

**Audit Committee**

*Agreed*

**12 June 2025**

**Members** Rachael Fisher (Chair); Suzanne Lyne; Shawez Mir; Kunal Parkash

**Attendees** Maxine Deslandes (Deputy Chief Operating Officer); Matt Fawcett (Deputy Principal (Planning, Partnerships and Projects)); Sara Muir (Director of Estates and Infrastructure); Richard Ward (Director of Governance)

Keri Williamson (Scrutton Bland); Shachi Blakemore (Buzzacott)

**1 Attendance**

The Chair welcomed members to the meeting.

**2 Declarations of interest**

No interests were declared.

**3 Minutes**

***Resolved, That the minutes of the meeting held on 20 March 2025 be approved as a correct record.***

**4 Health & Safety Report (Spring)**

The Director of Estates and Infrastructure presented the second termly health and safety report of the year. There had been a reduction in the number of accidents compared to the same period the previous year, and two serious accidents, one of which occurred at the Hammersmith & Fulham campus and the other abroad. The accident at Hammersmith had involved a learning support assistant twisting her ankle in the Colet Gardens area of the site and requiring a couple of weeks off work to recover. The accident had been reported to the Health and Safety Executive but this had not led to any further action being taken. A number of practical steps to reduce the risk of the accident taking place again had been introduced. The College had maintained a good level of completion of essential health and safety awareness training for staff, reaching 98% in early May.

**5 Risk management**

The Director of Governance presented an update on the College's strategic risk register, which had been reviewed in advance of the meeting as part of the College's risk management arrangements. The most significant change on the scores was a fall in the net risk score relating to the quality of educational provision, which had decreased in light of the 'Good' Ofsted outcome achieved by the College earlier in the month. The other risk that had reduced slightly was on the estates strategy, where positive external engagement by the College and the outcome of the appeal against the listing decision reduced the net risk from 'significant' to 'high'.

In the discussion that followed, the Committee asked for greater detail on the action plans being put in place to drive risks which were currently assessed as 'high' or 'significant' into 'acceptable'. The Director of Governance commented that on the financial risks, the steps taken by the College around the time of the last Board meeting in April in light of the in-year and future income risks constituted the action plan. The Deputy Principal (Planning, Partnerships and Projects) added that the College's operational plan played a role in managing many of the College's key strategic risks. A governor proposed that adding cross-references where this was the case between the strategic risk register and the operational plan might be of benefit to the College. The Director of Governance suggested that the College might consider introducing a board assurance framework to provide greater line of sight on performance and mitigation of strategic risks.

## **6 Fraud report**

The Deputy Chief Operating Officer reported that there had been no instances of fraud or suspected fraud since the last meeting of the Committee.

## **7 Subcontracting update**

The Deputy Principal (Planning, Partnerships and Projects) presented an update on the College's subcontracting arrangements and performance as they stood at the end of May 2025. He informed the Committee that the College was proposing to have no subcontracted provision other than the 62 16-18 learners with the Rhythm Studio in 2025/26. This would involve a doubling of internal activity and continue the planned and tapered reduction in subcontracting on AEB/ASF delivery.

The Committee discussed the impact of the proposed reduction in subcontracting activity. The Deputy Principal noted that the quality of subcontracted provision was good and the significant increase in internal delivery would be challenging in the year ahead. The Chair asked whether the College had the resources to deliver the provision internally. The Deputy Principal commented that this had been a focus during the budget setting process and that the priority had to be on maintaining quality.

## **8 Internal audit assignments**

Keri Williamson presented the risk and compliance report on subcontracting, which had resulted in a report with 100% compliance and no recommendations. On the College's progress report, the human resources assignment was underway, with assignments on funding assurance, estates management and business continuity scheduled for July. The Chair asked whether having so many assignments in July would create resource challenges for the College. The Deputy Chief Operating Officer responded that she did not expect that to be the case.

## **9 External audit strategy**

Shachi Blakemore presented the external audit strategy for 2025/26. The plan was similar to 2024/25 as there had not been any significant changes in what colleges were expected to disclose. The *Post-16 Audit Code of Practice* had been superseded by the *Framework for auditors and reporting accountants of colleges* but the essentials remained the same. Shachi Blakemore drew the Committee's attention to failures in governance at Weston College and that revised guidance from the Department had been published. She added that Cyber Essentials certification was a requirement for all Colleges, and the Deputy Principal confirmed that the College was on track to achieve this by the end of the year.

The Director of Governance presented a short paper noting that the tender for external audit services had been postponed and that Buzzacott would be reappointed for an additional year. Shachi Blakemore presented a new letter of engagement which was substantially the same albeit with changes to terminology. The Committee agreed to take the letter to the Board at the end of the month for signature.

## **10 Internal audit tracker**

The Deputy Chief Operating Officer presented the internal audit tracker, which now contained 26 outstanding recommendations. It was hoped that some recommendations could be closed off as part of the assignments taking part in July prior to the change in internal audit provider. She proposed that medium and higher level recommendations be prioritised, and seven lower level recommendations be closed off. A governor asked how the process of closing recommendations during the transition between internal audit firms would work. The Deputy Chief Operating Officer answered that there would be no fundamental difference.

## **11 Committee evaluation**

Governors commented positively on the meeting but noted that the scheduled business had left a lot of time which could have been used for greater discussion or deep dives on specific areas within the risk register or audit assignments.

The Deputy Chief Operating Officer raised the matter of the Committee's involvement in the production and agreement of the next internal audit plan. The Director of Governance commented that it was important that the Committee felt that it had ownership of the internal audit plan and active discussion of a draft plan was something that the Committee should aim for.

**12 Next meeting**

6.00 pm on 25 September 2025.