

## Board of Management

### Meeting of the Audit and Assurance Committee

MINUTE OF 3<sup>rd</sup> MEETING HELD ON THURSDAY 14 MARCH 2024 AT 1500 HRS,  
CITY CAMPUS, ROOM C.06.106 (AAC3)

Present	
Paul Hillard (Convener)	Lorna Hamilton (Remote)
Dave Anderson	
In attendance	
Karen Acheson (Remote)	Sheila Lodge
Andrew Dickson	Drew McGowan
Jon Gray	Laura Shields
Zoe Headridge (Audit Scotland)	Alex Stewart
Stuart Inglis (Henderson Loggie)	
Paul Little	Ann Butcher (Minute)
Apologies for absence	
Charandeep Singh	

Item AAC3-1	Apologies for Absence	
Paper No:	Lead: Convener	Action requested: Note
Decision/Noted	Apologies were noted for C Singh.	

Item AAC3-2	Declarations of Interest	
Paper No:	Lead: Convener	Action requested: Note
Decision/Noted	No interests were declared.	

Item AAC3-3	Items to be Discussed Privately with Auditors	
Paper No:	Lead: Convener	Action requested: Note
Decision/Noted	None.	

Item AAC3-4.1	Minute of the Meeting held on 5 December 2023	
Paper No: AAC3-A	Lead: Convener	Action requested: Approve
Decision/Noted	That the minutes were approved.	

### **Matters Arising – Internal Audit Overview**

P Hillard and K Acheson will meet to consider the implementation of performance measures prior to the next Committee meeting.

<b>Item AAC3-4.2</b>		<b>Document and Records Retention Policy</b>
<b>Paper No:</b> AAC3-B	Lead: S Lodge	Action requested: Approve
<b>Discussion</b>	<p>S Lodge informed members that the Document and Data Retention Policy outlines the College's approach to the storage of information and personal data. Updates to the Policy were made by the Data Protection Officer (DPO) to amend the out-of-date EU General Data Protection Regulations (GDPR) terminology, which has now been replaced with language that aligns with UK GDPR.</p> <p>The Committee noted that the Policy should be read in conjunction with the Document and Records Retention Procedure which provides an extensive list of all data and retention periods that each Faculty/Department are required to undertake. It was also noted that performance and compliance are managed by a process of spot checks on a rolling basis with any issues being reported back to S Lodge.</p> <p>Members were content to approve the amended Document and Data Retention Policy.</p>	
<b>Decision/Noted</b>	<p>To approve the Document and Data Retention Policy.</p> <p>S Lodge will clarify references made in relation to the deletion of lawful purpose criteria with the DPO and report back to the Committee.</p>	

<b>Item AAC3-4.3</b>		<b>Risk Management Policy</b>
<b>Paper No:</b> AAC3-C	Lead: D McGowan	Action requested: Approve
<b>Discussion</b>	<p>D McGowan informed the Committee that the Risk Management Policy has now been updated following feedback provided at the risk appetite session at the November strategy event. Following a review of the revised Policy, the following recommendations were made:</p> <ul style="list-style-type: none"><li>• that risk appetite criteria be included within the Policy;</li><li>• that the role of the Audit and Assurance Committee be clearly outlined;</li><li>• that a specific statement emphasising that risk management is the responsibility of all staff and teams be added to encourage them to identify and communicate risks as appropriate;</li><li>• that the College will provide appropriate training and development for the Board and wider college on risk management.</li></ul>	
<b>Decision/Noted</b>	<p>That, subject to the agreed amendments, the revised Risk Management Policy will be recommended for final approval at the full Board meeting on 27 March 2024.</p>	

### **Item AAC3-5.1**      **Annual Complaints Report 2022-23**

<b>Paper No: AAC3-D</b>	<b>Lead: J Gray</b>	<b>Action requested: Discussion &amp; Decision</b>
<b>Discussion</b>	<p>J Gray provided an overview of the College complaints procedures and a summary of the Annual Report to the Scottish Public Services Ombudsman (SPSO) was submitted for review. While the number of complaints received was an increase from the previous year, the Committee noted that this was still a downward trend from its highest level in 2019-20.</p> <p>The range of complaints, their outcomes and opportunities for improvement were highlighted within the report. Given the relatively low volume of complaints, the Committee noted that identification of recurring themes was often challenging. However, J Gray advised that a theme for better centralised data on student outcomes had been identified and that work continues to consider the benefits of assessment boards to ensure consistent communication of student results. Another recurring theme currently under investigation relates to the manner in which students disclose disabilities and the subsequent management of their Personal Learning Support Plans (PLSP) to ensure all necessary adjustments are properly handled.</p> <p>The Committee acknowledged the importance of communicating trends with relevant staff and noted that this was undertaken during the performance review process.</p> <p>D Anderson noted the absence of remedial actions taken subsequent to complaint investigations. J Gray clarified that although this level of detail was not required for the SPSO report, this was recorded on a tracker, with designated owners of agreed actions ensuring their completion. Actions concerning staff members are extracted from the process and forwarded to the HR department for further handling. A brief overview of the appeals process was also provided. The Committee queried what additional actions were taken where complaints were of a more serious nature. J Gray provided assurance that they were referred on to other relevant bodies if required.</p> <p>P Hillard suggested that it would be beneficial for the Committee to conduct an in-depth examination of an agreed subject area to gain a more comprehensive understanding of the complaint process, its outcomes and any remedial actions implemented. This was agreed.</p>	
<b>Decision/Noted</b>	<ul style="list-style-type: none"> <li>• To note the report.</li> <li>• To undertake an in-depth examination of a complaint area at the next meeting.</li> </ul>	

*J Gray left the meeting.*

<b>Item AAC3-5.2</b>	<b>Freedom of Information (FOI) Annual Report 2022-23</b>	
<b>Paper No: AAC3-E</b>	<b>Lead: D McGowan</b>	<b>Action requested: Discussion &amp; Decision</b>
<b>Discussion</b>	<p>D McGowan provided members with an overview of the Annual FOI Report for 2022-23 which had recently been reviewed and updated to ensure clear reporting.</p> <p>The Committee noted that the College received 64 FOI requests and 4 Environmental Information requests during the period, marking a 183%</p>	

	<p>increase from the previous academic year. The report highlighted the number of late and closed requests, types of exemptions applied and the instances of internal reviews and applications to the Scottish Information Commissioner. The Committee discussed the origin and nature of these requests and welcomed the increase in compliant responses amidst a significant increase in requests.</p> <p>D McGowan further advised that work will be undertaken to review the types of information regularly requested and, to continue being open and transparent and to reduce strain on certain departments, the College will consider what information can be proactively published on the website. This will involve a review of the Model Publication.</p>
<b>Decision/Noted</b>	<ul style="list-style-type: none"> <li>• To note the report.</li> <li>• That the report be submitted at the next Board meeting for noting.</li> </ul>

<b>Item AAC3-5.3 Internal Audit Reports</b>			
<b>Item AAC3-5.3.1 Libraries and Learning Technologies (L&amp;T Academy)</b>			
<b>Paper No: AAC3-F</b>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Discussion</b>	<p>S Inglis provided an overview of the review on the arrangements in place for managing libraries and learning technologies within the Learning and Teaching Academy (LTA). The positive report emphasised key strengths that reflect a culture of continuous improvement, aimed at enhancing accessibility and support for all staff and students. S Inglis particularly highlighted the strong connections between the LTA, Digital Services and various curriculum areas; the framework to assess technology needs, the laptop loan scheme and establishment of hardship funds to help student facing digital accessibility issues.</p> <p>Opportunities for enhancement on guidance for staff and students on the use of Artificial Intelligence (AI) and the absence of a risk associated with use were advised with 1 low level, priority 3 recommendation provided. D McGowan advised that the Learning, Teaching and Student Experience Committee will consider a new entry on the Strategic Risk Register for approval by the June Board meeting.</p> <p>K Acheson confirmed that actions within all Internal Audit reports undergo a robust review process to ensure that realistic and achievable timescales are set. Draft reports are now sent directly to K Acheson for discussion and agreement on management responses before being returned to the auditors.</p>		
<b>Decision/Noted</b>	To note the overall Level of Assurance as Good.		

<b>Item AAC3-5.3.2 Quality Assurance and Enhancement</b>			
<b>Paper No: AAC3-G</b>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Discussion</b>	<p>S Inglis provided an overview of the review of the arrangements in place for quality assurance and enhancement. Key strengths highlighted that arrangements for quality assurance and enhancement align with the Scottish Funding Council (SFC) Guidance and there is readiness for the</p>		

	<p>new Tertiary Enhancement and the change from Education Scotland to Quality Assurance Agency. The College also has an established Quality Management Cycle.</p> <p>No material weaknesses were identified and 2 low level, priority 3 opportunities for enhancement were recommended including improvement of key documentation to define roles and responsibilities and the update of procedures to reflect the new curriculum enhancement process guidance.</p>
<b>Decision/Noted</b>	To note the overall Level of Assurance as Good.

<b>Item AAC3-5.3.3 Business Engagement including Skills Academies</b>			
<b>Paper No: AAC3-H</b>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Discussion</b>	<p>S Inglis provided background information on the review of Business Engagement which supports commercial income and key workstreams including Skills Academies, Flexible Workforce Development Fund (FWDF) and Young Person’s Guarantee (YPG).</p> <p>A summary of the main strengths highlighted that the Business and International Plan includes key annual deliverables and targets aligned to the Corporate Development Strategy. Faculty management also reported excellent support to enhance the understanding of ongoing work from the Business Development (BD) team. Despite the withdrawal of FWDF funding, the BD team demonstrated innovative and proactive ways to maintain business relationships.</p> <p>One opportunity for improvement identified was the potential extension of the CRM system (HubSpot) for international partnerships. This work is currently underway therefore no specific recommendation was raised.</p> <p>P Little confirmed that all Internal Audit reports are shared with Senior Managers for dissemination to team managers. K Acheson ensures compliance with all lessons learned and facilitates the sharing of areas of good practice.</p>		
<b>Decision/Noted</b>	To note the overall level of assurance as Good.		

<b>Item AAC3-5.3.4 Severance Schemes</b>			
<b>Paper No: AAC3-I</b>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Discussion</b>	<p>S Inglis reported that an internal audit of the College’s voluntary severance (VS) and compulsory redundancy (CR) schemes over the last 12 months was undertaken to ensure they aligned with expected practice. He highlighted that the VS and CR schemes were thorough and robust, and complied with the College’s policies, the guidance of the Scottish Funding Council (SFC) and the Scottish Public Finance Manual and statutory requirements.</p> <p>The internal audit also found that the severance schemes and associated organisational change process were carefully planned and implemented effectively, with evidence of robust scrutiny undertaken by the Board before</p>		

	<p>approving the VS and CR schemes. Progress on CR was also regularly reported to the Glasgow Colleges' Regional Board (GCRB) and the SFC. Following CR consultation, it was noted that changes to business plans were monitored and fed into operational resource planning decisions. The College also demonstrated a collective recognition of the emotional impact on staff.</p> <p>S Inglis confirmed that the internal audit did not identify any significant weaknesses; however, he explained at the time of the review staff acknowledged that there may be longer term effects of the severance schemes on teams. The College will continue to monitor the position and flag potential signs in these areas through feedback from managers. Mitigating actions for individuals most affected have also been put in place.</p>
<b>Decision/Noted</b>	<ul style="list-style-type: none"> <li>• To note the overall level of assurance as Good.</li> <li>• That the report be submitted for noting at the next Board meeting.</li> <li>• To note that the report may be shared by the Executive as they see appropriate.</li> </ul>

<b>Item AAC3-5.3.5 Payroll</b>			
<b>Paper No: AAC3-J</b>	<table border="1"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Discussion</b>	<p>S Inglis provided an overview of the review of payroll arrangements. Sample testing verified that pay and deductions had been correctly calculated, with salaries, rates and non-statutory deductions agreed to the relevant source documentation. One exception where source documentation could not be located was identified however as this deduction had been in place for an extended period of time. As this was an isolated case, no specific recommendation was raised although it was noted that annual checks on all non-statutory payroll deductions will now be made.</p> <p>Payments to part-time staff and for overtime and expenses claims also showed that processes operated as expected and correct payments were made in all sample cases. The report also showed that changes to employee data through the self-service portal raised no issues and, new start appointments and leavers were appropriately documented and accurately notified to payroll.</p>		
<b>Decision/Noted</b>	To note the overall level of assurance as Good.		

<b>Item AAC3-5.4 Internal Audit Progress Report</b>			
<b>Paper No: AAC3-K</b>	<table border="1"> <tr> <td style="width: 50%;">Lead: S Inglis</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: S Inglis	Action requested: Discussion & Decision
Lead: S Inglis	Action requested: Discussion & Decision		
<b>Decision/Noted</b>	To note the progress in delivering the annual plan for 2023-24 as at March 2024.		

<b>Item AAC3-5.5 Internal Audit Overview</b>			
<b>Paper No: AAC3-L</b>	<table border="1"> <tr> <td style="width: 50%;">Lead: K Acheson</td> <td style="width: 50%;">Action requested: Discussion &amp; Decision</td> </tr> </table>	Lead: K Acheson	Action requested: Discussion & Decision
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<b>Discussion</b>	<p>K Acheson provided a report on the College’s implementation of recommendations and actions from audits. Since the publication of the report, 28 actions remain outstanding. 12 actions are overdue from the original completion date and 14 actions are due for completion by the end of March. Additionally, 2 actions will have extended completion dates but these will be realistic and will be closed by the new deadline. Tracking of outstanding actions continues to ensure that all are completed within the agreed timeframes.</p> <p>D Anderson sought clarity on why completion dates have been extended would be beneficial, noting that the revised dates now display as ‘green’ instead of ‘amber’ despite taking longer to close down. K Acheson reassured that with the current more robust process in place, such occurrences should decrease in future. However, if they continue, genuine reasons will be included in the breakdown to provide a clearer understanding of why these changes were made.</p> <p>P Hillard praised the new process involving operational managers to address outstanding actions and meet agreed deadlines. However, he stressed the importance of informing managers that the Committee expects actions to be closed within the specified deadlines. K Acheson further assured that appropriate support was in place to achieve this objective.</p>
<b>Decision/Noted</b>	To note the report.

<b>Item AAC3-5.6</b>		<b>Internal Audit Outstanding Action Proposal</b>	
<b>Paper No: AAC3-M</b>	Lead: K Acheson	Action requested: Discussion & Decision	
<b>Discussion</b>	<p>K Acheson reported on a proposal to merge two outstanding Internal Audit actions. The April 2019 Data Protection audit recommendation to put in place a robust Data Protection Compliance Framework had not been implemented due to a gap in DPOs. The current DPO has made good progress on a separate action to implement and complete Faculty records of processing activities (ROPAs). Once these are completed, the Framework can be finalised (including mandatory training and an annual health check).</p> <p>As the 2019 action is dependent on the completion of the 2022 action to complete Faculty ROPAs, it was proposed that both actions be merged with a revised completion 30 August 2024. Members were content to approve.</p>		
<b>Decision/Noted</b>	That the proposed merge of two outstanding actions was approved.		

<b>Item AAC3-5.7</b>		<b>Strategic Risk Review</b>	
<b>Paper No: AAC3-N</b>	Lead: D McGowan	Action requested: Discussion & Decision	
<b>Discussion</b>	<p>D McGowan confirmed to members that there were no changes to risk scores reported to the Committee following the most recent quarterly review.</p> <p>D Anderson considered that the risk score for SR7 (Failure to achieve improved business development with stakeholders) was rated too low. D McGowan clarified that SR7 was reported under the remit of the</p>		

	Development Committee for consideration. He suggested that changes to risk scores could be proposed during the review of the Risk Register at the upcoming Board meeting for consideration by that Committee.
Decision/Noted	That the Strategic Risk Register for risks reported to the AAC was approved.

<b>Item AAC3-6.1</b>	<b>Data Protection Officer Quarterly Report</b>	
Paper No: AAC3-O	Lead: S Lodge	Action requested: Note
Decision/Noted	To note the report.	

<b>Item AAC3-7</b>	<b>Any Other Notified Business</b>	
Paper No: Verbal	Lead: Convener	Action requested: Discussion & Decision
Decision/Noted	The Committee agreed to incorporate a regular agenda item for conducting in-depth analysis of specific issues, with the exception of the December meeting. D McGowan will progress this matter.	

<b>Item AAC3-8</b>	<b>Disclosability of Papers</b>	
Paper No: Verbal	Lead: D McGowan	Action requested: Note
Decision/Noted	That the disclosability of the papers remain unchanged.	

<b>Item AAC3-9</b>	<b>Date of Next Meeting</b>	
Paper No: Verbal	Lead: Convener	Action requested: Note
Decision/Noted	Tuesday 11 June 2024.	

*The meeting closed at 1655 hours.*



## ACTION POINTS ARISING FROM THE MEETING

Item	Description	Owner	Target Date
AAC3-4.2 14 03 24	<b>Document and Records Retention Policy:</b> Clarify referenced made in relation to deletion of lawful purpose items.	SL	ASAP
AAC3-4.3 14 03 24	<b>Risk Management Policy:</b> Update as agreed and submit for approval at next Board meeting.	DM	BoM 27 03 24
AAC3-5.1 14 03 24	<b>Annual Complaints Report 2022-23:</b> Undertake an in-depth examination of a complaint area at next meeting.	DM/JG	AAC 11 06 24
AAC3-5.2	<b>FOI Annual Report 22-23:</b> Submit at next Board meeting.	DM	BoM 27 03 24
AAC3-5.3.4 14 03 24	<b>IA Report – Severance Schemes:</b> Submit for noting at next Board meeting and raise to the attention of Board members.	DM/PH	BoM 27 03 24
AAC3-7 14 03 24	<b>AONB:</b> Incorporate regular agenda item for conducting in-depth analysis of specific issues.	DM	Ongoing

## ACTION POINTS ARISING FROM PREVIOUS MEETINGS

Item	Description	Owner	Target Date
AAC2-4.3 05 12 23	<b>Annual Report and Accounts:</b> To be tabled for final approval of the Board of Management at the next meeting.	AD/DM	14 12 23 <b>Complete</b>
AAC2-5.4.3 05 12 23	<b>Fraud Prevention, Detection &amp; Response:</b> To highlight the outcome of the recent internal audit and the 'good' level of assurance to the Board at the next meeting.	PH	14 12 23 <b>Complete</b>
AAC1-5.6 12 09 23	<b>Internal Audit Overview:</b> Consider implementation of Performance measures.	KA/P Hillard	Ongoing