

# Internal Audit Report

## Democracy and Governance: Committee Reporting

12 May 2025

CEO2401

<b>Overall Assessment</b>	<b>Reasonable Assurance</b>
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This Internal Audit review is conducted for the City of Edinburgh Council under the auspices of the 2024/25 internal audit plan approved by the Governance, Risk and Best Value Committee in March 2024. The review is designed to help the City of Edinburgh Council assess and refine its internal control environment. It is not designed or intended to be suitable for any other purpose and should not be relied upon for any other purpose. The City of Edinburgh Council accepts no responsibility for any such reliance and disclaims all liability in relation thereto.

The internal audit work and reporting has been performed in line with the requirements of the Global Internal Audit Standards (UK Public Sector) and as a result is not designed or intended to comply with any other auditing standards.

Although there are specific recommendations included in this report to strengthen internal control, it is management’s responsibility to design, implement and maintain an effective control framework, and for the prevention and detection of irregularities and fraud. This is an essential part of the efficient management of the City of Edinburgh Council. Communication of the issues and weaknesses arising from this audit does not absolve management of this responsibility. High and Critical risk findings will be raised with senior management and elected members as appropriate.

# Executive Summary

Overall Assessment	Reasonable Assurance
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## Overall opinion and summary of findings

The committee reporting process has a crucial role in maintaining the democratic processes and supporting the governance structure of the Council. The process within the Council is complex with input from numerous stakeholders as committee reports are progressed from report author through to relevant committees. The committee reporting process is a largely manual process which is time consuming and does not work as effectively as it could.

The [Modern.gov](#) report management system is used to manage all committee reports and related documents but does not enable officers and directorates to effectively manage the committee reporting process and to monitor actions raised by Elected Members. It is acknowledged that Committee Services have sought to replace the system, however, have advised there is currently no appropriate system available.

The committee reporting process is inconsistent across directorates as the Executive Director / Chief Officer have individual preferences as to how the process should be managed, which increases the risk of error and non-compliance with committee reporting standards.

The following issues should be addressed as a priority to enhance the workflow and improve the monitoring of relevant actions and Council decisions including:

- implementing effective processes to manage and monitor committee reports, record decisions and track actions
- documenting a standard operating procedure that covers the committee reporting process with clearly defined roles and responsibilities to help to reduce inconsistencies and errors in working practices across directorates
- establishing processes to ensure that there is evidence that committee reports are approved at an appropriate officer level
- monitoring report author's completion of relevant e-learning
- adequately capturing actions raised at agenda planning meetings and Committee meetings and tracking to completion to ensure transparency.

It is acknowledged that the remit of the [Streamlining Committee Business Working Group](#) aims to address the volume and overload issues relating to the committee reporting system and considering improvements to both the reporting process and the overall quality of the reports. Further engagement with key stakeholders and alignment of the remit of the group with the findings in this audit and consideration of the risks highlighted is recommended.









Further information to support the audit findings including results of testing and Elected Member feedback is included within the appendices 3 - 5.

## Areas of effective practice identified

The following guidance documents are in place which support the Democracy and Governance Committee processes:

- [Scheme of delegation](#) (September 2024) - intended to facilitate the efficient conduct of Council business by clearly setting out the nature and extent of the powers delegated to officers by the Council, pursuant to the [Local Government \(Scotland\) Act 1973](#).
- [Committee Terms of Reference and Delegated Functions](#), applicable from 28 June 2024, it sets out the terms of reference and delegated functions (Committee Terms of Reference) and the powers delegated by the Council to each of its committees and sub-committees pursuant to the [Local Government \(Scotland\) Act 1973](#).
- [Committee Best Practice Guide](#) – This guide further supports Elected Members in understanding and managing the committee process.
- [Procedural Standing Orders](#) (August 2024) which are developed and regularly updated to ensure compliance with relevant legislation.

## Audit Assessment

Audit Area	Control Design	Control Operation	Findings	Priority Rating
1. Policy and procedures			Finding 1 – Committee reporting procedures	Medium Priority
2. Governance and oversight			Finding 2 – Action Tracking and Recording Decisions	Medium Priority
			Finding 3 - Approval and sign-off of Committee Reports	Medium Priority
			Finding 4 – Monitoring and oversight	High Priority
3. Resource management and quality assurance			Finding 5 – Compliance with report writing guidance / training	Medium Priority
4. Learning and development				

[See Appendix 1 for Control Assessment and Assurance Definitions](#)

# Background and scope

The City of Edinburgh Council (the Council) [Committee Services](#) team within the [Democracy, Governance and Resilience Division](#) in the Chief Executive's Office, has a crucial role in maintaining the democratic processes and supporting the governance structure of the Council. The team offers professional and administrative support for the Council's democratic processes, including to the full Council, its Committees, Joint Boards, and Working Groups.

The team aims to provide a high-quality, accurate, timely, and confidential service to Elected Members, council officers, partnership organisations, and the citizens of Edinburgh. The team also provides impartial advice to Elected Members and officials on [Standing Orders](#) and the Elected Members [Code of Conduct](#), supports the webcasting of meetings, facilitates paperless Council sessions, and assists the Children's Panel.

Additionally, they manage the Council Papers on-line report management system [Modern.gov](#) ensuring public access to agendas, minutes, and reports since 2003. Committee Services have been reviewing and evaluating an alternative system with the aim of providing improvements over the current system including more advanced and user-friendly features.

Public meeting papers are also provided on the Council's ['Meetings, Agendas, and Minutes'](#) webpage.

[Business Support](#) provides essential administrative support for the committee reporting process for each of the Council's Directorates. Their responsibilities include managing and maintaining the committee report schedule, the rolling actions log, and committee work programme, ensuring processes are efficiently coordinated and streamlined.

## Standing Orders

The Council's [Standing Orders](#) is the primary document governing the administration of the Council and its committees, detailing procedures for decision-making and the distribution of relevant materials. The Council's Standing Orders are aligned to the following legislation:

- [Local Government \(Scotland\) Act 1973](#)

- [Local Government in Scotland Act 2003](#)
- [Local Government and Housing Act 1989](#) (applicable in part)

In addition, the following key documents set out the governance approach and administrative procedures to be followed by officers:

- [Scheme of delegation](#) - is intended to facilitate the efficient conduct of Council business by clearly setting out the nature and extent of the powers delegated to officers by the Council, pursuant to the [Local Government \(Scotland\) Act 1973](#).
- [Committee Terms of Reference and Delegated Functions](#), applicable from 28 June 2024, it sets out the terms of reference and delegated functions (Committee Terms of Reference) and the powers delegated by the Council to each of its committees and sub-committees pursuant to the [Local Government \(Scotland\) Act 1973](#).
- [Committee Best Practice Guide](#) – This guide is to further support Elected Members in understanding and managing the committee process. Following a Council decision in August 2024, an abbreviated version of this guide is currently being developed for the public with an aim to enhance transparency and public engagement.

A revised committee [report template](#), approved by full Council in May 2023, has been in use since 29 July 2023. Council officers should follow the council's [house writing style](#) and [writing report guidance](#) available on the Orb to produce clear, jargon-free reports. A separate briefing note template is also available for summarising documents requested by Elected Members, which do not require a formal committee report. To ensure compliance with these standards, officers responsible for report writing must complete an e-learning course on Committee Report Writing through [myLearning Hub](#).

The Council has convened a [Streamlining Committee Business Working Group](#) to address the volume and overload issues relating to the committee reporting system and to suggest improvements to both the reporting process and the overall quality of the reports.

The Head of Democracy, Governance and Resilience was requested by the Chief Executive to present a revised Political Management Arrangements approach to be considered by the working group which was reported to Council in [March 2025](#).

## Scope

The objective of this review was to assess the adequacy of design and operating effectiveness of the key controls established within Committee Services and Directorates to ensure that there are sufficient administrative arrangements in place to support effective committee reporting to aid informed decision making.

## Alignment to Council risk categories and Business Plan Outcomes

The review aims to provide assurance for all Corporate Leadership Team risk categories and all [Business Plan Outcomes](#).

## Limitations of Scope

The following areas were excluded from scope:

- the accuracy of the content of the committee reports and papers was excluded from our audit testing as the content of committee papers may rely on specific service knowledge or technical expertise which Internal Audit cannot attest to on a general basis
- whilst the Health and Social Care Partnership reporting to Council committees was within the scope of this audit, Partnership reporting to the Edinburgh Integration Joint Board and its committees were excluded from the scope, as this was included in the EIJB Management Information audit completed in August 2021.

## Reporting Date

Testing covered the period of September 2023 to September 2024 and was undertaken between November 2024 to January 2025. This included interviews with a group of Elected Members to gather their feedback and views on the Committee reporting process.

Audit work concluded on 17 January 2025, and the findings and opinion are based on the conclusion of work as at that date.

# Findings and Management Action Plan

## Finding 1 – Committee Reporting Procedures

**Finding  
Rating**

**Medium  
Priority**

The Council's approach to governance, democracy and committee reporting is set out in the [Council's Procedural Standing Orders](#), [Scheme of Delegation](#), [Committee Best Practice Guide](#), and [Committee Terms of Reference and Delegated Functions](#).

In addition, the Committee [Report writing guidance and committee report template](#) provide report authors with guidance on how to create and produce a committee report.

There are, however, some aspects of the committee reporting process which have not been documented and communicated to all relevant officers. In addition, roles and responsibilities are not clearly defined.

The guidance does note that all committee reports must be submitted in accordance with the arrangements within the relevant directorate, but there is no consistent process, with key differences identified across all directorates depending on the preferences of individual Executive Directors, which increases the risk of error and non-compliance with committee reporting standards.

Testing highlighted that there are no documented procedures to:

- define directorates responsibilities for the updating and maintaining of rolling action logs and work programmes
- ensure compliance with committee reporting guidance and the report template, as well as the accuracy, relevance and timeliness of information in committee papers.

Paragraph 15 of the report writing guidance notes that completed reports are passed to line managers and Head of Service. However, there is no agreed approval process across the Directorates to reflect the committee reporting approval process in practice, for example, where reports are signed off by Executive Directors.

In addition, evidence of the approval of committee reports should be retained once the report has been reviewed and approved, for example, one directorate operates a verbal approval process and does not retain any evidence to support that the committee report has been approved.

### Risks

#### Governance and Decision Making

- inconsistent practices in the committee reporting process leading to errors, delays, fragmented information and conflicting recommendations which may affect the decision-making process
- unclear approvals guidance may result in a lack of understanding on the approvals process and risk that reports are not appropriately approved.

**People** - without clear procedures including defined roles and responsibilities, officers may be unaware of specific tasks to be completed and may not understand what is expected of them in their role.

## Recommendations and Management Action Plan: Committee Reporting Procedures

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
1.1	Committee Services should document and communicate standard operating procedures for management of the committee reporting process to	Committee Services will draft a "model" process document which directorates	Head of Democracy and Governance	Democratic Services Manager	30/01/2026

	<p>ensure clarity and consistency in the approach across the Council, these should include:</p> <ol style="list-style-type: none"> <li>1. an approval process that clearly defines: <ol style="list-style-type: none"> <li>a. key approval stages</li> <li>b. approval hierarchy</li> <li>c. the requirement to obtain a documented record of the approval records as per recommendation 3.1 of this report.</li> </ol> </li> <li>2. directorates responsibilities for updating and maintaining committee action logs and work programmes.</li> <li>3. the process to ensure compliance with committee reporting guidance, the report template and the accuracy, relevance and timeliness of committee papers (see <i>recommendation 5.1</i>).</li> </ol> <p>It would be beneficial to identify areas of good practice within the current directorates processes and incorporate these into the documented standard operating procedures.</p> <p>The procedure should reflect clear version control, including the date of last review, and the date of the next scheduled review.</p> <p>The procedure should be approved by Senior Management and communicated to all relevant officers who support the committee reporting process.</p>	should comply with during submission of reports to committees.			
1.2	<p>Following issue of the standard operating procedures by Committee Services, Directorates and the Health and Social Care Partnership should update the supporting directorate procedures to reflect requirements, including:</p> <ol style="list-style-type: none"> <li>1. an approval process that clearly defines: <ol style="list-style-type: none"> <li>a. key approval stages</li> <li>b. approval hierarchy</li> </ol> </li> </ol>	<p><b>Corporate Services:</b> Following issue of the standard operating procedures by Committee Services (1.1) will update our directorate procedures to reflect requirements, including:</p> <ul style="list-style-type: none"> <li>• key approval stages</li> <li>• approval hierarchy</li> <li>• the requirement to obtain a documented record of the</li> </ul>	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/04/2026



	<p>c. the requirement to obtain a documented record of the approval records as per recommendation 3.1 of this report.</p> <p>2. directorates responsibilities for updating and maintaining committee action logs and work programmes.</p> <p>3. the process to ensure compliance with committee reporting guidance, the report template and the accuracy, relevance and timeliness of committee papers (see <i>recommendation 5.1</i>).</p> <p>Supporting directorate procedures should reflect clear version control, including the date of last review, and the date of the next scheduled review.</p> <p>Supporting directorate procedures should be approved by Executive Directors to confirm they reflect Directorate requirements and communicated to all relevant officers who support the committee reporting process.</p>	<p>approval records as per recommendation 3.1 of this report</p> <p>We will review and update our guidance, action logs, templates and work programmes to ensure we have controls in place across our Directorate.</p>			
		<p><b>Place:</b> Once the “model” process document has been developed and provided by Committee Services, the Place Directorate will review this and consider if changes are required to the current procedures. Updates will be made where required.</p>	Interim Executive Director of Place	Operations Manager, Place	31/07/2026
		<p><b>HSCP:</b> Following issue of the Committee standard operating procedure, the Partnership will review their directorate processes to provide further clarity on:</p> <ol style="list-style-type: none"> <li>1. roles and responsibilities.</li> <li>2. approval arrangements</li> <li>3. responsibility for updating committee action logs.</li> <li>4. reporting deadlines.</li> </ol>	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	31/08/2026
		<p><b>CEJS:</b> Following issue of the standard operating procedures by Committee Services (1.1) will update our directorate procedures to reflect requirements, including:</p> <ul style="list-style-type: none"> <li>• key approval stages</li> <li>• approval hierarchy</li> <li>• the requirement to obtain a documented record of the approval records as per recommendation 3.1 of this report</li> </ul> <p>We will review and update our guidance, action logs, templates and work</p>	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/04/2026

		programmes to ensure we have controls in place across our Directorate.			
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## Finding 2 – Action Tracking and Recording Decisions

Finding  
Rating

Medium  
Priority

### Agenda Planning Meeting (APM) Actions

Review of APM actions logs and final Committee reports, established it was not possible to determine whether actions requested by members at the APM had been completed in 6 of the 9 action logs. It is acknowledged as per para 1.57 of the [Committee Best Practice Guide](#), the final decision whether to implement these changes lies with the relevant Executive Director as the owner of the report. While a note of the actions is circulated following the APM, there was no evidence to demonstrate whether completion of the actions is followed up, and it is unclear how Elected Members would know whether the requested actions have been completed.

### Rolling Actions Log

Review of the rolling actions logs for 4 Committees between September 2023 to September 2024 highlighted that the ‘following through’ of actions between the documents was at times challenging and difficult to follow (see [Appendix 4](#) for further information).

The reasons why actions are delayed was not always transparent within the logs and there is often a lack of a clear audit trail of changes to the implementation dates, particularly where the actions are historical. It was also noted that the number of actions on some action logs were significant, particularly the Policy and Sustainability Committee (73 actions as at 22.08.24) and the Transport and Environment Committee (105 actions as at 12.09.24) which can make the monitoring of relevant actions difficult to manage. Testing also highlighted instances where there was no clear audit trail between the rolling action log and Business Bulletins and/or Briefing Notes. Providing updates for rolling action logs including revised dates is a Directorate responsibility.

### Recording of actions raised at committee

Elected Member feedback highlighted concerns related to some actions discussed at committee which were not being captured, which was confirmed by testing which identified instances where actions raised at committee meetings were not captured within committee minutes or rolling actions log.

Officers advised, that if an action is raised out with the committee decision process, then it legally cannot be captured in the meeting minutes and would not form part of the actions captured on the rolling actions log.

There is currently no mechanism in place to record actions which are agreed at committee between Elected Members and Council Officers, but which do not form part of the decision making process

A review of the webcast on the discussion of the ‘Low Emission Zone – Summer 2024 Update’ report at the Transport and Environment Committee (15.08.24) confirmed that an Elected Member request for an officer to clarify what vehicles the Royals were using. This was not part of the agreed decision; therefore, the action was not captured, and it is unknown if this request was responded to.

[Appendix 4](#) provides an example where it was confirmed that an action was recorded on the rolling actions log but there was no update provided to determine the progress made.

### Committee Decision Log

The Council does not publish a decision log instead decisions are recorded in the minutes and published 7 days prior to the next Committee meeting. Two Elected Members highlighted publishing a dedicated decision log would support transparency over decisions made as they often receive queries from members of the public on committee decisions. Delegated decision logs are a requirement in England but not Scotland and it is acknowledged that there are different democratic requirements between England and Scotland.

### Work Programmes

From the 4 work programmes reviewed, there was one action from the GRBV committee which was not taken forward within the work programme or within the minutes.

As with the rolling actions logs, there were instances where reports had been delayed, and the work programme had not been updated and there were

further instances where testing highlighted that there were no links between the rolling actions log, the work programmes, and business bulletins which made the audit trail of what was happening with a particular report and/or action difficult to follow. Further detail is provided in [Appendix 4](#).

Feedback from Elected Members noted that they liked the work programmes but also noted that these are not being consistently used and they also highlighted that there is no link between the rolling action log and the work programme.

### Elected Member feedback

Elected Member feedback highlighted that the committee reporting process could be improved across the following areas:

- they felt there are too many referral reports (particularly to and from GRBV committee) and there is a lack of understanding why reports are referred. It is noted that since August 2024 referral reports from GRBV to other Executive Committees have been clearer on the terms of the referral
- improving the search function for committee reports on the Council's website to support both key word and thematic searching as well as a clear chronological order
- consensus that Business Bulletins should be used more frequently and that they could provide an opportunity to reduce the number of reports received but stressed that they should be for updates only and not used for decisions

A summary of the key themes from the discussions held with Elected members is provided at [Appendix 5](#).

## Risks

### Governance and Decision Making

- Elected Members may challenge Council Officers during committee meetings if there is a lack of transparency of actions taken by Council Officers
- actions raised during APM and Committee meetings may be missed/not completed if there is not an effective recording and monitoring of actions process in place.

### Reputational

- the Council's reputation may be damaged if members of the public are unclear on the outcome of committee decisions and actions to be taken as a result of concerns raised by Elected Members.

## Recommendations and Management Action Plan: Action Tracking and Recording Decisions

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
2.1	Committee Services should provide further guidance and training to Elected Members to reiterate that if they require an action to be recorded in either the committee minutes or the rolling action logs, the action must form part of the formal decision making process. In addition, guidance should be clear on the process for where a requested action does not form part of the decision	Training/guidance will be provided to elected members.	Head of Democracy and Governance	Democratic Services Manager	30/01/2026

	making process and instead is the directorates responsibility to record and action. Responsibility for how required actions are recorded should be clearly defined within the guidance/training.				
2.2	Directorates should introduce and manage a tracking mechanism to capture actions which Council Officers have agreed to take forward at committee, but which do not form part of the decision making process to ensure that all actions raised at committee are responded to as required.	<b>Corporate Services:</b> We will review and update our tracking mechanism to ensure we are compliant with all agreed actions.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/04/2026
		<b>Place:</b> The Place Directorate will continue to share all recorded actions in the Committee Action Sheet and follow-up accordingly. The Directorate started using MS Planner to track actions since December 2024 and will continue to monitor its effectiveness through 2025.	Interim Executive Director of Place	Operations Manager, Place	30/01/2026
		<b>HSCP:</b> the Partnership will engage with Committee Services to work collectively to put in place a mechanism to ensure that actions agreed are progressed.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/04/2026
		<b>CEJS:</b> We will review and update our tracking mechanism to ensure we are compliant with all agreed actions.	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/04/2026
2.3	Committee Services should provide further guidance and training to both Elected Members and Council Officers on actions raised and/or changes requested by Elected Members at Committee Agenda Planning meetings to ensure that they are aware that the final decision as to whether Council Officers implement actions/changes to reports lies with the relevant Executive Director as the owner of the report.	The Committee Best Practice Guide will be updated to include narrative on this area.	Head of Democracy and Governance	Democratic Services Manager	31/08/2025

2.4	Directorates should ensure that where a Council Officer has agreed to take forward an action either at the Agenda Planning Meeting or at committee and officers subsequently determine it will not be taken forward, that is communicated to the Elected Member who made the request.	<b>Corporate Services: Corporate Services:</b> We will build in a mechanism into our monitoring and tracking process to ensure where a Council Officer has agreed to take forward an action either at the Agenda Planning Meeting or at committee and officers subsequently determine it will not be taken forward, that is communicated to the Elected Member who made the request if the details are recorded on the minutes or the rolling action log.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services, Corporate Services	30/11/2025
		<b>Place:</b> The Directorate will communicate with appropriate committee members where it's not possible to implement a decision from a committee or where there may be an alternative approach to implementation. Following APM meetings, officers will consider the request from Elected Members or changes to reports and where appropriate will follow-up with Elected Member where a request cannot be progressed.	Interim Executive Director of Place	Operations Manager, Place	31/08/2026
		<b>HSCP:</b> The Partnership will put in place an arrangement to ensure that all actions agreed are actioned.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/01/2026
		<b>CEJS:</b> We will build in a mechanism into our monitoring and tracking process to ensure where a Council Officer has agreed to take forward an action either at the Agenda Planning Meeting or at committee and officers subsequently determine it will not be taken forward, that is communicated to the Elected Member who made the request if the details are recorded on the minutes or the rolling action log.	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/11/2025

2.5	Committee Services should consider carrying out an options appraisal to determine whether it is feasible for the Council to implement decision logs as part of the committee reporting process, including a cost/benefit analysis considering system requirements /costs, and resource requirements for implementing and maintaining the decision log.	An options appraisal will be carried out. Committee Services is currently procuring an updated version of its committee management system. When this is in place and being used then consideration can be given to enhanced features that may be available within the system, including decision logs.	Head of Democracy and Governance	Democratic Services Manager	27/02/2026
2.6	Committee Services should ensure that where an action is not implemented within the agreed timescale, a revised date is recorded within the rolling action log and highlighted to the committee.	Committee Services will reiterate the need for all outstanding actions to have accurate estimated completion dates. Where accurate dates are not provided, Committee Services will raise this with the relevant directorate.	Head of Democracy, Governance and Resilience	Democratic Services Manager	30/09/2025
2.7	<p>Directorates should review their directorate specific actions on the Rolling Actions log for each committee to:</p> <ul style="list-style-type: none"> <li>establish the reasons as to why there are so many actions which have been recorded for significant periods of time without being cleared from the log</li> <li>ensure that the reasons for delay to the implementation of a required action have been recorded by the Directorate</li> <li>ensure that revised implementation dates are recorded.</li> <li>ensure that actions are reviewed and updated on a regular basis</li> </ul>	<b>Corporate Services:</b> We will review our directorate specific actions on the rolling actions log for each committee to ensure actions are being allocated and completed within specific agreed timescales, that updated information is recorded and implementation dates reflected are updated and reviewed regularly.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services, Corporate Services	30/09/2025
		<b>CEJS:</b> We will review our directorate specific actions on the rolling actions log for each committee to ensure actions are being allocated and completed within specific agreed timescales, that updated information is recorded and implementation dates reflected are updated and reviewed regularly.	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/09/2025
		<b>Place:</b> In advance of every committee, the Directorate will continue to review and update the Rolling Actions Log with all recent information received. This will include revising implementation dates and providing status updates wherever	Interim Executive Director of Place	Operations Manager, Place	31/08/2026

		possible. However, while the Directorate is working through a significant volume of historic actions it will not be possible to document the reasons for actions remaining on the log for significant periods of time.			
		<b>HSCP:</b> the Partnership will continue to review its actions on the rolling actions log for committees.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/09/2025



## Finding 3 – Approval and sign-off of Committee reports

Finding  
Rating

Medium  
Priority

Paragraph 15 of the [Committee report writing guidance](#), states that once completed and checked, the committee report should be passed to the report author's manager or Head of Service for approval. All reports must also be submitted in accordance with the arrangements within the relevant directorate.

Review of a sample of committee reports to assess whether there was documented evidence to support the approvals and signoffs of committee reports and business bulletins across all four directorates, highlighted that:

- for 3 of 8 committee reports, the relevant Senior Manager approval (i.e. Head of Service, Service Director) was not documented. Additionally, there were 2 further instances where the final approval / sign-off by the Executive Director was not recorded
- out of 5 Business Bulletins, 1 instance was noted where the final sign-off by the Executive Director was not documented.

### Risks

#### Governance and Decision Making

- lack of evidence to support that committee reports and business bulletins have been reviewed and approved at an appropriate level
- lack of evidence of adequate scrutiny of the reports by Senior Management to support that they agree with the report content and recommendations made within the reports/business bulletins prior to issuing to committee, which increases the risk of reports containing inaccurate, incomplete, misleading, or unauthorised information.

**Reputational Risk** - possible legal challenges and reputational damage may arise if the recommendations in the reports are later questioned and there is no evidence of proper governance.

## Recommendations and Management Action Plan: Approval and sign-off of Committee reports

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
3.1	Directorates should maintain a documented record of committee reports, and business bulletin approvals at each key stage of the approval process and the documented records should be retained in line with the Councils records retention policy requirements.	<b>Corporate Services</b> We will continue to maintain a documented record of committee reports and business bulletin approvals and that each stage of the approval process is recorded and maintained in line with records retention requirements as part of an improved tracking mechanism.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services,	30/04/2026
		<b>CEJS:</b> We will continue to maintain a documented record of committee reports and business bulletin approvals and that each stage of the approval process is	Executive Director of Children, Education and	Senior Executive Assistant,	30/04/2026

		recorded and maintained in line with records retention requirements as part of an improved tracking mechanism.	Justice Services	Operations Manager, CEJS	
		<b>Place:</b> Place Directorate will develop a process to ensure sign-off of reports and business bulletins for all committees.	Interim Executive Director of Place	Operations Manager, Place	31/08/2026
		<b>HSCP:</b> The Partnership will review its approval process for committee reports to ensure it remains fit for purpose	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/04/2026

## Finding 4 – Monitoring and oversight

Finding  
Rating

High Priority

### Committee Reporting Process

Testing highlighted that the overall committee reporting process including monitoring and oversight is not working as effectively as it could within directorates. It is a time-consuming manual process which impacts both officers and Elected Members.

In addition, the following points were highlighted through discussions held with Directorates, Committee Services and Elected Members:

- too many committee reports are presented to committees, and that the length of committee meetings has increased significantly. This has been reported in the [Council and Committee Statistics](#) report to GRBV in January 2025.  
Officers advised there have been attempts to reduce the length and volume of committee reports however, Elected Members often request further information within the report both at Agenda Planning Meetings and through raising actions at committee meetings. As noted within [Appendix 3](#) of this report, testing highlighted 4 of 11 reports where the main report was longer than the two pages set out within the committee report guidance
- Elected Members advised that at times, the recommendations are unclear or there is insufficient information in the main body of the report to support the officer recommendations made, which can make it difficult to make an informed decision. One Elected Member commented that sometimes decisions are hidden within the body of the report or the appendices rather than being included within the recommendations section of the committee report
- a further Elected Member highlighted that points for noting should not be included within the recommendations section of the report. It is understood that this point is to be discussed at the [Streamlining Committee Business Working Group](#) as part of a wider review of the format of committee reports.

- a further member advised that where a report is for noting, it would be helpful for the Executive Summary to include the key points members and the public need to know.

It is acknowledged that the Streamlining Committee Business Working Group includes within its remit a task to address the volume and work overload issues relating to the committee reporting system and to suggest improvements to both the reporting process and the overall quality of the reports.

### Replacement Automated Committee Reporting System

Committee Services use a combination of a manual process and the 'Modern Gov' application which is also available to Elected Members. However, there were mixed views from the six Elected Members interviewed during the audit on the effectiveness of the Modern Gov application, with one Elected Member advising that the Modern.gov application could be improved for linking motions and amendments instead of having to go in and out of documents and two Elected Members stating they do not use the mobile / iPad application as they think it is ineffective.

Discussions with Committee Services highlighted they have been researching a new committee reporting system for a significant period of time, however, there is no custom-built software package available on the market which would cover the requirements of the end-to end process between Departments, Committee Services and Elected Members.

A new version of the Modern Gov application is under consideration for when the current contract ends in May 2025, but this will only benefit the Committee Services team at this stage and does not include a Committee Reporting module.

Committee Services has advised that the Chief Executive is aware of this issue and that it is a priority but that the issue is historic and challenging to change.

## Risks

### Governance and Decision Making

- the decision-making process could become unmanageable and ineffective for both Council Officers and Elected Members due to the number and length of reports issued to committee.
- required decisions may be difficult to determine and may be missed if the decisions are not clearly defined in the recommendations section of the committee report. This could also leave the Council and Elected Members open to challenge if a report has been approved but where all the required decisions have not been clearly highlighted within the committee report and subsequently reflected in the committee minutes.

**Strategic Delivery** – there is no effective process to manage and monitor committee reports, decisions-made and actions raised.

**Reputational Risk** - members of the public may feel that the process is not effective as it could be, and may be unclear about the decisions made, which could leave the Council open to challenge and complaints.

## Recommendations and Management Action Plan: Monitoring and oversight

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
4.1	Committee Services should review the committee reporting process to consider best practice and what is working well in some areas, with the aim of establishing whether any of the individual tasks within the process could be improved to provide a more consistent process across directorates and to remove the need for tasks to be completed manually, where possible.	Democracy and Governance will consult directorates to identify their current practices, review the reporting process and thereafter produce a best practice guide.	Head of Democracy and Governance	Democratic Services Manager	30/01/2026
4.2	In the longer-term, the Council should consider an automated system which can automate as many of the committee reporting tasks as possible to ensure that the process is effectively managed and that errors are minimised.	Following the roll out of an updated Modern Gov system later in 2025, a review will be undertaken on the feasibility of utilising its report writing functionality. If it is concluded that this is not suitable then a review of other options and systems will be undertaken.			31/08/2026
4.3	Committee Services, Directorate officers and Elected Members should work collaboratively to	A review of committee reports, and their format will be taken in consultation with the Streamlining Committee Business Working			27/02/2026

	<p>agree a workable solution to the issues impacting the committee reporting process including:</p> <ul style="list-style-type: none"> <li>• an agreed format for the length, and content of committee reports</li> <li>• to agree a balance between the information provided to support decisions made and the detail of information which is included which is not entirely relevant to the decision or which could be submitted in a different agreed format</li> <li>• to agree on how the recommendation section of the committee reports should be completed and whether to allow points for noting to be included within this section</li> <li>• to instruct report authors to include the key points that members and the public should be aware of in the Executive Summary for reports for noting.</li> </ul>	Group with the aim of reporting to Council in December 2025.			
4.4	<p>Directorates should undertake quality checks to ensure that recommendations in committee reports are clear and that there is sufficient information within the body of the report to allow Elected Members to make an informed decision.</p> <p>This should include a check to ensure that all decisions are clearly documented within the recommendations section and not only referenced in the main body of the report and/or appendices.</p>	<p><b>Corporate Services:</b> We will undertake quarterly checks to ensure that recommendations in committee reports are clear and contain sufficient information for informed decision making as part of our improved tracking mechanism and processes.</p>	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/01/2026
		<p><b>CEJS:</b> We will undertake quarterly checks to ensure that recommendations in committee reports are clear and contain sufficient information for informed decision making as part of our improved tracking mechanism and processes.</p>	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/01/2026
		<p><b>Place:</b> A quality checking process is currently in place and will continue to be implemented and refined through 2025/26.</p>	Interim Executive Director of Place	Operations Manager, Place	31/08/2026

		<b>HSCP:</b> The Partnership will review its quality assurance approach to ensure it is fit for purpose.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/01/2026
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## Finding 5 – Compliance with report writing guidance / training

Finding  
Rating

Medium  
Priority

A review of a sample of committee reports was undertaken to assess compliance with the Council's [Report Writing Guidance](#) (June 2023) and the Committee [Report Template](#) (July 2023). A total of 11 reports issued to a sample of five council committees by four directorates were reviewed to evaluate adherence to mandatory guidance requirements.

Exceptions for all 4 directorates were noted across 11 of the 36 reporting specifications identified within the Report Template (where the expectation is that the committee report will comply with the noted template requirements):

- 7 committee reports did not have the 'Executive/routine, Wards' section completed
- 6 committee reports did not summarise the contents of the report and the reason for submission in one paragraph (Template Ref. 2.1)
- 6 committee reports were not updated to state whether an Integrated Impact Assessment (IIA) had been completed, 2 reports did have IIAs noted but the link to the published IIA was missing, and one noted that they will 'complete an IIA as necessary' (Template Ref. 7)
- 6 committee reports did not mention any actions to mitigate the risks applicable to the council to an acceptable level (Template Ref. 9.2)
- 4 committee reports did not comply with the requirement that the main report is no longer than 2 pages (Template Ref. 4.1). As noted within finding 4 above, officers have noted compliance with the 2-page requirement, is challenging when further information such as additional reports or business bulletin updates is requested at committee.

Committee Services supports the following training for their colleagues:

- **Induction for New Joiners** – conducted through a PowerPoint presentation
- **one-on-one on-the-job training** – one to one personalised training to build role-specific skills
- **shadowing** – 6–8 week shadowing Committee training at various committee meetings.

[Writing report guidance](#) on the Orb states that report authors must read the guidance on:

- how to write committee reports
- Integrated Impact Assessments (IIAs) to determine whether report authors should include IIAs as part of the committee report.

There is also guidance on whether sustainability impacts need to be reported.

In addition to the above, the Orb notes that report authors must complete the [Committee Report Writing](#) module on myLearning Hub. A report obtained from Learning and Development showed that:

- there was a total of 77 colleagues across the Council who have completed and passed the module
- from a sample of 20 Committee reports only 4 of 20 report authors had completed the Committee Report Writing e-learning module within myLearning Hub.

Committee Services advised this training is not mandatory and feedback from directorates provided a mixed response as to whether report authors are required to complete the required training. Most directorates noted that they would encourage and recommend the training to report authors and noted that they do use the guidance. However, there was only one area which confirmed that report authors would be expected to complete the e-learning training module.

Discussion with directorates established that People managers and Heads of Service are responsible for overseeing training for report authors. People Managers can monitor completion of modules through the myLearning Hub dashboard. However, completion of the Committee report writing module was not tracked or a requirement on role specific learning matrices.

## Risks

### Governance and Decision Making

- report authors may have a lack of understanding of the committee report writing guidance requirements which may result in poor report quality, miscommunication and potential non-compliance with Council reporting guidance
- lack of training could lead to poorly written and unclear reports which could impact the Council's decision-making process.

**Legislative and regulatory** - the Council may be challenged through judicial review if the relevant Integrated Impact Assessment (IIA) section of the committee report is not accurately completed and linked to an approved IIA.

## Recommendations and Management Action Plan: Report writing guidance and completion of training





Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
5.1	Directorates should streamline the existing pre-submission quality review process to ensure compliance with committee reporting guidance, and the committee reporting template.  The development of a report template checklist which comprehensively covers all the key reporting standards and requirements should be considered (recommendation linked to recommendation 1.1).	<b>Corporate Services:</b> We will further streamline the existing pre-submission review process as part of our improved tracking mechanism and processes to ensure compliance with all guidance and templates	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/04/2026
		<b>CEJS:</b> We will further streamline the existing pre-submission review process as part of our improved tracking mechanism and processes to ensure compliance with all guidance and templates	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/04/2026
		<b>Place:</b> The Place Directorate will investigate and consider the options that are available to improve the quality of submitted reports and compliance with the committee guidance.	Interim Executive Director of Place	Operations Manager, Place	31/08/2026
		<b>HSCP:</b> The Partnership will deliver report writing training and review its quality assurance approach to ensure it is fit for purpose.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/04/2026
5.2	The Council should determine if committee reporting training should be mandatory and included in the 'Role	This matter will be discussed with colleagues from Learning and Development and the outcome will be	Head of Democracy	Democratic Services Manager	30/09/2025



	<p>specific training logs' for all committee report writing authors.</p> <p>Directorates should instruct People managers to monitor completion of the module and instances of non-completion by report authors escalated to the relevant Head of Service.</p>	communicated to directorates and via the Orb so that the requirements are clear.	and Governance		
		<b>Corporate Services:</b> We will agree with our Senior Management Team if committee training should become mandatory and included in role specific training logs. We will implement a training mechanism via myLearningHub to monitor the completion of relevant training and report on any noncompliance to our SMT.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/01/2026
		<b>CEJS:</b> We will agree with our Senior Management Team if committee training should become mandatory and included in role specific training logs. We will implement a training mechanism via myLearningHub to monitor the completion of relevant training and report on any noncompliance to our SMT.	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/01/2026
		<b>Place:</b> Following Committee Services confirming the outcomes of their discussion with Learning and Development, the Place Directorate will implement any actions agreed.	Interim Executive Director of Place	Operations Manager, Place	30/01/2026
		<b>HSCP:</b> If agreed that report writing will be mandatory for officers, the Partnership will monitor compliance through the appropriate governance forum.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/01/2026
5.3	<p>Directorates should complete a check to ensure that all report authors have completed the <a href="#">Committee Report Writing</a> training module on myLearning Hub training before drafting committee reports.</p>	<b>Corporate Services:</b> We will introduce a training mechanism via myLearningHub to ensure that all relevant report authors have complete the Committee Report Writing module and monitor the completion compliance.	Executive Director of Corporate Services	Senior Executive Assistant, Corporate Services	30/01/2026
		<b>CEJS:</b> We will introduce a training mechanism via myLearningHub to ensure that all relevant report authors have complete the Committee Report Writing module and monitor the completion compliance.	Executive Director of Children, Education and Justice Services	Senior Executive Assistant, Operations Manager, CEJS	30/01/2026

		<b>Place:</b> Place Directorate will build e-learning module for committee report writing in to the induction for all new heads of service and service managers who will be involved in committee report writing.	Interim Executive Director of Place	Operations Manager, Place	31/08/2026
		<b>HSCP:</b> The Partnership will run a series of report writing session for report authors.	Chief Officer, Health and Social Care Partnership	Operations Manager, HSCP	30/01/2026

# Appendix 1 – Control Assessment and Assurance Definitions

Control Assessment Rating		Control Design Adequacy	Control Operation Effectiveness
Well managed		Well-structured design efficiently achieves fit-for purpose control objectives	Controls consistently applied and operating at optimum level of effectiveness.
Generally Satisfactory		Sound design achieves control objectives	Controls consistently applied
Some Improvement Opportunity		Design is generally sound, with some opportunity to introduce control improvements	Conformance generally sound, with some opportunity to enhance level of conformance
Major Improvement Opportunity		Design is not optimum and may put control objectives at risk	Non-conformance may put control objectives at risk
Control Not Tested	N/A	Not applicable for control design assessments	Control not tested, either due to ineffective design or due to design only audit

Overall Assurance Ratings	
Substantial Assurance	A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

Finding Priority Ratings	
Advisory	A finding that does not have a risk impact but has been raised to highlight areas of inefficiencies or good practice.
Low Priority	An issue that results in a small impact to the achievement of objectives in the area audited.
Medium Priority	An issue that results in a moderate impact to the achievement of objectives in the area audited.
High Priority	An issue that results in a severe impact to the achievement of objectives in the area audited.
Critical Priority	An issue that results in a critical impact to the achievement of objectives in the area audited. The issue needs to be resolved as a matter of urgency.

## Appendix 2 – Areas of Audit Focus and Control Objectives

Audit Areas	Control Objectives
Policy and procedures	<ul style="list-style-type: none"> <li>Up to date policies and procedures are in place both within Committee Services and within Directorates, which adequately cover the committee reporting process, including clearly setting out the roles and responsibilities of each stakeholder.</li> <li>Policies and procedures are aligned to relevant legislation.</li> </ul>
Governance and oversight	<ul style="list-style-type: none"> <li>The end-to-end committee reporting process ensures that adequate and timely information is provided to support informed decision-making, thereby enabling effective governance and upholding democratic processes within the Council.</li> <li>Committee members are provided with the necessary resources including materials, briefing and technical support to make informed decisions.</li> <li>Monitoring of committee decisions are adequately recorded to ensure that all decisions are appropriately tracked and communicated to Elected Members, Council Officers and members of the public.</li> </ul>
Resource management and quality assurance	<ul style="list-style-type: none"> <li>Workforce requirements are assessed, planned, regularly reviewed and action taken to ensure there is adequate resources at all stages of the process including the committee meetings to ensure that Elected Members, Council officers and Committee Services officers have sufficient time to effectively manage the committee reporting process.</li> <li>There are adequate processes in place for administering, delivering and monitoring the committee reporting service within both Committee Services and Directorates.</li> <li>A quality assurance process is in place within service areas to review committee reports to ensure they contain adequate, accurate and timely information to enable informed decision making.</li> <li>Reports issued to committee are aligned with the Council's approved <a href="#">report template</a>, <a href="#">house writing style</a> and <a href="#">writing report guidance</a></li> <li>There is an adequate process to ensure the completeness and accuracy of action logs and work programmes.</li> </ul>
Learning and development	<ul style="list-style-type: none"> <li>Role-specific learning and training materials are available to ensure staff possess the necessary skills and knowledge to perform their committee reporting duties effectively.</li> <li>All relevant Council officers who are involved in the committee reporting process have completed the required e-learning course on Committee Report Writing through the myLearning Hub.</li> </ul>

# Appendix 3 – Committee Meeting Report Template – Compliance Test

## Committee Meeting Report Template - Compliance Test

### Summary

			Occurrence of non-compliance							
Ref.	Report Item	Exception	Corporate Services		Place		CEJS	HSCP	Total Exceptions	%
			GRBV	P&S	T&E	P&S	EC&F	F&R		
	Executive/routine and Wards (if any)	Not mentioned	2	1	1		2	1	7	64%
2.1	Content of the report and reason for submission should be in one paragraph	More than one paragraph	2	1		1	1	1	6	55%
4.1	Main report no longer than two pages	More than two pages		1	2	1			4	36%
7	Equality and Poverty Impact	Not mentioned						1	1	9%
	Must detail whether an IIA has been undertaken. If not, briefly explain why?	Not mentioned	2	1			2	1	6	55%
8	Climate and Nature Emergency Implications	Not mentioned						1	1	9%
	If IIA not done above, briefly explain why?	Not mentioned						1	1	9%
9	Risk, policy, compliance, governance and community impact	Not mentioned						1	1	9%
9.2	Outline actions to mitigate the risk to an acceptable level	Not mentioned		1	2		1	2	6	55%
9.3	Should include whether there is an impact on an existing policy of the Council.	Not mentioned						1	1	9%
9.4	Should provide any health and safety, governance, compliance or regulatory implications	Not mentioned						1	1	9%
	Total Exceptions	Occurrence	6	5	5	2	6	9	35	
			31%		20%		17%	31%		

Additionally, the following areas for improvement where compliance is not mandatory but recommended are summarised below:

<b>4.3</b>	Any additional detail should be included as appendices	Appendix not linked in main report	2 exceptions were found
<b>11.1</b>	Appendices better served by a hyperlink	Appendices below report not hyperlinked	Exceptions were noted in all the samples (11)
<b>7.1</b>	Must detail whether an IIA has been undertaken. If not, briefly explain why?	IIA not hyperlinked	2 exceptions were found
		Statement given: 'IIA will be done as necessary'	One exception was found

## Appendix 4 – Extract from Testing of Rolling Actions Log and Work Programmes

Internal audit completed a review of the **rolling actions logs** of four committees for the period in scope (September 2023 to September 2024). Note this information is provided as an example of how the control is working in practise:

Item 1 on Governance, Risk and Best Value 'Outstanding Actions' log has an action dated 18.11.23 (EICC - Annual Update for the year ending 31 December 2022).

The action requests for a briefing note to be circulated and the 'update' notes that it is expects circulate this briefing note by June 24'.

IA found no evidence of the briefing note and no further update on the actions log. The Convenor raised this point at the committee meeting (17.09.24) and the Committee Services Manager provided an update to note that the briefing paper had been delayed as it was being discussed at another committee.

The 'Outstanding Actions Log' from 31.10.24 noted that the briefing note would expect the briefing note to be circulated by 31.10.24.

IA could not locate evidence of the report being submitted at the 31.10.24 committee. The Convenor raised this issue again (at the GRBV meeting of 31.10.24) and Interim Executive Director noted that “he was going to send an email round”.

On the 'Outstanding Actions Log' dated 23.01.25, this action has been marked for closure, and it is noted that a 'Briefing Note was issued on 31 October 24, and the action is recommended for closure.

Internal audit completed a review of the **work programmes** of four committees for the period in scope (September 2023 to September 2024), below is an extract from the testing of the work programmes from one committee tested:

Transport and Environment Committee - Thursday 12 September 2024, 10:00am - Start video at 0:50:05 - City of Edinburgh Council Webcasts

4.1) Councillor highlighted in the webcast that he was expecting report on Smokey Brae, but this was not noted on the Work Programme. Interim Executive Director noted that Smokey Brae has been in Active Travel Investment Plan in past and officers are working on single investment plan to approve around December time – it was noted that the update would be included within that report. Checked December's Work Programme and it includes a Business Bulletin update for January regarding Smokey Brae.

4.2) Councillor had question about Cycle Hire Scheme Update report that was noted in Work Programme for October committee – the report originally due to come in August, but this was delayed to September, and it has now been delayed again. The Councillor asked for reassurance that it would come to next committee and also asked why it had been delayed. Officer confirmed that it will come next month and was delayed due to fiscal position and by holidays too. Checked October Work Programme and report was moved into November. In November's Work Programme the report had been moved to December. The report was submitted in December's committee.

# Appendix 5 – Key themes highlighted from Elected Members Feedback

## Elected Members Meetings Thematic Review

### Key Themes:

1. Rolling Actions Log ineffective	2. Poor documenting of decisions	3. Duration of committees too long	4. Reports too long and not clear on decisions	5. Too many reports inc. referral reports
6. Modern.gov application needs improvement	7. Work programmes not used consistently	8. Business bulletins potential opportunity	9. Not possible to search for committee reports thematically.	

### Feedback from Elected Members highlighted the following views:

1. The rolling actions log is ineffective and not user-friendly as it is too long and not clear on actions. Governance in this area is weak, and actions get lost.
2. Concerns over documenting of decisions including an absence of a published decision log.
3. Concerns over the duration of committees being too long and that could result in lack of sufficient discussions/debate, and another highlighted the difficulty to maintain concentration.
4. Committee reports are too long, and key decision-making points are not clear enough in reports with some concerns that decisions could be hidden within reports.
5. There are too many reports submitted to committees. One member suggested to the Streamlining Committee Reports group that reports for 'noting' should not go to committee, it should only be decision-making reports which should be presented to the committee. There are too many referral reports (particularly to and from GRBV committee) and a lack of understanding as to *why* reports are referred.
6. The Modern.gov application could be improved, and some members do not use it due to its ineffectiveness.
7. Concerns over inconsistent use of work programmes.
8. Consensus that Business Bulletins should be used more and could provide an opportunity by reducing the number of reports received but stressed that they should be for updates only and not decisions.
9. Issues with the search facility for committee reports particularly being unable to search thematically – only chronologically. Members advised they rely on their memory and/or notes to go back and check the meeting they think a report was considered at, or they ask colleagues who might know (which is equally unreliable and potentially quite time-consuming) or officers (again, can be time-consuming). Additionally, different aspects of policy issues or projects sit within the scope of different committees, adding to the complications.