



THE CORNWALL COLLEGE GROUP

**Minutes of the Audit and Risk Committee meeting held on
Wednesday 9 March 2022 using a blended approach with some Governors
at the St Austell campus and others joining via Microsoft Teams**

Committee members present

Ian Tunbridge	IT	Committee Chair
Jonathan Mashen	JM	Governor
Anne Thomas	AT	Governor
Jane Warren	JW	Governor
Ellen Winser	EW	Governor

In Attendance

Adrian Ford	AF	Group Deputy Principal Group Operations (GDPGO)
Adam George	AG	RSM (Internal Auditors)
Wendy Randle	WR	Director of Governance
Craig Sullivan	CS	Bishop Fleming (External Auditors)
Graeme Sinclair	GS	Director of Finance

		Action
1	<p>WELCOME, APOLOGIES AND DECLARATION OF INTERESTS</p> <p>Apologies received and accepted from Tracey Hooper and Leon Sargent. It was reported that Leon Sargeant has resigned from his position of co-opted Committee member with immediate effect due to personal reasons. This would be Tracey Hooper's last Audit and Risk Committee meeting.</p> <p>There were no further declarations of interest to those contained on the members register.</p>	
2	<p>MINUTES AND MATTERS ARISING</p> <p>2.1 The minutes of the meeting held on 29 November 2021 were agreed to be an accurate reflection of the meeting and were approved by the Committee.</p> <p>2.2 Matters arising The Committee reviewed the matters arising report, it was noted that the report would be reviewed at agenda planning to ensure actions are resolved promptly.</p>	WR
3	<p>INTERNAL AUDIT</p> <p>3.1 Internal audit benchmarking report 2020/21 The Committee received the report prepared by RSM and circulated prior to the meeting, which provided a comparison to other RSM clients.</p>	

3.2	<p>Internal Audit Programme Progress Report 2021/22 The Committee received the report prepared by RSM and circulated prior to the meeting and were assured that the Internal Audit plan for 2021/22 would be completed by the June Committee meeting. It was noted that the briefing document circulated provides an outline of RSM's processes; noting that they have achieved the highest level that can be awarded.</p>	
3.3	<p>Internal Audit Reports: Staff Utilisation The Committee received the Staff Utilisation Internal Audit report circulated prior to the meeting and noted the assurance provided by this report.</p>	
4	<p>ADDITIONAL AUDIT REPORTS</p>	
4.1	<p>CONCORDE/ CCMS The report circulated prior to the meeting was received by the Committee. Further detail and actions contained in the confidential minutes.</p>	
4.2	<p>2019-20 ILR Higher Education Student Data (shared with HE Committee) Deferred to the next meeting. It is noted that the HE Committee have received this report.</p>	WR
5	<p>STANDING AGENDA ITEMS</p>	
5.1	<p>Rolling review of high and medium Audit recommendations from previous Audits The Committee received the paper circulated prior to the meeting. A Committee member noted the outstanding action linked to the walk through of the Business Continuity Plan and the asset register slippage, noting the need for the Committee to consider risk appetite and the duration the Committee and TCCG are prepared to hold a risk for; this will be considered at the next meeting.</p> <p>In response to a Committee member question on staff GDPR training compliance and whether measures in place to improve on progress in this area were sufficient, it was reported that a date has been agreed for when mandatory training must to be completed by.</p>	GS
5.2	<p>Business Continuity Plan (BCP) The Business Continuity Plan, updated to incorporate Executive Leadership Team (ELT) feedback and Committee member challenge, had been circulated prior to the meeting. Following comments made in the previous agenda item and via email in advance of the meeting, the Committee recommended approval of the BCP to the Board. Responses to Committee member challenge will be completed via email.</p>	IT GS
5.3	<p>Additional services provided by External Auditors There were no external services provided other than to Concorde for their weekly payroll.</p>	
5.4	<p>Board Assurance Framework (BAF) The Board Assurance Framework had been circulated prior to the meeting. The BAF provides clarity on internal and external assurance and should be used by Committee and Board to identify sources to triangulate information received; TCCG plan to link the BAF to the Risk Register.</p> <p>It was proposed that a session outlining the key documents/ tools now available to aid good governance be scheduled for Board. The Committee were pleased with the BAF and recommend to Board its approval.</p>	IT
5.5	<p>Risk Register The risk register was circulated prior to the meeting; the Committee reflected on the improving quality of the document. The following areas were reviewed;</p> <ul style="list-style-type: none"> ▪ TCCG plan to develop the risks linked to quality of education. 	

5.6	<ul style="list-style-type: none"> ▪ A discussion took place on staff retention, RSM reported this was an area of concern for many Colleges across the country. ▪ The EBITDA is improving. ▪ CCMS will be added to the risk register ▪ Risk risks linked to Cyber Security to be considered as part of agenda item 8. An update will be shared within this agenda item regarding email addresses. <p>The Committee committed on the quality of additional documentation provided by management. This is aiding understanding and also encouraging quality challenge from the Committee.</p> <p>Whistleblowing update None to report.</p>	AF
6 6.1 6.2 6.3	<p>HEALTH AND SAFETY</p> <p>6.1 Health and Safety Policy Circulated prior to the meeting, it was noted the policy includes the Group’s strategic intent and had been heavily debated at ELT. The Committee agreed the policy was robust and agreed to recommended to Board its approval.</p> <p>6.2 Health and Safety KPI’s The Board received the paper circulated prior to the meeting. KPIs will be reported against at the next Committee meeting.</p> <p>6.3 Health and Safety Lead Governor It was reported that the Health and Safety Lead Governor position was due to become vacant and Governors from this Committee were invited to consider the position; the role description will be circulated to the Committee with expressions of interest made to the Director of Governance.</p>	IT RC WR ALL
7	<p>SUSTAINABILITY POLICY</p> <p>The Committee received the policy circulated prior to the meeting noting the significant amount of work that has been completed by TCCG. The Committee agreed to recommend to Board the approval of the policy.</p>	IT
8	<p>CYBER SECURITY TO INCLUDE-</p> <p>A paper was shared prior to the meeting and the Head of IT services was invited to present the highlights to the Committee as noted;</p> <ul style="list-style-type: none"> ▪ much of the IT infrastructure has been replaced with an expectation to continue to replace IT equipment each year to maintain cyber security. Details of the devices supported by the IT department were shared. ▪ in 2021, 23 Colleges were impacted by ransomware, evidencing an increase in cases in the sector; TCCG has experience two significant security scares. ▪ detail of the risk mitigation measures in place were shared, highlighting the increase in resources required in this area. ▪ TCCG are externally assessed by JISC; details of penetration testing completed were shared. <p>A discussion took place on the use of personal Governor email addresses, TCCGs offer to provide Governors with suitably secure devices and TCCGs commitment to supporting Governors with IT security. CS from Bishop Fleming proposed TCCG consider including Governors in testing and to incorporate training for the Board.</p> <p>The Committee were assured by the presentation and thanked the Head of IT.</p>	

9	<p>ESFA UPDATED COLLEGE GOOD PRACTICE GUIDELINES ON THE SCOPE OF WORK OF AUDIT COMMITTEES</p> <p>The Committee received the good practice guidance.</p>	
10	<p>PRIVATE MEETING OF COMMITTEE WITH AUDITORS</p> <p>CS from Bishop Fleming reported there had been minimal interaction with the College since December and that this would increase when planning commenced.</p> <p>AG from RSM reported there were no concerns to raise.</p> <p>CS and AG were thanked for their time and they left the meeting.</p>	
11	<p>APPOINTMENT OF INTERNAL AUDITORS</p> <p>The Committee were informed that the internal auditor tender has gone out on the framework; providers have 30 days to respond. The Committee were pleased to learn that the tender had been based on quality not price. It was proposed that the Committee review presentations on the 29/04 with a recommendation of appointment made at the Board meeting on 04/05.</p>	GS
12	<p>DATES AND ADDITIONAL DATES OF NEXT MEETINGS</p> <p>22 June 2022 at midday.</p>	