THE NATURAL HISTORY MUSEUM
TRUSTEES’ AUDIT AND RISK COMMITTEE

80th Meeting on Thursday 3rd May 2018

Present
Hilary Newiss in the Chair
Professor Christopher Gilligan
Robert Noel
Colin Hudson (co-opted member)

In Attendance
Lord Green of Hurstpierpoint (Chair of Trustees)
Sir Michael Dixon (Museum Director)
Neil Greenwood (Director of Finance and Corporate Services)
Jan Day (Head of Risk and Assurance/Committee Secretary)
Paul Keane (Director, DCMS Financial Audit NAO)
Matthew Atkinson (Audit Manager, National Audit Office)

James Downs (Acting Head of Security), Dave Thomas (Chief Information and Technology Officer), Polly Parry (Information Manager and Data Protection Officer) and Chris Sleep (IT Security Manager) were in attendance for item 10.
Annette Fitzjohn (Health and Safety Manager) was in attendance for item 11.
Fiona McWilliams (Director of Development and Communications) was in attendance for items 11 to 17.

ACTION

MEMBERS AND TRUSTEES’ CLOSED SESSION

1 APOLOGIES FOR ABSENCE

1.1 None were received.

2 DECLARATIONS OF INTEREST, REGISTER OF INTERESTS AND ANNUAL REVIEW OF GIFTS AND HOSPITALITY (PAPER TAC 11/2018)
ACTION

2.1 The Declaration of Interests and Register of Interests were recorded by the Secretary to the Audit and Risk Committee. Members noted the annual review of Gifts and Hospitality valued over £50 recorded a nil return for 2017/18.

3 MINUTES OF THE MEETING HELD ON TUESDAY 30 JANUARY 2018 (PAPER TAC 12/2018)

3.1 The minutes which had previously been circulated to the February 2018 Board of Trustees were accepted as a true record of the meeting.

4. MATTERS ARISING FROM THE MINUTES (PAPER TAC 13/2018)

4.1 The Committee reviewed the matters arising and closed items where appropriate action had been taken.

4.2 Exhibition Road - November 2017 para 5.2 - The Royal Borough of Kensington and Chelsea (RBKC) were in the process of finding a permanent solution to providing a safe environment for visitors. RBKC had commissioned: (a) Dixon Jones to review the road scheme; and (b) traffic studies. RBKC had yet to decide on a course of action ranging from a very high security multimillion intervention. The problem was reconciling the original vision of the scheme and a modern interpretation. It was noted any scheme must allow emergency service vehicles to gain access. Since the opening of the Museum’s front entrance in January 2018 queuing was being managed more effectively, with a shorter queue on Exhibition Road.

4.3 The Museum Director was meeting the Minister of State for the Department for Digital, Culture, Media and Sport (DCMS) and there were discussions with Transport for London (TFL). The Exhibition Road Cultural Group also continued to press RBKC for a long-term solution. Pre-election rules restricted activity, however, once the local elections were over discussions will continue with the holder of the transport portfolio. The Museum Director undertook to update the Committee on progress at the June 2018 Meeting.

4.4 Emerging Risks - para 6.7 - The Audit and Risk Committee Chair and Museum Director will discuss an ad memore listing categories of emerging risks. Trustees will then be tasked with the consideration of emerging risks in their area of expertise e.g. property and science. This will be delivered to the Board of Trustees in July 2018.

4.5 Diversity Action Plan - para 11.9 - Diversity was increasing in importance. In response to the DCMS Corporate Governance Self-Assessment the Museum recognised that it could do more to promote diversity in: (a) the Workforce and Executive; (b) Board of Trustees and (c) Committees. It was agreed the Committee should receive a presentation on the finalised Diversity Strategy. The Museum Director and Audit and Risk Committee Chair will discuss timetabling. The members asked to know the ranking of the NHM in the Bronze Standard Employer accreditation bench marking exercise by the Employers Network for Equality and Inclusion (ENIE).

4.6 Special Exhibitions - para 14.4 - The new Director of Engagement was undertaking a strategic review of the balance of the Special and Permanent exhibition programmes. An initial report was going to the 24 May Board of Trustees. It was noted there was a tendency for information bias amongst project managers. The Museum Director agreed to add the process for lessons learned to the Director of Engagement’s brief.

4.7 The business models for Treasures of the Natural World Japan a touring exhibition and Special exhibitions held in South Kensington were not the same. The business model for touring exhibitions intuitively seemed to work whereas the special exhibitions model did not. An
appealing programme of exhibitions in London formed part of the Museum’s 2020 strategy. The review of Japan was to establish net profit and if full cost accounting should be used for future international exhibitions whereas the Committee wanted to understand the Museum’s methodology for forecasting attendance, profitability and evaluating impact and non-financial benefits from individual exhibitions.

MD/HN 4.8 It was agreed that following the 24 May Board of Trustees the Museum Director and Audit and Risk Committee Chair will discuss the most beneficial exhibition topic to be presented to the Committee at the June meeting 2018 e.g. Treasures of the Natural World Japan or Special exhibitions.

5 DIRECTOR’S REPORT (PAPER TAC 14/2018)

5.1 The Director presented his paper

5.2 Water Ingress to NHM Archive Store, 9 -10 April 2018 - Executive Board had concluded that infrastructure failures were happening more frequently.

5.3 Collection Management Taskforce - A collection management taskforce had been set up under the Head of Masterplanning and Projects working with Collections Managers and Estates to look at collections vulnerabilities, potential and unpredictable failures. The work of the taskforce will not duplicate the “Join the Dots” collections assessment. The taskforce will also review the procedures for responding to alarms from environmental management and building management systems. The first meeting of the taskforce was on 2 May 2018. Data gathered will help build the case for government funding of an offsite storage facility. It will also ensure the Museum was doing everything possible to protect the collections including upgrading existing buildings where this action will be of long term benefit.

5.4 Emergency Storage - The custodianship of the collections was the trustee’s number one responsibility. Members recommended a radical urgent solution was part of the Museum’s Masterplan i.e. accelerating the move of collections offsite to temporary emergency storage which provided safe conditions e.g. Wandsworth or rented storage space. The cost of a temporary storage solution needed to be established. The Audit and Risk Committee and the Board of Trustees should be provided with an overview of how the different collection types were ranked in relation to risk e.g. archives, mineralogy, palaeontology.

MD/NG 5.5 Property Committee - It was agreed the taskforce progress and the case for a temporary storage solution will be overseen by the Property Committee reporting to the Audit and Risk Committee and main Board. Resources must not however, be diverted from finding a long term permanent solution to collections storage. If necessary the project for costing and finding temporary storage should be subcontracted to outside consultants. The Museum Director agreed to speak with the Head of Masterplanning and Projects and decide on a realistic timetable for reporting to the Audit and Risk Committee and the Board of Trustees. The Chair of the Audit and Risk Committee requested a comprehensive progress report at the June 2018 Audit and Risk Committee.

MD/NG 5.6 DCMS Corporate Governance Self-Assessment Exercise - The Museum Director will discuss a Board diversity action plan which included social background with the Chair of the Board of Trustees.

MD 5.7 General Data Protection Regulation (GDPR) - Subject Request - Under GDPR individuals can submit a subject request to the NHM to which the Museum was obliged to respond within 30 working days. It was recommended that if not already in place a policy/procedure for handling
these was developed.

5.8 **Museum Attendance** - The moving annual total was 4.64m and NHM was close to the projected number of visitors for 2017/18. If the trend continued this will have a positive impact on visitor related commercial income.

5.9 **Year-end Financial Out-turn** - The Museum Director: (a) commented on the extra-ordinary effort that was required from staff to deliver the 2017/18 financial out-turn; and (b) paid tribute to the Director of Finance and Corporate Services who led the process to ensure the salary expenditure target was delivered.

6 **DIRECTOR OF FINANCE AND CORPORATE SERVICES’ FINANCIAL REVIEW FOR THE PERIOD APRIL 2017 - MARCH 2018 - PROVISIONAL YEAR OUTTURN (PAPER TAC 15/2018)**

6.1 The Director of Finance and Corporate Services presented his paper.

6.2 **Outturn 2017/18** - The improved outturn for 2017/18 had come from: (a) a slowdown in recruitment; (b) a cut back on discretionary non salary operational expenditure; (c) by deferring capital and project expenditure; and (d) efficiencies. There was a high fixed cost base with expenditure pressures e.g. increased business rates, core operational maintenance and salary increases outside the Museum’s pay structure.

6.3 **Commercial Business Performance** - The volatility in 2017/18 commercial performance was a consequence of closing the Hintze Hall for 6 months. Collectively the Museum was surprised by the lack of bounce back and visitor surge following the Summer 2017 reopening. This had led to inaccurate commercial forecasting. The January 2018 reopening of the Hintze front door resulted in increased visitor numbers and improved queue management with a positive impact on income. There were good performances on donation boxes, membership, venue hire and the Ice Rink. Venue hire was a challenge with the Hintze Hall closure which meant Hintze Hall bookings could not be taken until September 2017.

6.4 The Museum Director and Director of Finance and Corporate Services were cautious about the 2018/19 year end outturn and incurring additional expenditure at this time. The Executive Board were meeting to decide their financial strategy over the next four to five months. The Museum will also continue to look for further efficiencies throughout the year.

6.5 **Commercial Forecasting** - The new Director of Engagement will consider how to improve the accuracy of forecasting which was influenced by the optimism or conservatism of commercial managers.

6.6 **Scientific Hires** - One of the three Centres of Excellence had been put on hold. The restriction on scientific hire expenditure was due to: (a) candidates with the right skills and track record not coming forward; and (b) the long lead time in scientific recruitment. There was no restriction on appointing star researchers when they became available.

6.7 **Financial Review Paper Format** - The Museum was congratulated on the delivery of the 2017/18 financial outturn, however, tough action had impacted on Museum strategy. It was observed the format and narrative in Financial Review paper was difficult to interpret. The Committee and Board of Trustees required an overview and detailed analysis of trends, deferred investment decisions, challenges and the implications for the Museum’s strategic objectives going forward e.g. scientific objectives and improved commercial performance.

6.8 **Monthly Financial Statement** - The Museum will be producing a monthly financial statement for trustees to which context and future plans agreed by Executive Board can be added. Members asked that it should also contain dashboard style graphics to provide a visual presentation of
performance and trends. It was anticipated there will be several iterations of the new report before it was finalised.

7 ANNUAL ACCOUNTS UPDATE 2017/18: DRAFT GOVERNANCE STATEMENT (PAPER TAC 16/2018)

7.1 The Director of Finance and Corporate Services presented his paper.

7.2 Draft Governance Statement

7.3 Members reviewed the Governance Statement and made a number of recommendations.

7.4 The Governance Statement broadly followed a standard template and was supported by other annual assurance papers on the agenda e.g. the Annual Opinion of the Head of Risk and Assurance and the Health and Safety Report. The statement included key risks and other work to strengthen internal control e.g. GDPR and fire risk management system (FRMS) certification to PAS 7:2013.

7.5 Archive Store - The incident relating to water ingress to the Archive Store in April 2018 will be reported in the Accounts heritage asset note. Although it fell within 2018/19 and not 2017/18 any significant events up to the date of signing need to be included. It was unlikely any of the damaged archives were disclosed on the balance sheet as only heritage assets acquired on and after 1 April 2001 were required to be capitalised.

7.6 Meeting Attendance - Attendance at the Board of Trustees and Committees of the Board included attendance by conference calls.

7.7 Science Advisory Committee - Members asked that the designation of the Science Advisory Committee as an advisory committee rather than a committee of the Board should be revisited in view of importance of Science.

7.8 Heritage Assets Acceptance In Lieu - Prior Period Adjustment - The prior year adjustment will be reported as a note to the accounts.

8. IFRS 9 – FINANCIAL INSTRUMENTS, IFRS 15 REVENUE FROM CONTRACTS WITH CUSTOMERS AND IFRS 16 – LEASES (PAPER TAC 17/2018)

8.1 The Director of Finance and Corporate Services presented the paper.

8.2 IFRS 16 - Leases - It was noted: (a) if the Museum did hold any long term leases for advertising space they would not be material; and (b) the South Kensington Tunnel was the responsibility of TFL.

9 HEAD OF RISK AND ASSURANCE ANNUAL REPORT TO THE ACCOUNTING OFFICER AND THE AUDIT AND RISK COMMITTEE 2017/18 (PAPER TAC 18/2018)

9.1 The Head of Risk and Assurance presented her paper and a report on Legal Compliance Mechanisms in Estates.
9.2 **Annual Assurance** - The Head of Risk and Assurance gave an overall assurance of **SUBSTANTIAL**. In her opinion the Museum currently had an adequate and effective governance, risk management and internal control framework in place to ensure the proper conduct of business and the achievement of its aims and objectives. The basis for that assessment was not limited to the internal audits carried out by Risk and Assurance and included wider assurances.

9.3 **Classification of the Annual Audit Opinion** - Members agreed with the overall assessment of **SUBSTANTIAL**. It was noted the classification of the annual audit opinion complied with the Cross Government Internal Audit Manual classifications. The NAO Director agreed to provide members with a report on the overall assurance classifications of other Museums and Galleries.

9.5 **Outstanding Recommendations Priority 1 and 2**

9.6 **Contract Letting and Procurement - Contracts Database** - The contracts backlog was being reviewed to identify how many and what types of contracts were held locally in departments. To keep the task to a manageable level guidance on which contracts must be recorded on the database will be issued to staff e.g. long term substantive contracts. Purchase orders were raised for short term purchase and service agreements. A purchase of a new user-friendly database will only take place if justified by the volume of contracts required to be held centrally.

9.7 **Travel and Other Expenses - The Official Absence (OA) Request and Risk Assessment**

The new KPI required fieldwork risk assessments to be submitted prior to travel. It was noted during Q3, only 1 of a potential 44 field trips complied with the KPI. The systems in place for planning and approving fieldwork were cumbersome and worked against achieving the new KPI. Resources will be made available for a project to improve and streamline the Official Absence process.

9.8 **Legal Compliance Mechanisms in Estates**

9.9 The Committee reviewed the report. The review was designed to assess the adequacy and effectiveness of the mechanisms in place to help ensure Estates identified and complied with relevant legislation and regulations pertinent to their specialist area of work and the Museum. It was not a review of the extent to which the Estates Department was compliant with specific legislation or regulations.

9.10 **OHSAS 18001 and of ISO 14001** - Two continuing independent external assessments in 2017/2018 confirmed compliance with: (a) the Museum’s health and safety management system in line with the requirements of OHSAS 18001; and (b) the Museum’s Environmental Management system in line with the requirements of ISO 14001.

10 **ANNUAL SECURITY REPORT 2017/18 (PAPER TAC 19/2018)**

10.1 The Acting Head of Security and Chief Information and Technology Officer presented their report. Supporting information was provided by the IT Security Manager and the Information Manager and Data Protection Officer.

10.2 **Annual Security Report Format** - The long format of the Security Report was governed by the HMG Security Policy Framework (SPF) developed by the Cabinet Office and against which the Museum was required to report. It was observed the key challenges were not clear as there was no overview and index. A member explained at the request of his company’s Board the organisation’s annual Health and Safety and Security report for a footfall of 5m visitors a week was an 8 page power point presentation. The presentation set out the objectives for the year,
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highs, lows, issues and objectives for the coming year. The presentation will be made available to the Director of Finance and Corporate Services. The Chair of the Board said the Audit and Risk Committee should receive the detailed report, with a shorter report going to the Board of Trustees.

10.3 Information Management - The primary focus of information management had been GDPR. The Museum had taken a compliance stance consistent with being a trusted public brand and adopted a risk-based approach to be sufficiently compliant by 25 May 2018. Farrer and Co the Museum’s solicitors endorsed this approach.

10.4 Technology and Services - Cyber Security - The importance of the risk was accelerating and was a Museum top ten strategic red risk. There were annual e-learning refreshers covering: Online Safety and Cyber Awareness and Data Protection and Information Handling.

10.5 Cyber Essentials - To deal with the remaining areas of Cyber Essentials non-compliance the NHM were working with a third party. The Chair of the Board said the Museum’s expectation of achieving certification in the summer of 2018 must be met. NHM was in a similar position to several other large museums e.g. the British Museum and British Library. Museum research work added to the complexity for NHM. The Chief Information and Technology Officer will provide the Committee with an update at each meeting.

10.6 Phishing Exercises - Technology Solutions ran simulated phishing exercises to test staff susceptibility to social engineering attacks. A recent test was reported to the Help Desk who put out a global warning within 30 minutes to staff. An ethical hack’ which was not as rules based as other assurance tests was planned for 2018/19.

10.7 Backups - The Datacentre where the daily back-ups take place is now at Slough. A backup tape was also shipped to a secure back up vault in Kent.

10.8 Researchers - Further levels of segmentation will be considered for the network to provide for the needs of researchers.

10.9 North Korea - North Korean probes looked for vulnerabilities in NHM IT systems for: (a) criminal purposes e.g. ransomware and to generate bit coins transactions and; (b) to launch state sponsored attacks on other government organisations for political purposes.

10.10 Acting Head of Security - The Deputy Head of Security had taken up the position of Acting Head of Security with a view to being confirmed as permanent Head of Security within twelve months. The former Head of Security provided mentoring support.

10.11 Security - Over the last 12 months a project was run by the Museum Consortium which included the NHM, V&A and the Science Museum to retender the Security contract. Wilson James was confirmed until April 2023. There had been a strategic review of the delivery of security services. This included a more agile and intelligently led security service. The security team had undertaken behavioural detection training and this approach was being used successfully e.g. with the Ice Rink.

10.12 Exhibition Road - The Acting Head of Security was Chair of the South Kensington Business Resilience Forum (SKBRF) who were working closely with RBKC. A feasibility study had taken place and a plan for a more permanent solution was to be published in November 2018.

10.13 The Audit and Risk Committee Chair thanked the Acting Head of Security, Chief Information and Technology Officer, IT Security Manager and the Information Manager and Data Protection Officer for their informative report.

11 ANNUAL HEALTH AND SAFETY REPORT 2017/18 (PAPER TAC 20/2018)
11.1 The Health and Safety Manager presented her report.

11.2 ISO 45001 - The Museum had a significant decision to make. ISO 45001 published on 12 March 2018 superseded OHSAS 18001 which will be withdrawn in 2021. The options were to: (a) pursue ISO 45001 or the Health and Safety Executive’s HSG 65; or (b) rely on self-evaluation. ISO 45001 had cost implications. It was noted only NHM and the Science Museum had OHSAS 18001. The majority of Museums and Galleries operated without OHSAS 18001 and HSG 65. The Executive Board will recommend an option to the Board of Trustees. Members agreed with 5m visitors a year the option of internal self-evaluation should not be pursued. It was also noted some commercial activities in the Museum were considering ISO 9001 Quality Management System. It would make sense to put in place a holistic approach to quality standards across the Museum.

11.3 KPIs - The museum had failed to achieve its KPIs with regard to line manager training, incident investigation and fieldwork planning.

11.4 Line Manager Training - The most concerning KPI was the poor turnout to line managers training for 250 staff. The Director of Finance and Corporate Services observed there needed to be a reasonable approach to defining a manager as 250 was excessive. A member noted that generalised training can be a disincentive to staff attending on the basis it was not relevant to them. During training, however, there were exercises which addressed local risks. The Committee asked the Executive Board to take effective action and put in place a way of penalising staff that: (a) do not attend training; or (b) postpone attendance at very short notice.

11.5 Near Misses - The number of reported near misses was recorded. It was important to create a culture which encouraged reporting. However, it was not appropriate to set a metric as this resulted in the reporting of trivial issues which did not have the potential to cause injury or ill health.

11.6 London Healthy Workplace Charter - The Museum was not able to provide adequate proof of compliance in two areas: (a) healthy eating options. The Museum will be speaking to its caterers about sign posting visitor and staff healthy eating options; and (b) the Museum needed to promote its corporate support more effectively.

11.7 Health and Safety Manager - The Director of Finance and Corporate Services thanked the Health and Safety Manager who was leaving the Museum for her proactive work and forthright views over the last ten years. Museum staff and directors were very receptive to Health and Safety and a key reason for the manager leaving was the opportunity to work in another sector. Interviews were taking place for a replacement and all the candidates were creditable.

11.8 The Audit and Risk Committee Chair thanked the Health and Safety Manager for her informative report and wished her well for the future.

12 NHM ANTI-FRAUD, BRIBERY AND CORRUPTION ARRANGEMENTS (PAPER TAC 21/2018)

12.1 The Committee reviewed the Whistleblowing Policy, Anti-Fraud, Bribery and Corruption Policy and Response plan and the Fraud, Bribery and Corruption risk profile/assessment.
12.2 **Whistleblowing Policy** - Human Resources (HR) were the owners of the Whistleblowing Policy. HR had recently reviewed the policy against best practice guidance provided to them by the Head of Risk and Assurance. This included an NAO report and guidance from the Department for Business Innovation and Skills.

12.3 The NAO Director recommended the Whistleblowing Policy should include reference to: (a) the Role of the Comptroller and Auditor General who was a prescribed person under the Public Interest Disclosure Act 1998, for external disclosures relating to “the proper conduct of public business, value for money, fraud and corruption in relation to the provision of public services”; and (b) Public Concern At Work. It was noted there was information on the Museum intranet about Public Concern At Work.

12.4 **Staff Awareness** - The policies formed part of the staff induction process, are periodically brought to the attention of managers at policies updates and will be included in e-learning once in place.

13 **STRATEGIC RED RISKS 2017/18 AND 2018/19 (PAPER TAC 22/2018)**

13.1 The Director presented his report

13.2 The Committee reviewed (a) the Q4 Board Assurance Framework and summary for the major strategic risks subjected to special scrutiny in 2017/18: and (b) the risks to be monitored in 2018/19. The Board Assurance Framework for 2018/19 Q1 will be presented at the June 2018 Meeting.

13.3 **Board Assurance Framework** - Members commended the format and detail in the 2017/18 Board Assurance Framework. However, the number of strategic red risk was concerning. It was noted optimism bias had reduced and the average score of the risks had increased. Three risks for 2018/19 had the maximum score.

13.4 A member observed they were struck by the variability of the narrative written on each individual risk. While a formulaic approach was undesirable the Museum should decide on the approach, focus and what the narrative was trying achieve. Problems need to be highlighted and not overshadow by optimism.

13.5 **Capital Investment** - The paper highlighted lack of capital investment was having a serious impact on building maintenance, the collections and the galleries public offer. It was noted a number of other Museums were in the same position.

13.6 **Annual Report** - The Minister of State for DCMS signed off the Annual Report and Accounts. The Governance Statement in the Annual Report highlighted a number of the risks on the Museum’s Risk Universe. Members agreed there must be a direct message to DCMS in the Annual Report that: (a) lack of capital investment was having a serious impact on a number of strategic red risks; and (b) under investment was due to reduced resources as a result of flat cash grant in aid, inflationary pressures and a challenging commercial environment. The Director of Finance and Corporate Services will discuss how this might be achieved effectively with the Director of Development and Communications.


14.1 The Head of Risk and Assurance presented her plan.
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**ACTION**

14.2 The Committee approved the draft plan for 2018/19 subject to the Audit and Risk Committee Chair reviewing the plan and the updated Risk Universe for 2018/19 with the Head of Risk and Assurance and co-opted member.

14.3 Audit Resources - The Museum Director and the Head of Risk and Assurance had regular discussions on available resources to complete the audit plan. If the plan could not be met a decision was made on which audits to postpone whilst still allowing the Head of Risk and Assurance to provide a broad based assurance to the Audit and Risk Committee.

14.4 Timing of Audits - The timing of audits was based on a range of factors. It was not always possible or effective to bring key audits forward from later in the fiscal year e.g. General Data Protection where work was ongoing and Key Financial Controls where an assurance was required for the whole year.

14.5 Lessons Learned Audit - This review will consider whether effective processes were in place to ensure lessons learned were identified and acted upon.

15 AUDIT AND RISK COMMITTEE ANNUAL REPORT 2017/18 (PAPER TAC 24/2018)

15.1 The Chair presented her report which was agreed by the other members.

15.2 The Head of Risk and Assurance had made changes to the report format from the previous year. Based on a recommendation by a former Audit and Risk Committee Chair: (a) part 1 explained how the Audit and Risk Committee had met its responsibilities under its terms of reference and in compliance with HM Treasury guidance; and (b) part 2 reported on audit and risk assessment activity over the last financial year, including recording the basis of the Committee’s opinion on the effectiveness of the Museum’s system of risk management and governance.

16. FUTURE AGENDA ITEMS, JUNE 2018 RISK PRESENTATIONS AND THE IDENTIFICATION OF EMERGING RISKS SINCE THE LAST MEETING

16.1 The Museum Director and Audit and Risk Committee Chair will discuss future agenda items and which strategic red risks will be presented to the Audit and Risk Committee.

17 ANY OTHER BUSINESS

17.1 Annual Accounts 2017/18 - There will be an informal review of the Annual Accounts 2017/18 on 13 June 2018 to which all members were invited. Members who were unable to attend will, however, receive a copy of the Accounts and can submit comments.

18. DATE OF THE NEXT MEETING

18.1 The next meeting will be held at 10.00 a.m. on Tuesday 26 June 2018.
**ACTION**

**KEY TO ACTION INITIALS**

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