

## Board of Management

### Meeting of the Audit and Assurance Committee

MINUTE OF 1<sup>st</sup> MEETING HELD ON TUESDAY 3 SEPTEMBER 2024 AT 1500 HRS (AAC1)

Present	
Paul Hillard (Convener)	Charandeep Singh
Manira Ahmad	
In attendance	
Jack Green (Co-opted)	Paul Little
Karen Acheson	Sheila Lodge
Andrew Dickson	Drew McGowan
Jon Gray	Laura Shields
Stuart Inglis (Henderson Loggie)	
Mark Laird (Audit Scotland)	Ann Butcher (Minute)
Apologies for absence	
David Archibald (Henderson Loggie)	Amy Paterson
Morgan O'Neill	

*P Hillard welcomed M Ahmad and J Green to their first meeting of the Committee.*

Item AAC1-1	Apologies for Absence	
Paper No: Verbal	Lead: Convener	Action requested: Note
Decision/Noted	Apologies were received from D Archibald, M O'Neill and A Paterson.	

Item AAC1-2	Declarations of Interest	
Paper No: Verbal	Lead: Convener	Action requested: Note
Decision/Noted	No declarations were made by members.	

Item AAC1-3	Items to be Discussed Privately with Auditors	
Paper No:	Lead: Convener	Action requested: Note
Decision/Noted	No matters were required to be discussed privately with auditors.	

Item AAC1-4.1	Minute of the Meeting held on 11 June 2024	
Paper No: AAC1-A	Lead: Convener	Action requested: Approve

**Decision/Noted**

The Committee approved the minute.

<b>Item AAC1-4.2</b>		<b>Committee Annual Report 2023-24</b>	
<b>Paper No: AAC1-B</b>	Lead: D McGowan	Action requested: Approve	
<b>Discussion</b>	<p>D McGowan provided an overview of the Committee's high-level review and record of deliberations and decision-making throughout academic year 2023-24. P Hillard suggested including reference to the new system for managing outstanding internal audit actions implemented by the College Compliance Auditor. This addition was agreed.</p> <p>The Committee's remit and responsibilities were discussed. It was confirmed that asset management and disposal would fall under the remit of the Finance Committee (FC). It was noted that associated risks are not currently reflected in the Risk Register, and it was agreed that this would be addressed at next week's FC meeting.</p> <p>P Little suggested that the Committee reports should be used to brief managers as they are consistent and easily understandable. This suggestion was supported by the Committee.</p>		
<b>Decision/Noted</b>	<p>To approve Committee Annual Report 2023-24, subject to agreed amendment.</p> <p>To consider associated risks under asset management and disposal at the next FC meeting.</p>		

<b>Item AAC1-5.1</b>		<b>Deep Dive – Complaints Process and Outcomes</b>	
<b>Paper No: AAC1-C</b>	Lead: J Gray	Action requested: Approve	
<b>Discussion</b>	<p>J Gray provided a detailed summary of complaints management. Complaints are received through a formal process, guided by the College's policies and procedures. The process is largely student and stakeholder focused, aimed at enhancing customer satisfaction and the student experience rather than serving as a platform for staff to raise issues.</p> <p>According to the procedure, complaints are assigned a handling timeframe, determining if they can be resolved within five working days (Stage 1) or within 20 working days (Stage 2). Following the investigation process, each complaint results in an outcome categorised into four distinct groups (upheld, not upheld, partially upheld and resolved).</p> <p>The complaint handling process is well established, with experienced staff managing the operations. Each complaint has a designated action, owner, and completion date, ensuring all outstanding actions are completed within the same academic year. All lessons learned and insights are used to drive continuous improvement to the benefit the College.</p> <p>J Gray informed that the College is required to comply with the Scottish Public Services Ombudsman's (SPSO) Complaints Handling Procedure and report annually on performance. The SPSO Complaint Annual Report for academic year 2023-24 was submitted and a summary of the statistical data was provided. Additionally, two case studies were presented to</p>		

illustrate the complexity of complaints and how the process effectively manages these risks.

Members congratulated College on the reduced number of complaints compared to the previous year. However, they particularly noted that that 169 complaints were received regarding industrial action and course closures.

The outcome of complaints categorised by theme were reviewed and members were informed that appropriate actions are taken for each upheld complaint. These actions may include implementation of training and other measures to improve services and protocols within the College. Complaints relating to staff conduct that are upheld are shared with HR and line managers for further action.

It was noted that Diversity and Equality received 0 complaints, a reduction on the previous year, recognising the strength of existing policies, which will continue to be actively championed. M Ahmad suggested that investigation into equity of access for raising complaints be further considered to ensure that everyone can voice issues without any barriers.

P Hillard thanked J Gray for the valuable report highlighting its relevance to the Committee's responsibilities. J Gray informed that the annual SPSO report will be published on the College website and will inform the annual review of academic quality, reported as part of the Scottish Funding Council's (SFC) new quality arrangements, the Tertiary Quality Enhancement Framework (TQEF).

**Decision/Noted**

To approve the publication of the 2023-24 Complaint Handling report.

*J Gray left the meeting.*

<b>Item AAC1-5.2</b>		<b>Draft Governance Statement</b>	
<b>Paper No:</b> AAC1-D	Lead: D McGowan	Action requested: Approve	
<b>Discussion</b>	<p>D McGowan submitted the draft Governance Statement, which provides a comprehensive overview of the College's governance arrangements in place during 2023-24 and will be included in the Annual Report and Accounts. It was noted that the internal audit opinion will be added once the ongoing Internal Audit work and Annual Report is finalised.</p> <p>P Little emphasised the importance of demonstrating best value and D McGowan confirmed that this will be highlighted in the report's performance section. The Committee noted that a 'Best Value' summary document will be presented at the Senior Management Team (SMT) for discussion and has already been well received by the external auditors.</p>		
<b>Decision/Noted</b>	To approve the draft Governance Statement.		

<b>Item AAC1-5.3</b>		<b>Data Protection Officer Annual Report</b>	
<b>Paper No:</b> AAC1-E	Lead: D McGowan	Action requested: Discuss	
<b>Discussion</b>	S Lodge reported that the Data Protection (DP) gap analysis illustrates current levels of compliance, identifying areas where compliance is being		



met, where improvement is needed and where issues are being addressed. Progress is under way in implementing controls to mitigate compliance risks.

A new template has been developed for use with overseas recruitment partners to govern the cross-border sharing of personal data. The review of current third-party agreements will be risk based and conducted as part of the ongoing assurance exercise.

The College continues to receive extensive Subject Access Requests (SARs), including those from authorised external agencies for students and staff. C Singh suggested that a detailed breakdown of SARs from external bodies would be beneficial, and this will be provided.

The challenges faced in reviewing substantial documentation during the processing of requests was noted. S Lodge assured that where possible, individuals are asked to narrow the scope of their requests. M Ahmad suggested exploring the use of AI to streamline this process and will provide contact names for consideration.

All Data Protection policies and procedures were updated during 2023-24, with one document pending approval later this month.

Members noted that the focus of Department and Faculty DP compliance health checks has changed to concentrate on high-risk areas and those with amber ratings in the gap analysis.

**Decision/Noted**

To provide breakdown of SARs from external bodies.  
To note the Data Protection Annual Report 2023-24.

**Item AAC1-5.4 Data Breaches 2023-24**

<b>Paper No: AAC1-F</b>	Lead: D McGowan	Action requested: Approve
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<b>Discussion</b>	<p>S Lodge provided a report on the data breaches that occurred during academic year 2023-24. The College suffered eight data breaches with the majority indicating a lack of awareness and/or failure to consider the requirements of data protection law. S Lodge assured that appropriate Data Protection and Cyber Security training is provided to all staff and that the College continues to promote a culture of reporting issues to ensure they are addressed and managed effectively.</p> <p>Members were informed of one serious breach which was reported to the Information Commissioner’s Office. A full investigation has been undertaken and a final report relating to the incident is being prepared. An update on the outcome will be provided in the next Data Protection Officer update report.</p>
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**Decision/Noted**

To note the report.  
To provide an update on the outcome of the most recent severe breach in the next DP Officer report.

**Item AAC1-5.5 Internal Audit Reports**

**Item AAC1-5.5.1 Leadership and Management Development**

<b>Paper No: AAC1-G</b>	Lead: S Inglis	Action requested: Discuss
<b>Discussion</b>	<p>S Inglis reported on the internal audit of the arrangements in place for leadership and management development. Findings showed that the People and Culture strategy identifies the vision for the workforce with delivery supported by the operational plan. Appropriate systems have been established to support talent management including a programme of training for new and existing managers, accessed through the Learner Experience Platform (MyDevelopment), with development for teaching staff provided through a programme established by the Learning and Teaching Academy.</p> <p>Opportunities for enhancement were highlighted including increased staff participation in the MyPDR process, Core Skills for Managers Programme and the CV module. 3 low priority recommendations were outlined and will be addressed by the Organisational Development team. S Lodge reported on further training opportunities for staff, including individual arrangements in place.</p>	
<b>Decision/Noted</b>	To discuss the report.	

**Item AAC1-5.5.2    Cleaning Management**

<b>Paper No: AAC1-H</b>	Lead: S Inglis	Action requested: Discuss
<b>Discussion</b>	<p>S Inglis provided an overview following a review of the arrangements in place for Cleaning Management. While the findings showed that the quality of cleaning is regularly assessed through visual inspection, it was noted that there is no formal audit process in place for periodically inspecting and documenting the quality of work undertaken. Formal training mechanisms are also not in place to ensure cleaning works are consistent across campuses. 2 low level recommendations were highlighted however, members were informed that actions are already in progress to address these issues.</p> <p>The high level of absence rates and staff turnover were highlighted. While no recommendation has been made, members was informed that support to help reduce absence rates and staff turnover is being provided, with actions raised to address any identified areas of concern.</p>	
<b>Decision/Noted</b>	To discuss the report.	

**Item AAC1-5.5.3    Student Fees**

<b>Paper No: AAC1-I</b>	Lead: S Inglis	Action requested: Discuss
<b>Discussion</b>	<p>S Inglis reported on the findings following a review of the systems in place for Student Fees. The positive report highlighted that during testing of student fee invoices, fees had been correctly raised in all instances. Fee waiver testing confirmed that appropriate information at enrolment stage, to identify students eligible for fee waivers is also obtained. The College also maintains a high level of debt collection procedures. From sample testing of student fee debts, appropriate debt management processes had been followed in all cases.</p>	

	Members noted that a student fee project is currently in development to allow automation of student fee checks for full implementation by academic year 2025-26.
<b>Decision/Noted</b>	To discuss the report.

<b>Item AAC1-5.5.4 Project Management</b>	
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<b>Paper No: AAC1-J</b>	Lead: S Inglis	Action requested: Discuss
<b>Discussion</b>	<p>Following the review of project management arrangements, S Inglis reported that overall, the level of assurance was satisfactory with 1 medium priority and 1 low priority recommendation made.</p> <p>While the current Project Coordinator was a great asset to the PMO (project management office) with significant contributions allowing the delivery of projects, recruitment for a second project coordinator has proved difficult. This has coincided with a higher than usual workload due to the recent College transformation, leading to limited resources within the department. Recruitment of suitable candidates is ongoing.</p> <p>The PMO Project Handbook is now in need of review and findings showed that some project files did not include documentation required for completion by Project Leads. S Lodge assured that the Project Handbook will be updated, and a document checklist will be designed by the end of October.</p>	
<b>Decision/Noted</b>	To discuss the report.	

<b>Item AAC1-5.6 Internal Audit Progress Report</b>	
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<b>Paper No: AAC1-K</b>	Lead: S Inglis	Action requested: Discuss
<b>Discussion</b>	S Inglis reported to the Committee that outstanding internal audits will be completed by the end of September. Final reports will be submitted at the November meeting.	
<b>Decision/Noted</b>	To discuss the report.	

<b>Item AAC1-5.7 Internal Audit Overview</b>	
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<b>Paper No: AAC1-L</b>	Lead: K Acheson	Action requested: Discuss
<b>Discussion</b>	<p>K Acheson provided a summary of her role as Audit Compliance Officer, serving as the liaison between the College and auditors, attending individual audit meetings and ensuring accurate findings. She coordinates implementation with action owners and provides feedback to auditors.</p> <p>Members were informed that 12 actions are currently outstanding, with 4 overdue. Internal auditors have completed their final annual follow up review which has now been handed over to K Acheson. Good progress has been made in implementing the recommendations with 34 of the 41 recommendations being categorised as 'fully implemented' and 4 recommendations showing as open. 3 'considered but not implemented'</p>	

	<p>recommendations were proposed as closed and the rationale was provided to members for consideration. Additional clarification was provided for Recommendation 2 and all 3 closures were approved.</p> <p>Members thanked K Acheson for the significant of progress made since the last meeting and requested that this appreciation be passed on to all colleagues.</p>
Decision/Noted	<p>To discuss the report.</p> <p>To approve the closure of 3 recommendations.</p>

<b>Item AAC1-5.8</b>	<b>Strategic Risk Review</b>	
Paper No: AAC1-M	Lead: D McGowan	Action requested: Discuss
Discussion	<p>D McGowan tabled the outcome of the most recent quarterly review of the Strategic Risk Register and Management Action Plans (MAPs) reported to the Committee for discussion. Due to the additional responsibilities and requirements of the new tertiary quality enhancement framework arrangements, a change to SR9, failure to manage performance and achieve improved performance risk score was recommended from 15 to 20.</p>	
Decision/Noted	<p>To agree an increased risk score for SR9 from 15 to 20 and recommend to the Board for final approval.</p>	

<b>Item AAC1-6</b>	<b>Any Other Notified Business</b>	
Paper No: Verbal	Lead: Convenor	Action requested: Note
Decision/Noted	<p><b>Deep Dive Topic</b></p> <p>It was noted that future discussions and insights would continue to focus on the Committee's role in providing assurance, recognising that this is an early approach and there may be better methods to consider moving forward. It was agreed that Cyber Security would be reviewed in this format at the next meeting. S Renton will be invited to attend.</p>	

<b>Item AAC1-7</b>	<b>Review of Meeting</b>	
Paper No: Verbal	Lead: D McGowan	Action requested: Note
Decision/Noted	<p>The following matters were highlighted for particular attention of the Board:</p> <p>A data breach update will be provided at the next meeting and reported to the Board via the Risk Register and associated risk MAPs.</p>	

<b>Item AAC1-8</b>	<b>Disclosability of Papers</b>	
Paper No: Verbal	Lead: D McGowan	Action requested: Note
Decision/Noted	<p>That the disclosability status of papers be retained.</p>	

<b>Item AAC1-9</b>	<b>Date of Next Meeting</b>	
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Paper No:  
Verbal

Lead: Convener

Action requested: Note

Decision/Noted

The next meeting will be held on 27 November 2024.

*The meeting closed at 1726 hours.*



**ACTION POINTS ARISING FROM THE MEETING**

<b>Item</b>	<b>Description</b>	<b>Owner</b>	<b>Target Date</b>
AAC1-4.2 03 09 24	<b>Committee Annual Report:</b> Consider associated risks under asset management and disposal at the next FC meeting.	DM	FC Mtg 11 09 24
AAC1-5.3 03 09 24	<b>DP Officer Annual Report:</b> Provide breakdown of SARs from external bodies.	SL	ASAP
AAC1-5.4 03 09 24	<b>Data Breaches:</b> Provide update on the outcome of recent severe breach in DP Officer report.	SL	AAC Mtg 27 11 24
AAC1-6 03 09 24	<b>AONB, Deep Dive Topic:</b> Review Cyber Security at next meeting. S Renton to be invited to attend.	DM/AD	AAC Mtg 27 11 24

**ACTION POINTS ARISING FROM THE MEETING**

<b>Item</b>	<b>Description</b>	<b>Owner</b>	<b>Target Date</b>
AAC4-4.2 11 06 24	J Gray to facilitate a deep dive on the College's complaints process and outcomes at the Committee's meeting in September.	J Gray	03 09 24 <b>Complete</b>
AAC4-4.5.6 11 06 24	K Acheson to consider changes to the quarterly report, including reporting on individual actions and dependencies.	K Acheson	03 09 24 <b>Complete</b>