



HARTPURY

AUDIT AND RISK MANAGEMENT COMMITTEES HARTPURY UNIVERSITY AND HARTPURY COLLEGE

Minutes

10am Thursday 31st March 2022

Via Videoconferencing – Microsoft Teams and Gordon
Canning Room

Members

Ms Lisa Oliver
Professor Ian Robinson
Dr John Selby
Mr David Seymour
Mr Patrick Brooke
Mrs Barbara Buck
Ms Mary Heslop

University Audit Committee

Apologies
Present
Present (Vice-Chair)
Present (Co-opted for meeting)
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-
-

College Audit Committee

-
-
-
Present (Chair)
Present
Present

In Attendance

Ms Lynn Forrester-Walker
Ms Gillian Steels
Mr Iain Williams
Ms Helen Cargill
Mr Russell Marchant

Present (Chief Operating Officer)
Present (Clerk to the Board)
Present (Head of Finance)
Present (TIAA)
Present (Vice-Chancellor)

Present (Chief Operating Officer)
Present (Clerk to the Board)
Present (Head of Finance)
Present (TIAA)
Present (Principal)

		ACTION & DATE
AR01/03/22	<p>Apologies & Confirmation of Quoracy Apologies were as noted above.</p> <p>It was confirmed that the University Audit and Risk Management Committee and the College Audit and Risk Management Committee meetings were quorate.</p>	
AR02/03/22	<p>Declaration of Interest. The Clerk advised that members' interests would be taken as those disclosed in the Register of Members Interests. There were no further declarations of members' interests for agenda items.</p>	
AR03/03/22	<p>Minutes of the Meetings – 22nd November 2021 The minutes of the University Audit and Risk Management Committee and the College Audit and Risk Management Committee 22nd November 2021 meetings were APPROVED as true records.</p>	

AR04/03/22	<p>Matters Arising</p> <p>The updated Action Log was noted.</p> <p>It was confirmed all the Accounts (including subsidiaries) had been submitted as required in the agreed format.</p> <p>Deep Dive for Risks – Agreed future sessions should be Safeguarding and Business Continuity.</p>	
AR05/03/22	<p>Audit Recommendations Follow Up Update</p> <p>The Committee considered the update which detailed that of the two ongoing recommendations one had now been completed and the other had been delayed but was now targeted to be complete by 30th April. It was confirmed this was on schedule.</p> <p>The Audit Recommendations Update Report was NOTED.</p>	
AR07/03/22	<p>Procurement Compliance</p> <p>The Head of Finance presented the Procurement Compliance Report and provided assurance where there had been any variation on the standard compliance requirements, for example where work was bespoke, time critical or there was a need to align to current services, or there was only a single supplier. The process used relating to silage was explained. It was confirmed the new farm manager had been advised of the process and evidence required for the future. Governors queried why there were two amounts relating to insurance. The Head of Finance advised that we used brokers who identified the best insurers for the different elements of the Hartpury portfolio of activities. It was confirmed they annually tested the market for Hartpury. The Head of Finance agreed that in future the invoices should be grouped together, although shown separately for transparency. A governor queried if insurance cover was likely to increase given rising prices. The Chief Operating Officer advised that the insurance renewed in November. It was noted SFR were receiving an update on insurance at their May meeting.</p> <p>The Procurement Compliance Report was NOTED.</p>	H of F June on
AR06/03/22	<p>Internal Audit Reports</p>	
6.2	<p>Risk Management – Risk Management and Board Assurance – SUBSTANTIAL ASSURANCE</p> <p>Action Points: 0 - Urgent, 0 - Important, 1 - Routine, 1 – Operational</p>	
	<p>The review considered the arrangements to integrate risk management into business planning and the internal controls assurance framework. The scope of the review did not include providing assurance that all the business significant risks have been correctly prioritised. The Report confirmed that the arrangements to integrate risk management into business planning were robust and that Departmental risk registers were produced and reviewed on a timely basis and were exported into the Corporate Risk Register. The Committees considered the recommendation relating to the form of the Risk Register and whether a revised shorter register would be helpful to ease monitoring. The</p>	

	<p>Committees were advised that the Risk Management Group had reviewed the position and were comfortable with the risks and range of risks included. The Committees considered the recommendation, noting that the reports they received included a high-level summary of highest scoring risks and highlighted changes. The Internal Auditor advised that the report was used to highlight processes they had seen elsewhere, but that it did not need to be taken further. It was agreed that this recommendation would not be taken forward.</p> <p>No recommendations were made in relation to the internal controls' assurance framework arrangements.</p>	
	<p>The Committees NOTED the Audit and Substantial level of Assurance provided.</p>	
<p>6.1</p>	<p>Assurance Review of Student Accommodation – Advisory Report Action Points: 0 - Urgent, 1 - Important, 5 - Routine, 0 – Operational</p> <p>Natalie Retsis – Accommodation Manager attended for this item</p>	
	<p>It was noted this review needed to be completed every 3 years. The review considered Hartpury University and Hartpury College's compliance with the Universities UK Code of Practice for the Management of Student Accommodation by completing the UUK Code Mandatory Elements of the Auditor's Checklist. No urgent recommendations had been identified. It was noted that because of Covid and personnel changes there had been some delays in putting in place the renewed contracts for some of the checks required under H&S. Asbestos and legionella checks had been prioritised. It was confirmed that a new contract was commencing on 1st May. The Vice-Chancellor and Principal advised that after the shutdown during Covid there had been a significant review, with re-opening protocols, before the accommodation had been opened up again. The issue referred to in the report related to the regular reviews; in-house testing had been maintained. The electrical lighting was currently being tendered. A governor queried the comments relating to the proposed move from tank system to mains and queried if this was a good practice change or an operational matter. The Chief Operating Officer advised she would check with facilities.</p> <p>A governor, noting the reference to the Mental Health Minds Charter queried if Hartpury had now achieved this. The Vice-Chancellor and Principal advised that this was progressing, Hartpury had received a visit and was awaiting feedback [the formal assessment will take place in September].</p> <p>A governor queried whether the CityHeart accommodation was also assessed. The Committees were advised it was not covered by the UUK Code. The Chief Operating Officer advised they shared their policies and processes. The Accommodation Manager advised that she met with CityHeart termly to review the accommodation, a member of the Wellbeing Team visited twice a week to offer students support if required. There was regular dialogue with students so they had the opportunity to raise any issues. She advised that student feedback was that they were happy there. It was noted that CityHeart had a manager on the site who was accessible 24/7 and that there were security patrols. Governors commented that this feedback was very reassuring. The Vice-Chancellor and Principal advised that Hartpury had been very impressed by CityHeart.</p>	<p>COO June 22</p>

Governors queried the support/assurance relating to the accommodation leased from the University of Gloucestershire. They were advised these were smaller and did not have a site manager. There were 2 blocks. They had 24/7 patrol security. The Accommodation Officer and Student Experience Manager & Head Warden visited Ermin Hall fortnightly and there were regular Teams check ins for students. It was noted use of this accommodation was a temporary expedient, currently for one year. The students contracted with Hartpury. It was confirmed that the University of Gloucestershire was part of the UUK Review.

A governor noted the CCTV Policy Review was indicated as due in August 21. The Accommodation Officer advised that it was now subject to a 2 yearly review which was due September 2022.

A governor asked if all the Fire Safety checks had now been completed. The Accommodation Officer advised that a new contractor was in place and internal testing had commenced.

The Committees were pleased with the level of assurance provided by the report.

The Committees thanked the Accommodation Officer for her attendance and for her and her team's ongoing work.

The Committees NOTED the positive assurance provided.

6.3

FE Student records – SUBSTANTIAL ASSURANCE

Action Points: 0 - Urgent, 0 - Important, 1 - Routine, 0 – Operational

Jon Lisle – Head of MIS attended for this item.

The review considered the checks completed by MIS staff in relation to learner records. Compliance testing was carried out to test data completeness/accuracy. It was noted that the audit was to provide assurance on the procedures in place and did not confirm that all ESFA requirements in relation to student data had been complied with.

The Report confirmed that the College had appropriate arrangements for ensuring the completeness and accuracy of Student Management Information System (MIS) Data through checks undertaken at the point of data entry, ongoing validation of data and through a programme of audit checks. Sample testing had not identified any issues with the completeness of enrolments, withdrawals and transfers. It was highlighted that procedures and user guides to support the process were in place and that data quality assurance checking and regular reporting was in place to ensure data was clean and accurate. The Committees queried if the issue relating to signing transfers had been resolved. The Head of MIS advised this was now undertaken by his deputy unless there was a query.

The Committees were pleased with the level of assurance provided by the report. They noted that the area had moved on significantly since the Chief Operating Officer and Head of MIS had been appointed. The complexity of managing FE and HE student data was recognised.

	<p>The Committees thanked the Head of MIS for his attendance and for his and his team's ongoing work.</p> <p>The Committees NOTED the Audit and the Substantial level of Assurance provided.</p>	
6.4	Summary Internal Controls Report	
	<p>It was confirmed that the Annual Internal Audit Plan was broadly on track and that no Urgent recommendations had been highlighted. The Report confirmed that the Auditors had not been advised of any frauds or irregularities in the period since the last SICA report was issued. There were no root cause analysis issues to highlight. It was agreed it was a positive report. Governors queried how it compared with the sector. The Internal Auditor advised that for the next report she would add the average number of recommendations other clients received for comparison.</p> <p>Governors noted the Briefing Notes, and requested these be provided on an ongoing basis. The Internal Auditor agreed to provide to Clerk on an ongoing basis. The impact of Covid highlighted in the Briefing Notes was considered. It was noted students and staff might have a different perspective on more home working. It was noted Teams 1:1's on-line were preferred by some students, and that lesson capture was supported. Study skills were preferred on-line and attendance had improved. A hybrid approach was planned for a year as a pilot; approval for home working was considered on a case by case basis by the managers. Consideration of impact on the student was key, and there was a recognition of the need to ensure an on-site presence. Regular meetings were also in place to support a team culture. The benefit of informal conversations as part of individual development was flagged by governors. The Vice-Chancellor and Principal advised that this was particularly recognised as an issue for new staff. A governor commented that whilst there were references to Covid legacy, it also needed to be recognised that it remained an ongoing issue, the importance of being prepared for all scenarios was emphasised.</p>	<p>IA June 22</p> <p>IA Ongoing</p>
	The Committees NOTED the Audit and level of Assurance provided.	
AR08/03/22	<p>Risk Management</p> <p>8.1 Review Risk Management Register</p> <p>The Committees considered the Register. The Risk Register had been reviewed and updated following the latest Risk Management Group meeting and continual reviews by each operational area of their local risk registers. The latest version (available on the Governors website) had been reviewed by the Executive at a recent meeting. A new risk relating to the OfS Conditions of Registration had been added. The Chair of HE QuEST confirmed that this risk was on the HE Quest Committee's radar and was being kept under review. The risk relating to succession planning for Vice-Chancellor and Principal and governors had been added as requested. Governors debated if this was the right level, recognising the risks around change of Vice-Chancellor/Principal/CEO in any organisation. It was agreed that the mitigations provided and the thorough recruitment process provided assurance.</p> <p>It was noted that the Covid risks had been reduced, recognising that this was now something organisations would need to live with, and that it had been well managed to date. It was noted that the risk of failure to recruit/retain HE</p>	

academic staff had been reduced following the development of the revised HE Staffing Structure. It was noted that the composite risk which covered Brexit, Covid and the war in Ukraine, and the impact on international recruitment and inflation had been increased. A governor queried whether the increased cost of transport for student travel was reflected. The Chief Operating Officer agreed to add fuel to the aspects detailed. She advised that there would be a 15% transport cost increase for students. There would be support in place for students to ensure access was not inhibited. Governors queried whether the risk would be better termed “international Instability” and whether the need to record impact of inflation on all areas – both for staff and for Hartpury - was sufficiently reflected. It was noted this was referenced in the actions/mitigations. The COO agreed to review. She advised that inflation costs had been included in the budget setting discussion. It was noted it was referenced within Risk 1.4.

COO June
22

COO – June
22

A governor queried what the arrow indicated and was advised it reflected any movement in the risk since the previous meeting, if it was a straight arrow there had been no change. A governor queried if a red arrow had a particular meaning, and was advised changes in red indicated a change since the previous meeting, but that the red should not be used on the arrows. It was suggested it would be helpful to add an explanatory note on this.

COO June
22

The risk relating to meeting parameters relating to TEF had increased following further information from OfS – this focused particularly on the challenge to measuring the data required to meet TEF. The risk relating to Blackfriars had increased following the failure of the construction partner, although current indications were that the project would be delivered, although slightly late, and that the cost of the delay in provision of rooms would be met by CityHeart. It was confirmed this was being monitored by the SFR Committees and that contingency accommodation was being sourced by CityHeart for a short period of time. The arrow on this risk was pointing up as the main contractor had gone out of business. Governors discussed the risk relating to failure of tenants at the Box Park. It was noted there was no financial risk as there was no charge for tenants for the first 2 years. The aim was to create a base for innovation. It was noted that Covid meant it had not been possible to hold the agreed events/interactions but this had been agreed with the LEP. It was confirmed there was a more detailed risk register for this project.

The Committees also noted that a number of risks had been deleted, including risks relating to mass testing and Covid because of the wider environment changes.

COO June
22

A governor flagged that the register still contained some partial scores and the Chief Operating Officer confirmed she would remove them.

The Risk Register was NOTED.

8.2 Review Top Risks

The governors considered the Top Risks and changes since the last meeting. It was confirmed the Risk Management Group had met to discuss these risks and updated where appropriate, the Senior Management Team had also reviewed the list.

The report identified all risks across the Main Risk Register and Capital Risk Register, which were RAG rated as red when the risk was identified and therefore were the most significant risks Hartpury faced.

Changes to the Risks were highlighted which were as set out within item 8.1. Following discussion at the November meeting the Chief Operating Officer confirmed she had reviewed Risk 33.

The Committees reviewed and NOTED the top risks.

8.3 Review of Corporate Risk Policy

There had been no changes. A governor agreed to send some typos to the COO out of the meeting for completeness and update as relevant.

**COO
May 22**

The Risk Policy was APPROVED for RECOMMENDING to the Board, subject to the minor clarifications noted above.

8.4 Risk Management Group Minutes

A governor commented on presentation on the Risk Maturity Questionnaire to the Risk Management Group and queried if this would be helpful for the Committees. The Chief Operating Officer advised that this had followed the Risk Management Group completing the Risk Maturity Questionnaire so that it targeted relevant issues; she proposed to do a similar exercise with the Audit and Risk Management Committees. This was supported and it was noted that the Questionnaire would be issued shortly to the members of the Committees.

The Committees considered the Risk Management Appetite noting that this would vary against the type of risk and the context. The Internal Auditor advised that it was good practice to review the Risk Appetite each year. It was confirmed that all departments had access to the Risk Register, and that there were separate tabs for the registers for Covid and the Box Park. It was debated whether it would be helpful to have separate tabs for all departments. It was noted the Risk Management Group was comfortable with the risks being held locally, recognising that practice demonstrated risks were being reviewed and escalated as required. It was agreed the Audit and Risk Management Committees would not want more detail than they received currently and they were comfortable with the approach the Risk Management Group had in place. It was agreed that the Risk Management Group would periodically look at departmental risk registers as part of its assurance process. Governors queried the reference to the Callmy App and if there were issues in its delay for the Critical Management Policy. It was noted this was the Critical Incident Policy and that CallMy would be part of the process in future but was not delaying the Policy. This was being taken forward by the Vice-Principal Resources and the Director of Digital.

The Risk Management Group Minutes were NOTED.

8.5 Consideration Potential Area for Deep Dive

Agreed this should be Business Continuity - to provide an overview, objectives and include one specific area. The risks relating to cyber in terms of potential disruption and cost were considered. Safeguarding was also flagged for another meeting.

AR09/04/22	<p>IT and Cyber Annual Report Graham Quint – Head of Digital was present for this item</p>	
	<p>The Annual IT and Cyber Report set out the steps taken in the past 12 months to address IT and cyber related issues and provided a road map for future developments. It was noted this was the first IT and Cyber report and that it would continue to be updated annually.</p> <p>It was highlighted that as part of our risk management Hartpury takes a number of steps to minimise our risk from the use of our digital system. This was performed organisation-wide through a combination of policy, education and technical enforcement and covers all users of our systems. This was particularly important since the widespread introduction of home/hybrid working in response to the Covid pandemic, which has encouraged cyber criminals to target educational establishments, as they are seen as desirable targets, holding a large amount of personal information.</p> <p>The Report updated on policies updated over the year, the development, membership and role of the Information Governance Group, ongoing education work, penetration testing and other processes in place to safeguard against cyber-attacks.</p> <p>The assurance provided by the recent Internal Audit – reasonable assurance - of this area was noted. It was noted that multi-factor authentication introduction was ongoing.</p> <p>A governor queried whether achieving Cyber Essentials certification was an important part of Hartpury's assurance in this area. The Head of Digital advised it was a good framework, and that each year the measures extended as the environment changed. He advised it was considered a good standard to achieve and it was one we asked our suppliers to have in place.</p> <p>The need for governor's to be aware of cyber security and to ensure confidential information was not communicated over a private email network was noted.</p> <p>Governors were briefed on the CallMy App – a student and staff messaging system which was part of the business continuity plan. It was confirmed the project for rolling it out was ongoing. Governors queried its link with the Critical Incident Policy. The Director of Digital advised it was a procedure rather than a policy and would be considered by the Risk Management Group in June. The Director of Digital advised that, since the war with Ukraine had started, Hartpury was subject to 200,000 cyber attacks a day. It was confirmed there had been no breaches to date. The Director of Digital commented that if there was a breach of key issues, how quickly it was identified and how quickly it was actioned, was critical.</p> <p>The Committees APPROVED the Annual Report IT and Cyber.</p>	
AR11/03/22	<p>Health and Safety Annual Report Neil Chatten – Health and Safety Manager was present for this item</p>	
	<p>The Annual report provided Governors with a comprehensive overview of Health and Safety Management and activities over the academic year 2020/2021 as well as an understanding of the health and safety priorities and activities undertaken</p>	

in the first half of 2021/22 under the support of the new Health and Safety Manager. It detailed Hartpury's aim to secure health and safety legal compliance and aspiration to achieve the highest standards of health and safety management.

It was recognised that our health and safety performance affects all aspects of Hartpury life, our staff, our students, visitors and contractors who may be affected by our actions or inaction. Our health and safety performance reflects the organisational culture and contributes to our reputation.

It was noted that Hartpury's strategy was to manage risk in a proactive and positive way and avoid becoming risk averse. Accordingly, we had developed a structured safety management system (SMS) to ensure we can operate effectively, provide a rich and flourishing learning environment and meet our strategic priorities whilst, at the same time complying with all relevant health and safety legislation. This was achieved through effective management practices that integrate health and safety, ensuring that we review our operations, learn from unintended outcomes and continue to seek maintain and deepen our positive health and safety culture.

It was highlighted that for the second academic year the Covid Pandemic has impacted upon all aspects of Hartpury's operations. Following on from the first year of Covid measures, established and robust bio-security protocols were maintained and Hartpury continued to safely deliver a diverse programme of education whilst controlling the risks.

It was noted that at the end of the academic year 2020-2021 the previous Health and Safety Manager, Peter Jackson had retired after a period of part-time working. Peter was replaced by Neil Chatten, who it was confirmed had a breadth of knowledge and experience, in September 2021.

The reporting process provides Hartpury governors, senior management and the Corporation with information on the health and safety management system and its effectiveness in facilitating Hartpury's aims and objectives whilst controlling risk exposure.

The Health and Safety Manager advised that the Health and Safety Forum had been expanded to include HE and student voices, providing improved coverage overall. He explained the Risk Assessment process, stressing that it was the key line of defence against accidents and incidents, and part of establishing an effective Health and Safety culture. Going forward the audit processes he would undertake would also reinforce this. He outlined the Facilities Management Health and Safety processes to support effective Health and Safety. He advised that much work had been actioned in relation to water, fire and safety to review and update as required. He confirmed the required processes were in place in relation to asbestos. He confirmed that work had taken place to ensure the fire records were comprehensive and this was now in place. The water H&S processes were also being taken forward by the Accommodation Manager, as reflected earlier in the meeting.

The Committees considered the Accident Reporting data. It was noted these had reduced in 2020/21, reflecting the reduction of many face to face activities due to Covid restrictions. The rise during 2021/22 was therefore confirmed as not a point of concern. It was agreed that improved reporting and a raised profile for Health and Safety was likely to lead to an increase of reported accidents and near misses

which was helpful. The Health and Safety Manager advised that at this point there were no items for learning indicated, but this would continue to be monitored.

The Committees noted the areas highlighted for prioritisation: security, security of residential students, safeguarding. He advised he met with the Vice-Principal Resources fortnightly.

The Committees considered the Health and Safety Plan going forward, and noted the work undertaken in the previous year. He confirmed that there would be more audits in the future, reflecting that the resource for Health & Safety had moved from part-time to full time.

Governors thanked the Health & Safety Manager for his comprehensive report. They suggested it would be helpful to include in future if an accident had the potential to become an insurance claim. It was agreed the prioritisation within the report was helpful. It was confirmed he reported to the Vice-Principal Resources with a dotted line to the Vice-Chancellor and Principal.

Governors queried any issues which “kept him awake”. He advised that he was pleased that the assurances around fire safety compliance were now confirmed. There had been a recent Fire and Safety Rescue inspection which indicated no enforcement action. He advised that his next focus would be reviewing the fire risk assessment. Governors noted that attendance in the Health and Safety Plan was listed in the Improvement Plan and queried the related issue. The Health & Safety Manager advised that attendees were now required to send a deputy if they didn’t attend. He advised he had an overview of all departments but it was helpful to have the leads there to feed in. He advised he had regular contact with all the managers.

Governors queried if there was a Homeworking Risk Assessment. This was confirmed, this recognised that Hartpury was employing individuals to undertake a job of work, the place where it was undertaken was not relevant. A governor asked to what the fire hydrants issue referred. The Health & Safety Officer advised that there was an initial tank, but there was a need for a backup. There would be a risk benefit review. It was not an enforcement issue. Governors noted that the Internal Auditors had looked at Fire Safety Management – it was confirmed they had no issues. Governors queried if there were guns on site. It was confirmed there was an appropriate fire-arm storage for some areas of provision – all compliance was in place. It was confirmed the police undertook audits to ensure appropriate requirements being met. Governors questioned the reference to the deteriorating greenhouse. It was confirmed it was not used by students and was categorised as low risk.

Going forward governors confirmed they were happy with the level of detail in the report, that for future reports something on learning from near misses would be helpful. IT was agreed the report would be received in March/April.

The Annual Health & Safety Report was APPROVED for RECOMMENDING to the Board.

AR10/03/22	Value for Money Annual Report	
	The Annual Value for Money report reviewed the progress to date on the delivery of the Value for Money Strategy set in September 2020 and considered the Value for Money (VFM) reporting in the annual report and financial statements of the University for 2020/21.	

	<p>It was noted this was the first Value for Money Report. Governors agreed it was helpful to have this information in one place. It was noted it didn't include VFM from a Students perspective and queried how we were approaching this. The Chief Operating Officer advised that pre-Covid she had had sessions with the SU on this. In future she planned to have an annual engagement on this with the SU. It was noted that OFS used some measures such as employability/value added to assess this. The Chief Operating Officer agreed to look at this for both FE and HE. The challenge of measuring VFM was discussed. The Internal Auditor commented that some organisations used measures against the headings: efficiency, effectiveness, economy, sustainability (environment), social value to assess. The Committee noted that Hartpury used a range of metrics such as generation of a surplus. It was noted that on page128 the objective needed completing and that on page 129 there was a blank. The COO agreed to update for the future.</p> <p>The Annual Value for Money Report was APPROVED for RECOMMENDING to the Board.</p>	2023
AR12/03/22	<p>Internal Audit Guidance notes and Hartpury Response to Fraud Update</p> <p>The Committees had been provided with a report which had been developed in response to the regular briefings provided by TIAA on key sector issues which are shared with the committees and in response to a request by the committee to demonstrate the briefings have been considered. The Committees agreed the report provided helpful assurance and closed the loop on the information provided. It was agreed it would also be helpful for members to see the notifications as they were issued.</p> <p>The Update was NOTED.</p>	
AR13/03/22	<p>BUCS Super Rugby Audit of Minimum Operating Standards 2021/22, overview, summary and best practice*</p> <p>The Committees had been provided with the BUCS Super Rugby Audit of Minimum Operating Standards 2021/22, overview, summary and best practice. The Committees noted the positive feedback from the audit.</p> <p>The Committees NOTED the update.</p>	
AR12/11/21	<p>Any Other Business</p>	
AR16/06/21	<p>Dates of future meetings all at 10am tbc</p>	

The meeting closed at 12.40

	<p>Closed Session Without Management with Internal and External Auditors</p> <p>It was confirmed there were no issues either set of auditors wanted to raise. Governors were pleased with the feedback provided by staff attending, and the knowledge and confidence displayed.</p>	
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The meeting closed at 12.50

APPROVED June 2022