

AUDIT COMMITTEE

Minutes of the meeting held on Monday 17 March 2025 at 4.00pm in M6

Present:	Lucille Knapp	Governor	Chair
	Craig Ablett	Governor	Vice-Chair
	Andy MacCaig	Governor	
	Mark Whitehouse	Governor	
	Helen King	Co-opted Governor	
	Aaron Keers	Co-opted Governor (Teams)	
In attendance:	Alicia Bruce	COO	
	Neil Clark	Internal Auditor – Wylie & Bisset (Teams)	
	Catherine Duro	Head of Governance (Clerk)	

SECTION A.1 – ROUTINE AND STANDING ITEMS:

Apologies for absence (Agenda item 1)

1. Apologies were received from Becky Bradshaw, Graham Gillespie from Wylie Bisset. Sue Hutchinson and Sana Mumtaz External Auditors from Beever & Struthers and Sarah Bunney Finance Director

Declarations of interest (Agenda item 2)

2. There were no declarations of interest.

Minutes of the last meeting (Agenda item 3, Paper A)

3. The minutes of the meeting held on **Monday 2 December 2024** had been circulated previously and were **approved** as a true and accurate record.

Matters Arising (Agenda item 4)

4. The one action had been completed to the committee's satisfaction. There were no further matters arising.

SECTION B – GOVERNANCE:

There were no matters of governance to discuss.

SECTION C – CHIEF OPERATING OFFICER UPDATE:

Risk Management Report (Agenda item 5, Paper B)

5. The risk management report was presented. The evolving picture due to the financial position, delay in government funding announcements and management restructure were discussed at length. It was understood that each of these potentially increased the risks facing the organisation, including financial health, staff retention and student experience. Management would monitor the changing impact closely and provide a revised risk register to the next meeting of the Corporation.
6. The risk and impact of high staff turnover and reliance on agency staff was discussed.

7. The importance of regular testing on the delivery and impact of the digital project was discussed, including the need to ensure the solution was fit for purpose and not over-engineered. The hosting of the MIS system was discussed, and the server versus cloud storage analysed. Governor oversight beyond the audit meeting was offered.
8. The need for ongoing, clear ownership of the ISB employer voice process was clarified.
9. An update on estates was sought. An update was provided on recent activity and the essential need to secure additional grants to enable further progress, beyond essential maintenance.
10. Concern was raised that ransomware attacks had increased in the university sector; caution was raised that servers are often the weak spot rather than cloud-based systems.

Internal audit action tracker (Agenda item 6, Paper C)

11. The internal audit tracker was **received**. 16 had reduced to 9.
12. A Governor asked for an additional column of the revised due date. The original should be left, but where overdue clarity of the revised target date would be useful. **(Action AB)**
13. Questions were invited.

SECTION D – External Auditor Update

No external audit updates were due or received.

SECTION E –INTERNAL AUDITOR UPDATE:

Staff Recruitment and Retention Audit (Agenda item 7, Paper D)

14. The report was confirmed as **received**. The key points were revisited and the recommendations expanded upon.
15. Questions were invited.
16. It was **asked** how the sample size had been decided as only 10 samples seemed to be a small sample. The auditor **confirmed** they would always start with a sample of 10 for this audit and seek additional samples if concerns or abnormalities were identified. As no abnormalities were found or suspected this audit was completed based on the 10 samples.

Revised Internal Audit Plan (Agenda item 8, Paper E)

17. The revised internal audit plan and reasons for amendments were **considered**.
18. It was **confirmed** that the two internal audit draft reports due at the end of May would be presented in some form to the June meeting as it was agreed that December would be too late to have any impact.
19. It was **asked** what the business continuity audit would involve. The auditor **explained** the typical process and testing, governors were assured this would not be disruptive.

The timely opportunity to review the recent one-day closure when a water outage was forecast was discussed.

SECTION F – HEALTH AND SAFETY

Health and Safety Report (Agenda item 9, Paper F)

20. The Health and Safety Report was **presented**. Governors were advised a new H&S manager had started the day of the meeting. It was **expected** that a new approach, cultural shift and method of reporting would be apparent. It was proposed that the new H&S Manager would come to Audit Committee meetings and would also be responsible for business continuity planning. It was **confirmed** that a consultant had provided cover during the period of vacancy.
21. It was **agreed** that the college was particularly good at compliance but a positive cultural shift was welcomed. A **request** was made for more visual, graphical reports.
22. A governor **challenged** that looking at the raw numbers the number of accidents had increased, how could we know if this was due to being better at reporting not an actual increase. The increase follows a period of reminder activity, indicating it was an improvement in reporting. Need to be more analytical and feedback. **(Action IS)**
23. The inclusion of wellbeing in the Health and Safety Report was **debated**. It was asked if it was possible to know how well used the Employee Assistance Programme (EAP), what were the trends, categories of call etc? **(Action DA/IS)**
24. A governor **questioned** why no injury sustained, would not be more accurately reported as a near miss. This was **explained** as an accident happened but did not result in an injury.
25. **Clarity was sought** over the knife/ sharp tool incidents. It was explained that the knife reports referred to an accidental cut when preparing animal food, not a knife being used as a weapon. It was asked that this be clear within the report. **(Action IS)**
26. Governors **questioned** the references to seizures which were mentioned twice, referencing a high number of seizures, but the count showed only 1 and not more than previous years. It was explained the increase was non epileptic seizures, often caused by stress.
27. There was a discussion around staff training, the reported figures were challenged. Mandatory training should be linked to PDR, checking this is currently a manual process. Checks were requested. **(Action DA)**

Health and Safety Link Governor update (Agenda item 10)

28. An update was given on conversations with the Health and Safety Manager, who had done a good job in improving reporting and college compliance. The link governor committed to meeting the new Health and Safety Manager ahead of the next committee meeting.

SECTION G - POLICY

No policies were due for review.

SECTION H – Closing Items

Any other business (Agenda item 11)

29. The reporting and auditing of safeguarding was **questioned**. **Assurance was given** that this was scrutinised in detail by the CQS Committee.
30. One incidence of processing error was reported in the interests of transparency. A human error was made in making a payment to the pension service, which was rapidly identified and reclaimed. This identified a weak spot in financial control, where human error was flagged and a revised process was confirmed to be in place.
31. The finance team resources and pressures were discussed.
32. It was asked if there had been a change in the Ofsted approach, did it feel more caring to leaders. **(Action FW)**

Impact of Governance (Agenda Item 12)

- The opportunity to challenge the risk register and health and safety report, during a period of significant change was beneficial.
- The maintenance of accountability through regular committee scrutiny was recognised

Date of next meeting (Agenda item 13)

The next meeting was scheduled for 16 June 2025