

**Report from Audit and Integrated Governance Committee
meeting held on 26 May 2016**

Item 22i

Governing Body meeting

7 July 2016

Author(s)	Julia Newton, Director of Finance
Sponsor	Phil Taylor, Chair of Audit and Integrated Governance Committee
Is your report for Approval / Consideration / Noting	
Noting	
Are there any Resource Implications	
Not applicable	
Audit Requirement	
<u>CCG Objectives</u>	
5. Organisational development to ensure CCG meets organisational health and capability requirements	
Principal Risk: 5.4 Inadequate adherence to principles of good governance and legal framework leading to breach of regulations and consequent reputational or financial damage.	
<u>Equality impact assessment</u>	
<i>Have you carried out an Equality Impact Assessment and is it attached?</i> No	
<i>If not, why not?</i> Not applicable	
<u>PPE Activity</u>	
<i>How does your paper support involving patients, carers and the public?</i> Not applicable	
Recommendations	
The Governing Body is asked to:	
<ol style="list-style-type: none"> 1. Note the key messages in the Executive Summary 2. Receive the unadopted minutes from the 26 May 2016 meeting 	

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EXECUTIVE SUMMARY

Process for the Appointment of NHS Sheffield CCG's External Auditors

AIGC delegated to the Chair of AIGC approval of the specification for the tender for procurement of the CCG's external auditors.

AIGC agreed the two individuals to be part of the single evaluation process across South Yorkshire and Bassetlaw CCGs of the tenders would be Sheffield CCG's AIGC Chair and Director of Finance.

Financial Accounts for 2015/16

AIGC reviewed the Annual Accounts and Annual Report for 2015/16 and recommended them to Governing Body for adoption and approval.

Internal Audit Progress Report 2015/16

Members of AIGC raised concerns about the findings of Internal Audit's review into the quality of care in care homes. Members recognised that this issue is being formally discussed by the Quality Assurance Committee (QAC), and asked for further assurance that the QAC will ensure that action is being taken to address these concerns.

Counter Fraud Update

The committee noted that a new Counter Fraud e-learning module will soon be available for training purposes for new starters.

Update on Governing Body Assurance Framework (GBAF) and Risk Register

The committee gained assurance on the GBAF process for 2016/17. Members made a request to receive the Quarter 1 update on GBAF by the end of July rather than wait until the September 2016 AIGC meeting.

External and Internal Audit Technical Updates

External and Internal Audit's Quarterly Technical Updates are very helpful papers, containing lots of useful information in one place. The Committee agreed that, as it was difficult to discern what was helpful to different people, the report would be made available via the intranet and weekly round up to the CCG's Governing Body and staff to make them aware of what was available.

**Audit and Integrated Governance Committee
Unconfirmed minutes of the meeting held on 26 May 2016
Boardroom, 722 Prince of Wales Road**

- Present:** Mr Phil Taylor, Lay Member (Chair)
Mr John Boyington CBE, Lay Member (from item 18/16(b))
Dr Ngozi Anumba, CCG GP
Dr Leigh Sorsbie, CCG GP
- In Attendance:** Ms Rebecca Good, Financial Accountant, NHSSCCG
Ms Leanne Hawkes, Deputy Director / Client Manager, 360 Assurance
Ms Carol Henderson, Committee Administrator / PA to Director of Finance, NHSSCCG
Mrs Jackie Mills, Deputy Director of Finance
Ms Julia Newton, Director of Finance, NHSSCCG
Ms Alison Ormiston, Senior Manager, KPMG
Mr Robert Purseglove, Local Counter Fraud Specialist, 360 Assurance
Mrs Margaret Saunders, Head of Governance and Planning, NHSSCCG
Mr Graham Shead, Assistant Client Manager, 360 Assurance

Minute		ACTION
15/16	<p>Welcomes, Introductions and Apologies for Absence</p> <p>Apologies for absence had been received from Ms Amanda Forrest, Lay Member.</p> <p>Apologies for absence from those who were normally in attendance had been received from Mr Tim Furness, Director of Delivery, NHSSCCG, Ms Suzie Paradine, HR Manager, NHSSCCG, and Ms Clare Partridge, Director, KPMG.</p> <p>Mr Taylor, who was now chairing the committee as part of the changes to the AIGC's terms of reference, thanked Mr Boyington, former Chair of the committee, for his contribution and the excellent way he had chaired AIGC meetings since its formal establishment.</p>	
16/16	<p>Declarations of Interest</p> <p>The Senior Manager, KPMG, declared a conflict of interest in item 4(ii) Oral update on procurement process for the appointment of External Auditors.</p> <p>There were no further declarations of interest this month.</p>	

17/16

Minutes and Matters Arising of the meeting held on 24 March 2016

i) Accuracy

The minutes of the meeting held on 24 March 2016 were agreed as a correct record.

ii) Matters Arising

a) Quality Assurance Committee (QAC) (minutes 42/15(b), 50/15, 03/16(a) refer)

The Director of Finance advised members that an update on Ms Forrest's request for an additional GP member of the QAC could not be given at this stage, as the CCG Chair's review of individual Governing Body GPs' roles and responsibilities was not yet complete.

AF

b) 2015/16 AIGC Self Assessment Exercise (minute 04/16(a) refers)

The Director of Finance advised members that the key findings from KPMG's Audit Committee Self Assessment Survey, including comparator information, had been emailed round to members as a late paper, and would be formally presented to members in September. In the meantime, any issues or questions arising from the report should be forwarded to the Director, KPMG.

CP

c) External Audit Technical Update (minute 06/16(a) refers)

The Director of Finance advised members that, with regard to the Lord Carter of Coles' report that set out how non specialist acute trusts could reduce unwarranted variation in productivity and efficiency across every area in the hospital to save the NHS £5 billion per annum by 2020/21, this was being picked up by the Sustainability Transformation Plan (STP) workstreams, with a working group working through what the implications might be for the trusts. We would also need to work through what the implications might be for CCG, as it could possibly end up being quite a contentious issue.

d) Draft Internal Audit Annual Plan for 2016/17 and Fees (minute 07/16(d) refers)

The Deputy Director / Client Manager, 360 Assurance, advised members that she had still to provide specifications for the Director of Finance on the suggested programmes of work on HR and procurement where the service is a Sheffield-hosted service covering a number of CCGs.

LH

e) Local Counter Fraud 2015/16 Update Report including Progress Against NHS Sheffield CCG Self Assessment Review Action Plan (minute 09/16(a) refers)

The Local Counter Fraud Specialist (LCFS) explained that, with regard to the

CCG's annual self assessment review action plan, to be able to get to a Green rating we would have to be able to confirm and demonstrate that areas of compliance were in fact Green, however, officially the RAG rating could only be moved on a year. He advised members that he would be able to give an update in this regard following his completion of the documentation later in the day. He would prepare a plan to show progress which he would present to the committee in September.

RP

18/16

External Audit

a) 2016/17 Audit Fee Letter

The Director of Finance presented the annual audit fee letter which, she advised was the standard letter that external audit have to present to the AIGC for noting until the CCG appoints its own external auditors. She advised that the fee had been set by the Public Sector Audit Appointments Limited (PSAA) and was set at the same level as it had been for 2015/16.

She advised members that the CCG's Constitution (ie the Scheme of Delegation, Standing Orders and Prime Financial Policies (PFPs)) would need to be changed to reflect that, subject to final approval by NHS England, the CCG was now in a position to appoint its own external auditors

The Committee received and noted the External Audit Annual Audit Fee Letter for 2016/17.

Mr Boyington joined the meeting at this stage.

b) Update on Procurement Process for Appointment of External Auditors

The Director of Finance gave an oral update on progress with the procurement process for the appointment of the CCG's External Auditors.

She advised members that Doncaster CCG had agreed to lead on co-ordinating a combined procurement process for the South Yorkshire and Bassetlaw CCGs. The specification for the tender was in the final stages of completion and agreement, and was based on a national template but reflected our local needs.

She explained that the proposal was that each CCG's AIGC nominate two representatives, who did not necessarily need to be members of the AIGC, to undertake the formal evaluation of tenders. However, she did not want to exclude any members of the AIGC from being able to comment and so they would be invited to be part of the evaluation and contribute to the two "votes" from Sheffield CCG. It was agreed that for Sheffield the two nominated representative would be the Chair of AIGC and the Director of Finance.

PT/JN

She explained that, due to timing issues, the specification for the tender would need to be approved prior to the next AIGC meeting and, in this respect, advised members that her recommendation was to ask them to delegate authority to the

PT

AIGC Chair to sign this off on their behalf.

The Audit and Integrated Governance Committee delegated authority to Mr Taylor, Chair of the AIGC, to approve the specification on their behalf.

19/16

CCG 2015/16 Statutory Accounts and Annual Report

a) CCG Audited Annual Accounts with Explanatory Paper

Mrs Jackie Mills, Deputy Director of Finance, presented the final audited accounts for 2015/16 and advised the committee that nothing material had changed from the draft accounts presented to Governing Body on 5 May, with just a few minor presentational changes that had been agreed during the audit of the accounts to be made, and the inclusion of late information received from NHS England relating to staff sickness data which had not been available at the time of the production of the draft accounts. A summary of these changes were set out in section 3 of the explanatory report.

She advised members that the accounts had been slimmed down from previous years, including taking out a number of accounting explanatory notes where there had been zero entries, which AIGC had agreed to in March.

The Audit and Integrated Governance Committee recommended to the Governing Body that the final audited accounts, as presented to the AIGC, were approved and adopted.

b) External Audit ISA260 Report

The Senior Manager, KPMG, presented this report which provided a summary of the work they had carried out to discharge their statutory audit responsibilities to those charged with governance at the time they were considering the annual accounts, and which summarised the key issues they had identified during their audit of the accounts. The Engagement Manager, KPMG, drew the committee's attention to the key issues.

They were giving a full unqualified Audit Opinion on Value for Money (VfM) and Use of Resources. Whilst they had made no adjustments, they had identified some minor presentational changes to the accounts, mainly relating to an accounting note confirming where Better Care Fund (BCF) expenditure is.

The Senior Manager KPMG, expressed her formal thanks to the Director of Finance and her team for their continued efforts to produce outstanding accounts. She also expressed her thanks to the Director of Finance and her team for ensuring that, operationally, it had again been a smooth audit.

The Chair also thanked everyone involved in preparing the accounts and undertaking the audits.

The Audit and Integrated Governance Committee received and noted the

External Audit ISA260 Report.

c) Management Representation Letter

The Director of Finance presented the Management Representation Letter. She advised the committee that it was very similar to last year, with just a few grammatical tweaks, which the CCG's Accountable Officer and Chair would be asked to sign once it was approved by the AIGC and Governing Body.

The Audit and Integrated Governance Committee recommended that the Governing Body approve the 'Letter of Management Representation' as attached at Paper Biii.

d) Annual Report including Remuneration Report and Annual Governance Statement with Explanatory Paper

The Director of Finance presented this report. She advised the committee that the Governing Body had received a draft copy for comment on 5 May and reported that a number of comments had been made, specifically asking for some areas to be drawn out more and for some presentational changes to be made. These, together with helpful comments and suggestions from the auditors and NHS England, had all been taken into account and incorporated into the final report.

She drew the committee's attention to the Annual Governance Statement (AGS) (pages 40-53), which the AIGC had had the chance to comment on in March. She reported that helpful comments had been received from audit and NHS England colleagues. She advised that the CCG had received a final Head of Internal Audit Opinion that provided Significant Assurance, a summary of which was appended to the report (Appendix B).

The Deputy Director of Finance advised members that, subject to approval from Governing Body, the Annual Report and Accounts would be submitted to NHS England by 12.00 noon on 27 May and published on the CCG's website by 10 June.

The Chair commented that the magazine style should encourage people to read it. The Deputy Director of Finance advised that, whilst it had made it more difficult in that it had added a lot of additional time into the process in respect of having to go back to the designers every time a change was required, it did have added value to have the report professionally designed.

The Audit and Integrated Governance Committee:

- Recommended to the Governing Body that they approve the final Annual Report, incorporating the final Annual Governance Statement, subject to any final amendments being made.
- Recommended to Governing Body that all relevant sections and declarations be signed by the Accountable Officer.

a) CCG 2015/16 Internal Audit Annual Report including Head of Internal Audit (HoIA) Opinion

The Deputy Director / Client Manager, 360 Assurance, presented this report. As noted above, she advised the committee that they had been able to provide Significant Assurance that there was a generally sound system of internal control designed to meet the organisation's objectives and that controls were generally being applied consistently. She drew members' attention to section 3 which included the detailed commentary, including any areas for improvement they considered the CCG should take forward during 2016/17, and confirmed that the CCG had implemented all the recommendations they had suggested.

The Chair asked about section 2.3 that summarised the context of the four opinion areas and asked how the CCG could receive Full Assurance on all four areas (there were currently three areas of Significant Assurance and one of Full Assurance). The Assistant Client Manager, 360 Assurance, responded that it was very rare for an organisation to receive Full Assurance on all four areas at the same time, particularly around the outturn from the internal audit plan as, in some instances, they were being led to areas where there were problems. He also advised that, with regard to risk management and the Governing Body Assurance Framework (GBAF), recommendations had been made around the development of risk management at lower levels within the organisation, there needed to be a greater understanding at senior level to keep the framework up to date, and it was not clear how individual departments were evaluating risks and / or escalating risks if they needed to. He advised that, with regard to the latter, this had been taken on as a more corporate approach through the CCG's monthly Deputy Directors' meeting, led by the CCG's Senior Associate Risk and Governance.

Mr Boyington asked if this result was in line / below the norm with other organisations. The Deputy Director advised that, in terms of the 18 CCGs covered by 360 Assurance, all had an overall assessment of Significant Assurance with some variation in the component elements.

The Committee received and noted the CCG's 2015/16 Internal Audit Annual Report including final Head of Internal Audit Opinion.

b) Final Progress Report on 2015/16 Audits

The Assistant Client Manager, 360 Assurance, presented this report which summarised the position on the 2015/16 internal audit plans. He drew the committee's attention to section 2 which highlighted and summarised the reports that had been issued from the 2015/16 reviews.

Monitoring the Quality of Provision in Care Homes: The Chair raised concerns about the findings from the review and asked if internal audit was fully assured that everyone in the organisation was acting to address the concerns raised.

The Assistant Client Manager responded that this was being dealt with by the CCG's Quality Assurance Committee (QAC), which was attended by a qualified nurse from internal audit, who had fed back that the report had been very well received and would be discussed again at their next meeting in August. He also advised the committee that individual recommendations from this review had implementation dates of September 2016 and progress would be presented to AIGC as part of the quarterly follow up report on audit recommendations.

Members asked the Chair to raise this as part of his report to Governing Body.

PT

Compliance with Programme Management Framework: The Assistant Client Manager advised the committee that, since the time of writing, the report from this review of Compliance with Programme Management Framework had been signed off, and that all the learning opportunities flagged up in the report would be pulled together into a single action plan. This was due by mid July, with the intention that it would be presented by the CCG's Programme Management Office (PMO) to the AIGC in September, followed by more detailed follow up work he had yet to timetable.

Nicky
Doherty
GS

The Committee received and noted the report, and the level of assurances that had been given.

c) Commissioner Technical Update – Quarter 4 2015/16

The Client Manager, 360 Assurance, presented this report to the meeting. It was agreed this should be circulated and added to the intranet for information.

CRH

The Audit and Integrated Governance Committee noted the report.

21/16

Counter Fraud

Local Counter Fraud 2015/16 Annual Report

The Local Counter Fraud Specialist (LCFS) presented this report. He had no particular issues to bring to the committee's attention, except to draw to their attention to the Conclusion at page 14 of the report, which provided assurance that the activities delivered by 360 Assurance were efficient and effective.

The Chair asked about dissemination of fraud awareness within the organisation. The LCFS advised that, although he had undertaken an awareness session one lunchtime within the CCG, he had not been involved in staff induction as yet. However, they were looking at doing this by the use of e-learning and workbooks, which would be rolled out shortly. The Deputy Director of Finance advised that periodic staff induction programmes had now been initiated and would liaise with the LCFS to ensure that counter fraud was included as part of this.

RP

JM

Finally, Mr Boyington commented that the conclusion was a very satisfying and encouraging result for the CCG.

22/16

The Audit and Integrated Governance Committee received and noted the report.

Governance – Key Issues for Audit and Integrated Governance Committee

a) Managing Conflicts of Interest: Revised Statutory Guidance for CCGs

The Head of Governance and Planning presented this report which outlined the proposed key changes within the revised statutory guidance for CCGs, which included that declarations of conflicts of interest should be received in a timely manner and how those declarations were managed and dealt with. She advised the committee that it was intended that the revised guidance should be available in June, following approval by the NHS England Board. She reported that the CCG had been invited to become a member of NHS England's project board, for training purposes, and all staff and Governing Body would be required to undertake on-line training, with those staff employed at a more senior level given the option to do face to face training. The intention was that it would be an on-line product by October 2016 with completion by at least 90% of staff by the end of January 2017. She also advised members that the CCG would need to have a Conflict of Interest Guardian which, as set out in the CCG's Constitution, would be the Chair of the Audit and Integrated Governance Committee.

The Audit and Integrated Governance Committee:

- Received and noted NHS England's "*Managing Conflicts of Interest: Revised Statutory Guidance for CCGs*" draft for discussion document
- Noted the response from NHS Sheffield CCG to the draft for discussion document.

b) Governance Report including Unadopted Minutes of the Governance Sub Committee Meeting held on 3 May 2016

The Head of Governance and Planning presented the report and minutes. She had no particular issues to bring to the committee's attention.

In response to a question from the Chair, the Deputy Director of Finance confirmed that the CCG had to achieve 90% of all staff completing information governance mandatory training to be able to receive our information governance assurance.

The Chair asked if there were any additional risks to the organisation due to the two vacancies within the facilities team. The Head of Governance and Planning responded that both these posts had been advertised and it was hoped would be filled within the next couple of weeks.

The Audit and Integrated Governance Committee received and noted the report and unadopted minutes.

c) Review of Governance Sub Committee Terms of Reference

The Head of Governance and Planning presented the revised Governance Sub

Committee Terms of Reference (ToR) for comment and approval. She drew members' attention to one minor change relating to section 3.1.5 and the change of name of the Equalities Action Group to Public Equality Engagement Experience Group (PEEEG). The Director of Finance also requested an amendment to the quorum of the sub committee (section 5.1) and a change of title of the Chief Operating Officer to Director of Health Reform and Transformation.

The Audit and Integrated Governance Committee recommended to Governing Body to approve the proposed changes (as per the requirements of the CCG Constitution).

d) Update on Governing Body Assurance Framework (GBAF) and Risk Register

The Head of Governance and Planning presented this report which outlined the good progress that continued to be made with regard to management of strategic risks facing delivery of the organisation's key objectives, reported the position at the end of Quarter 4 2015/16, the gaps in control and assurance and actions identified in order to close the gaps, and presented the draft refreshed framework for 2016/17. She advised the committee that the paper had already been presented to Governing Body on 5 May but should provide the committee with assurance that the Governance Sub Committee had reviewed and scrutinised risks within the GBAF and operational risk register at its meeting on 4 May, including a review of risk scores.

She advised that, at the end of Quarter 4, 14 identified risks remained on the GBAF, with one remaining very high. No new risks had been added and no risks had been closed during this period. Five risks had reached their risk target or appetite score in year, three had increased in score, four had remained static in score for one cycle, 14 had remained static for two or more cycles, and one had reduced in score during Quarter 4. The three risks that showed gaps in control and assurance (risks 2.2, 4.4 and 4.5) at the end of Quarter 4 had been included on the Annual Governance Statement (AGS). The Deputy Director of Finance advised the committee that, as reported under minute 20/16(a), a more corporate approach, through the CCG's monthly Deputy Directors' meeting, was being taken to address those risks that remained static.

He also advised that, with regard to risk management and the Governing Body Assurance Framework (GBAF), recommendations had been made around the development of risk management at lower levels within the organisation, there needed to be a greater understanding at senior level to keep the framework up to date, and it was not clear how individual departments were evaluating risks and / or escalating risks if they needed to. He advised that, with regard to the latter, this had been taken on as a more corporate approach through the CCG's monthly Deputy Directors' meeting, led by the CCG's Senior Associate Risk and Governance.

The Director of Finance explained that two meetings with the CCG's Directors / Risk Owners, supported by internal audit, had taken place to review and refresh

the GBAF for 2016/17, ensure alignment with the CCG's objectives and the eight goals for commissioning strategy, and come up with revised risks and scores. Directors were still in the process of completing explanatory notes, gaps in control, references to primary care, etc, on the individual sheets as they could not be rolled forward, which would be presented to AIGC in September. However, the Quarter 1 update (which had a cut off date for directors' updates) at the end of June) could be sent out to members as soon as it was available, and by July at the very latest.

MS

The Audit and Integrated Governance Committee:

- Noted the activity with regard to risk management during Quarter 4 with regard to the GBAF and Risk Register.
- Noted the content of the refreshed GBAF for 2016/17.

e) Quality Assurance Committee Report including Unadopted Minutes of the Quality Assurance Committee meeting held on 6 May 2016

In the absence of Ms Forrest, Chair of the Quality Assurance Committee (QAC), members received and noted the minutes. The Chair requested that these minutes were re-presented to the next AIGC meeting, with the minutes of the next QAC meeting taking place on 26 August 2016.

AF(CRH)

As noted under minute 17/17(ii)(a), an update on Ms Forrest's request for an additional GP member of the QAC could not be given at this stage, as the CCG Chair's review of individual Governing Body GPs' roles and responsibilities was not yet complete.

23/16

Other reports

a) Update report on Internal Audit Recommendations

The Financial Accountant presented this paper which provided a summary for the Committee of all the outstanding actions against recommendations agreed within finalised internal audit reports. She advised the committee that three outstanding actions had been brought forward from March 2016, one relating to patient and public engagement which was still ongoing and rated as Amber, one related to Medicines Management Audit which was now completed and rated Green, and one relating to the complaints review which was still ongoing and rated Amber.

She advised the committee that, of the three reports issued by internal audit since the last report to AIGC, no medium or high risk recommendations had been identified from the review of budgetary control and financial reporting and key financial systems, and from the review of information governance. However, eight medium risk recommendations had been identified from the review of quality of care in care homes, which the Assistant Client Manager had earlier updated the AIGC on under minute 20/16(b).

Members discussed patient and public engagement and why it was so difficult to establish how many patient participation groups there were. Mr Boyington

suggested asking the CCG's Director of Delivery to present a report, containing some factual information in this regard, to the next meeting.

The Audit and Integrated Governance Committee:

- Noted the progress against all the outstanding high and medium risk actions.
- Agreed that the 'Green' completed action could be excluded from any further updates to the Committee.

b) Sheffield CCG – Payables and Receivables as at 30 April 2016

The Financial Accountant presented this paper which provided a summary of the aged payables and receivables for Sheffield CCG based on the latest month end position available at the time of writing the report for AIGC (as at 30 April 2016). She advised the committee that a general bad debt provision, totalling £123k, had been made in 2015/16 to cover 50% of non-NHS debts over 30 days old.

The Audit and Integrated Governance Committee received and noted the report.

c) Losses and Special Payments 2016/17

The Financial Accountant presented this report which provided the committee with a summary of instances where Losses and Special Payments had been approved since 1 April 2016.

The Director of Finance advised the committee that, although there had been no payments of this nature relating to 2016/17 made up to the time of writing the report, an ex-gratia payment re a continuing health care appeal had since been made and would be reported to the next meeting.

The Audit and Integrated Governance Committee received and noted the report.

d) Competitive Tender Waiver Approvals since 1 April 2016

This paper was presented by the Financial Accountant and provided the committee with information on instances where the competitive tendering rules have been waived since 1 April 2016.

There had been no tender waivers since 1 April 2016.

The Audit and Integrated Governance Committee received and noted the report.

24/16 Any Other Business

There was no further business to discuss this month.

25/16 Key Highlights for Governing Body

The Chair advised as follows:

- The committee's delegation to the AIGC Chair to approve the specification for the tender for procurement of the CCG's external auditors.
- The committee's agreement of the process for the nomination of two individuals to be part of the panel for evaluation of the tenders.
- The committee's review of the Annual Accounts and Annual Report for 2015/16 and their recommendation to Governing Body for adoption and approval.
- The committee received and noted Internal and External Audit's Annual Reports for 2015/16, and their respective technical updates.
- The committee's concerns about the findings of Internal Audit's review into the quality of care in care homes, their recognition that this is being discussed by the Quality Assurance Committee (QAC), and their request for assurance that the QAC will ensure that action is being taken to address these concerns.
- The committee noted that a new Counter Fraud e-learning module will soon be available for training purposes for new starters.
- The Committee's assurance of the GBAF process for 2016/17 and their request to be provided with some further information in-between meetings by July at the latest.

26/16

Date and Time of Next Meeting

Thursday 15 September 2016, 2.00 pm – 4.00 pm, Boardroom, 722 Prince of Wales Road