Independent, objective assurance and consulting activity designed to add value and improve an organisations operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes'.*

- 2.3 Internal audit plays a vital role in advising the Council that these arrangements are in place and operating effectively. The Council's response to the internal audit activity should lead to the strengthening of the control environment and, therefore, contribute to the achievement of the organisation's objectives.

### 3. Internal audit approach

- 3.1 To enable effective outcomes, internal audit provides a combination of assurance and consultancy activities. Assurance work involves assessing how well the system and processes are designed and working, with consulting



activities available to help to improve those systems and processes where necessary.

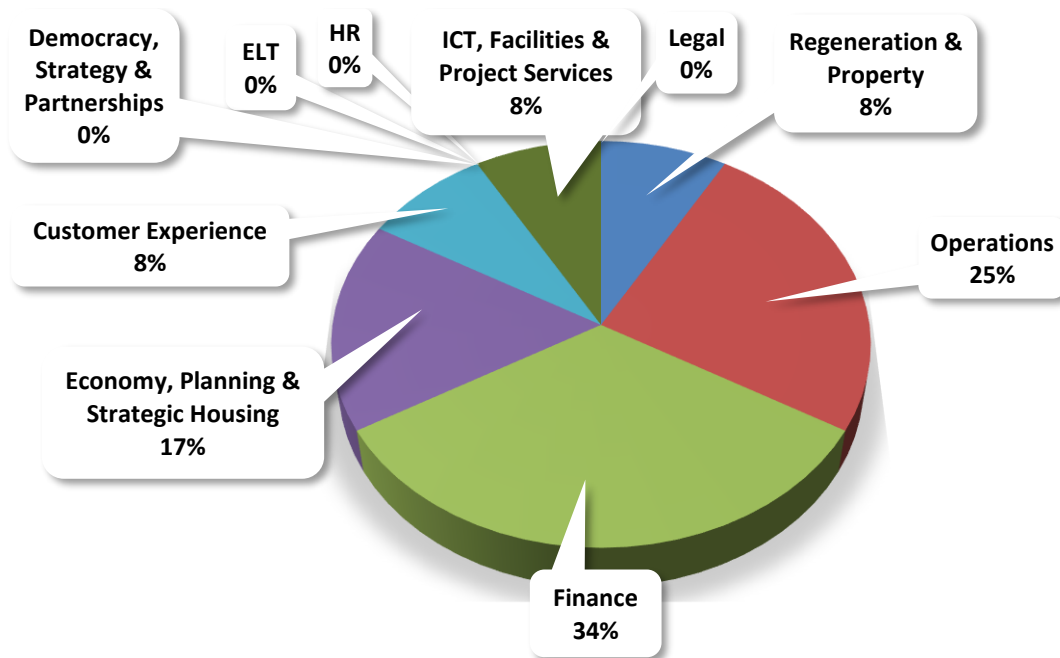
- 3.2 All formal internal audit assignments will result in a published report. The primary purpose of the audit report is to provide an independent and objective opinion to the Council on the framework of internal control, risk management and governance in operation and to stimulate improvement.

#### **4. Internal audit coverage and output**

##### Coverage

- 4.1 The annual internal audit plan was prepared to take account of internal audits own assessment of risk and materiality in addition to consultation with Senior Management to ensure it aligned to key risks facing the organisation.
- 4.2 The plan has remained fluid throughout the year to ensure an effective focus can be provided. The following revisions to the plan were made in 2019/20:
- The Capital programme management audit was brought forward from 2018/19
  - The Performance Management audit was deferred until 2020/21 due to the data not being reported in the new format at the time the audit was due to commence.
  - The Car Park Penalty Charge Notices audit was deferred until 2020/21 due to changes within the service.
  - The Taxi Licensing -fees processes audit was added at the request of Management
  - The Corporate Investigations Officers were due to carry out proactive anti-fraud work on the Housing tenancy/ allocation list and Procurement. However, as a large proportion of their work is unpredictable, due to being reactive, there was not the scope within 2019/20 to carry out this proactive work.
- 4.3 Work has been planned and performed in order to obtain sufficient evidence to enable a reasonable assurance to be given that the internal control environment is operating effectively.
- 4.4 The internal control environment comprises the Council's policies, procedures and operational systems and processes in place to:
- Establish and monitor the achievement of the Council's objectives
  - Facilitate policy and decision making
  - Ensure the economical, effective and efficient use of resources
  - Ensure compliance with established policies, procedures, laws and regulations
  - Safeguard the Council's assets and interests from losses of all kinds, including those arising from fraud, irregularity or corruption.

4.5 The pie chart below shows the revised internal audit coverage for 2019/20 based on the substantially completed and finalised audits.



4.6 Specific IT network security audits are not carried out as reliance on IT assurance is taken from the annual Public Services Network (PSN) certificate. PSN outlines the minimum Information Assurance standards expected of organisations connected to the Public Services Network (PSN) and carries out an assessment against these standards. Areas covered within this review are:

- Operational security – Appropriate policies, processes and procedures in place
- Authentication and access control – Appropriate access levels for users' needs
- Boundary protection and interfaces – Firewall and network parameter security
- Protecting data at rest and in transit – Encryption and data access security
- User and Administrator separation of data – Access controls
- Users – Pre-employment checks for users with administrative privileges
- Testing your security – Carry out regular IT health checks

4.7 The Council has achieved its PSN compliance until October 2020, when the annual check will be carried out. The management report received states,

*'The overall security posture of Rushmoor Borough Council's internal network was found to be fairly strong'*

4.8 The view of External Audit is also taken into account. Any areas which are highlighted within their annual report will be considered when developing the audit plan.

4.9 The corporate risk register is reviewed to place some assurance that appropriate mitigation has been put in place against the strategic and operational risks identified.

Output

4.10 In carrying out systems and other reviews, Internal Audit assesses whether key, and other, controls are operating satisfactorily and an opinion on the adequacy of controls is provided to management as part of the audit report.

4.11 All final audit reports include an action plan which identifies responsible officers, and target dates, to address any control issues identified. Implementation of action plans resets with management.

4.12 High risk control issues identified and/or Limited overall assurances are reviewed during subsequent audits or as part of a specific follow up.

4.13 Any significant weaknesses identified are put forward for consideration when preparing the Council's Annual Governance Statement.

4.14 The revised 2019/20 internal audit plan has been delivered with the following exceptions:

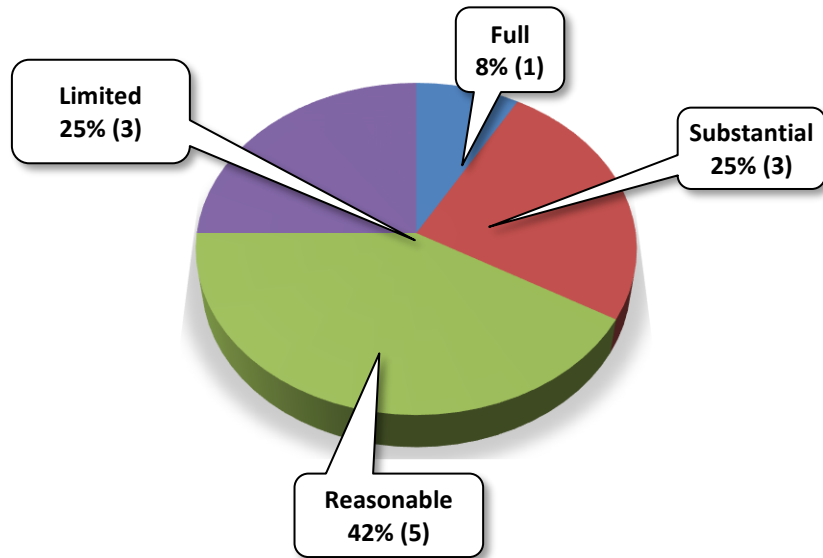
- Work is substantially complete, and an opinion has been formed for 8 audits, however, final reports have not yet been agreed with management.
- Due to the coronavirus, additional assurance work was required with the issuing of grants and auditees availability was impacted. As a result, 2 audits are not yet substantially completed and therefore will not be included within assurance opinion, these are, Petty cash and Housing company/RDP set up. However, they will be included within the 2020/21 audit opinion.

4.15 I do not consider these exceptions to have an adverse impact on the delivery of my overall opinion for the period.

4.16 Most of Internal Audit's assurance work results in the issue of an opinion on the controls and procedures in place, categorised as follows:

Full	A comprehensive system of internal controls is in place designed to achieve the system/function/process objectives. These controls are operating effectively and are being consistently applied.
Substantial	Key controls designed to achieve the system/function/process objectives, are in place. There are opportunities to enhance/strengthen these controls.
Reasonable	Basic controls designed to achieve the system/function/process objectives, are in place. Improvements are required if key controls are to be established.
Limited	Minimal controls designed to achieve the system/function/process objectives, are in place. Significant improvements are required if key controls are to be established.
No assurance	No controls that achieve the system/function/process objectives, are in place.

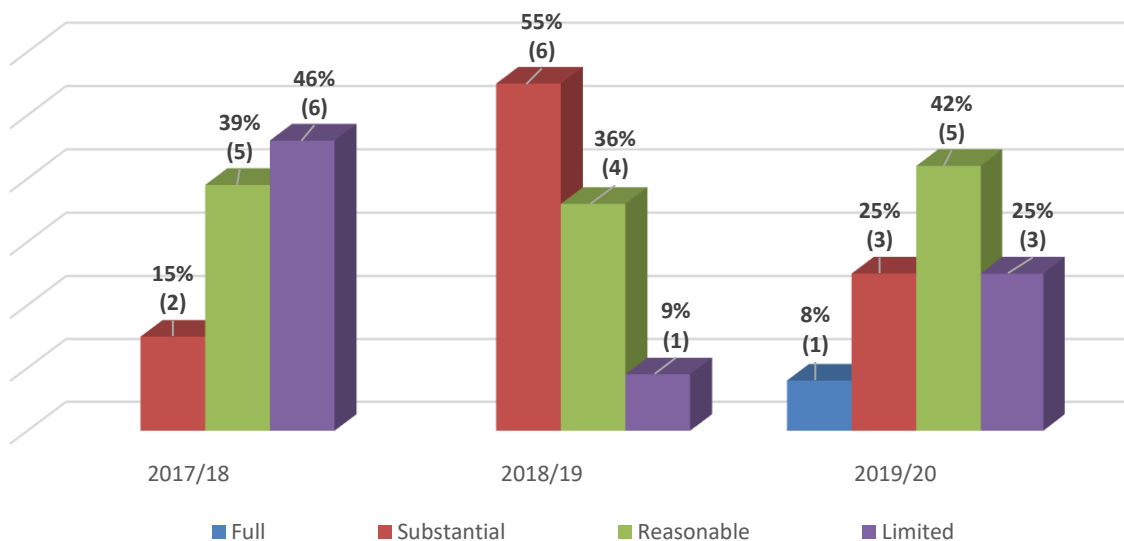
4.17 Analysis of the opinion-based assurance work shows the following distribution of opinions issued during 2019/20. Based on this, I can conclude that a satisfactory level of internal control is in operation in the Council. See also the audit update reports, which provide further detail on the assurances provided for each report.



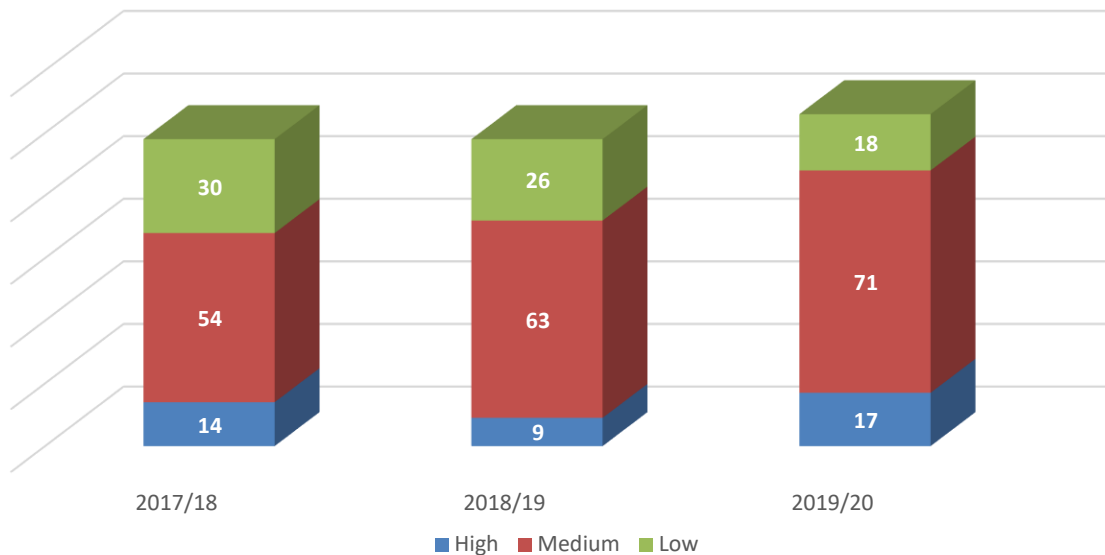
4.18 The trend in the audit opinions over the past few years is illustrated in the graph below. This shows that, in percentage terms:

- The substantial assurances have increased from 2017/18.
- Limited assurance has decreased since 2017/18 with a slight increase in 2019/20.
- The first full assurance was provided within 2019/20, for Cash Receipting.
- Reasonable assurance has remained at a similar level across all 3 years.

4.19 Internal Audit’s opinion remains that the overall level of internal control in the Council is satisfactory.



4.20 The bar chart below shows the number and level of priority of recommendations made in comparison to previous years. This shows that, the overall number of recommendations made has remained at a similar level across the 3 years.



4.21 A summary of audit work across the organisation is shown within the table in Appendix 1

## 5. Performance indicators

5.1 Currently Internal Audit does not have in place any performance indicators to demonstrate the performance of the service. The following performance measures will be put in place within 2020/21 and reported within the next annual report:

- % of draft reports received by the audit manager within 6 weeks of the initial meeting with the auditee
- % of draft reports finalised with the auditee within 21 days following the Audit Managers review.
- A target of 90% of the audit plan programme to be completed/ at draft report stage, by the end of the financial year.

## 6. Anti-fraud and corruption

6.1 The Council is committed to the highest possible standards of openness, probity and accountability. A fraudulent or corrupt act can impact on public confidence in the Council and damage both its reputation and image. Counter-fraud arrangements assist in the protection of public funds and accountability.

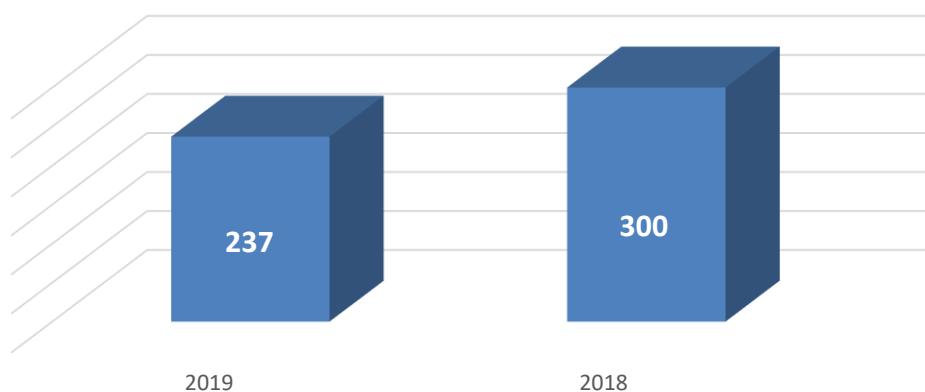
6.2 Policies and strategies are in place setting out the Council's approach and commitment to the prevention and detection of fraud or corruption. During 2019/20 the Council's Anti-fraud, bribery and corruption policy and Money-laundering policy were updated and will be included within the update to the Council's Constitution.

National Fraud Initiative (NFI)

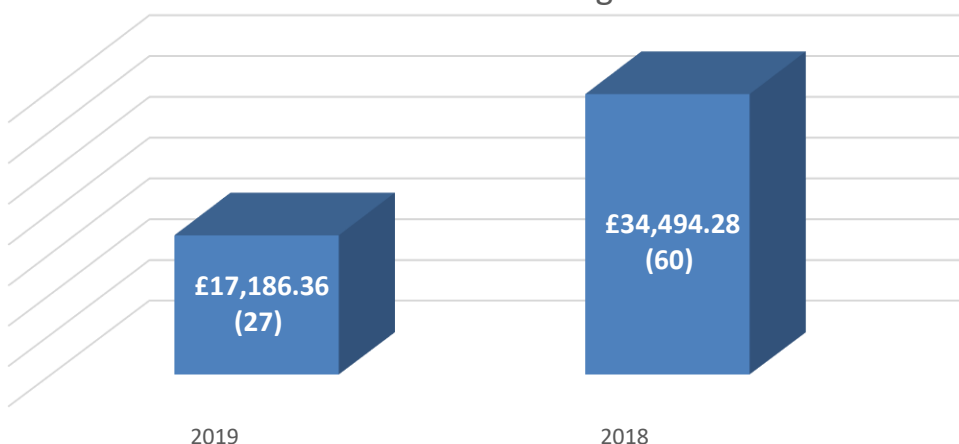
6.3 The Council continues to conform to the requirements of the National Fraud Initiative (NFI). An annual SPD NFI exercise is carried out to match data from the Council tax system and the Electoral roll. The Council submitted the required data sets for this in February 2019, with feedback on potential matches being received instantly.

6.4 Work continued during 2019/20 to review the identified matches. The outcome of the matches are detailed in the graphs below, which also show the outcome from the previous year. This shows that, although the total identified matches have remained similar, the number of matches confirmed as being irregular has reduced. Therefore, reducing the overpayment of Single Persons Discount.

Matches



Council Tax Savings



6.5 Furthermore, a biennial NFI exercise is carried out which is classed as a ‘full match’. This reviews areas such as, Parking permits, Payroll, Licenses etc. The Council submitted required data sets for the full match in October 2018 receiving feedback on potential matches in February 2019. Work continued within 2019/20 to review identified matches. No irregularities have been identified as a result of the matches reviewed as part of this exercise.

Proactive anti-fraud work

6.6 Pro-active fraud awareness was undertaken on Housing tenancy fraud, during fraud awareness week in November 2019. Leaflets and Social Media posts with videos were promoted by Rushmoor.

Irregularities

6.7 The Corporate Investigation Officers have assessed and where appropriate, advised, investigated or supported the investigation of any allegations of fraud, corruption or improper practice. Analysis of the types of investigation and the number undertaken in 2019/20 are detailed in the table below. *(The below figures do not detail any work carried forward from 2018/19)*

<b>Area</b>	<b>No. of cases</b>
Fly tipping	4
FPN littering	14
Tree Preservation Order breaches (TPO)	1
Revenue & Benefits	67
Community	1
Parks & Grounds	6
Total	93

## 7. Internal audit opinion

- 7.1 The Audit Manager is responsible for the delivery of an annual audit opinion that can be used by the Council to inform its annual governance statement. The annual opinion concludes on the overall adequacy and effectiveness of the Council's framework of governance, risk management and control.
- 7.2 In giving this opinion, assurance can never be absolute, as audit cannot review every decision and transaction of the Council. Therefore, only a reasonable assurance can be provided that there are no major weaknesses in the Council's processes reviewed and any reliance placed on other sources of assurance.
- 7.3 In assessing the level of assurance to be given, I have based my opinion on:
- written reports on all internal audit work completed during the course of the year (assurance & consultancy);
  - results of any follow up exercises undertaken in respect of previous years' internal audit work;
  - the results of work of other review bodies where appropriate for example PSN certification;
  - The counter-fraud work carried out by the Corporate Investigations Team;
  - the quality and performance of the internal audit service and the extent of compliance with the Standards
  - NFI data match checks
  - Participation on the corporate governance group.
  - Mitigations in place to minimise the risks identified within the Corporate risk register.

### Opinion of the Audit Manager

I am satisfied that sufficient assurance work has been undertaken to allow me to form a reasonable conclusion on the adequacy and effectiveness of Rushmoor Borough Council's internal control environment.

In my professional opinion, Rushmoor Borough Council's framework of governance, risk management and management control is **reasonable** and assurance work undertaken has demonstrated controls to be working in practice.

Where weaknesses have been identified through internal audit review, we have worked with management to agree appropriate corrective actions and a timescale for improvement.



## 8. PSIAS

- 8.1 The Public Sector Internal Auditing Standards (PSIAS) and the Local Government Application Note (LGAN), together came into effect from April 2013 and supersedes the 2006 CIPFA Code of Practice for Internal Audit in Local Government.
- 8.2 A self-assessment against the standards for 19/20 has been carried out by the Audit Manager. There are 11 overall standards, which are broken-down into 336 fundamental principles, against which to measure compliance. A summary of the findings is shown in the table below.

	Compliant			
	Yes	Partial	No	N/A
2019/20	300 (94.93%)	12 (3.80%)	4 (1.27%)	20

- 8.3 A detailed breakdown of the areas of compliance and non-compliance is shown within Appendix 2.
- 8.4 The key areas of non-compliance are due to not having:
- An external assessment carried out on the audit activity – *This is due to be carried out every 5 years. However, the cost and resource time required to have this assessment carried out is not seen of benefit at this moment but will be re-evaluated next year.*
  - In place performance targets - *These have been put in place for 2019/20 as detailed above in section 5 and shown as an action within the improvement plan within Appendix 3.*
  - Up to date policies and procedures – *Due to other higher priority work these were not updated within 19/20 but have been included as an action within the improvement plan within Appendix 3.*
  - Reviewed the Council's Ethics related objectives, programmes and activities. – *An ethics related audit was scheduled to be carried out in 19/20 but due to other higher priority work it was not completed and will be finalised in 20/21.*

## 9. Quality Assurance and Improvement Plan (QAIP)

- 9.1 The QAIP for 2020/21 will look to address some of the non-compliance and partial compliance identified within the PSIAS self-assessment, over the next financial year, taking in to account the resources available. The full QAIP for 2020/21 is set out in Appendix 3.

	Assurance reviews			
	Limited Assurance	Reasonable Assurance	Substantial Assurance	Full Assurance
ELT/Corporate wide				
Finance		Capital Programme Management	- Council Tax Billing & Collection - Financial Borrowing - Treasury Management	
ICT, Facilities & Project Services		PCI DSS		
HR				
Customer Experience				Cash Receipting
Democracy, Strategy & Partnerships				
Operations	Taxi Licensing - Fees & processing records	Community Safety Partnership  Ski Slope Maintenance		
Legal				
Regeneration & Property	Estates Management & Commercial Letting			
Economy, Planning & Strategic Housing	SANGS	Building Control Partnership		
	<b>Advisory Work</b>	<b>Counter-Fraud</b>		
ELT/Corporate wide	Corporate Governance Group			
Finance		NFI		
ICT, Facilities & Project Services		Revenues & Benefits		
HR				
Customer Experience				
Democracy, Strategy & Partnerships				
Operations		Fly tipping Parks & grounds		
Legal		FPN Littering (Forwarding addresses for court packs)		
Regeneration & Property	RIPA policy			
Economy, Planning & Strategic Housing		TPO breaches		

## PSIAS – Self-assessment

Aspect of Standards	No. of requirements in the standards	Standards not applicable at RBC	No. of applicable standards assessed	Compliance assessment		
				Yes	Partial	No
Definition of internal auditing	3		3	3		
Code of ethics	13		13	13		
<i>Attribute Standards</i>						
Purpose, authority & responsibility	23		23	23		
Independence & objectivity	30	5	25	22	2	1
Proficiency & due professional care	21		21	21		
Quality assurance & improvement programme	27	6	21	17	3	1
<i>Performance Standards</i>						
Managing the internal audit activity	47		47	43	3	1
Nature of work	31		31	28	3	
Engagement planning	58	3	55	55		
Performing the engagement	22		22	22		
Communicating results	55	6	49	47	1	1
Monitoring progress	4		4	4		
Communicating the acceptance of risk	2		2	2		
<b>Totals</b>	<b>336</b>	<b>20</b>	<b>316</b>	<b>300</b>	<b>12</b>	<b>4</b>
				<b>94.93%</b>	<b>3.80%</b>	<b>1.27%</b>

## Quality Assurance and Improvement Plan (QAIP) 2020/21

<b>Non-conformance</b>	<b>Action</b>	<b>Comments</b>
Do not have in place up to date policies and procedures for the internal audit activity	The internal audit policies and procedures will be updated.	This was due to be carried out within 2019/20. However, due to other higher priority work this was not carried out.
Performance targets are not in place for the internal audit activity.	Performance targets will be put in place for 2020/21 and reported to the Board.	Performance targets have been detailed within this report and the outcome against these targets will be communicated to the Board within the annual report for 2020/21.
Ethics related review has not been carried out.	An ethical review will be carried out within 2020/21.	An ethical audit was scheduled to be carried out within 2019/20. However, this was not sufficiently completed at the time of this report therefore the findings will be carried forward to 2020/21.

## NOMINATIONS FOR COUNCIL REPRESENTATION ON OUTSIDE BODIES 2020/21

**NOTE: Appointments to outside bodies reflect political balance where there are four or more representatives, subject to the body's constitution**

	NAME OF ORGANISATION	FREQUENCY AND TIME OF MEETINGS/VENUE	REPRESENTATIVE(S) 2019/20	MEMBERSHIP	NOMINATED REPRESENTATIVES 2020/21
1	Age Concern, Farnborough	Venue - RVS Offices, Elles Hall Frequency - Every 2 months Day – Monday Time – Mornings	Cr. C.P. Grattan Cr. Jacqui Vosper	Two Members	Cr. C.P. Grattan Cr. Jacqui Vosper
2	Aldershot & Farnborough Festival of Music & Art	Venues – Schools and Church Halls in Rushmoor Frequency - (i) Weekends in April and May for competitions (ii) AGM in November (iii) 3 committee meetings during the year	Cr. Gaynor Austin Cr. K.H. Muschamp Vacancy	Three Members (Cross – Group representation)	Cr. Gaynor Austin Cr. K.H. Muschamp Vacancy
3	Aldershot Military Museum Strategic Local Agreement Meeting	Venue – Aldershot Military Museum Frequency – Once a year Time – daytime	Cr. Mrs. D.B. Bedford Cr. Sophie Porter	Two Members	Cr. Mrs. D.B. Bedford Cr. Sophie Porter

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
Page 34	Aldershot Town Centre Business and Retailers Group	Venue – Princes Hall, Aldershot Frequency - Twice a year Day – Weekday evenings Time - 6.30 p.m.	Cr. M.S. Choudhary Cr. Gaynor Austin Cr. Christine Guinness Cr. Sophia Choudhary Cr. Prabesh KC	Up to five Aldershot Members (cross-party representation)	Cr. M.S. Choudhary Cr. Gaynor Austin Cr. Christine Guinness Cr. Sophia Choudhary Cr. Prabesh KC
5	Basingstoke Canal Joint Management Committee	Venue - Canal Centre, Mytchett Frequency - Twice a year Day - Friday Time - 10.00 am	Cr. J.H. Marsh Cr. Veronica Graham Green  Standing Deputies: Cr. P.G. Taylor Cr. C.P. Grattan	Two Members  and a Standing Deputy for each Member (requested by the Management Committee)	Cr. J.H. Marsh Cr. Veronica Graham Green Cr. C.P. Grattan  Standing Deputies: Cr. P.G. Taylor
6	Blackbushe Airport Consultative Committee	Venue - British Car Auction Frequency - 2 per year Day - 1st Wednesday in March and October Time - 7.30 pm	Cr. P.J. Cullum  Standing Deputy: Vacancy	One Member and one Standing Deputy  (Standing Deputy requested by the Consultative Committee)	Cr. P.J. Cullum  Standing Deputy: Vacancy
7	Blackwater Valley Advisory Panel for Public Transport	Venue – RBC offices Frequency - 4 times per year (Mar, June, Sept, Dec) Time - 3.30 pm	Cr. M.L. Sheehan and Cr. M.J. Roberts  Standing Deputies: Cr. Rod Cooper Cr. T.D. Bridgeman	Cabinet Member with responsibility and one Member  (maximum of two standing deputies)	Cr. M.L. Sheehan Cr. M.J. Roberts  Standing Deputies: Cr. Rod Cooper Cr. T.D. Bridgeman

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
8	Blackwater Valley Countryside Partnership	Venue – RBC Offices Frequency – Annually Day- Various days in Sept/Oct Time- Afternoon	Cr. Mrs D.B. Bedford Cr. P.G. Taylor  Standing Deputies Cr. A.J. Halstead	Two Members and up to two Standing Deputies	Cr. Mrs D.B. Bedford Cr. P.G. Taylor Cr. C.P. Grattan  Standing Deputies Cr. A.J. Halstead
9	Brickfield Country Park, Friends of	Venue - Various Frequency - Every 3 months Day - 1st Tuesday of the month Time - 8.00 pm	Cr. D.E. Clifford Cr. P.I.C. Crerar Cr. B.A. Thomas	Three Manor Park Ward Members	Cr. D.E. Clifford Cr. P.I.C. Crerar Cr. B.A. Thomas
10	Cove Brook Greenway Group	Venue - Blunden Hall, Farnborough Frequency - Quarterly Time – Evenings	Cr. L. Jeffers Cr. Veronica Graham-Green	Two Members	Cr. C.P. Grattan Cr. L. Jeffers Cr. Veronica Graham-Green
11	District Council's Network (DCN)	Venue – AGM Birmingham	Cr. D.E. Clifford	Leader of the Council	Cr. D.E. Clifford
12	Enterprise M3 Joint Leaders Board	Venue – Various Frequency – 6 a year Time – daytime	Cr. D.E. Clifford	Leader of the Council	Cr. D.E. Clifford

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
Page 36	Farnborough Aerodrome Consultative Committee	Venue - BA Park Centre, Farnborough Frequency - Twice a year Day - Thursday Time - 2.00 pm	Cr. M.L. Sheehan Cr. P.G. Taylor  Cr. Martin Tennant as Standing Deputy	Cabinet Member with responsibility and one Member from a ward that adjoins the site (and one standing deputy).	Cr. M.L. Sheehan Cr. P.G. Taylor  Cr. Martin Tennant as Standing Deputy
14	Farnborough and Cove War Memorial Hospital Trust Ltd	Venue - Devereux House Frequency - 6-8 weeks Day - Monday Time - 8.00 pm	Cr. C.J. Stewart	One Member	Cr. C.J. Stewart
15	457 Farnborough Squadron	Venue – Squadron HQ, St. Christophers Road, Cove Frequency – 6 each year Day - Wednesday Time – 7.30 p.m.	Cr. J.H. Marsh	One Member	Cr. J.H. Marsh
16	Hampshire and Isle of Wight Local Government Association	Venue - Rota of Association authorities Frequency - 6 per year Day – Friday Time - Day-time	Cr. D.E. Clifford Cr. P.G. Taylor	Two Cabinet Members, one of whom is the Leader	Cr. D.E. Clifford Cr. P.G. Taylor
17	Hampshire Districts Health and Wellbeing Forum	Venue – rotation around Hampshire Frequency – 3 per year Time – daytime	Cr. Marina Munro	Cabinet Member with responsibility for Health	Cr. Marina Munro



	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
18	Hampshire Police and Crime Panel	Venue – venues around Hampshire Frequency – 4 times a year Time – 10.00 a.m. weekdays	Cr. K.H. Muschamp	Leader or Cabinet Member	Cr. K.H. Muschamp
19	Hampshire Buildings Preservation Trust AGM	Venue – Various Frequency – Annually (AGM) Day - Friday in November Time - 10.30 am	Cr. Veronica Graham-Green Cr. Marina Munro	Two Members	Cr. Veronica Graham-Green Cr. Marina Munro
20	Local Government Association - General Assembly	Venue - London and Conference venues Frequency – Annually Time – Daytime	Cr. D.E. Clifford	Leader of the Council	Cr. D.E. Clifford
21	North Hampshire Area Road Safety Council	Venue – Hart/RBC/BDBC Frequency – 3 times a year Time – daytime	Cr. Mara Makunura Cr. P.G. Taylor as Standing Deputy	One Member and one standing deputy	Cr. Mara Makunura Cr. P.G. Taylor as Standing Deputy
22	North Hampshire Community Safety Partnership	Venue – RBC/Hart/Basingstoke Offices Frequency – 3 times a year Time – daytime	Cr. M.L. Sheehan	Cabinet Member with responsibility for Community Safety	Cr. M.L. Sheehan

	NAME OF ORGANISATION	FREQUENCY AND TIME OF MEETINGS/VENUE	REPRESENTATIVE(S) 2019/20	MEMBERSHIP	NOMINATED REPRESENTATIVES 2020/21
Page 38	Joint Scrutiny Committee (Hart/Basingstoke/Rushmoor) North Hampshire Community Safety Partnership	Venue – RBC/Hart/Basingstoke Offices Frequency – once a year Time – daytime	2 representatives from Chairman and Vice-Chairmen of the Overview and Scrutiny Committee  Cr. A.H. Crawford  Nominated Substitutes: Cr. K. Dibble Remaining Scrutiny Chair or Vice-Chairman	Three non-executive Members including Chairman and Vice-Chairman of OSC  To reflect proportionality: 2 Conservatives 1 Labour  Nominated substitutes	2 representatives from Chairman and Vice-Chairmen of the Overview and Scrutiny Committee  Cr. A.H. Crawford  Nominated Substitutes: Cr. K. Dibble Remaining Scrutiny Chair or Vice-Chairman
24	Parity for Disability	Venue - Day Centre, Whetstone Road Frequency - 2nd Tuesday of every month Time - 7.30 pm - 9.30 pm	Cr. S.J. Masterson  Cr. Sue Carter as Standing Deputy	One Member and one standing deputy	Cr. S.J. Masterson  Cr. Sue Carter as Standing Deputy
25	Project Integra Strategic Board	Venue - Various Authorities Frequency - Quarterly Day - Friday Time - 9.30 am	Cr. M.L. Sheehan	Cabinet Member with responsibility for waste management	Cr. M.L. Sheehan
26	Royal British Legion (Farnborough Branch) Remembrance Day Arrangements	Frequency – As required Time - 7.45 pm	Cr. Mrs D.B. Bedford	One Member	Cr. Mrs D.B. Bedford

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
27	Citizens' Advice Rushmoor Trustee Board	Venue - Alternates: Farnborough CAB/Aldershot CAB Frequency - 6 per year Day - Monday Time - 7.00 pm	Cr. C.J. Stewart Cr. P.F. Rust	Two Members (representatives of different Political Groups).	Cr. C.J. Stewart Cr. Nadia Martin
28	Rushmoor Development Partnership LLP (RDP) Board	Venue – RBC Offices	Cr. D.E. Clifford Cr. M.J. Tennant Executive Director (KE)	Two Cabinet Members Executive Director	Cr. D.E. Clifford Cr. M.J. Tennant Executive Director (KE)
29	Rushmoor Homes Company – Board of Directors	Venue RBC Offices	Cr. K. Dibble Cr. K.H. Muschamp Cr. P.G. Taylor	Two Cabinet Members Leader of main opposition group	Cr. K. Dibble Cr. K.H. Muschamp Cr. P.G. Taylor
30	Rushmoor In Bloom Forum	Venue - RBC Offices Frequency - 6 per year Time - 7.00 pm	Cr. Mrs. D.B. Bedford Cr. M.S. Choudhary Vacancy Cr. Sophie Porter Cr. C.P. Grattan	Five Members (politically balanced. Last year, political balance was 3 Conservative, 2 from other Groups)	Cr. Mrs. D.B. Bedford Cr. M.S. Choudhary Vacancy Cr. Sophie Porter Cr. C.P. Grattan
31	Rushmoor Partners Network	Venue - RBC Offices Frequency - Quarterly Time - 4.00 pm	Cr. D.E. Clifford Cr. K.H. Muschamp Cr. Marina Munro	Leader, Deputy Leader and Cabinet Member	Cr. D.E. Clifford Cr. K.H. Muschamp Cr. Marina Munro

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
Page 40	Rushmoor Voluntary Services Board	Venue – Community Centre Frequency – 8 per Year and AGM and Awayday Time – Thursday Evening at 7.15 p.m.	Cr. S.J. Masterson	One Member	Cr. S.J. Masterson
33	Rushmoor Youth Forum (Currently a virtual forum )	Business is exchanged electronically only	Cr. J.B. Canty Cr. Sue Carter Cr. A. J. Halstead	Three Members (one from each Political Group)	Cr. J.B. Canty Cr. Sue Carter Cr. A. J. Halstead
34	South East Employers – Full Meeting	Venue – London & Winchester Frequency - 2 per year – next meeting Wednesday, 11th July, 2018	Cr. P.G. Taylor	Cabinet Member with responsibility for HR and one Member as Standing Deputy	Cr. P.G. Taylor
35	South East England Councils (SEEC) All Member Meeting	Venue – London Frequency - Quarterly Time – Daytime	Cr. D.E. Clifford	Leaders of the Council	Cr. D.E. Clifford
36	Thames Basin Heaths Joint Strategic Partnership Board	Venue – South East area	Cr. Marina Munro	Cabinet Member with responsibility for Planning Policy	Cr. Marina Munro
37	Wellesley Residents Trust Ltd	Venue – Wellesley	Cr. A.H. Crawford	One Member	Cr. A.H. Crawford Cr. Prabesh KC

	<b>NAME OF ORGANISATION</b>	<b>FREQUENCY AND TIME OF MEETINGS/VENUE</b>	<b>REPRESENTATIVE(S) 2019/20</b>	<b>MEMBERSHIP</b>	<b>NOMINATED REPRESENTATIVES 2020/21</b>
38	West End Centre Management Committee	Venue - West End Centre Frequency - Every 2/3 months Day - Varies Time - 7.00 pm	Cr. M.S. Choudhary Cr. Nadia Martin	Two Members	Cr. M.S. Choudhary Cr. Sophie Porter

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