**Annual Report of Harrow Council’s Governance Audit, Risk Management & Standards Committee**

**2018/19**

**Chair’s Foreword**

I am very pleased to present this Governance, Audit, Risk Management and Standards Committee Annual Report for 2018/19 to Full Council.

The report shows that the GARMS Committee has undertaken its role effectively; covering a wide range of topics and ensuring that appropriate governance and control arrangements are in place to protect the interests of the Council. The Committee considered and reviewed a number of policy areas throughout the past year and this can be seen within the programme of works appendix in the report.

The Committee has ensured that best practice has been followed throughout our workings and where issues need to be raised, they have been discussed at length at Committee meetings and the right level of scrutiny and challenge has occurred.

As the Chair of the Committee I would like to express my appreciations to the Council officers for their robust work throughout the year along with our external auditors. I also express my thanks to the Committee members for their contributions this year in carrying out the vital and important responsibilities the Committee oversees.

Cllr. David Perry

Chairman - Governance, Audit, Risk Management & Standards Committee

**Introduction**

1. The purpose of the Governance, Audit, Risk Management and Standards (GARMS) committee is to provide independent assurance to the members of the adequacy of Harrow Council’s governance, risk management and control frameworks and oversees the financial reporting and annual governance processes. It oversees internal audit and external audit, helping to ensure efficient and effective assurance arrangements are in place. It also acts as the Standards Committee.

**Terms of Reference and Membership**

1. The Committee’s Terms of Reference were reviewed and updated during 2018/19 as part of the Internal Audit review of the Committee against the CIPFA guidance ‘Audit Committees – Practical Guidance for Local Authorities & Police 2018’. The changes to the Terms of Reference were recommended to Council by the GARMS Committee at the December meeting and were approved by Council on 28/02/19.
2. The updated Terms of Reference requires the Committee:

* To report to those charged with governance on the committee’s findings, conclusions and recommendations concerning the adequacy and effectiveness of their governance, risk management and internal control frameworks, financial reporting arrangements, and internal and external audit functions.
* To report to full Council on an annual basis on the committee’s performance in relation to the terms of reference and the effectiveness of the committee in meeting its purpose.
* To publish an annual report on the work of the committee.

1. The membership of the Committee for 2018/19 consisted of the following:

* Councillor David Perry (Chair)
* Councillor Ghazanfar Ali
* Councillor Peymana Assad
* Councillor Maxine Henson
* Councillor Philip Benjamin
* Councillor Amir Moshenson
* Councillor Kanti Rabadia (Vice-Chair)

1. The Committees membership rules state that:

* An Elected Mayor, the Leader or a member of the Executive may not be Members;
* The Chair of the Committee must not be a Member of the Executive;

These rules were complied with during 2018/19.

1. The Committee usually meets 5 times a year (April, July, September, November/December and January) however during 2018/19 the April meeting was cancelled due to the local elections.

**The Committee’s Programme of Work**

1. The Committee has a broad remit that includes:

* Governance
* Risk Management
* Countering Fraud and Corruption
* Internal audit
* External audit
* Financial reporting
* Treasury Management
* Health & Safety
* Standards

1. There is comprehensive programme of work and the table below shows the reports that were considered by the Committee during the year and decisions/resolutions made. The following sections provide further detail on each area.

**Governance**

1. The role of the GARMS Committee in relation to governance is:

* To review the Council’s corporate governance arrangements against the good governance framework, including the ethical framework and consider the local code of governance.
* To review the Annual Governance Statement (AGS) prior to approval and consider whether it properly reflects the risk environment and supporting assurances and legal and financial advice, taking into account internal audit’s opinion on the overall adequacy and effectiveness of the Council’s framework of governance, risk management and control.
* To monitor the progress of agreed actions to close significant governance gaps.
* To consider the Council’s arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
* To consider the Council’s framework of assurance and ensure that it adequately addresses the risks and priorities of the Council.
* To review the governance and assurance arrangements for significant partnerships.

1. To achieve this in 2018/19 the committee received a report on the 2017/18 Annual Governance Statement that included an Evidence Table detailing the assurances obtained to support the statement. This included assurances from the Council’s Legal and Finance teams, assurance on arrangements to secure vfm, assurance on how the Council’s framework of assurance addresses the risks and priorities of the Council and assurances on arrangements for the Council’s significant partnerships.
2. The Head of Internal Audit’s opinion on the adequacy and effectiveness of the Council’s framework of governance, risk management and control and the rationale behind it was reported to the committee at the same meeting as part of the Internal Audit Year-end report and was also included in the Annual Governance Statement. The opinion stated that:

*The adequacy and effectiveness of organisation’s control environment for the 2017/18 financial year has been assessed as “good”.*

The statement itself detailed progress on the significant gaps identified as part of the 2016/17 Annual Governance Statement.

**Risk Management**

1. The role of the committee in risk management is:

* To review the Council’s risk management strategy.
* To monitor the effective development and operation of risk management in the Council via the review of the Council’s Corporate Risk Register on a regular basis.
* To monitor progress in addressing risk-related issues reported to the committee.

1. During 2018/19 the committee received two reports on risk management, one covering the annual refresh process of the Corporate Risk Register and the agreed Quarter 1 register and the other covering the Quarter 2 and Quarter 3 updates of the register. The Quarter 4 updated register was presented to the committee’s April 2019 meeting. These reports enabled the committee to monitor progress of risk-related issues facing the Council.
2. The Council’s risk management strategy was not presented to the committee during 2018/19, although it was previously approved by the committee, as it was not reviewed/updated during this time. The strategy is however currently under review by officers and will be presented to the committee for review during 2019/20.

**Countering Fraud and Corruption**

1. The role of the GARMS Committee in relation to countering fraud and corruption is:

* To monitor the counter-fraud strategy, actions and resources and the Council’s approach to tackling fraud and corruption and promote an anti-fraud culture.
* To review and approve the annual Corporate Anti-Fraud Team Plan.
* To consider reports from the Head of Internal Audit/ Corporate Anti-Fraud Manager on the Corporate Anti-Fraud Team’s performance at mid-year and at year-end.

1. During 2018/19 the committee received reports on the corporate anti-fraud plan of work for 2018/19, the year-end report covering the output and performance of the Corporate Anti-Fraud Team for 2017/18 as well as an outline of fraud referrals made during the year, a summary of the fraud risk register and progress against the fraud strategy. A mid-year report on progress against the 2018/19 agreed plan of work was also considered.

**Internal Audit**

1. The role of the committee in relation to internal audit is:

* To approve the internal audit charter and support the independence of Internal Audit.
* To review proposals made in relation to the appointment of external providers of internal audit services and to make recommendations.
* To approve the risk-based internal audit plan, including internal audit’s resource requirements, the approach to using other sources of assurance and any work required to place reliance upon those other sources.
* To approve significant interim changes to the risk-based internal audit plan and resource requirements.
* To make appropriate enquiries of both management and the Head of Internal Audit to determine if there are any inappropriate scope or resource limitations.
* To consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing of the Head of Internal Audit.
* To approve and periodically review safeguards to limit such impairments.
* To consider reports from the Head of Internal Audit on internal audit’s performance at mid-year and year-end, including the performance of external providers of internal audit services.
* To consider Red and Red/Amber assurance reports and summaries of specific internal audit reports as requested.
* To contribute to the Quality Assurance Improvement Programme and in particular, to the external quality assessment of internal audit that takes place at least once every five years.
* To consider the report on the effectiveness of internal audit contained within the AGS.
* To provide free and unfettered access to the GARMS Committee Chair for the Head of Internal Audit, including the opportunity for a private meeting with the committee.

1. The internal audit charter is presented and approved by the GARMS Committee on an annual basis, in 2018/19 this went to the July meeting along with the internal audit plan of work for 2018/19 for approval. (This report would normally be presented to the April meeting of the GARMS Committee i.e. at the beginning of the financial year; however the April 2018 meeting was cancelled due to the local elections.) This report also covered the independence of internal audit outlining the additional roles and responsibilities of the Head of Internal Audit e.g. for the Corporate Anti-Fraud Team, Risk Management and the annual governance process and how the impact on objectivity is being mitigated. In addition the report covered internal audit’s resource requirements and the approach to using other sources of assurance.
2. A mid-year report on the performance of internal audit against the agreed plan was provided in January 2019 along with proposed changes to the agreed 2018/19 plan:

* to create capacity to deal with emerging risks;
* to reflect the reduction in overall internal audit resources as a result of a vacant post;
* as a result of a planned action in another part of the Council not being completed on which the review was reliant.

1. The committee considered 5 red or red/amber assurance internal audit reports and 1 follow-up of a red assurance report from the 2017/18 internal audit plan at its meeting in September 2018 as well as 2 such reports in December and 1 report in January 2019 from the 2018/19 plan.
2. The Annual Governance Statement that includes a report on the effectiveness of internal audit was considered and approved by the committee in July 2018 (as above).
3. The Head of Internal Audit is provided with free and unfettered access to the GARMS Committee Chair and met once privately with him during 2018/19.
4. During 2018/19 there were no new proposals made in relation to the appointment of external providers of internal audit services and no external providers were used during the year.

**External Audit**

1. The committee’s role in relation to external audit is:

* To support the independence of external audit through consideration of the external auditor’s annual assessment of its independence and review of any issues raised by Public Sector Audit Appointments (PSAA).
* To consider the external auditor’s annual letter, relevant reports and the report to those charged with governance.
* To consider specific reports as agreed with the external auditor.
* To comment on the scope and depth of external audit work and to ensure it gives value for money.
* To advise and recommend on the effectiveness of relationships between external and internal audit and other inspection agencies or relevant bodies.
* To scrutinise/comment on the External Audit plan and fees.
* To monitor progress against the External Audit plan and receive summaries of audit work completed and key recommendations.
* To review the management response to external audit recommendations and progress on implementation of recommendations.
* To recommend action where external audit recommendations are not being implemented.

1. The external auditor’s assessment of their independence was included in KPMG’s External Audit Report 2017/18 presented to the committee in July 2018 however no issues were raised by the PSAA. This report provided information on the progress of the external auditor’s work on the financial statements and the value for money conclusion. The draft Management Letter for 2017/18 prepared by the external auditors was also provided at this meeting.
2. The Annual Audit Letter for 2017/18 was presented to the September meeting of the committee providing an unqualified opinion on the Authority’s financial statements for 2017/18 and an unqualified conclusion on the Authority’s arrangements to secure value for money (VFM conclusion) for 2017/18. No recommendations were made for 2017/18.
3. New external auditors (Mazers) were appointed for the new financial year (2018/19) by the PSAA and their first report covering plans for 2018/19 and their fees was presented to the committee in January 2019.

**Financial Reporting**

1. The role of the committee in relation to financial reporting is:

* To review the annual statement of accounts prior to approval and satisfy themselves that appropriate steps have been taken to meet statutory and recommended professional practices.  Specifically to:·
* review the narrative report to ensure consistency with the statements and the financial challenges and risks facing the authority in the future;
* review whether the narrative report is readable and understandable by a lay person;
* review the key messages from each of the financial statements and evaluating what that means for the authority in future years;
* monitor trends and review for consistency with what is known about financial performance over the course of the year;
* review the suitability of accounting policies and treatments;
* seek explanations for changes in accounting policies and treatments;
* review major judgemental areas, e.g. provisions or reserves;
* seek assurances that preparations are in place to facilitate the external audit.

* To consider the external auditor’s report to those charged with governance on issues arising from the audit of the accounts.

1. The committee received one report on financial reporting during 2018/19 on the statement of accounts including the narrative report. In previous years the committee had received two reports, a draft statement of accounts for review and comments and a final statement of accounts for approval however the deadline for publishing the statement of accounts was brought forward from September to July in 2018. The new earlier deadline meant that GARMS Members did not have a scheduled meeting to review and ask questions on the draft Statement of Accounts. To enable Members to have the same opportunity of discussing the draft Statement of Accounts, all Members were offered a training session with the technical finance team and also provided with the opportunity to ask further questions before they were formally presented to the committee.
2. The publishing of the Statement of Accounts makes public the Council’s financial performance for the year of account. They provide public information on the Council’s financial performance, and are a substantial part of the process by which the Council is held accountable to the public for the proper management and stewardship of the Council’s resources.
3. The external audit report on the accounts was appended to this report as described in the section on external audit above.

**Treasury Management**

1. The committee’s role in treasury management is:

* To review the Treasury Management strategy and monitor progress on treasury management in accordance with CIPFA codes of practice.

1. The committee considered three reports on Treasury Management during the year, the 2017/18 outturn report in July, the strategy statement and annual investment strategy mid-year review 2018/19 in December and the treasury management strategy in January 2019.

**Health & Safety**

1. In relation to Health & Safety the committee are required by their terms of reference:

* To review the Council’s Health and Safety arrangements and oversee progress on Health and Safety.

1. During the year the committee was asked to approve the Health & Safety policy and received the Annual Health & Safety report summarised the Council’s health and safety performance for 2017/18 and providing an update of activities together with statistics on training, audits and accidents, including schools.

**Standards**

1. The committee’s role in promoting and maintaining high standards of conduct by Councillors and an overview of Standards items considered during the year.

* Promoting and maintaining high standards of conduct by Councillors, co-opted members and “church” and parent governor representatives.
* Assisting Councillors, co-opted members and “church” and parent governor representatives to observe the Members’ Code of Conduct.
* Advising the Council on the adoption or revision of the Members’ Code of Conduct.
* Monitoring the operation of the Members’ Code of Conduct.
* Developing and recommending local protocols to the Council to supplement the Members’ Code of Conduct.
* Enforcing local protocols and applying sanctions in respect of breaches as appropriate.
* Advising, training or arranging to train Councillors, co-opted members and “church” and parent governor representatives on matters relating to the Members’ Code of Conduct.
* Granting dispensations to Councillors, co-opted members and “church” and parent governor representatives from requirements relating to interests set out in the Members’ Code of Conduct.
* To keep under review and amend, as appropriate, the Protocol on Councillor/Officer Relations.
* To keep under review the Officer Code of Conduct and, after consultation with unions representing staff, make recommendations to Council for amendment or addition.
* To receive reports and keep a general overview of probity matters arising from ombudsman investigations, Monitoring Officer reports, reports of the Chief Financial Officer and Audit Commission.
* To have oversight of the Council’s Whistleblowing Policy.
* To agree the policy for decisions on payments to those adversely affected by Council maladministration (under section 92 Local Government Act 2000).
* To establish sub-committees and working groups to deal with complaints that a member or a co-opted member has failed to comply with the Council’s Code of Conduct.
* To consider any application received from any officer of the Authority for exemption from political restriction under Sections 1 and 2 of the Local Government and Housing Act 1989 in respect of the post held by that officer and may direct the Authority that the post shall not be considered to be a politically restricted post and that the post be removed from the list maintained by the Authority under Section 2(2) of that Act.
* Upon the application of any person or otherwise, consider whether a post should be included in the list maintained by the Authority under Section 2(2) of the 1989 Act, and may direct the Authority to include a post in that list.
* On referral from the Monitoring Officer, to decide whether to take action against a member for breach of the Code of Conduct and if so, to decide what action should be taken.

1. No reports on standards were submitted to the committee during 2018/19.

**Conclusion**

1. The Committee has successfully fulfilled its purpose/roles and responsibilities as outlined in its agreed Terms of Reference.

**Programme of Work 2018/19**

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| Meeting | Report  subject | Reports Considered | Description of Reports/Decisions |
| 17/04/18 |  | Meeting cancelled due to the local elections |  |
| 17/07/18 | HS  HS  TM  FR/EA  Gov  IA/CFC  IA/CFC  RM | Health & Safety Policy  Health & Safety Annual Report (Information Report)  Treasury Management Outturn (Information Report)  Statement of Accounts 2017-18   * SOA 2017-18 Draft * Draft Pension Fund Final Accounts 2017-18 * Appendix 1 Governance Compliance Statement March 2018 * Appendix 2 Communication Policy March 2018 * Appendix 3 LGPS Brief Guide April 2018 * Appendix 4 Investment Strategy Statement March 2018 * Appendix 5 Funding Strategy Statement March 2018 * Appendix 6 Summary Statement of Accounts 2017-18 Draft * Appendix 7 LB Harrow 2017-18 LG ISA260- Draft * LBH Draft Management Letter 2017-18   Annual Governance Statement 2017-18   * AGS 2017-18 * Governance review Evidence Table 2017-18   Internal Audit and Corporate Anti-fraud Annual Plan 2018-19   * IA-CAFT Plan 2018-19 * Harrow Internal Audit Charter March 2018 * IA Peer Review final report   Internal Audit and Corporate Anti-fraud Year-end report 2017/18 (Information Report)   * Appendix 1 - IA Year-end report * Appendix 2 - IA Output against plan * Appendix 3 - CAFT Year End Report 17-18 * Appendix 4 - 2017-18 CAFT fraud referrals year end * Appendix 5 - Fraud Risk Register Summary * Appendix 6 - 2016-19 Strategy progress report   2018-19 Refreshed Corporate Risk Register Quarter 1 (Part II Information Report)   * CSB approved Refreshed Corporate Risk Register Q1 , * Corporate Risk Register Refresh | The Committee considered a report of the Corporate Director Community which sought approval for a refreshed health and safety policy for the Council.  RESOLVED: That the Health and Safety Policy be approved.  The Committee considered a report which summarised the Council’s health and safety performance for the year 1 April 2017 to 31 March 2018. It provided an update of activities together with statistics on training, audits and accidents, including schools.  RESOLVED: That the report be noted.  The Committee received a report which summarised treasury management activities in the 2017-18 financial year. It was noted that at its meeting on 21 June 2018 Cabinet had noted the outturn position for treasury management and had referred it to this Committee for review.  RESOLVED: That the report be noted.  The Committee received a report which set out the Council’s draft financial accounts for 2017-18, together with the Pension Fund annual report.  RESOLVED: To  (1) note the reports of the External Auditor on matters arising from the audit of the Statement of Accounts 2017-18 and the Pension Fund Annual Report 2017-18;  (2) approve the audited Statement of Accounts 2017-18 and note the Pension Fund Annual Report 2017-18 and authorise the signing thereof by the Chair;  (3) authorise the Director of Finance, following consultation with the Chair, to make any final amendments to the Accounts and Pension Fund Annual Report arising from the external audit prior to the signing of the accounts by the auditor; and  (4) note the Summary Statement of Accounts 2017-18.  The Committee received the Council’s Annual Governance Statement (AGS) for 2017-18 which had been produced in accordance with the Accounts and Audit Regulations 2015.  Members noted that whilst the Audit Committee broadly complied with CIPFA’s best practice it had not been specifically reviewed against CIPFA best practice for several years so was included in the internal audit 2018/19 plan.  RESOLVED: That the Annual Governance Statement for 2017/18 be approved.  The Committee received the Internal Audit and Corporate Anti-Fraud Plans for 2018/19.  RESOLVED: That the Internal Audit and Corporate Anti-Fraud Plans for 2018/19 and the Internal Audit charter be approved in accordance with the Public Sector Internal Audit Standard 2020 Communication and Approval.  The Committee received the 2017/18 year end Internal Audit and Corporate Anti-Fraud Plans which included the Head of Audit’s overall annual audit opinion on the control environment.  RESOLVED: That the report be noted.  The Committee considered a report which set out the Council’s 2018/19 Refreshed Corporate Risk Register for quarter 1 of the financial year in order to monitor progress on risk management.  RESOLVED: That the report be noted. |
| 04/09/18 | IA  EA  IA | Audit Committee Review (Information Report)   * Audit Committee Review Terms of Reference * CIPFA Audit Committees – Practical Guidance for Local Authorities & Police 2018   Annual Audit Letter   * LBH Annual Audit Letter 2017-18   Internal Audit Red Assurance Reports (Part II Information Report)   * Adult Residential Final Report * Cash Personal Budgets Final Report * Cash Personal Budgets Follow Up Report * Welldon Park Primary Gov and Financial Controls Final Report * Welldon Park Teaching Assistants Final Audit Report * Regeneration Programme Final Report | The Committee received a report which outlined the approach to be taken to the Internal Audit review of the Audit Committee agreed as part of the 2018/19 Internal Audit Plan.  It was noted that, as part of the review, the Committee would undertake a self-assessment against the CIPFA guidance facilitated by the Head of Internal Audit and Corporate Anti-Fraud. The results would be reported to the next Committee meeting together with a proposed action plan. In addition, a review of the Terms of Reference would be undertaken by the Head of Internal Audit and Corporate Anti-Fraud and the results and any suggested improvements would be submitted to the next meeting.  RESOLVED: That the report be noted.  The Committee received a report on the Annual Audit Letter from the Council’s external auditors.  RESOLVED: That the report be noted.  The Committee received a report on the final red or red/amber assurance reports undertaken by Internal Audit as part of the 2017/18 Internal Audit Plan and reported at a high level in the Year End Report presented at the last GARMS meeting in July.  The Committee requested the attendance of officers from the reviewed departments at future meetings.  The Committee scrutinised the review reports and made comments and asked questions which were responded to by the officers  RESOLVED: That the report be noted. |
| 05/12/18 | IA  TM  IA | Audit Committee Review   * Appendix 1 Audit Committee Review – Draft Internal Audit report * Appendix B Audit Committee Self-assessment * Appendix C – Current GARMS Committee ToR * Appendix D Proposed GARMS Committee ToR   Treasury Management Strategy Statement and Annual Investment Strategy: Mid-year Review 2018/19  Internal Audit Red Assurance Reports (Part II Information Report)   * Appendix 1 Final Report - Waste * Appendix 2 Final report - SNT | The Committee received a report which outlined the draft findings and recommendations of the Internal Audit review of the Audit Committee as agreed as part of the 2018/19 Internal Audit Plan.  Resolved to RECOMMEND: (to Council)    That the revised Terms of Reference as attached be approved.  RESOLVED: That the recommendations in the draft Internal Audit report be agreed.  The Committee received a report on the mid-year review of treasury management activities for 2018/19.  RESOLVED: That  (1) the report be noted;  (2) the Director of Finance verbally report to Cabinet on the reason for the discrepancy between tables 4 and 5 HRA capital expenditure estimate of £2.739k against a forecast of £10380k in table 4.  The Committee received a report on two final red or red/amber assurance reports undertaken by Internal Audit as part of the 2017/18 Internal Audit Plan and reported at a high level in the Year End Report presented to CSB and GARMS in July.  The Committee scrutinised the review reports and made comments and asked questions which were responded to by the officers.  RESOLVED: That the report be noted. |
| 29/01/19 | EA  EA  TM  IA/CFC  RM  IA | External Audit Plans 2018-19 (Information Report)   * LB Harrow Main ASM 2018-19 Final * LBHarrow Pension Fund ASM 2018-19 Final   External Audit Report on Returns and Certifications 2017/18   * LB Harrow Grants Annual Report 2017-18 Final   Treasury Management Strategy Statement including Prudential Indicators, Minimum Revenue Provision Policy Statement, Annual Investment Strategy for 2019/20 and Corporate Strategy   * Final GARMS TMSS Appendix H Draft Capital strategy 19-20     Internal Audit and Corporate Anti-Fraud Mid -Year Report and Plan Update 2018-19 (Information Report)   * Appendix 1 - 18-19 Mid- Year Report * Appendix 2 CAFT Mid- Year Report 18-19 * Appendix 3 2018-19 CAFT fraud referrals mid-year   2018-19 Corporate Risk Register Q3 (Part II Information Report)   * GARMS Updated Q3 18-19 Corporate Risk Register   Internal Audit Red Assurance Reports (Part II Information Report)   * Appendix 1 Internal Audit Assurance Ratings * Appendix 2 Regeneration Final Report * Appendix 3 Distinction between Compliance and Audit | The Committee received a report on the External Audit Plans for 2018/19. The report summarised how the external audit of the Council’s accounts and Pension Funds for 2018/19 would be conducted and the key aspects of the audit plan.  The Chair informed the Committee that he had met with the Auditors and that there would be opportunities for them to meet with Members of the Committee at an appropriate time.  RESOLVED: That the report be noted.  The Committee received the annual report on grants and returns 2017/18 which included a summary of the outcome of returns with regard to Teachers’ Pension Return, the Pooling of Housing Capital Receipts return, and the Housing benefits Grant claim.  RESOLVED: That the Audit report on Grant and Returns Certifications 2017/18 be noted.  The Committee received a report which set out the Council’s Treasury Management Strategy Statement which included the Prudential Indicators, Minimum Revenue Provision Policy Statement and Annual Investment Strategy 2019/20 and the Annual Capital Strategy.  RESOLVED: That the report be noted. (this is not right – it is a decision report!)  The Committee considered a report that set out progress against the 2018/19 Internal Audit and Corporate Anti-fraud plans. The report also covered progress in Quarters 3 and 4 and an update on the Internal Audit annual plan.  RESOLVED: That the report be noted.  The Committee received a confidential report which set out the Council’s 2018/19 Corporate Risk Register for quarter 3 of the financial year to enable progress on risk management to be monitored in accordance with the Committee terms of reference.  RESOLVED: That the report be noted.  The Committee considered a red final red assurance report undertaken by Internal Audit as part of the 2018/19 Internal Audit Plan and two follow-ups of red or red/amber reports issued as part of the 2017/18 Internal Audit Plan to help fulfil the Committee’s purpose to provide assurance to the Members of the adequacy of the Council’s governance, risk management and control framework.  RESOLVED: That the report be noted. |