

# **Board of Management**

# Monday 9 December 2024 (1315-1630)

## Boardroom 1074b / Teams

# Agenda

Time	Item	Lead	Paper
13.15	1. Welcome and Apologies	CS	Verbal
	<b>1b.</b> Declarations of Interests and Connections		
	<ul> <li>Minutes of Previous Meetings and Matters Arising (Approval)</li> <li>Monday 2 October 2023</li> <li>Confidential Minute</li> <li>Action Log</li> </ul>	CS LG	Paper 2.1 Paper 2.1b Paper 2.2
	Candy Munro, CDN, EER Report	СМ	Presentation
	Guest Speaker - Karen Gray, SFC TQEF Assistant     Director Learning and Quality     (Scottish Tertiary Quality Framework paper added for reference, D Dickson)	KG	Presentation Paper 2.3
	3. UWS Project (Confidential)	PS/JC	Paper 3.1
	4. Annual External Audit Report (For Approval)	AR/AH	Paper 4.1
	<ul> <li>5. Letter of Representation and Draft Financial Statements (For Approval)</li> <li>Management Accounts</li> </ul>	KH	Paper 5.1 Paper 5.2
	6. Annual Health and Safety Report	JM	Paper 6.1
	7. Student Association Report	HG/SS	Paper 7.1
For Appr	oval		
	8. Audit Committee Annual Report	JR	Paper 8.1
	<ul><li>9. Strategic Risk Register</li><li>Risk Appetite</li></ul>	LG	Paper 9.1 Paper 9.2

10. Workforce Report (Confidential)	JM	Paper 10.1
For Discussion		
11. Chair's Report	CS	Paper 11.1
12. Principal's Report	JC	Paper 12.1
13. Performance Report	DD/JM/ KH	Paper 13.1
14. Commercial– for Approval (Confidential)	DD	Paper 14.1
<ul> <li>15. Committee Chairs Update (Key business/decisions)</li> <li>FGP</li> <li>HR Sub</li> <li>Remuneration</li> <li>L&amp;T</li> <li>Audit</li> </ul>	RN SI SI SH JR	Verbal
<b>16.</b> Confidential Matter (Confidential – (excluding ELT/SLT members)	JC	Verbal
17. ELT/SLT Performance Review (Confidential Non-Executive members only)	SI	Paper 17.1
Starred items For Information only		
<ul> <li>18. Committee Minutes *</li> <li>Finance and General Purpose</li> <li>HR Sub Committee</li> <li>Learning and Teaching</li> <li>Audit Committee (to be circulated)</li> <li>Remuneration Committee</li> </ul>	RN SI SH JR SI	Paper 18.1 Paper 18.2 Paper 18.3 Paper 18.5
19. Self-Evaluation and Action Plan (SEAP)*	DD	Paper 19.1
20. Estates Annual Report*		Paper 20.1
21. Early Experience Student Satisfaction Report*		Paper 21.1
22. Any Other Business	CS	Verbal
23. Date of next meeting  ■ Monday 24 March 2025	CS	Verbal



One step ahead Status: Approved

## **Board of Management Meeting**

#### Minute of Meeting held on 9 December 2024 @ 1315 hrs Dumfries

Present:		
Caroline Stuart (CS) - Chair	Jamie Ross (JR)	Susan McLellan (SMc)
Joanna Campbell (JC) Principal	Sharon Hodgson (SH)	Gillian Brydson (GB)
Pete Woods (PW)	Richard Nash (RN)	Kirsty Duncan (KD)
Honor Gibson HG)	Will Dowson	Kate Glendye (KG)
Alastair Irons (AI)	George Clark (GC)	Ann Hill (AH)
Sue Irving (SI)		
In attendance:		
Douglas Dickson (DD) – Depute Principal	Karen Hunter (KH) – Executive Director of Finance	Lorraine Grierson (LG) – Governance Professional
Joe McGraw (JM) – Vice Principal People and Transformation	Mary Cheetham (MC) – Minute taker	Candy Munro (CM)
Karen Gray, SFC		
Apologies:		
Inga McVicar (IM)	Shane Saunders (SS)	Claire McLean (CM)
David Burns (DB)		

#### 1. Welcome and Apologies for Absence | Verbal | Chair C. Stuart

- 1.1. The Chair welcomed everyone to the meeting and introduced Candy Munro from CDN, and Karen Gray, SFC TQEF Assistant Director. The meeting was confirmed as quorate.
- 1.1.1. Apologies were received as shown above.
- 1.2. <u>Declaration of Interest and Connections | Verbal | Chair C. Stuart</u>
- 1.2.1. The Chair reminded Members to indicate any declaration of interest as appropriate throughout the course of the meeting.

#### FOR APPROVAL

- 2. <u>Minutes of Previous Meetings and Matters Arising</u>
- 2.1. Minute of Meeting held 1 October 2024 | Paper 2.1 | Chair C. Stuart
- 2.1.1 The minute was approved as an accurate representation of the meeting.
- 2.2 Action Log | Paper 2.2 | L. Grierson
- 2.2.1 LG provided an update on the progress of the current actions, confirming that Actions 1 and 3 have been closed.
- 2.2.2 Action 2, has been deferred to the March Board meeting, as we are awaiting the outcome of funding bids which are expected in late December..
- 2.2.3 The Board noted all actions.
- 2.3 **CDN EER Report**
- 2.3.1 CM presented to the Board an overview of the recent EER Report (Link) and expressed gratitude to all involved, particularly LG, for their hard work. The report was highly positive, with one key recommendation with the Board being in transition, steps should be taken to strengthen the new team, build members' confidence, and enhance their understanding of the sector. This should be incorporated into the Board development plan.
- 2.3.2 The Chair thanked CM.
- 2.4 Karen Gray, SFC TQEF Assistant Director Learning and Quality
- 2.4.1 CS introduced Karen Gray to the meeting. KG presented to the Board (presentation <u>Link</u>) and provided an overview of the new TQEF Framework.
- 2.4.2 The Chair invited questions, leading to a discussion on enhancement, improvement, and metrics. The STEP programme, under the new governance structure, will set this year's theme of supporting diverse learner journeys. Improved communication was identified as a key impact. Challenges with the risk register were noted, as national delays can affect institutions. Confidence remains in the STEP programme's delivery, with flexibility compared to SEAP.
- 2.4.3 Action: The L&T Committee to assess and monitor capacity and resources for improvement related to the risk register.
- 2.4.4 The Chair thanked KG for her time.

#### FOR DISCUSSION

- 3. UWS Project | Paper 3.1 | P Smart / J Campbell Confidential
- 3.1 PS gave an overview of the proposal..

Al left the meeting at 1430 hrs due to a conflict of interest.

4. Annual External Audit Report (For Approval) | Paper 4.1 | A Reid

#### Board of Management Minute 9 December 2024

- 4.1 AR presented the annual report and updated accounts, confirming an unqualified opinion had been given. These had been reviewed by the Audit Committee on 26 November 2024 and are now being brought to the Board for final approval. The accounts are ready for sign-off once the Board approves, with one outstanding item related to asset value being resolved.
- 4.2 The report highlighted strong leadership and good governance.
- 4.3 The Board thanked AR for the summary and noted the land and building valuation changes and job evaluation adjustments. The Board also thanked KH and the team for their work on the report.
- 4.6 The Board approved the Annual External Audit Report.

# 5.1 <u>Letter of Representation and Draft Financial Statements (For Approval) | Paper 5.1 |</u> K Hunter

- 5.1.1 The Executive Director of Finance provided an overview of the report.. A standard letter of narrative confirmed management responsibility and judgements, with no issues identified regarding the land and buildings valuation.
- 5.1.2 Regarding internal audit recruitment due to RSM's term now complete, a new appointment is being considered through the APUC process.
- 5.1.3 The Board approved the Draft Financial Statements and Letter of Representation following discussion with the Chair of Audit.

#### 5.2 <u>Management Accounts| K Hunter| Paper 5.2 | K Hunter</u>

- 5.2.1 The Executive Director of Finance confirmed that the management accounts had been approved by the F&GP Committee. Ongoing meetings with budget holders are assessing spending up to January and the year-end.
- 5.2.5 The Board noted the Management Accounts.

#### 6. Annual Health and Safety Report | Paper 6.1 | J McGraw

- The VP People and Transformation reported that the new Health & Safety compliance management system, Smartlog, is now fully active across the College.
- The Association of Colleges benchmark report was used for statistical comparisons, although it should be noted that only 5 Scottish Colleges participated. Out of 93 colleges, only 43 submitted data, with the report comparing instances of health and safety issues.
- 6.3 A bid has been submitted to the SFC to upgrade fire doors.
- A Member noted that the College had 43 instances reported, which is higher than the average of 41. However, noted that the work is appreciated. The status for AY24/25 was questioned, with a report indicating lower RIDDOR incidents. JMc clarified that reports will be brought to each meeting, and health and safety will be monitored for a more detailed oversight.
- 6.5 ACTION: JMc to assess whether the old fire doors have any resale value.

6.6 The Board noted the paper.

#### 7 Student Association Report | Paper 4.1 | H. Gibson

- 7.1 The Student Association President assumed the paper as read highlighting that class representation meetings and event planning are being organised, incorporating student feedback.
- 7.2 Updates on recent and upcoming activities were shared, highlighting the following:
  - Therapets program is planned, with 4 class reps participating.
  - The Student Experience Committee had 5 lead reps attend, and a further 8 in Dumfries and 4 in Stranraer have come forward.
  - The Holywood Trust funding application was unsuccessful, but the project search intern has reapplied.
  - A successful coffee morning was held, and the funds were used to purchase festive food bank parcels for Dumfries & Stranraer.
  - The Student Association is participating in the NEON (National Education Officers' Network) meeting focused on the SEAP project.
  - A Christmas Toy appeal was launched,
- 7.2 The Chair commended the engagement and the great report, highlighting innovations in student and staff collaboration for quick wins and improvements, which will be reported through the Learning & Teaching committee.
- 7.3 The Board noted the report.

GB left the meeting at 1450 hrs

#### FOR APPROVAL

### 8. <u>Audit Committee Annual Report | Paper 8.1 | J. Ross | Approval</u>

- The Audit Committee Annual Report was presented to the Board for approval, which confirmed that the committee continues to work alongside both the external and internal auditors. The Committee continues to review the strategic risk register and discuss the risk appetite. The external audit and financial statements were tabled and discussed, 9 areas were audited by RSM: 5 were rated as substantial, and 3 were rated reasonable. The Audit Committee also reviewed the outcome of the AY23/24 external audit to ensure the College's approach to governance, risk, and control remains compliant and effective.
- 8.2 The Chair commended the work of the team, recognising their contributions to the Audit Committee's success. The Chair further thanked the Committee Chairs for their continued dedication and effective leadership in overseeing these crucial aspects of governance.
- 8.3 The Board Approved the Audit Committee Annual Report.

#### 9.1 Strategic Risk Register | Paper 6.1 | L. Grierson | Approval

9.1.1 The report was taken as read. LG confirmed that five risks were assigned to the Board of

- Management for their review: 1,2, 5, 6 and 12 all of which were unchanged after consideration by the relevant ELT owners. The Board was asked to approve the Strategic Risk Register, including changes to risks 8 and 10 in terms of residual risk.
- 9.1.2 The risk management audit update highlighted the audit terms of reference, with key points marked in yellow at point 4 in the paper.
- 9.1.3 The Chair asked for approval on risks 1, 2, 5, 6 and 12. Each Risk was discussed in turn, with no changes.
- 9.1.4 A discussion was held on the 12 risks, with a focus on residual values of 4 or 5 or lower. It was agreed that the risks requiring further focus would be discussed in more detail at the next Board meeting, with an emphasis on mitigations and strategies to reduce risk, while avoiding discussions on "green" risks.
- 9.1.5 A full discussion centred on emerging risks, particularly in relation to AI. Concerns were raised about the potential risks of false information and plagiarism linked to AI, but it was noted that operational controls were in place. The opportunity to embrace AI as part of the College's strategy was also emphasised.
- 9.1.6 Action: Al to be included on the emerging risks register and added to SLT agenda for further review and monitoring.
- 9.1.7 The Board Approved the Risk Register.

#### 9.2 Risk Appetite Paper 9.1 | L. Grierson | Approval

- 9.2.1 The Board were advised that, following consideration and recommendations from the Audit Committee, they are asked to note the inclusion of a numerical scoring matrix in the risk appetite and approve the updated risk appetite for AY24/25. A risk map was added, and it was agreed at the Audit Committee to remove the 'Avoid' category, as it is not feasible to eliminate all risks. The scale of appetite has been updated, with a move to cautious/moderate appetite for risk reflected in the revised statement, which now better aligns with the College's positive position allowing for opportunity and challenge.
- 9.2.2 The Board Approved the Risk Appetite.

#### 10. Workforce Report | Paper 10.1| J. McGraw | Approval - Confidential

10.1 The VP People & Transformation presented the paper for approval.

#### 11. Chair's Report | Paper 11.1 | C Stuart

- 11.1 The Chair took the paper as read and highlighted that an interim governance review, completed by CDN during the first quarter, had been shared with members. It was also noted that recruitment for new Board members will begin in January.
- 11.2 The Board noted the report.

#### 12. Principal's Report | Paper 12.1 | J Campbell

- 12.1 The Principal took the paper as read and highlighted key opportunities and challenges...
- 12.2 The Board noted the report.

#### 13. Performance Report Paper | 13.1 | Executive Team

13.1 The Depute Principal took the paper as read, summarised the operating plan, noting it remains largely on track and highlighting continued improvements in student performance and sustained success over time, with appreciation expressed for staff efforts during challenging years. The Board commended the performance and the quality of the report. A suggestion was made to incorporate a commercial aspect to the report.

### 14. Commercial | Paper 14.1| D Dickson | Approval | Confidential

14.1 The Depute Principal provided an overview of the paper...

#### SH left 1635 hrs

### 15. <u>Committee Chairs Verbal Update - Key Business/Decisions</u>

- ➤ Finance & General-Purpose Committee The Committee highlighted the focus of the previous meeting and statutory accounts review, Scot Gov budget will provide us, focus on commercial developments and infrastructure and IT
- > HR Sub Committee Sue no comments to add
- Learning & Teaching Committee no further update
- Audit Committee nothing further
- ➢ Board Development Committee no further comments

# 16. <u>Confidential Matter | Verbal | J Campbell | Approval | Confidential (excluding ELT/SLT members)</u>

16.1 This item has been removed and therefore was not discussed.

# 17. <u>ELT/SLT Performance Review Paper 17.1| S Irving (Confidential Non-Executive</u> members only)

**17.1** Performance review update was provided to members.

#### For Information only

#### 18. <u>Committee Minutes</u>

- 18.1 Finance & General-Purpose Committee minute, Paper 18.1 was noted by the Board.
- 18.2 Learning & Teaching Committee minute, Paper 18.2 was noted by the Board.
- 18.3 Audit Committee minute, Paper 18.3 was noted by the Board.

18.4 Board Development Committee Minute, Paper 18.4 was noted by the Board.

### 19. Self-Evaluation and Action Plan (SEAP) Paper 19.1 D Dickson

19.1 The Board Noted the report.

#### 20. Estates Annual Report Paper 20.1 J McGraw

20.1 The Board Noted the report.

#### 21. <u>Early Experience Student Satisfaction Report | Paper 21.1| D Dickson</u>

21.1 The Board noted the report.

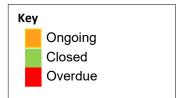
#### 22 Any Other Business | Verbal | C Stuart

22.1 No further business raised.

### 23. <u>Date of next meeting | Verbal | C Stuart</u>

23.1 The date of the next meeting is on 24 March 2025.





# **Board of Management Action Log 09.12.24**

No	Meeting Date	Action	Lead	Deadline	Status	Commentary
1	01.10.24	UWS - Project   Verbal   J Campbell  Action: It was agreed to invite a member from the Partnership for an in-depth discussion at the December Board.	LG	Dec 24	Closed	. Update to be provided at December meeting.
2	01.10.24	Principal's Report   Paper 11.1  J Campbell a specific agenda item and invite D&G Council to the next Board meeting.	LG		Ongoing	Deferred to March Meeting once we know the outcome of the bids
3	01.10.24	Mission 2030 to be circulated to new members.	LG	Dec 24	Closed	Sent to members.



# **Dumfries and Galloway College**

Board of Management					
Agenda Item	2				
Paper Number	BOM1224-2.3				
Date of Meeting	09 December 2024				
Location	Dumfries Campus				
Title of Paper	Scotland's Tertiary Quality Framewo	rk			
Presented by	Douglas Dickson				
Recommendation	Noting				
Freedom of Information	n of Information Disclosure Assessment				
FOI flag:	⊠ Disclosable □ Non-disclosable				
Reason/s for choice:	This information is in the public domain.				
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)	en will it become losable? Has FOI cer guidance been				
Further comments/updates after initial submission					
Date added	Added by (name and role)  Comment/detail				

Read Time: 6 minutes

#### 1. Recommendation

1.1. The Board of Management are asked to note the impact of Scotland's Tertiary Quality Framework

#### 2. Executive Summary

2.1. A helpful summary of the new quality arrangement can be found here - https://www.youtube.com/watch?v=w4jBu7pbzWk.

#### 3. Context

- 3.1 What is different in Scotland's Tertiary Quality Enhancement Framework?
- 3.1.1 Scotland Tertiary Quality Enhancement Framework (TQEF) is the new quality assurance and enhancement framework for Scotland's colleges and universities. It comprises a shared set of principles, delivery mechanisms, and outputs that can be applied to the different contexts of colleges and universities to give assurance on academic standards and the quality of the student learning experience and ensure accountability for public investment in learning and teaching.
- 3.1.2 The **Outcomes Framework** (OF) and **Assurance Model** (AM) replaces the Outcome Agreement process in providing assurance for SFC's investment in the sectors from AY 2024-25. The OF and AM sets out expectations of colleges and universities in return for the funding but does not specify targets. Outcomes are instead expressed more generally across the broad range of areas that matter to students, employers, the Scottish Government, and other key stakeholders. These include, but are not limited to, high-quality learning and teaching, good governance, financial viability and sustainability of colleges and universities.
- 3.1.3 College and universities must have in place robust arrangements to evaluate and review their provision, appropriate to the context of the institution, this is called **Institution Led Quality Review (ILQR).** This is currently well defined for universities, however in the context but there is work to do in ensuring it will be well defined for the college sector.
- 3.2 What is the role of each Agency?
- 3.2.1 The **QAA** are designing and delivering a multi-year external peer review method for colleges and universities, reflecting their experience in conducting external review in Scotland and elsewhere, and its understanding of tertiary education developed over many years. The first college to be reviewed will be Forth Valley College in 2025.
- 3.2.2 **SFC** expect institutions to engage positively in the external peer-review process in a spirit of openness and 'no-surprises'. SFC also expect all institutions to encourage and facilitate their teaching, and professional services staff and students to put themselves forward as peer reviewers. SFC will annually meet with colleges to discuss quality, this engagement is likely led by SFC Outcome Managers.
- 3.2.3 Scotland's Tertiary Enhancement Programme (STEP) of national thematic activity is administered by QAA it is expected that all institutions engage in the STEP programme, identifying aspects of the STEP topic that are aligned with their own mission and context sharing innovation and good practice across the sector to support better student outcomes.
- 3.2.4 During implementation of the TQEF, **Education Scotland** will support QAA and College Development Network (CDN) in the development and delivery of a programme of activity

- to enhance the capacity of college leadership and staff to undertake critical self-evaluation and develop robust internal quality assurance processes.
- 3.2.5 In support of the TQEF, **CDN** will work with the QAA to provide coordinated support to enhance the capacity of college leadership and staff to undertake critical self-evaluation and develop robust internal quality assurance processes. CDN will also support and facilitate shared learning amongst college peer and student reviewers through the development of support networks and other activities.
- 3.2.6 The TQEF is designed to build on and develop Scotland's commitment to student partnership, putting students at the heart of its approach. Student Partnerships in Quality Scotland (**Sparqs**) will support institutions and students to continue to engage effectively in quality assurance and enhancement, but also to develop and mature student partnership in all aspects of quality assurance and enhancement.

#### 3.3. Key Outputs and Interactions

- 3.3.1 Annual monitoring, Institution-Led Quality Review (ILQR) and External Review
  - SFC expects colleges and universities to operate systems of annual monitoring across all their provision and periodic review (Institution-Led Quality Review (ILQR)) across all their provision and support services. In terms of DGC we have an existing process which takes place annually which would require adjustment to meet the requirements of SFC.
  - The Self-Evaluation and Action Plan (SEAP) will, from AY 2024-25, be the only annual reporting on quality submitted by institutions to the SFC. The SEAP will replace both the annual report and statement of assurance on Institution-Led Review for universities, and the (currently paused) Evaluative Report and Enhancement Plan (EREP) which formed part of the How Good is our College framework for colleges. The SEAP will also replace the learning and quality aspects of SFC's Outcome Agreement process for both colleges and universities. The SEAP must be submitted to SFC by the 30<sup>th</sup> November (or start of December if the 30<sup>th</sup> is a weekend). In terms of DGC this will be a similar process.
  - Institutions will not be required to submit a SEAP in those years of the review cycle where they undergo a Tertiary Quality Enhancement Review (TQER). In those years colleges and universities will instead submit a Strategic Impact Analysis (SIA) to the QAA focusing on self-evaluation against the principles of the TQEF. This is part of the TQER review method, and the SIA will support the development of an evidence base for TQER.
  - There will be two aspects to Annual Quality Engagement (AQE) to support the delivery of high-quality learning in institutions. Institution Liaison Meetings (ILMs) will be led by QAA as part of the TQER process, while SFC Outcome Managers will continue to lead discussion around high-quality learning and the outcomes of the SEAP in their approach to the OF and AMQAA will lead on external review. In terms of DGC this will be similar, however it is unclear at this stage whether there is a risk of duplication of conversation.

## 4. Strategic Implications

The TQEF will provide public confidence in DGC. In the guidance given SFC have identified that they wish the TQEF to cover credit and non credit bearing qualifications. The focus on non credit bearing qualifications has been subject to much discussion by institutions as this is predominantly commercial activity in universities and colleges.

#### 5. Risk

Risk	Mitigations	
Risk 10. Failure to achieve an effective student experience.	Mitigations are contained within the risk management framework.	

### 6. Implications

Financial	YES	
Legal	YES	The TQEF has implications of each of the elements.
Learning and Teaching	YES	The TQEF has implications of each of the elements.
Equalities	YES	

## **Douglas Dickson**

Depute Principal 28 August 2024



# **Dumfries and Galloway College**

Board of Management Committee					
Agenda Item	6				
Paper Number	BOM1224-6.1				
Date of Meeting	09 December 2024				
Location	Dumfries Campus				
Title of Paper	Health and Safety Performance Rep	ort			
Presented by	Billy Currie				
Recommendation	on Discussion				
reedom of Information Disclosure Assessment					
FOI flag:	⊠ Disclosable □ Non-disclosable				
Reason/s for choice:	Accident information is generally disclosable				
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)	(When will it become disclosable? Has FOI Officer guidance been				
Further comments/upd	Further comments/updates after initial submission				
Date added	Added by (name and role)  Comment/detail				

Read Time: 8 minutes

#### 1. Recommendation

1.1. The Board of Management Committee are asked to note and discuss the contents of this paper.

#### 2. Executive Summary

- 2.1. 2024 is the first year with a return of a dedicated H&S resource within the College.
- 2.2. For the purposes of this report the Association of Colleges benchmark report has been used for some statistical comparisons. Note that only 5 Scottish Colleges took part, this is mainly an English exercise although it does prove useful.
- 2.3. In 2024 the College has moved to a new H&S compliance management system Smartlog. This is now fully active across the College.

## 3. Context

- 3.1. <u>Health and Safety Action Plan 2024</u>
- 3.1.1 The following table will show progress made to date against the H&S action plan for 2024.

	Action	Timescale	Owner	Dependents	Status
1	Develop new H&S advisor role	January 2024	Director of Estates	VP People and Transformation/ Human Resources	Complete. H&S Advisor in post from 8/1/2024
2	Refresh H&S committee including TOR/Membership and activities	February 2024	Director of Estates	H&S Advisor/H&S Committee/All College Staff	Complete – Approved at H&S committee 31/1/24
3	Review and standardise all overarching H&S documentation including policies and procedures. This will include H&S policy, Risk Assessment Policy, Fire Policy and associated procedures.	Rolling programme of review to be developed and monitored with an action to complete by August 2024	H&S advisor	College managers – Performance team	Complete All previously out of date policies and procedures refreshed and approved.
4	Review H&S training requirements and create H&S training plan	June 2024	H&S advisor	All College Managers – HR Officer	Training module in Smartlog being utilised. Additional training scoped for senior team and managers.  Pathway training to be consider as part of Mission 2030 work.

5	Create an operating plan of ongoing H&S document review to ensure full compliance with legal obligations ahead of each new Academic Year	March 2024	H&S advisor	All College Manager	Now addressed under the new Smartlog System. All documents will have a review date which automatically alerts the relevant personnel. Any overdue items are subject to managerial escalation.  Dashboards are incorporated in the system to view non-compliance.
6	Source and implement a new COSSH system	December 2024	H&S advisor	Director of Estates and Sustainability/ Procurement officer/Identified college staff	Smartlog is being used for both training and assessment completion. So far 5 staff have been trained with further staff due to begin
7	Implement a suitable H&S management system which provide live access to all staff	December 2024	Director of Estates/H&S Advisor	Finance/Director of Business Transformation	Roll out completed on 4 <sup>th</sup> November

#### 3.2 <u>Incident and Near Miss Statistics</u>

#### 3.2.1 Incidents

- 3.2.2 Data from the AoC Health and Safety at work Summary Statistics for Further Education for Academic Year 2023/24 indicate:
  - There were a total number of 15,652 non-fatal accidents, incidents, and ill health reports in the 2023/24 academic year.
  - Of the 93 Colleges who form part of AoC's National Health and Safety Forum 43 Colleges submitted data.
  - The AoC figures are predominantly made up of Colleges in England but 5
    Colleges from Scotland including DGC submitted details. It is not possible from the information provided to compare directly with the other Scottish Colleges.
  - The Incident Rate for the 2023/24 academic year is **41** per 1000 students and staff (total headcount for all FE colleges who took part in the National Benchmarking Exercise).
  - Specifically for DGC we recorded 43 incidents over the same period.

#### 3.2.3 Near Misses

- 3.2.4 There were a total number of 1373 Near Misses in the 2023/24 academic year as part of work activities.
  - The Near Miss Incident Rate for the 2023/24 academic year is **4** per 1000 students and staff (total headcount for all FE colleges who took part in the National Benchmarking Exercise)
  - Specifically for DGC we recorded 4 incidents over the same period
- 3. 3 Reporting of Injuries, Disease and Dangerous Occurrences (RIDDOR)
- 3.3.1 At the time of writing there have been no instances of reports to the HSE under RIDDOR in 2024/25. The following table will show the comparison with the latest AOC report from 2023/24.

DGC 2023/24 Total	AOC 2023/24 Total (Average)	DGC 2024/25 to date Total
3	4	0

- 3.3.2 The College follows up on any first aid report to ensure that any potential RIDDOR is followed up and reported. These arise should any working time be lost or an injury be diagnosed as more serious following investigations.
- 3.4 Health and Safety Compliance
- 3.4.1 At the time of writing the compliance is operating with 1 due item which is the annual Emergency lighting 3-hour tests. This is currently out to tender with the aim to complete prior to the Christmas break.

- 3.4.2 The College is working with the new insurers to implement some recommendations from them in line with the new contract. These include:
  - New fire suppression system in college canteen area
  - Inspections of EV chargers and Solar panels
- 3.4.3 Actions arising from the fire risk assessment have been a focus over the last 2 months. The current action update is as follows:

Dumfries Actions	Closed	Stranraer Actions	Closed	
12	11	10	9	

- 3.4.4 The actions remaining are as follows:
  - Dumfries 1 fire door in UWS area requires replaced/repaired due to position of hinge. UWS advise new contractor attending site to survey and quote for repair
  - Stranraer 1 fire door in MV workshop requires repair. College has sourced new supplier via APUC framework to attend and survey all doors at Stranraer and repair/replace MV door. Quote pending from DAHSCO.
- 3.5 Health and Safety General Update
- 3.5.1 With the new advisor role the College has been able to focus on the provision of a more proactive supporting service in relation to Health and Safety. Key work carried out in this context includes:
  - Regular departmental walk arounds with managers/staff to identify risks and areas of good practice
  - Attend department meetings to discuss safety matters
  - Complete induction workshops on Smartlog with 3 sessions dedicated to managers and 2 whole staff sessions to date.
  - Manage the completion of actions from Fire Risk Assessment and provide advice and guidance to areas on improvements.
  - New First Aider rota providing clarity of service via dedicated points of contact
- 3.5.2 In 2025, the key direction is to continue a supportive role to ensure that a positive H&S culture is in place. Actions will include:
  - Incorporate H&S matters into the Colleges quality framework via DGSee, where H&S is a focus at team level for evaluative and enhancement purpose
  - Continuing to grow the Smartlog system through feedback, monitoring and implementation of new functions such as Estates contract and task management.
  - Developing a pathway training approach to help those from ground level up to managerial level with a focus on succession planning in line.

- 3.5.3 The H&S committee will continue to meet on a quarterly basis with its focus of governance oversight. Reportage will change to include the new dashboard reports available from Smartlog which focusses on key areas such as:
  - Risk Assessments
  - Training
  - Checks and Tests
  - Documentation.

## 4. Strategic Implications

4.1 This paper is directly linked to Strategic Priority 5, Systems and Infrastructure and Strategic Priority 1 Student Experience

#### 5. Risk

Risk	Mitigations
Risk 12. Health and Safety (BOM)	Reporting and Review procedure including Incidents and Near Miss
	Health and Safety IOSH training for staff, H&S training including fire safety for all staff.
	Specific communication at time of increased risk eg Covid, building works, adverse weather
	Clear channels of communication regarding issues and preventative actions.
	Improved compliance management via Smartlog
	Dedicated day to day H&S support resource via H&S advisor
	Oversight of H&S via H&S committee

#### 6. Implications

Financial	YES	Failure of College H&S processes could lead to financial penalties imposed through actions.
Legal	YES	Failure of College H&S processes could lead to legal proceedings under the Health and Safety at work act
Learning and Teaching	YES	H&S processes ensure the safety of all staff and learners when working in high risk areas.

Equalities	YES	H&S policies and procedures cover all persons utilising our campuses and should be fair and equal for all
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# **Billy Currie**

Director of Estates and Sustainability 26 November 2024



## **Dumfries and Galloway College**

Board of Management Committee					
Agenda Item	7	7			
Paper Number	BOM1224-7.1				
Date of Meeting	09 December 2024				
Location	Dumfries Campus				
Title of Paper	Student Association Report				
Presented by	Honor Gibson	Honor Gibson			
Recommendation	Discussion				
Freedom of Information	n Disclosure Assessment				
FOI flag:	☑ Disclosable ☐ Non-disclosable				
Reason/s for choice:					
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)					
Further comments/updates after initial submission					
Date added	Added by (name and role)	Comment/detail			

Read Time: 7 minutes

#### 1. Recommendation

1.1 The Board are asked to note and discuss the activities that have been undertaken by Dumfries and Galloway College's Student Association since the date of the last meeting.

#### 2. Executive Summary

- 2.1. The purpose of this report is to showcase the work of the Student Association to the Board of Management.
- 2.2. The focus has been class representation, training, and planning events.

#### 3. Context

#### 3.1 Class reps

- 3.1.1 Representatives are now in place and on the system we have 55 for Dumfries campus and 20 for Stranraer. I am arranging to meet the Stranraer reps every time I go through there to visit the campus. Vice President, Leah is communicating well with both me and the reps. I did some informal meetings with the class reps through the week beginning 4 November, just to introduce myself to them and to let them know about the Student Association. The meetings were held on Tuesday 19 November (online), and in person on 20 November, the meeting on 21 November was cancelled as I sustained an injury, and those looking to attend that meeting were messaged and we had a more informal meeting through teams to talk about things that they may want to do. There was a good turnout to the rep meetings with just under half of the reps attending.
- 3.1.2 Stranraer representative meeting took place online on 27 November and was well represented, with 11 of the 20 representatives joining. They have a lot of ideas at Stranraer, and I will continue to liaise with Leah to make sure that we are all kept up to date with what is happening.
- 3.1.3 From Dumfries we have 8 students who have come forward as interested in being a lead representative, and 4 students from Stranraer. We have our first meeting for lead reps on Thursday 5 December and I will report back on that in the next Board of Management meeting.
- 3.1.4 Sparqs training is being completed by the representatives in their own time. It is a 2-hour long course with a small test at the end and they have been given the date of 6 January to complete this. (as of 29/11 13 students have completed).

#### 3.1 <u>Funding applications</u>

- 3.1.1 We investigated funding from Third Sector about the wellbeing area outside at the back of the college it was a tight deadline, and we needed quotes and those who were asked could not make it in that short space of time, so the application was not entered. However, I am still in contact with Third Sector and planning a different approach to the funding application with them.
- 3.1.2 Working with HP on sustainability I had a productive meeting about this, thanks to Darren Morton for setting up the meeting. They have received images of the area at the back of the college and a little diagram of how the students (3 students gave input to this) think it would/should look like. It has gone to their planners, and I will update on this in the next meeting.
- 3.1.3 The Mental Health Awareness Day went ahead on 10 October.

- I have worked on with the planning of the Christmas events which were released on 28/11/24. A calendar for December will be released on Student Portal, social media and sent out to class representatives to share with their classes on the 30 November, displaying the events that the Student Association will be doing.
- 3.1.4 The coffee morning organised by the Executive Office was a success with £745 raised to go towards Christmas foodbank purchases. A massive thank you to the Principal who match-funded the money raised to take it to this total.

#### 3.2 NUS/Sparqs

3.3.1 I am currently working with Helen Brown and Sarah Davidson through the 'Think Positive' forum around the Student Mental Health Agreement . I am keen to get the class representatives involved with this and I am currently scheduled to do a training seminar with Sparqs (NEON – National Education Officers' Network). The first NEON meeting for 2024-25 will focus on the engagement of student officers and leaders in developing the Self-Evaluation and Action Plan (SEAP).

#### 3.4 Student Engagement

- 3.4.1 The student engagement survey told us that students want more fun things to do within the college. The pool table has been reopened thanks to a donation of pool cues, balls and chalk. A couple of the cues are broken, and the pool table is currently closed until new materials are ordered.
- 3.4.2 We have started a timetable of events that will be posted at the beginning of each month detailing what the Student Association has planned. This will be backed up with posters, social media posts, emails and word of mouth to get as much engagement as possible from students.
- 3.4.3 The Student Association is being made into a more comfortable space for students to feel welcome. On Monday 2<sup>nd</sup> December, class representatives will be helping with the Christmas decorating and contributing to where they want things in the area.
- 3.4.4 The Student Association are also working on their Student Enhancement Plan which has been attached to this paper for your information.

#### 3.5 Upcoming Events

- Monday 25 November Friday 6 December Christmas Toy appeal Toy drop off.
- Monday 9 December Wednesday 18 December Christmas toy appeal pick up.
- Thursday 28 November Friday 13 December Christmas door decorating competition (this is for ALL students and staff from both campuses to take part – including those doing online courses).
- Monday 2 December Class representatives decorating Student Association.
- Tuesday 4 December 'Santa's Little Helpers' Stranraer Campus Therapets.
- Tuesday 10 December Therapets (Dumfries STEM hub) lunchtime.

- ➤ Wednesday 11 December Dumfries Campus Christmas Jumper Day activities along the corridor at reception in collaboration with D&G Youthwork.
- Wednesday 11 December 'Chocolate Bliss Break' Stranraer Campus.
- Wednesday 11 December 'Cue Clash' Stranraer Campus.
- Monday 16 December Therapets (Dumfries STEM hub) lunchtime.
- Monday 16 December Judging for Christmas Door Competition. (Joanna, Lorraine and a member of the board).
- Wednesday 18 December Therapets (Dumfries STEM hub) lunchtime.
- ➤ Wednesday 18 December 'The Merry Mystery Guest' Stranraer Campus. Friday 20 December Christmas Holiday ♥!

### 4 Strategic Implications

- 4.1 This Student Association report to the college Board of Management has significant strategic implications which provide key insights into students' needs, priorities and campus life.
- 4.2 This report serves as a bridge between students and decision-makers, aligning student interests with the institution's goals. By highlighting issues such as student engagement, inclusivity, and resource accessibility, it informs policy adjustments that can enhance student satisfaction and retention.
- 4.3 Additionally, it strengthens student voice in governance, promoting a culture of collaboration and transparency.
- 4.4 Strategically, this report aids the board in making informed, responsive decisions that support a vibrant, student-centred campus, enhancing the college's appeal and reputation.

#### 5. Risk

Risk	Mitigations			
Risk 10. Failure to achieve an effective student experience.	<ul> <li>Early Experience Student Survey</li> <li>Class Representatives</li> <li>Lead Representatives</li> <li>Class Representative Meetings</li> </ul>			
	<ul> <li>Student Experience Committees</li> <li>Student Representatives to present at key committees and groups.</li> </ul>			

# 6. Implications

Financial	YES	Failure to sustain sufficient funding may inhibit activities of the Student Association
Legal	NO	
Learning and Teaching	YES	It is critical to ensure the student voice is systematically gathered, analysed and used to ensure enhancements
Equalities	YES	Projects being worked on by the Student Association are raising awareness of equality and diversity – allowing for students to feel accepted and recognised within the college.

**Honor Gibson**Student Association President
07 November 2024



# Service Area Enhancement Plan

Date (or fill with required area or control table):

Version: 1



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Part 2 - Support Service Enhancement Plan	. 4
Part 3 - Support Service Enhancement Reflection	7

#### Part 1 - Support Service Analysis

Support Service: Student Association	Service Manager: Claire Marshall	Academic Year:2023/2024

#### **Context of Service:** Initial narrative responding to the two reflective questions below.

Our core purpose is for our Student Association is to enhance the student experience, represent student interests, and contribute to the overall well-being of the student community at DGC.

Our Measure of success should be specific to the goals and priorities of the Student Association and should reflect the needs and expectations of the student body. Regularly collecting data and feedback, setting clear objectives, and regularly assessing progress are key steps in determining whether the Association is meeting its core purposes effectively.

**SWOT Analysis:** Base on the internal self-evaluation completed by teams in the previous academic session and considering future challenges and opportunities in your service area complete a high-level analysis of your service.

Strength	Description	Evidence		
Here For You Event	Invited in different organisation in for	Photos and giving advice to students		
	the day	about cost of living		
Vouchers for meals	For students who are really struggling	Been giving the go ahead for funds		
Freshers	Organisations attended and networked	Microsoft form sent out and all would		
	with each other.	attend again – also photo evidence.		
Food Bank Donations	For students struggling – they know we	Use of funds from awards ceremony to		
	can help.	purchase items. Partnership with DGC LIFT		
		who can accommodate and give items		
		from their storage. There is also a list of		
		places that students can go if they are		
		needing a hot meal out with the college.		

### Service Area Enhancement Plan

Weakness	Description	Evidence
Not working same days as a team	All working different days to each other	More working getting done when all in
		same days.
Communication between Dumfries and	No communication for events	Not knowing what events each other are
Stranraer		doing.
Class Representatives	Getting students on board to be part of	Communication and QR codes not working
	the system – Tried to change the scope	– Need to find a platform for all students to
	this year, but this has not happened	know they are a part of the student
		association and allow them to give ideas.
Difference of opinions	Unsure of what to focus on and	Talk about everything and make sure the
	promote as we all have different ideas	students are on board – It's not what 'we'
	-trying to involve the students as best	want but what 'they' want.
	we can.	
Opportunities	Description	Evidence
Therapy pets	Organisations being invited in to help	Date to be confirmed
	with students with anxiety and stress	
	pro Christmas.	
Food bank/toy appeal	Opportunity for students to get help if	Donations been giving for student food
	struggling	bank.
Funding -	Applying for funding in multiple places	e-mail exchanges with many funding
	to give some sort of funds into the	sources and word of mouth exchanges
	Student Association account.	with some others.
Threats	Description	Evidence
Budget	Not a lot of accessible funds to	All money going to awards event
	organize things	
Activities	Low attendance	Students not engaging
Pool table	New equipment	Students breaking the new items which
		stops others from taking part.

# Part 2 – Support Service Enhancement Plan (This Academic Year)

Initial Assessmen	nt		Priority	Action Plan				
Description of activity	What is the current standard / impact of that service	What are the risks associated with not making improvements	(High / Medium / Low)	Actions to improve the service	Progress	Action Owner	Completion Date	RAG
Introduction of basic data analytics around students accessing support services	We currently have no robust process for gather data around who is accessing support services	We lack understanding of impact. Inefficient use of resource on the wrong things.	Medium	Introduce a booking system with allotted times and gathering key student information. Introduce data analysis and reporting once per block to best align service. Digital automation to create space for high impact face to face work.	Initial focus work done with teams around system and digital ticket logged.	Student Journey Manager	Oct 22	
Here for you engagement event	Helping students through the cost-of-living crisis	Student impact will be students dropping out as can't afford to stay at college.	High	To organize the organisations to come in more through the year. Contact both zest and Aramark to have more days.	In progress we are organising relevant support to come back in after Christmas to provide students with more information and bring therapy pet to come in January. More	Annette & Lindsay VP	Jan/24	

### Service Area Enhancement Plan

					people getting involved in helping with toy appeal for Christmas vouchers for free lunch -free soup -toy appeal -food bank -free gym -free DGC Clothing			
Active campus/Sports clubs	Continuing to try a bring students and staff together to improve physical and mental health	Students drop out due to lack of social opportunities out with classrooms to help them keep engaged	Medium	Better promotion and advertisement and having what student wants. Gathered information.	Setting up links with external and internal clubs and continuing with existing clubs	Connor/Shane	Jan '25	
Class rep/lead reps/meetings/ Sparqs timing	Giving students the opportunity to meet regularly to get their views heard on a variety of issues, aspects around the college	Student feeling their opinions not valued or listened to throughout the college.	High	Bringing different department in when issue arises etc. estate	We have 55 for Dumfries campus and 20 for Stranraer Organising Sparqs training Organise lead reps before beginning of December '24Class rep dates set and Student Experience Committees (Lead Reps)	Honor is keeping this going and the training should be completed by December '24	Dec '24	

### Service Area Enhancement Plan

Wellbeing and mental health initiatives	Student Mental Health Agreement	Students not feeling valued and struggling to cope which may lead to drop out.	High	Working together as staff and students to have an agreement that will help all those students in need.	SPARQS training now available online. Talking with Manager and talking with NUS representatives to get the ball rolling.	Honor Shane Lindsay Claire	End of Academic year '24- '25
Wellbeing garden	An area for students to go when they need space	Students need somewhere to go when they need a minute and space within the college is limited – this area outside can be used for students who need a little time to breathe.	Medium	Applying for funding and doing fundraisers through the year to be able to create this area. Looking at sustainability and hopefully creating an area for	Talking with estates, funders and students to find the best things to use within this area that won't make it look cluttered.	Honor	End of Academic year '24- '25 and beyond if the funding is in place.
Vulnerable Students	Ensuring student voice and lived experience is shaping enhancements	Negative impact on vulnerable students.	High	Join relevant committee Targeted groups/focus groups	Honor has joined the DG-Cares team and will seek student representation.	SA Officers	Jul 25

# Part 3 – Support Service Enhancement Reflections (Previous Academic Year)

Reflection on Enhancements						
Enhancement Activity	What was the impact	What evidence supports this	Further action required?			
Student Portal	Easier to find	Feedback from Students	Constantly review with			
			Student Association			
Introduce Portal in classes	76% of classes were shown	Increase in referrals	This was introduced in			
			Induction this year			
Summer Onsite	Attended Welcome Days and	There was a Student	Continue this			
	allowed for needs	Association member at each				
	assessments to be completed	Welcome Day				
	during the summer					
Active Campus/Sports clubs	These are being continued as	Sign up has increased with	Keep going with different			
	they have been going well	more students giving ideas on	activities			
		what sports they would like to				
		see on the campus.				
Here for you	Many students, some staff,	They would like to attend	Having this as a 'refresher' in			
	and the groups networked	events again in the future	January			
	with each other					
TheraPets	High praise when they visited.	Have been given dates	Continuing with this and			
	Looking into having them in	throughout December to	offering them more times to			
	more often	come along and join us so	come along so they can reach			
		they are not just here one day	more students/staff			
		at a time every few months				

# Service Area Enhancement Plan

Date (or fill with required area or control table): Version: 1



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- Part 1 Support Service Analysis
- Part 2 Support Service Enhancement Plan
- Part 3 Support Service Enhancement Reflection

#### Part 1 – Support Service Analysis

Support Service: Student Association	Service Manager: Phil Storrier	Academic Year:2023/2024

#### Context of Service: Initial narrative responding to the two reflective questions below.

Our core purpose is... Our core purpose is... of a Student Association is to enhance the student experience, represent student interests, and contribute to the overall well-being of the student community at DGC.

Our Measure of success looks like...should be specific to the goals and priorities of the Student Association and should reflect the needs and expectations of the student body. Regularly collecting data and feedback, setting clear objectives, and regularly assessing progress are key steps in determining whether the Association is meeting its core purposes effectively.

**SWOT Analysis:** Base on the internal self-evaluation completed by teams in the previous academic session and considering future challenges and opportunities in your service area complete a high-level analysis of your service.

Strength	Description	Evidence
Here For You Event	Invited in different organisation in for the	Photos and giving advice to students
	day	about cost of living
Vouchers for meals	For students who are really struggling	Been giving the go ahead for funds
Weakness	Description	Evidence
Not working same days as a team	All working different days to each other	More working getting done when all in
		same days.
Communication between Dumfries and	No communication for events	Not knowing what events each other are
Stranraer		doing.
Opportunities	Description	Evidence

Therapy pets	Organisations being invited in to help with	Date to be confirmed
	students with anxiety and stress pro	
	Christmas.	
Food bank/toy appeal	Opportunity for students to get help if	Donations been giving for student food
	struggling	bank.
	999	
Threats	Description	Evidence
Threats Budget	30 3	
	Description	Evidence

# Part 2 – Support Service Enhancement Plan (This Academic Year)

Initial Assessment			Priority	Action Plan				
Description of activity	What is the current standard / impact of that service	What are the risks associated with not making improvements	(High / Medium / Low)	Actions to improve the service	Progress	Action Owner	Completion Date	RAG
Introduction of basic data analytics around students accessing support services.	We currently have no robust process for gather data around who is accessing support services.	We lack understanding of impact. Inefficient use of resource on the wrong things.	HIGH	Introduce a booking system with allotted times and gathering key student information. Introduce data analysis and reporting once per block to best align service.  Digital automation to create space for high impact	Initial focus work done with teams around system and digital ticket logged	Student Journey Manager	Oct 22	

				face to face work.			
Here for you event/vouchers for free lunch/ free soup/toy appeal/food bank/ free gym/free DGC Clothing	Helping students through the cost of living crisis	Student impact will be students dropping out as can't afford to stay at college	High	work. To organize the organisations to come in more through the year. Contact both zest and Aramark to have more days	In progress we are organising relevant support to come back in after Christmas to provide students with more information and bring therapy pet to come in January. More people getting involved in helping out with	Annette & Lindsay VP	Jan/24
Active campus/Sports clubs	Trying to bring students and staff together to improve physical and mental health	Students drop out due to lack of social opportunities out with classrooms to help them keep engaged	High	Better promotion and advertisement and having what student wants. Gathered information.	toy appeal for Christmas. Setting up links with external and internal clubs and continuing with existing clubs	Adnan/Connor	Jan/24
Class rep/lead reps/meetings/Sparqs timing	Giving students the opportunity	Student feeling their opinions not valued or listened to	High	Bringing different department in when issue arises etc. estate	Organising sparqs training. Organize lead	Annette & Adnan	Jan/24

to meet	throughout the		reps after		
regularly to	college		Christmas		
get their					
views heard					
on a variety					
of issues,					
aspects					
around the					
college					

# Part 3 – Support Service Enhancement Reflections (Previous Academic Year)

Reflection on Enhancements			
Enhancement Activity	What was the impact	What evidence supports this	Further action required?
Student Portal	Easier to find	Feedback from Students	Constantly review with Student Association
Introduce Portal in classes	76% of classes were shown	Increase in referrals	This was introduced in Induction this year
Summer Onsite	Attended Welcome Days and allowed for needs assessments to be completed during the summer	There was a Student Association member at each Welcome Day	Continue this.



### **Dumfries and Galloway College**

Board of Manag	ement	
Agenda Item	8	
Paper Number	BOM1224-8.1	
Date of Meeting	09 December 2024	
Location	Dumfries Campus	
Title of Paper	Audit Committee Annual Report	
Presented by	Jamie Ross	
Recommendation	Discussion	
Freedom of Information	n Disclosure Assessment	
FOI flag:	☐ Disclosable	
Reason/s for choice:		
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)		
Further comments/upd	ates after initial submission	
Date added	Added by (name and role)	Comment/detail

Read Time: 12 minutes

#### 1. Recommendation

1.1. After consideration and on the recommendation of Audit Committee, the Board of Management is asked to note the work of the Audit Committee during 2023-24 and approve the Annual Report for the year.

#### 2. Executive Summary

2.1. The purpose of this report is to advise the Board of Management on the activities and decisions of the Audit Committee during the financial year 2023-24 and to provide opinions on matters specified by the Code of Audit Practice.

#### 3. Report

- 3.1 <u>Background and Membership</u>
- 3.1.1 It is a requirement of the Code of Audit Practice and the College's Standing Orders and Financial Regulations that the Audit Committee provides the Board with an Annual Report so that all members of the Board can be fully informed of, amongst other things, aspects of the system of Internal Control. The Audit Committee work with the Internal and External Auditors independently of College Staff and report directly to the Board of Directors. Part of the remit of the Audit Committee is to give reassurance that the systems of governance, risk management and internal controls across the College are maintained at acceptable levels.
- 3.1.2 The period covered by this report is the twelve-month period 1 August 2023 to 31 July 2024.
- 3.1.3 The membership of the Committee during the period was:
  - Gillian Brydson (Chair until September 2024)
  - Will Dowson
  - > Ann Hill
  - Sue Irving
  - Malcolm MacLeod
  - Jamie Ross (Chair from September 2024)
- 3.1.4 Other attendees at Audit Committee meetings included:
  - Joanna Campbell (Principal)
  - Caroline Stuart (Chair of the Board)
  - Douglas Dickson (Depute Principal)
  - Joe McGraw (Vice Principal)
  - Mike Gibson (RSM)
  - Andrew Reid (Azets)
  - Amy Hughes (Azets)
  - David Eardley (Azets)
  - Alex Elkins (Executive Assistant)
  - Lorraine Grierson (Governance Professional)
  - Karen Hunter (Executive Director of Finance)
  - Calum Rodgers (Digital Services Manager)

3.1.5 During the period, the Committee's formal meetings were as follows:

Date of Meeting:	Board members present:
19.09.23	G Brydson, W Dowson, M MacLeod, J Ross, A Hill
29.11.23	G Brydson, W Dowson, A Hill, S Irving, J Ross
19.03.24	G Brydson, W Dowson, A Hill, S Irving, M MacLeod, J Ross
04.06.24	G Brydson, W Dowson, A Hill, S Irving, M MacLeod, J Ross

- 3.1.6 There was an average attendance of 5.25 members (87.5%)
- 3.1.7 The Audit Committee has continued to meet remotely.

#### 3.2 Key work of the Audit Committee during 2023-24

- 3.2.1 Risk Management is an integral part of the overall governance arrangements of the College, and as such there are specific responsibilities for people and groups undertaking different roles in the organisation. The Board of Management has responsibility to:
  - establish the overall culture and ethos in respect of risk and opportunity management within the College as a whole.
  - approve major decision affecting the College risk profile or exposure in accordance with appropriate financial strategy and procedures.
  - > annually review the College approach to risk management, risk appetite and approve changes or improvements as necessary.
  - enable the College Executive to discharge their duties in the management of risk.
- 3.2.2 The Board of Management has delegated responsibility for Risk Management to the Audit Committee. The Audit Committee monitor and report to the Board on internal controls and alert Board Members to any significant emerging issues.
- 3.2.3 An Internal Audit review during 2023-24 highlighted improvements which could be made to support the monitoring and reporting on risk matters, ensure appropriate oversight of risks and related mitigations. The Risk Management Policy was refreshed to include reference to risk management at operational level, escalation, and formalise the process for new and emerging risks. The Policy ensures that significant risks are monitored and managed more closely and confirms roles and responsibilities of the Board of Management, Executive Team and others in the effective management of risk.
- 3.2.4 The Audit Committee continue to monitor and update the Risk Register based on feedback from the Internal and External Auditors. Throughout the year, the Audit Committee review the reports from the Internal Auditors and discuss the findings for each Risk area.
- 3.2.5 The Audit Committee exercises the right to deep dive other risks as appropriate. As the Audit Committee maintain the risk registers, they discuss the potential requirement for any additional deep dives into specific risks regularly.

- 3.2.6 Specifically, during 2023-24, the Audit Committee has overseen the following in order to give reassurance on the levels of risk faced by the College:
  - Maintain the risk register and progress for each area
  - Considered the Internal Audit report for 2022-23
  - Considered the individual reports during the 2023-24 Internal Audit reviews
  - Maintained a tracker for implementation of recommendations from the internal audit investigations
  - Considered and approved the internal audit plan for 2024-25
  - Considered the External Audit report and financial statements for 2022-23
  - Approved the plan for the 2023-34 external audit
  - Reviewed and approved the Code of Good Governance Checklist
- 3.2.7 The Audit Committee will review the outcome of the 2023-24 external audit in order to give assurance to the Board of Directors that the College is compliant in its approach to governance, risk and control.
- 3.3 Internal Audit
- 3.3.1 RSM acted as internal auditors throughout the year.
- 3.3.2 RSM's Annual Audit Report for 2023-24 was presented at the September 2024 Audit Committee Meeting. The report provides an annual internal audit opinion:
- 3.3.3 Annual Opinion

For the 12 months ended 31 July 2024, the Head of Internal Audit opinion for Dumfries and Galloway College is:

The organisation has an adequate and effective framework for risk management, governance and internal control.

However, our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective.

- 3.3.4 A copy of the full report is detailed in RSM's 'Annual Internal Audit Report 2023/2024'.
- 3.3.5 A summary of the internal audits undertaken, and the resulting opinion, is provided below.

		Action	ns agre	ed
Assignment	Assurance level	L	M	Н
Further Education Statistical (FES) Return	Reasonable Assurance	4	1	0
Student Support Funds	Substantial Assurance	0	0	0
Financial Planning/ Budget Monitoring	Substantial Assurance	4	0	0

GDPR	Advisory review	5	1	0
Risk Management	Reasonable Assurance	4	5	0
Awarding Body Activity	Substantial Assurance	2	0	0
Student Onboarding	Substantial Assurance	2	0	0
Business Continuity Planning	Substantial Assurance	0	0	0
Follow up of Previous Audit Management Actions	Reasonable Assurance	2	3	0
Total (2023-24)		23	10	0
Total (2022-23)		18	17	1

- 3.3.6 The recommendations are categorised by the auditors according to the level of priority High, Medium, and Low, and are prioritised to reflect the auditors' assessment of risk associated with the control weaknesses.
- 3.3.7 In addition, suggestions may be included as part of the Action Plan reported. These are not formal recommendations that impact the overall audit opinion but used to highlight a suggestion or idea that management may want to consider.
- 3.3.8 10 of the recommendations made during the year were categorised as Medium Priority, which was a decrease from 17 for the previous year. The Risk Management review raised 5 of the Medium Priority Actions for 2023-24, with 1 each raised for the GDPR and the FES Return review. An implementation plan and appropriate timescales have been agreed with Management, and the actions taken to implement the plan within a reasonable timescale will be monitored by the Audit Committee. The Audit Committee will also assess any further actions required as part of the Risk Management processes.
- 3.3.9 No High Priority management actions were made during the year.
- 3.3.10 Where a recommendation is not accepted this is documented in the individual audit reports considered by the Audit Committee. In general, recommendations may not be accepted where it is considered that the benefits of implementation are outweighed by the costs.
- 3.3.11 Factors and Findings which have informed the Internal Audit Opinion were noted in RSM's report as follows:
  - ➤ **Governance** RSM did not perform a specific governance review at the College in 2023-24, however they have covered elements of the governance framework in place for the following reviews and have used that work to support their governance opinion:

Financial Planning/ Budget Monitoring

- Awarding Body Activity
- Student Onboarding
- ➢ GDPR

- Business Continuity Planning
- 3.3.12 The above reviews resulted in a Substantial (positive) assurance rating provided to the Board, with the exception of the GDPR review, which was provided as an Advisory review and did not provide an overall assurance opinion.
  - ➤ Risk a specific Risk management review was performed which resulted in a Reasonable (positive) assurance rating being provided to the Board. Additionally, RSM's risk management opinion was further informed by their assessment of risk mitigation controls and compliance with those controls in their risk-based reviews in the following areas:
    - Financial Planning/ Budget Monitoring
    - Awarding Body Activity
    - Student Onboarding
    - Business Continuity Planning
- 3.3.13 All four reviews resulted in a Substantial (positive) assurance opinion being provided to the Board.
  - Control RSM undertook seven audits (including the Business Continuity Planning review and three other risk driven reviews mentioned above) of the control environment that resulted in formal assurance opinions. Those reviews concluded that the Board could take five Substantial assurance (positive) opinions and two Reasonable assurance (positive) opinions.
- 3.3.14 Furthermore, the implementation of agreed management actions agreed during the course of the year are an important contributing factor when assessing the overall opinion on control. RSM have performed a Follow Up review during the year which concluded in reasonable (positive) progress had been made towards the implementation of those actions agreed.
- 3.3.15 The Scottish Funding Council requires internal audit to provide an appraisal each year on the College's arrangements for value for money. RSM have not performed a specific value for money review but have considered the arrangements in place as part of each individual assignment. The College are continuing to increase the level of automation in processes wherever possible.
- 3.3.16 RSM concluded the College are aware of arrangements in place to promote and secure Value for Money and has continued to take steps to improve processes.

#### 3.4 External Auditors

- 3.4.1 The external auditors throughout the period were Azets Audit Services, Quay 2, 139 Fountainbridge, Edinburgh.
- 3.4.2 The fundamental objective of the planning, approach and execution of the audit is to enable the auditors to express an opinion on whether or not the financial statements, as a whole, give a true and fair view of the activities of the College since the last audit and of its state of affairs as at the Balance Sheet date.

- 3.4.3 We confirm that the external auditors have been approved by the Auditor General in accordance with the Code of Audit Practice and the letter from the Auditor General dated 20 April 2000 for provision of external audit services for the financial period 2023-24.
- 3.4.4 The external audit of the financial statements for the period ended 31<sup>st</sup> July 2024 commenced in September 2024, and Azets will issue their final report '2023-24 Annual Audit Report to the Board of Management and the Auditor General for Scotland' at the December Board meeting.

#### 3.5 The Financial Statements

- 3.5.1 The College external Auditors, Azets, have issued their Draft 2023-24 Annual Audit Report, and a copy has been provided to this Committee.
- 3.5.2 The draft 2023/24 Annual Audit Report to the Board and the Auditor General for Scotland indicates that Azets intend to report unqualified opinions within their independent auditors report in the financial statements for the year ended 31 July 2024, subject to completion of outstanding matters prior to formal signing.
- 3.5.3 The Annual Audit Report highlights the significant risks relating to financial sustainability due to the financial pressures on the college sector, which will require careful management and oversight.

#### 3.6 Other Matters

- 3.6.1 There are no matters arising from trusts, joint ventures, subsidiary, or associated companies.
- 3.6.2 There are no incidents of fraud.
- 3.6.3 There are no foreseeable events that will affect the work of the Audit Committee.

#### 3.7 Audit Committee Opinion

3.7.1 The financial statements present an accurate view of the state of affairs of the College at 31 July 2024 and of the surplus and cash flows for the year then ended and have been properly prepared;

Funds from the Scottish Funding Council and others have been used for the purposes for which they were given;

The College has complied with the Board's Standing Orders and Financial Regulations and where appropriate, the Financial Memorandum dated December 2014 from the Scottish Funding Council;

The College has appropriate systems in place to record, process, summarise and report financial and other relevant data. We have not identified any significant weaknesses or governance issues in the College's accounting and internal control systems throughout the period.

We are satisfied that the Board continued to receive sufficient and appropriate information throughout the period to support the effective and timely scrutiny and challenge.

3.7.2 The Audit Committee's view on the Board of Management's responsibilities, as described in the responsibilities of the Board of Management Statement, is that they have been satisfactorily discharged.

3.7.3 The Audit Committee believes that the Code of Audit Practice, and the Financial Memorandum, were fully complied with during 2023-24.

### 4. Strategic Implications

4.1 This paper links into all strategic priorities of Ambition 2025.

#### 5. Risk

Risk	Mitigations
Choose a risk	> As per Risk Register

### 6. Implications

Financial	YES	Financial loss and reputational damage and impact to financial sustainability
Legal	YES	Failure to comply with statutory requirements
Learning and Teaching YES		Failure to provide sustainable learning opportunities and reduced provision
Equalities	YES	Failure to comply with regulatory requirements

**Jamie Ross** 

Chair of the Audit Committee

28 November 2024



### **Dumfries and Galloway College**

Board of Manag	Board of Management					
Agenda Item	9					
Paper Number	BOM1224-9.1					
Date of Meeting	09 December 2024					
Location	MS Teams					
Title of Paper	Strategic Risk Register					
Presented by	L Grierson					
Recommendation	on Approval					
Freedom of Information	n Disclosure Assessment					
FOI flag:	⊠ Disclosable □ Non-disclosable					
Reason/s for choice:						
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)						
Further comments/updates after initial submission						
Date added	Added by (name and role)	Comment/detail				

Read Time: 25 Minutes

#### 1. Recommendation

- 1.1. The Board are asked to consider and review, in the first instance, Strategic Risks 1, 2, 5, 6 and 12 which are assigned to it.
- 1.2. After consideration by relevant Committees and recommendations from Audit Committee, the Board of Management are asked to consider, and if so minded, approve the whole Strategic Risk Register.

#### 2. Executive Summary

2.1 The Principal and Executive Leadership Team routinely review the Strategic Risk Register to reflect the key risks to the College and the mitigations that are applied to each risk. Risks are also circulated to relevant committees for their scrutiny and Audit Committee review high level risks and individual risks for deep-dive scrutiny

#### 3. Context

- 3.1 Currently there are 4 major risks rated 16-20, however after mitigations have been applied, only Risk 3 retains a major rating.
- 3.2 Risk 3: Failure to achieve institutional sustainability the inherent risk has a **fundamental 25 rating** (purple), but after mitigations, the residual rating of 20 still remains a **major risk**. In line with the current concerns around the external financial position, this continues to be monitored closely.
- 3.3 The Board of Management has 5 risks assigned to it for review. All risks have undergone a mitigation review and updated accordingly with any amendment by ELT owners to the scoring noted below:
  - Risk 1: Failure of College strategy to meet the needs of Dumfries and Galloway
     Region and/or national priorities no change
  - Risk 2: Legal actions; serious accident; incident or civil/criminal breach -no change
  - Risk 5: Business Continuity Incident Fire, Systems, Emergency Procedures,
     Health no change
  - Risk 6: Failure to meet regulatory obligations no change
  - Risk 12: Health and Safety no change

#### 3.4 Audit Committee

- Risk 4: Financial Fraud all mitigations have been reviewed and updated. No changes.
- Risk 11: Failure to achieve and maintain systems and operable and secure ICT No changes.

#### 3.5 <u>Learning and Teaching Committee</u>

- Risk 8: Academic Performance there has been an addition to independent monitoring, and residual likelihood reduced to 4/25 due to positive 3-year PI trend.
- ➤ Risk 9: Failure to adhere to Academic Compliance No changes.
- ➤ Risk 10 Failure to achieve an effective student experience Rating has been reduced due to high student satisfaction (97%), independent assurance by quality agency (Education Scotland) and improved and sustained student success over 3 years.

#### 3.6 Finance and General-Purpose Committee

- Risks 3 No changes to grading mitigations updated.
- ➤ Risk 7 Industrial Relations No changes.

#### 4. Terms of Reference

- 4.1 In line with the risk management audit actions, it was recommended that Audit Committee terms of reference should be updated to clearly reflect the information required within the deep dive template. This has been discussed and approved by Audit Committee.
  - Monitor, review and advise the Board on the Risk Management Policy and the effectiveness of the risk management systems, including the College's Risk Appetite to ensure the College's approach to managing risk is appropriate and adequate. The AC will review and discuss the Risk Register at each meeting and consider 'deep dives' of individual risks to seek assurance that the risk is being managed appropriately. The standard deep dive template will be used which provides a clear outline of information required ie context and rating rationale, examples of key mitigations and controls within the 1st and 2nd line of defence, appetite and tolerance, and make recommendations as required.

#### 5. Strategic Implications

4.1 The risks associated with Audit Committee link into the following strategic priorities:
 Priority 1 – Student Experience, Priority 4 – Growth and Financial Sustainability; Priority 5 – Systems and Infrastructure

#### 5. Risk

Risk	Mitigations	
All risks	Paperwork attached for reference.	

#### 7. Implications

Financial	YES	Financial loss, fraud and reputational damage and impact to financial sustainability.
Legal	YES	Failure to meet regulatory and compliance obligations
Learning and Teaching YES		Serious impact to the college's ability to operate and deliver education to students, financial loss, loss of data and reputation.

Equalities	NO	

**Lorraine Grierson** 

Governance Professional 25 November 2024



# **Dumfries and Galloway College**

	RISK DEFINITION		ORIGINAL	TASK			RESIDU	AL RISK			
No	Risk	Likelihood	Impact	Total	Risk Level	Likelihood	Impact	Total	Risk Level	Risk Appetite	Trend
Resp	onsible Person – Principal										
1	Failure of College strategy to	meet the need	s of Dumfries	and Gallowa	ay Region a	and/or nationa	I priorities	(BoM)			
	•	4	4	16		3	3	9		Open	=
2	Legal actions; serious accident	t; incident or ci	vil/criminal br	each (BoM)							
		5	3	15		3	2	6		Cautious	=
Resp	onsible Person – Executive D	irector of Fina	ance								
3	Failure to achieve institutional	sustainability (	(FGP)								
		5	5	25		4	5	20		Cautious	=
4	Financial Fraud (AUD)										
		4	3	12		3	2	6		Averse	=
6	Failure to meet regulatory obliq	gations (BoM)									
		3	5	15		5	1	5		Avoid	=
Resp	onsible Person – Vice Princip	oal People and	l Transforma	ation							
5	Business Continuity Incident –	Fire, Systems,	Emergency	Procedures,	Health (Bo	M)					
		4	4	16		4	3	12		Avoid	=
7	Failure to achieve effective Ind	ustrial Relation	ıs (FGP)								
		3	4	12		2	3	6		Cautious	V
11	Failure to achieve and maintain	n systems and	operable and	d secure ICT	(AUD)						
		4	5	20		3	5	15		Avoid	=

12	Health and Safety (BOM)									
		4	5	20		3	4	12	Avoid	=
Resp	onsible Person - Depute Prin	cipal Learning	g, Skills and	Student Exp	perience					
8	Failure to achieve highest acad	lemic performa	nce levels (L	_T)						
		3	4	12		1	4	4	Cautious	V
9	Failure to adhere to academic	compliance arr	angements (	LT)						
		4	3	12		2	2	4	Avoid	=
10	10 Failure to achieve an effective student experience (LT)									
		3	4	12		1	4	4	Cautious	V

Risks which should be monitored by the Risk Management Group:	Scores: 1 – 8	Minor Risk
Risks to be brought to the attention of SLT and Board of Management:	Scores: 9 - 15	Moderate Risk
Risks to be reported to, and monitored by, Board of Management:	Scores: 16 – 20	Major Risk
Risks to be reported to, and monitored by, Board of Management:	Scores: 21 – 25	Critical Risk

Score	Impact	Likelihood
1	Insignificant: the risk has minimal to no effect on the College's operations, objectives, reputation, stakeholders or financial sustainability.	Highly Unlikely: the likelihood of the risk occurring is minimal. It would be estimated that the risk has a 1-5% chance of happening.
2	Minor: the risk may cause slight disruption or impact on the College's operations, objectives, reputation, stakeholders or financial sustainability.	Unlikely: the likelihood of the risk occurring is unlikely but still possible. It would be estimated that the risk has a 6-25% chance of happening.
3	Moderate: the risk has a noticeable impact or disruption, affecting the College's operations, objectives, reputation, stakeholders or financial sustainability.	Possible: the likelihood of the risk occurring is reasonable. It would be estimated that the risk has a 26-50% chance of happening.
4	Major: the risk has a substantial impact on the College's operations, objectives, reputation, stakeholders or financial sustainability.	Likely: the likelihood of the risk occurring is probable. It would be estimated that the risk has a 51-75% chance of happening.

	5	10	15	20	25
act	4	8	12	16	20
Impact	3	6	9	12	15
	2	4	6	8	10
	1	2	3	4	5
	Likelihood				

#### Minor (1-8)

Acceptable level of risk subject to periodic review.

#### Moderate (9-15)

Moderate level of risk subject to regular monitoring and mitigating actions and plans being in place.

#### Major (16-20)

Unacceptable level of risk requiring immediate actions and plans to prevent or mitigate.

#### **Critical (21-25)**

Critical level of risk requiring urgent attention and Page 6 of 24 actions to prevent or mitigate.

Strategic Risk Register

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	. ,	11/1		1-4

Col	tical: the risk is a severe threat to the llege's operations, objectives, reputation, keholders or financial sustainability.	Almost Certain: the likelihood of the risk occurring is highly likely. It would be estimated that the risk has more than a 75% chance of happening.
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## **Dumfries and Galloway College**

Strategic Objective	Risk No: 1 Failure to meet Region/National Pr	iorities
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Reference to Risk Registers:	Strategic	Owner: Principal/BoM
Description of the Risk:	Failure of College strategy to meet the needs of Dumfries and Galloway Region and/or national priorities.	
risk was to emerge? region, co		nable to meet economic and societal needs of ot fit for purpose, College will not meet funding remain financially sustainable

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A) 4/5	IMPACT	(B) 4/5	What is the total risk score? (A x B)	16/25
The <b>GROSS</b> risk is therefore: (MIN/MOD/MAJ/CRIT)	Major F	Risk	4/3		

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Operational Plans</li> <li>PRDs</li> <li>Membership of REP</li> <li>Mission 2030</li> </ul>	Clear performance metrics for all strategic outcomes and linked to individual performance targets reviewed by Line Managers  SLT monitoring
Organisation Oversight  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Portfolio Review 1 - Pl and Curriculum Plan</li> <li>Portfolio Review 2 - Pl Review</li> <li>Reportage to BoM on Mission 2030</li> </ul>	Membership of key strategic groups     SLT Systems of Control and Reporting     Amendment of strategic direction/plans to government policy and regional economic strategy     Robust monitoring of activity targets via ROA and reported quarterly to SFC and BoM
Independent Assurance Internal Audit / external bodies	<ul> <li>Annual Engagement on Self Evaluation and Action Plan (SEAP) reportage</li> <li>Outcome Framework and Assurance Model</li> <li>Audit of Plans</li> </ul>	Education Scotland /QAA     Ongoing engagement and reporting to SFC     External Audit     BoM oversight

NET RISK SCORE (i.e with controls in place)						
LIKELIHOOD	(A) 3/5	IMPACT	(B) 3/5	What is the total risk score? (A x B)	9/25	

Risk Status	Meeting 1 MOD	Meeting 2 MOD	Meeting 3	Meeting 4

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations
	BoM – approved.
Q2	Owner – independent assurance mitigations updated in light of Tertiary Quality Enhancement Framework
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
1	Failure of College strategy to meet the needs of Dumfries and Galloway Region and/or national priorities						
4	Financial Fraud						
6	Failure to meet regulatory obligations						

# Strategic Objective: Risk No: 2 Legal Actions, Serious Incidents

Reference to Risk Registers	Strategic	Owner: Principal/BoM	
Description of the Risk:	Legal actions; serious accident; incident or civil/criminal breach		
What are the possible consequences if the risk was to emerge?	Financial loss to the college, impact on reputation and potential criminal / civil legal proceedings		

GROSS RISK SCORE (i.e without controls in place)						
LIKELIHOOD	(a)	IMPACT	(b)	What is the total risk score? (A x B)		
	5/5		3/5	Score: (AXB)	15/25	
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	te Risk				

3 LINES OF DEFENCE	MITIGATIONS	MONITORING

FRONT LINE  (Management Assurance)  Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Health and Safety Risk Assessments</li> <li>H&amp;S Training</li> <li>H&amp;S Committee</li> </ul>	Records of staff training and completion     Line Manager oversight
OVERSIGHT OF MANAGEMENT ACTIVITY  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	H&S Checks     EDI Annual Report	Monitoring and reporting in key areas – e.g., H&S, equalities, employee engagement/Staff surveys
INDEPENDENT ASSURANCE Internal Audit / external bodies	<ul> <li>External audit of fire systems</li> <li>External audit of H&amp;S</li> <li>BoM Audit</li> <li>EDI Report</li> </ul>	Internal and External Audit     BoM oversight     Reportage to SFC

NET RISK SCORE (i.e., with controls in place)						
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)		
	3/5		2/5	, ,	6/25	

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4	1
	MIN	MIN			

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No changes to ratings
	BoM - Approved
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings.
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
2	Legal actions; serious accident; incident or civil/criminal breach						

# Strategic Objective: Risk No: 3 Financial Sustainability

Reference to Risk Registers:	Financial	Owner: Principal / FGP		
Description of the Risk:	Failure to achieve institutional sustainability due to sector-level budge allocations in 2024-25			
What are the possible consequences if the risk was to emerge?	The college will be unable to operate within the Scottish Public Finance Manual, contravening governance requirements by SG, Section 22, Reputational damage to Board and F&GP			

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A) 5/5	IMPACT	(B) 5/5	What is the total risk score? (A x B)	25/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Critical	Risk			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Increase Commercial Income/ reduce reliance on SFC funding</li> <li>Effective cost control</li> <li>Active tracking of Credits against forecast</li> <li>Protection of funding through dialogue with SFC</li> <li>Scheme of Delegation</li> </ul>	<ul> <li>Commercial Reporting to FGP/review by SLT</li> <li>Reportage to SLT / FGP/ BoM</li> <li>Finance business partnering to review budgets/spend with Managers, and timely preparation of Management Accounts and forecasts</li> <li>Continuous monitoring of demand v funding allocation of student funds</li> <li>Spot checks by team</li> </ul>
Organisation Oversight Of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Budgets approval process</li> <li>Major project business cases approval processes</li> <li>Finance Directors Network</li> </ul>	Regular internal reporting to SLT, BoM and FGP Committee Regular interaction with Scottish Funding Council Finance Team Knowledge exchange through Finance Directors Network / Colleges Scotland VPs Group and Principals Group
Independent Assurance Internal Audit / external bodies	<ul> <li>Internal Audit Programme</li> <li>External Audit</li> <li>Regional Outcome Agreement</li> </ul>	External firm of professionals appointed/External by Audit Scotland / approval by Audit Committee/BoM     Regular returns to Scottish Funding Council (FFR/FES)

NET RISK SCORE (i.e with controls in place)						
LIKELIHOOD	(A)	IMPACT	\ /	What is the total risk score? (A x B)	20/25	
	4/5		5/5	,	20/20	

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4	
	MAJ				

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings.

	FGP/BoM- approved
Q2	Owner – No changes to ratings. FGP – approved.
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
3	Failure to achieve institutional sustainability						

# Strategic Objective: Risk No: 4 Financial Fraud

Reference to Risk Registers:	Financial	Owner: Executive Director of Finance/AUD
Description of the Risk:	Financial Fraud	
What are the possible consequences if the risk was to emerge?	Financial Loss, Loss o	f reputation, impact to financial sustainability

GROSS RISK SCORE (i.e without controls in place)						
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	12/25	
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	4/5 Moderate	Risk	3/5			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance)  Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>No PO / no Pay policy</li> <li>Scheme of Delegation</li> <li>Segregation of duties and review of transactions</li> <li>Staff training and sharing of good practice for risks</li> </ul>	<ul> <li>Continuous review of financial controls and spot checks by team</li> <li>Implementation of Internal Audit recommendations</li> <li>Training records/ tracking of audit recommendations</li> </ul>
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Review of impact of any changes in structure or duties</li> <li>Public Interest Disclosure (Whistleblowing) Policy</li> <li>Review of lessons learned report from COGC</li> </ul>	<ul> <li>SLT reportage</li> <li>Monitoring across SLT Directorates</li> <li>Tracking of audit recommendations</li> </ul>
Independent Assurance Internal Audit / external bodies	Internal Audit plan	Internal Audit     External firm of professionals appointed / approval and review of reports by Audit Committee /BoM oversight

NET RISK SCORE (i.e with controls in place)						
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	0.05	
	3/5		2/5	( /	6/25	

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MIN	MIN		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings. AUD/BoM – approved.
Q2	Owner – no changes
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
4	Financial Fraud						

# Strategic Objective: Risk No: 5 Business Continuity

Reference to Risk Registers:	Organisational	Owner: VP People and	
		Transformation/BoM	
Description of the Risk:	Business Continuity Incident – Fire, Systems, Emergency Procedures Health threats		
What are the possible consequences if the risk was to emerge?	Serious impact to the college's ability to operate and deliver educatio to students, safeguarding of staff and students, impact to financial sustainability of college, loss of reputation		

GROSS RISK SCORE (i.e without controls in place)						
LIKELIHOOD	(A) 4/5	IMPACT	(B) 4/5	What is the total risk score? (A x B)	16/25	
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Major R	isk				

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Business Continuity Plan</li> <li>Staff CPD on business continuity themes</li> <li>Monitoring Public Health Advice</li> <li>Planning, careful phasing of processes, systems and equipment</li> <li>Asset register</li> <li>Effective management of GDPR</li> </ul>	<ul> <li>Adherence to local and national Public Health Guidance</li> <li>Reporting to SLT on effectiveness of testing arrangements.</li> <li>Business continuity Plan walkthrough and desk top scenario planning</li> </ul>

		Active data protection monitoring, training and auditing     User acceptance testing of new systems
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	Rolling programme of routine updates to systems and equipment	<ul> <li>Liaison with SFC and Colleges Scotland</li> <li>Climate Emergency College Group (includes Student Representatives)</li> </ul>
Independent Assurance Internal Audit / external bodies	Communication to stakeholders	Internal Audit on process and statutory compliance     BoM oversight

NET RISK SCORE (i.e with controls in place)						
LIKELIHOOD	(A)	IMPACT?	` '	What is the total risk score? (A x B)	12/25	
	4/5		3/5	, ,	12/20	

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MOD	MOD		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings. BoM – approved.
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings.
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
5	Business Continuity Incident, e.g., Fire, MIS Failure, Failure of Emergency Procedures, Threats to Health						

# Strategic Objective: Risk No: 6 Failure to meet Regulatory Obligations

Reference to Departmental Risk Registers:	Organisational	Owner: Executive Director of Finance and Planning / BoM	
Description of the Risk:	Failure to meet regulatory obligations		
What are the possible consequences if the risk was to emerge?	Loss of reputation, impact to financial sustainability, Government bodi intervention		

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A) 3/5	IMPACT	(B) 5/5	What is the total risk score? (A x B)	15/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	ite Risk	•		

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance)  Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Prevent, Health and Safety and Safeguarding training</li> <li>Staff awareness and contingency planning</li> <li>Engagement/practice sharing with local agencies</li> </ul>	<ul> <li>Business Continuity Plan including scenario testing</li> <li>Training records/ Reportage to SLT</li> </ul>
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Engagement/practice sharing with local agencies</li> <li>Board approval of SFC submissions</li> </ul>	<ul> <li>Information sharing with local agencies</li> <li>Reportage to SLT/ Committees and BOM</li> </ul>
Independent Assurance Internal Audit / external bodies	<ul><li>Internal Audit Plan and review</li><li>External Audit Planning and review</li></ul>	External firm of professionals appointed/ approval and review of reports by Audit Committee

NET RISK SCORE (i.e with controls in place)							
LIKELIHOOD	(A)	IMPACT	\ /	What is the total risk score? (A x B)	5/25		
	5/5		1/5		3/23		

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MIN	MIN		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings.  BoM – approved.
Q2	Owner – no changes
Q3	
Q4	

	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
6	Failure to meet regulatory obligations						

### Strategic Objective: Risk No: 7 Failure to Achieve Effective Industrial Relations

Reference to Risk Registers:	Organisational	Owner: VP People and Transformation / FGP		
Description of the Risk:	Failure to achieve effective Industrial Relations through local dialogue/relationships and effect of national campaigns from trade unions			
What are the possible consequences if the risk was to emerge?	Financial loss, impact to ability to effectively teach, industrial action, action short of strike action (ASOS), loss of reputation.			

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	12/25
	3/5		4/5	Goorg : (ATA B)	12/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	ate Risk			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Constructive formal and informal communication channels</li> <li>Regular meetings</li> <li>Staff awareness and contingency planning</li> </ul>	LJNC (Local Joint Negotiating Committee)     College Employers Scotland advice and updates     Regular union/management dialogue
Organisation Oversight of Management Activity Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>LJNC (Local Joint Negotiation Committee)</li> <li>Representation at Employers Association</li> <li>NRPA (National Recognition and Procedures Agreement)</li> <li>Representation at Strategic HR Network</li> </ul>	ELT/SLT/Board     Staff engagement survey     Regular union/management dialogue
Independent Assurance Internal Audit / external bodies	College Employers Scotland	SFC/Scottish Government     HR Sub/BoM oversight

### NET RISK SCORE (i.e with controls in place)

LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk	
	2/5		3/5	score? (A x B)	6/25

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MOD	MIN	-	

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations.
	FGP – after discussion it was agreed that industrial disputes/ASOS have ceased and a reduced likelihood of upcoming disputes, therefore, the inherent rate has been reduced to 12 and the residual rate reduced to 6.
	BoM – approved.
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings.  FGP – approved.
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
7	Failure to achieve effective Industrial Relations						

#### Strategic Objective: Risk No: 8 Failure to achieve highest academic performance

Reference to Departmental Risk Registers:	Organisational	Owner: DP Learning Skills and Student Experience / LT	
Description of the Risk:	Failure to achieve highest academic performance levels		
What are the possible consequences if the risk was to emerge?	Loss of reputation in the region, financial sustainability, ability to attract future students and educational partners		
	<b>Note</b> – College performance has been a long term issue that predates COVID. Recent data identifies progress		

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A) 3/5	IMPACT	(B) 4/5	What is the total risk score? (A x B)	12/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	ite Risk	,		

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
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Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Online reportage of PI and Discussion with Teaching Team</li> <li>Self-Evaluation Reportage – Curriculum</li> <li>Student early experience survey and Student Satisfaction and Engagement Survey (SSES)</li> <li>Self-Evaluation Reportage – Support</li> <li>Complaint Procedure</li> </ul>	<ul> <li>Managers and Directors monitor course PIs</li> <li>Self-evaluation reporting monitored by Performance</li> </ul>
Organisation Oversight of Management Activity Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Portfolio Review 1 - PI and Curriculum Plan</li> <li>Portfolio Review 2 - PI Review</li> <li>Support Review</li> <li>Performance Review of Self Evaluation Block 1</li> <li>Performance Review of Self Evaluation Block 2</li> <li>Complaint Report</li> </ul>	College wide enhancement plan monitored annually Annual portfolio review to examine improvement actions Regular reportage on performance to SLT Reportage to L&T Committee on College wide self - evaluation and portfolio reviews
Independent Assurance Internal Audit / external bodies	<ul> <li>Annual Engagement Visit by Inspection Body</li> <li>Self-evaluation reportage to SFC</li> <li>Risk based Cycle of External Verification Visits</li> </ul>	<ul> <li>Reportage by Education         Scotland presented to the BoM</li> <li>Reportage to SFC Outcome         Team</li> <li>Awarding Body</li> <li>Scrutiny by QAA</li> </ul>

	NE	T RISK SCORE	(i.e with contro	ols in place)	
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	
	1/5		4/5	, ,	4/25

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MIN	MIN		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings.  LT/BoM – approved.
Q2	Owner – addition to Independent Monitoring, likelihood reduced to 4/25 due to 3-year PI trend.  LT: approved
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Ope n	Hungry
8	Failure to achieve highest academic performance levels						

# Strategic Objective: Risk No 9: Failure to adhere to academic compliance

Reference to Risk Registers:	Organisational	Owner: DP Learning Skills and Student Experience / LT
Description of the Risk:	Failure to adhere to academic compliance arrangements, eg awarding bodies, Education Scotland	
What are the possible consequences if the risk was to emerge:	Loss of reputation, financial loss, loss of ability to deliver and develop new courses, loss of ability to issue international visas and impact on student certification.	

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	
	4/5		3/5	,	12/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	te risk			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Assessor marks in line with national standards utilising awarding body resources.</li> <li>Curriculum team meetings</li> <li>Self-Evaluation Reportage         <ul> <li>Curriculum</li> </ul> </li> <li>Self Evaluation Reportage         <ul> <li>Support</li> </ul> </li> <li>Complaint Procedure</li> </ul>	<ul> <li>Internal verifier appointed for each unit and a cycle of verification is followed.</li> <li>Curriculum Managers</li> <li>Self-evaluation plan and reporting monitored by Performance</li> </ul>
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Compliance report by academic block</li> <li>Performance Review of Self Evaluation Block 1</li> <li>Performance Review of Self Evaluation Block 2</li> <li>Performance Review of Self Evaluation Block 3</li> <li>Complaint Report</li> </ul>	<ul> <li>College Wide Review by Performance Manager at SLT</li> <li>Reportage to SLT and L&amp;T Committee on College wide self -evaluation and Complaints</li> </ul>
Independent Assurance Internal Audit / external bodies	<ul> <li>Cycle of External Verification Visits</li> <li>Annual Engagement Visit by Inspection Body</li> <li>Self-Evaluation Reportage to SFC</li> </ul>	External verifier     Performance directorate     monitor external verification     and report to SLT and the L&T     Committee.     Reportage by Education     Scotland/QAA presented to the     BoM     SFC Outcome Team monitor     returns and provide feedback     as required

NET RISK SCORE (i.e with controls in place)					
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	
	2/5		2/5	(11x 2)	4/25

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MIN	MIN		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings. LT/BoM – approved.
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings. LT: approved.
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Ope n	Hungry
9	Failure to adhere to academic compliance arrangements						

### Strategic Objective: Risk No: 10 Failure to achieve an effective student experience

Reference to Risk Registers:	Organisational	Owner: DP Learning, Skills and Student	
		Experience / LT (Inc Infrastructure/Marketing/ICT)	
Description of the Risk:	Failure to achieve an effective student experience		
What are the possible consequences if the risk was to emerge?	Loss of reputation in the region, financial sustainability, ability to attract future students, ability to retain students and potential to limit student progression.		

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	
	3/5		4/5	, ,	12/25
The <b>GROSS</b> risk is therefore: MIN/MOD/MAJ/CRIT	Modera	te Risk			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Curriculum team meetings</li> <li>Self-Evaluation Reportage –         Curriculum</li> <li>Student early experience survey and         Student Satisfaction and         Engagement Survey (SSES)</li> <li>Student representative meetings</li> <li>Self-Evaluation Reportage – Support</li> <li>Complaint Procedure</li> </ul>	<ul> <li>Curriculum Managers (CMs)</li> <li>Self-evaluation reporting monitored by Performance and Directors</li> <li>Performance return survey and SSES results to CMs</li> <li>Performance overview</li> <li>Self-evaluation reporting monitored by Performance and Directors</li> </ul>

Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Performance Review of Self Evaluation Block 1</li> <li>Performance Review of Self Evaluation Block 2</li> <li>Performance Review of Self Evaluation Block 3</li> <li>Portfolio Review 1 - Pl and Curriculum Plan</li> <li>Portfolio Review 2 - Pl Review</li> <li>Support Review</li> <li>Complaint Report</li> </ul>	Reportage to SLT and L&T Committee on College wide self -evaluation, enhancement plan and portfolio reviews
Independent Assurance Internal Audit / external bodies	<ul> <li>Annual Engagement Visit by Inspection Body</li> <li>Self-evaluation reportage to SFC</li> <li>Outcome Framework and Assurance Model</li> </ul>	Reportage by Education     Scotland/QAA presented to the     BoM     SFC Outcome Team monitor     returns and provide feedback     as required

NET RISK SCORE (i.e with controls in place)					
LIKELIHOOD  (A) IMPACT (B) What is the total risk score? (A x B)  4/2					

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4	
	MIN	MIN			

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings.  LT/BoM – approved.
Q2	Owner - all mitigations have been reviewed and updated. Rating reduced due to high student satisfaction (97%), independent assurance by quality agency (Education Scotland) and improved and sustained student success over 3 years.  LT: approved
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
10	Failure to achieve an effective student experience						

### Strategic Objective: Risk No: 11 Failure to maintain systems and operable and secure ICT

Reference to Risk Registers:	Organisational	Owner: VP People and Transformation / AUD	
Description of the Risk:	Failure to achieve and maintain systems and operable and secure ICT		
What are the possible consequences if the risk was to emerge?	Serious impact to the college's ability to operate and deliver education to students, financial loss, loss of data and reputation		

LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk	
LIKELIHOOD	(A)	INIPACI	(6)	score? (A x B)	
	4/5		5/5	, ,	20/25
The <b>GROSS</b> risk is therefore: (MIN/MOD/MAJ/CRIT)	Major				

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line  (Management Assurance)  Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Documented disaster recovery procedures</li> <li>Cyber Incident disaster recovery plan and training</li> <li>Staff CPD on business continuity areas including Cyber security</li> <li>Firewalls and antivirus software in place</li> <li>ICT Systems linked to the Business Continuity and Management Plan</li> <li>'Ethical hacker' training completed by staff</li> <li>Cyber essentials certified</li> </ul>	<ul> <li>Cyber exercises</li> <li>Phishing exercises</li> <li>Regular planned security monitoring.</li> <li>Network Monitoring</li> </ul>
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Planned cyber exercises</li> <li>Planned phishing exercises.</li> <li>Cyber exercises – exercise in a box NCSC</li> <li>Infrastructure updates from external review of ICT estate</li> </ul>	<ul> <li>Feedback via SLT/ELT on monitoring statistics;</li> <li>Regular Board reporting around cyber position;</li> </ul>
Independent Assurance  Internal Audit / external bodies	CISO (Chief Information Security Officer) service in place through HEFESTIS.	<ul> <li>Regular reporting and risk assessment.</li> <li>Audit Committee/BoM oversight</li> </ul>

NET RISK SCORE (i.e with controls in place)						
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	12/25	
	3/5		4/5	((1,12)	12/23	

Risk Status		Meeting 1 MOD	Meeting 2 MOD	Meeting 3	Meeting 4	
MEETING	IG AMENDMENTS TO RECORD AND PLANS TO TREAT					
Q1	Owner – reviewed and updated mitigations. No change to ratings.  AUD/BoM – approved.					
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings					
Q3						
Q4						

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
11	Failure to achieve and maintain systems and operable and secure ICT						

# Strategic Objective: Risk No: 12 Health & Safety Compliance

Reference to Risk Registers:	Organisational	Owner: VP People and Transformation / BoM	
Description of the Risk:	Failure to meet regulatory health & safety obligations		
What are the possible consequences if the risk was to emerge?			

GROSS RISK SCORE (i.e without controls in place)					
LIKELIHOOD	(A)	IMPACT	(B)	What is the total risk score? (A x B)	20/25
	4/5		5/5		
The <b>GROSS</b> risk is therefore: (MIN/MOD/MAJ/CRIT)	Major F	Risk			

3 LINES OF DEFENCE	MITIGATIONS	MONITORING
Front Line (Management Assurance) Operational Delivery /Systems /Quality Assurance /Supervision	<ul> <li>Reporting and review procedures, including near miss</li> <li>Health and Safety and IOSH training for staff</li> <li>Regular communication on responsibilities</li> </ul>	Regular, formal Health & Safety Committee     BoM H&S Champion attends H&S committee meetings
Organisation Oversight of Management Activity  Internal Compliance and quality checks / Legal and Regulatory / Financial controls / Management controls / Project assurance	<ul> <li>Reporting of H&amp;S is standard agenda item at SLT meetings</li> <li>Smartlog system</li> </ul>	Reporting to FGP Committee / BoM
Independent Assurance Internal Audit / external bodies	External independent oversight from H&S specialist	Internal Audit     Public Health     Environmental Health

LIKELIHOOD	(A) 3/5	IMPACT	(B) 4/5	What is the total risk score? (A x B)	12/25

Risk Status	Meeting 1	Meeting 2	Meeting 3	Meeting 4
	MOD	MOD		

MEETING	AMENDMENTS TO RECORD AND PLANS TO TREAT
Q1	Owner – reviewed and updated mitigations. No change to ratings.  BoM – approved.
Q2	Owner - all mitigations have been reviewed and updated. No change to ratings
Q3	
Q4	

No.	Risk and Risk Appetite	Avoid	Averse	Cautious	Moderate	Open	Hungry
12	Health & Safety compliance						



## **Dumfries and Galloway College**

<b>Board of Manag</b>	ement			
Agenda Item	9			
Paper Number	BOM1224-9.2			
Date of Meeting	09 December 2024			
Location	MS Teams			
Title of Paper	Risk Appetite Review			
Presented by	esented by L Grierson			
Recommendation Approval				
Freedom of Information	n Disclosure Assessment			
FOI flag:	⊠ Disclosable ☐ Non-disclosable			
Reason/s for choice:				
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)	en will it become bsable? Has FOI br guidance been  Disclosable after BoM approval			
Further comments/updates after initial submission				
Date added	Added by (name and role)	Comment/detail		

Read Time: 25 Minutes

## 1. Recommendation

After consideration and recommendation by the Audit Committee, the Board is asked to note the numerical scoring matrix added to the risk appetite and **approve the** updated risk appetite for 2024-25.

#### 2. Executive Summary

2.1. The purpose of this paper is for the Board to satisfy itself that the organisation is properly embedding the risk appetite within the activities, limits, and reporting of the organisation, and invite **approval of** the reviewed risk appetite. BoM is asked to note the addition of the scoring matrix for Dumfries and Galloway College, which has been included on the recommendation from the Risk Management Audit Report. The risk appetite is appended to each risk as they are reviewed at the relevant committee and board of management meeting.

#### 3. Context

- 3.1 <u>Dumfries and Galloway College's Risk Appetite</u>
- 3.1.1 The College maintains a risk register which divides its risks into 12 areas. Each has an Executive lead, and each risk is monitored by the Board, but a number are overseen operationally by Board committees, which report back to the Board. Each risk area on the risk register has a score for gross risk (without controls) and net risk (with controls).
- 3.1.2 In 2022/23 the Executive completed an initial assessment of Dumfries and Galloway College's risk appetite in relation to the following organisational risk areas:
  - Failure of College strategy to meet the needs of Dumfries and Galloway Region and/or national priorities.
  - Legal actions; serious accident; incident or civil/criminal breach
  - Failure to achieve institutional sustainability.
  - Financial Fraud
  - ➤ Business Continuity Incident e.g., Fire, MIS Failure, Failure of Emergency Procedures, Threats to Health
  - Failure to meet regulatory obligations
  - Failure to achieve effective Industrial Relations
  - Failure to achieve highest academic performance levels
  - Failure to adhere to academic compliance arrangements
  - Failure to achieve an effective student experience
- 3.1.3 In 2023-24, 2 new risks were added:
  - Failure to achieve and maintain systems and operable and secure ICT
  - Health and Safety
- 3.1.4 For each area, Dumfries and Galloway College undertook an assessment of its risk appetite using a six-point scale: Avoid/ Averse/ Cautious/ Moderate/ Open/ Hungry. The definitions of each point on the scale were based on guidance developed by HM Treasury

for public bodies and the executive's rationale for each risk and associated appetite was compiled (appendix 1).

#### 4. Review of Risk Appetite 2024-25

- 4.1 The Executive team have reviewed the risk appetite for 2024-25 taking into consideration recommendations from the internal Risk Management audit which was conducted in March 2024.
- 4.2 An action from the Audit was to attribute numerical scores to each appetite rating enabling a comparison to the residual rating for each risk. In doing this, it identifies clearly when a risk is above, below or within, the risk appetite level. Risk response would then be applied: Terminate, Treat, Transfer or Tolerate, to determine the course of action.
- 4.3 In line with this, and in consultation with Zurich Insurance, we have compiled a scoring matrix as noted below, and aligned this to the 6-point appetite scale. However, Zurich have suggested level 1 'AVOID' should be removed as an appetite option. The term is defined as "not prepared to accept any risk" and the only way to achieve this is to stop the activity giving rise to the risk which is a management decision as part of the "4 T's" and not necessarily a suitable approach to defining appetite.

## 4.4 Risk Appetite Aligned to Risk Map

1	5	5 AVERSE	10 CAUTIOUS	15 MODERATE	20 OPEN	25 HUNGRY
	4	4 AVERSE	8 CAUTIOUS	12 MODERATE	16 OPEN	20 OPEN
	3	3 AVERSE	6 AVERSE	9 CAUTIOUS	12 MODERATE	15 MODERATE
	2	2 AVERSE	4 AVERSE	6 AVERSE	8 CAUTIOUS	10 CAUTIOUS
Impac	1	1 AVOID	2 AVERSE	3 AVERSE	4 AVERSE	5 AVERSE
	•	1 Likelihood	2	3	4	5

4.4.1 The Executive and Audit Committee have endorsed the removal of 'Avoid' and the appetite scale has been amended below showing the changes.

## 4.4.2 Risk Appetite Scale

Classification	Description
AVERSE 1-6	Prepared to accept only the very lowest levels of risk, with the preference being for very safe decision-making and strategy implementation, while recognising there may be little opportunity for innovation or the exploitation of new opportunities.
CAUTIOUS 7-10	Willing to accept some low risks, while maintaining an overall preference for safe decision-making and strategy implementation, despite the probability that there is restricted potential for innovation and increased outcomes and benefits.
MODERATE 11-15	Tending predominantly towards exposure to only modest levels of risk in order to achieve acceptable, but possibly unambitious outcomes or benefits.
OPEN 16-20	Prepared to consider innovative decisions and strategic implementation and selecting those with the highest probability of productive outcomes and benefits, even where there are elevated levels of associated risk.
HUNGRY 21-25	Proactively taking innovative/creative/pioneering decisions and adopting forms of strategic implementation, while accepting the associated substantial risk levels in order to secure highly successful outcomes and benefits.

4.4.3 The scored appetite will be applied to the Risk Register (appendix 1), to enable a comparison against the residual ratings and identify risks within, above or below appetite.

## 5. Risk Appetite for 2024-25

5.1 After discussion at Audit Committee the appetite level for 2024-25 has been amended and outlined below. There has been movement from averse to cautious/moderate to reflect the current position the college is in and to allow scope for progression and innovation to meet future opportunities and challenges.

No	lo. Risk and Risk Appetite		Cautious	Moderate	Open	Hungry
		1-6	7-10	11-15	16-20	21-25
1	Failure of College strategy to meet the needs of Dumfries and Galloway Region and/or national priorities					
2	Legal actions; serious accident; incident or civil/criminal breach					
3	Failure to achieve institutional sustainability					
4	Financial Fraud					
5	Business Continuity Incident – e.g., Fire, Failure of Emergency Procedures, Threats to Health					
6	Failure to meet regulatory obligations					
7	Failure to achieve effective Industrial Relations					
8	Failure to achieve highest academic performance levels					
9	Failure to adhere to academic compliance arrangements					
10	Failure to achieve effective student outcomes					
11	Failure to achieve and maintain systems and operable and secure ICT					
12	Health and Safety					

## **Risk Appetite Statement**

- 5.2.1 The Risk appetite Statement has been reviewed in line with the changes to appetite and is attached below. Any amendments have been highlighted in yellow.
  - We encourage a well-managed risk appetite to develop and deliver a high-quality Student Experience to meet the changing needs of our region. We will ensure that we do not lose sight of the impact of taking these risks in more risk-sensitive parts of the business.
  - Taking a well understood approach to risk to help us achieve our long-term mission of providing individuals, businesses, and communities with the skills to flourish. We are willing to take well-managed risks to raise profile, and performance levels, creating meaningful partnerships with stakeholders to influence policymakers on behalf of the region we serve and across the tertiary education sector.
  - In areas of our business where we are restricted in our risk taking due to the requirement to comply with relevant policy, regulations, legislation, and standards (e.g., financial management, data protection, safeguarding legislation) our risk appetite is to comply; however, in order to operate efficiently and take advantage of suitable new opportunities, we are willing to incur low levels of risk where requirements are open to interpretation.

Risk Area	Appetite Statement	How Delivered	
Failure of College strategy to meet the needs of Dumfries and Galloway Region	We are willing to take well-informed and well managed risks to change the service we provide or the way we relate to our stakeholders.	To improve our service, we may need to change the way we operate and relate to them. So, we can meet the needs of policy drivers we are willing to take the risk that changes may not align with all stakeholders' needs.	
and/or national priorities Risk No: 1 Contact: Principal	We may take well-understood risks to resource use, service levels and customer satisfaction to improve the way we serve our stakeholders create opportunities for our students.	We are reluctant to take a risk that could have a significant impact on our relationship with our primary funder. We will publish timely communications to our stakeholders detailing the offer and any changes to services.	
	We are willing to accept well-understood risks that come from offering a service that supports our strategic aims.	We will regularly seek opportunities for stakeholder engagement and feedback.	
	We are willing to accept well-understood risks that come from moving to new business models that help our long-term strategic position.	When introducing new business models, we accept there is a risk that not all stakeholders will like the outcome, and this may have a negative impact on our profile.	
	We are willing to take managed risks that enable Dumfries and Galloway College to support policy developments.	We will ensure all interaction with media and PR is carefully managed through external expertise.	
	We will not risk taking any position that would harm our ability to maintain Dumfries and Galloway College's reputation and status as a publicly funded not-for-profit organisation.	We will manage staff and student behaviour likely to cause reputational damage through the relevant college policy framework.	
	We will not risk taking a position that would bring Dumfries and Galloway College into disrepute either through staff or student activity or alignment to stakeholder activity that would compromise this position.	We will routinely seek the views of staff, student and stakeholders on our services and publish the outcome of these.	
Legal actions; serious accident;	We will always comply with the legal and regulatory framework in which we operate.  In places where law or regulation is open to interpretation, we may use an interpretation that favours our preferred course of	We will plan for the impact of changes to law and regulations well ahead of the time they will come into force, and if necessary, take advice from external experts on what they mean for us.	

Risk Area	Appetite Statement	How Delivered
incident or civil/ criminal breach Risk No: 2 Contact: Principal	action (based on legal counsel), where we know that any legal challenge favours our position.  We are willing to incur a limited amount of risk of a contractual dispute to achieve important strategic or financial goals.  We will contest cases brought against DGC where we have a better than 80% chance of winning	We may walk away from an opportunity rather than sign a highly disadvantageous or legally defective contract, especially if external experts confirm the potential problems that may arise.
Failure to Achieve Institutional Sustainability and Financial Fraud Risk No: 3 and 4 Contact: Exec Director Finance	We are willing to take carefully managed risks in the way we manage our finances that would lead to a breach of current regulations, legislation and standards or leave us open to fraud or potential money laundering.  In places where finance law or regulation is open to interpretation, we may use an interpretation that favours our preferred course of action (based on the advice of external expertise).	We will check that our annual returns and accounts comply fully with relevant laws and regulations (e.g., SFC, ONS or HMRC).  We will plan for the impact of changes to regulations well ahead of the time they will come into force, and if necessary, take advice from external experts on what they mean for us.  If we must decide about a financial issue where law or regulations leave areas of uncertainty, we will not automatically take the most cautious view.
Business Continuity Incident – e.g., Fire, Failure of Emergency Procedure, Threats to Health, Systems Failure, Cyber Incidents Risk No: 5 and 11 Contact: VP People and Transformation	We are not willing to take risks to health and wellbeing of staff, students through any event that could cause an impact on this. The risks will be mitigated through control measures.  We are not willing to take risks to the integrity of our data and systems cause by the impact of a business continuity. The risks will be mitigated through control measures.	We will plan for the impact of business continuity incidents and disaster recovery through the use of simulated exercises as a method of flagging any vulnerabilities and rehearsing well developed business and disaster recovery planning and will develop 'lessons learned' outcomes from such exercises.  We will link in with regional and national recovery response teams to help plan and jointly manage any business continuity risks e.g., COVID-19  We will plan for higher levels of disruption to operations in order to deliver education and services that meet members' immediate needs. especially those that would help their response to Covid-19.  We will plan for the likelihood of any event that disrupts productivity in operations in order to ensure the safety of our staff, to be sustainable and effective as an organisation and to deliver education and services to stakeholders during crisis situations such as Covid-19.

Risk Area	Appetite Statement	How Delivered		
Failure to meet regulatory obligations and Climate Change targets e.g., GDPR,	Where Dumfries and Galloway College is processing personal data, other sensitive data or our operations are at risk, we are not willing to accept information security risks as any incidents involving these areas is more likely to lead to	We will ensure that the correct structures, controls, and training are in place to ensure that information security is well managed and has the attention of senior management.		
Health and Safety, HR	reputational damage and regulatory action.	Through our health and safety monitoring process we will ensure that highest standards of compliance and reporting are met.		
Risk No: 6 and 12  Contact: Exec finance	We are not willing to accept a risk that puts life, and the well-being of people, at risk.	We will also maintain an awareness of new standards, threats, and vulnerabilities, and ensure that the risks from these are managed.		
director / VP People and Transformation	We are open to taking well-understood risks in recruitment and skills to achieve one or more of our strategic priorities.	To build DGC as a more modern and efficient organisation, we are willing to accept that satisfaction may decline for some members of staff		
	We may take well understood risks to operations to introduce more effective and efficient processes and systems.	because we need to change strategies and policies, and that some staff may leave.		
	We are willing to risk higher levels of disruption and impact on productivity in operations in order to ensure that DGC achieves its chosen Net Zero target, currently set as 2030.	We will recruit staff which bridge skills deficits to realise opportunities and introduce new talents and expertise into the business. Our recruitment will match our vision to be an inclusive employer.		
	We are willing to risk higher levels of disruption and impact on productivity in operations in order to ensure that DGC supports the regional and national Climate Change ambitions.	To retain talented members of staff we are willing to risk making limited one-off changes to employment policies within our framework but within legislation.		
		To modernise HR/Payroll/Finance and IT systems through a transformative approach, we are willing to risk temporary periods of manual work around to get to improved systems and reporting.		
Failure to achieving effective Industrial Relations	In its management of national bargaining and through membership of the EA we will take a cautious approach to this risk in order to minimise the risks to the organisation and	We will run regular LJNC meetings with TU representatives and ensure that consultation on relevant matters are tables at the correct fora.		
Risk No: 7	to its staff, particularly where these may pose a threat to our financial sustainability, or where they may create significant	We will engage with staff through a number of channels throughout the year to seek feedback and act accordingly.		
Contact: VP People and Transformation	instability, uncertainty, or public relations damage to the college and more broadly the college sector.	We will adopt a revised set of values and ensure that these are embedded into our culture		
Failure to achieve highest academic performance levels	DGC has minimal to cautious appetite for risk exposure that could result in a reduction in the academic performances of all modes of students (FT and PT).	It is recognised that the College conducts curriculum portfolio reviews to ensure the offer matches the market. This enables scrutiny of each curriculum area to ensure that student performance is enhanced.		

Risk Area	Appetite Statement	How Delivered
Risk No: 8 Contact: DP Learning, Skills, and Student	The College has a positive student performance trend at all modes and levels over the last 3 years.	We are prepared to accept that performance may be below the national sector performance in a small number of courses if there is an economic need in the region for the skills they develop.
Experience		We will plan curriculum pathways and commit resource that enables study at each SCQF level and also take account of entry qualifications and also routes to employment and further study.
		We are prepared to commit resource to ensure that our teaching staff have TQFE and relevant CPD to deliver to the highest standards.
		We are prepared to commit resource to ensure that we provide support to retain students and enable their progression.
Failure to adherence to academic compliance a rrangements Risk No: 9 Contact: DP Learning, Skills, and Student Experience	We will take a cautious approach to ensure that we do not compromise our compliance with awarding body quality arrangements which would endanger our ability to deliver qualifications.  We will be cautious and plan action to ensure we are not deemed 'unsatisfactory' by QAA or Education Scotland within their respective arrangements.	We are prepared to commit significant resource to the monitoring and minimisation of national standards.  We are prepared to commit significant resource to develop and implement an enhancement and improvement plan for teaching and support areas. This plan will be within the College's Self Evaluation and Enhancement Plan (SEAP).
Failure to achieving effective student outcomes Risk No: 10 Contact: DP Learning, Skills, and Student Experience	We will mitigate actions that affect the student experience by taking a moderate approach to risk.  We are committed to the achievement of strategic goals through the strategic planning process and will ensure a "student first" approach to planning is paramount.	We will ensure that decisions made put students first and we will ensure that student feedback is featured first within our governance arrangements.  We will take decisions which enhance processes to student satisfaction and will commit resources to onboarding and to student retention and support.  We will ensure that the Student Association is provided with resources to enable it to contribute to student life and to the life and work of the College.

## 6. Strategic Implications

6.1 The risks associated with Audit Committee link into the following strategic priorities:

Priority 1 – Student Experience, Priority 4 – Growth and Financial Sustainability; Priority 5

– Systems and Infrastructure

### 7. Risk

Risk	Mitigations		
All Risks	> As per Risk Register supporting documentation.		

## 8. Implications

Financial	NO	
Legal	NO	
Learning and Teaching	NO	
Equalities	NO	

### **Lorraine Grierson**

Governance Professional 20 November 2024

# Appendix 1

	RISK DEFINITION		ORIGINAL	TASK			RESIDU	AL RISK			
No	Risk	Likelihood	Impact	Total	Risk Level	Likelihood	Impact	Total	Risk Level	Risk Appetite	Trend
Resp	onsible Person – Principal										
1	Failure of College strategy to	meet the need	s of Dumfrie	s and Gallow	ay Region	and/or nationa	al priorities	(BoM)			
		4	4	16		3	3	9		Open 16-20	=
2	Legal actions; serious acciden	t; incident or ci	vil/criminal b	reach (BoM)							
		5	3	15		3	2	6		Cautious 7-10	=
Resp	onsible Person – Executive D	Director of Fin	ance								
3	Failure to achieve institutional	sustainability	(FGP)								
		5	5	25		4	5	20		Cautious 7-10	=
4	Financial Fraud (AUD)										
		4	3	12		3	2	6		Cautious 7-10	=
6	Failure to meet regulatory obliq	gations (BoM)				•					
		3	5	15		5	1	5		Cautious 7-10	=
Resp	onsible Person – Vice Princip	oal People and	d Transform	ation							
5	Business Continuity Incident –	Fire, Systems	, Emergency	Procedures,	Health (Bo	oM)					
		4	4	16		4	3	12		Cautious 7-10	=
7	Failure to achieve effective Ind	lustrial Relation	ns (FGP)								
		3	4	12		2	3	6		Moderate 11-15	=
11	Failure to achieve and maintai	n systems and	operable an	d secure ICT	(AUD)						
		4	5	20		3	5	15		Cautious 7-10	=
12	Health and Safety (BOM)										
		4	5	20		3	4	12		Cautious 7-10	=
Resp	onsible Person - Depute Prir	ncipal Learnin	g, Skills and	l Student Ex	perience						
8	Failure to achieve highest aca	demic performa	ance levels (I	LT)							
		3	4	12		1	4	4		Moderate 11-15	V
9	Failure to adhere to academic	compliance ar	rangements	(LT)							
		4	3	12		2	2	4		Cautious 7-10	=
10	Failure to achieve an effective	student experi	ence (LT)								

	3	4	12		1	4	4	Moderate 11-15	V
Risks which should be monitored by the	Risk Manageme	ent Group:	Sco	res: 1 – 8	Mir	or Risk			
Risks to be brought to the attention of SL	T and Board of	Management:	Sco	res: 9 - 15	Mo	derate Risk			
Risks to be reported to, and monitored by	y, Board of Mana	agement:	Sco	res: 16 – 20	Ma	jor Risk			
Risks to be reported to, and monitored by	y, Board of Mana	agement:	Sco	res: 21 – 25	Cri	tical Risk			



One step ahead

# **Dumfries and Galloway College**

Board of Management					
Agenda Item	11				
Paper Number	BOM1224-11.1				
Date of Meeting	09 December 2024				
Location	Dumfries Campus				
Title of Paper	Chair's Report				
Presented by	Caroline Stuart				
Recommendation	Discussion				
Freedom of Information	n Disclosure Assessment				
FOI flag:	□ Disclosable □ Non-disclosable				
Reason/s for choice:					
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)					
Further comments/updates after initial submission					
Date added	Added by (name and role)	Comment/detail			

Read Time: 2 minutes

## 1. Recommendation

1.1. The Board of Management are asked to **note** and **discuss** any points within the paper.

Chair's Report BOM1224-11.1

## 2. Executive Summary

2.1 The purpose of this report is to update the Board on the activities of the Chair during the period since the last Board meeting on 1 October 2024. This report covers activity during the period October to December 2024. The Board are invited to note and discuss the contents.

#### 3. Activities October to December 2024

#### 3.1 Governance Review

- 3.1.1 An interim review of Governance was completed by Candy Munro of CDN during the first quarter and the report was shared with members in the June meeting.
- 3.1.2 We commissioned CDN to undertake the major Governance review in the Autumn 2024. The report is attached, and Candy Munro will attend the Board meeting in December to give the Board the findings and recommendations. The recommendations have been accepted and are being actioned and added to the Board Development Plan 24-25. All members and staff should be very proud of this report and the hard work that has gone in to getting us here. My thanks go to Lorraine for all her hard work and professionalism over the past 3 years.

#### 3.2 Engagements Oct-Dec 2024

- Colleges Scotland Chairs Meeting
- Colleges Scotland Board meeting
- College Scotland Strategic Planning session 10-year vision
- Colleges Scotland Ministerial meeting
- Candy Munro CDN re Governance review x2
- Meeting SFC
- > COSS
- College Graduation
- UWS Graduation
- Principal UWS
- Young Enterprise Scotland

#### 3.3 Board Recruitment

3.3.1 We will be seeking new Board members and will get that process underway early in 2025.

Chair's Report BOM1024-10.1

## 4. Risk

Risk	Mitigations
	None attached to the paper

# 5. Implications

Financial	NO	
Legal	NO	
Learning and Teaching	NO	
Equalities	NO	

## **Caroline Stuart**

Chair of the Board of Management

2<sup>nd</sup> December 2024



## **Dumfries and Galloway College**

Board of Management					
Agenda Item	21				
Paper Number	BOM1224-21.1				
Date of Meeting	9 December 2024				
Location	MS Teams				
Title of Paper	Early Student Satisfaction Survey Results				
Presented by	D Dickson				
Recommendation	Noting				
Freedom of Information	Freedom of Information Disclosure Assessment				
FOI flag:	□ Disclosable □ Non-disclosable				
Reason/s for choice:					
Notes from author: (When will it become disclosable? Has FOI Officer guidance been sought?)					
Further comments/updates after initial submission					
Date added	Added by (name and role)	Comment/detail			
	,				

Read Time: 7 minutes

## 1. Recommendation

1.1. The Board are asked to note the output of the Early Experience Student Survey for academic year 2024/25.

## 2. Executive Summary

- 2.1. The purpose of this report is to provide the Board of Management with a summary report of the findings of our Early Experience Student Survey for academic year 2024/25.
- 2.2. The summary report gives insight into how students feel about their early experience at Dumfries and Galloway College scoring us 4.6 out of 5 overall.
- 3. Student voice is critical in informing how we progress as part of our wider self-evaluative processes. This survey will be an essential tool we leverage and utilise demonstrating student voice enhancing the student experience is a strong asset under the new SEAP principles around student voice and partnership.
- 3.1. The survey was developed to be simple and easy to complete for students whilst still recording enough informative and specific data.
- 3.2. We introduced the Early Experience Student Survey in 2022 and following evaluation we made some amendments in 2023.
- 3.3 We have once again included a contextualised section around student experience and support services including a specific self-evaluative question set for all teams within DG-SEE. This is about what they have learned from their departments feedback and how that will be actioned. You Said We Did activity directly linked to this will be submitted to Performance in Block 2 and shared outwardly to students.

#### 4. Context

- 4.1 The DGC Early Experience Student survey was issued to ascertain levels of student satisfaction from their initial onboarding and first month of learning and teaching at the college. This year we have once again achieved an overall rating of **4.6 out of 5** which sustains levels of satisfaction from last academic session and staff should be commended for their efforts on this. Significantly this year we have seen a **80%** return from all eligible students which is a **15% increase** on return from the previous academic year and a **39.5% increase** on the 2022-2023 return.
- 4.2 The summary report (attached) has been shared across college with all staff. The survey has been set up in a way where the Performance team can drill down into curriculum and course specific level detail and feedback for use by curriculum teams to understand success and inform enhancements.
- 4.3 Based on curriculum specific feedback teams have been asked to complete a You Said / We Did activity as part of this to be submitted within the DG-SEE system. Performance will track completion of this activity.
- 4.4 College wide themes have been identified and reports shared with specific service areas. Similar You Said / We Did reporting will be done and will be included in the Block Self-Evaluation report as well as reported back to students.

# 4.5 Examples of immediate impact:

Department	Students Said	We Did
Engineering	Three students were travelling from Stranraer for a half day of learning. Was impacted on them financially, causing them to be late and at times miss classes.	Bespoke timetable was arranged supporting access to classes remotely. Students are accessing devices and learning from the Stranraer campus and removing travel for that half day.
Early Years	Mature students identified a need for additional support around digital skills for learning.	Bespoke digital skills sessions will be added to programme for all students. We will look at enhanced activity for 24/25 as [art of induction and onboarding.
Health and Social Care	Online students had intimated they had at times felt isolated from the group and wider college life.	Team have agreed and mapped monthly 'Get Together' sessions for cohorts. Coming together to develop cohesion and share learning.
Make Up and Hairdressing	Students noted that staff and students moving in and through teaching spaces was distracting from learning.	The team have created new signage and developed new protocols for moving through practical spaces to enhance learning activities and focus.
Computing	Students were finding it confusing where to get feedback on progress from each staff member across programmes.	Team are developing a single space where students will digitally access their own progress, next steps and outstanding work.
Construction	Students enjoyed induction but noted there could have been more team building activities to get to know each other.	This will be developed and included into 25/26 induction. The team are going to look at additional team events and activities for students this AY.

## 5. Strategic Implications

5.1 The practice of organisational self-evaluation holds profound strategic implications for enhancing the student experience within the college and helps us meet the ambitious targets set within the student experience strategy. By systematically assessing our own performance, processes, and resources, we can identify areas of improvement and innovation. Student voice plays a critical part in understanding our services and impact of our work allowing us to align our approaches with the evolving needs and expectations of students, thereby optimizing the overall student experience. By tailoring our services based on student informed enhancement, we can refine our services, from curriculum design to support services, ultimately resulting in a more personalised and impactful journey for students.

#### 6. Risk

Risk	Mitigations
achieve an effective student experience	<ul> <li>Student block surveys and Student Satisfaction and Engagement Survey (SSES).</li> </ul>
	Student engagement prior to course start and on course.
	<ul> <li>Continuous self- evaluation and action planning by support and teaching areas captured through DG-SEE.</li> </ul>
	Action planning at curriculum area level.
	Regular curriculum team meetings.
	Student class representatives input to course teams.

### 7. Implications

Financial	YES	Output of ongoing self-evaluative activity can impact performance and helps meet reporting requirements around funding allocations.
Legal	NO	
Learning and Teaching	YES	Effective student engagement should enhance learning and teaching and services to support learning which should seek to improve areas of performance.
Equalities	YES	Student engagement activities are in place to ensure we are hearing voice of a wide breadth of our student populations, allowing us to respond to diverse needs.

## **Phil Storrier**

Executive Director of Student Experience 01 November 2024



# EARLY EXPERIENCE STUDENT SURVEY SUMMARY REPORT 24-25

Date: October 2024



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## Introduction

This is a high-level report detailing the overall satisfaction per curriculum area.

For a third consecutive year the Dumfries and Galloway College Early Experience Student Survey was issued by the Performance Team to ascertain levels of student satisfaction. The survey was open for two working weeks from 9 September 2024 to 20 September 2024 and could be accessed by students via a link on LearnNet/Student Portal and was hosted in a Wufoo Survey. Digital screens displaying a QR code were also utilised to promote the survey. Personal Tutors were asked to promote and encourage engagement with the survey.

Students were invited to rate their satisfaction from 1 star (very poor) to 5 stars (great). The questions sought feedback in each of the following areas:

- Feeling Welcome and Valued
- Learning Experience so far
- Our Curriculum Staff
- Our Support Staff
- Support Services
- Places and Platforms for Learning
- "One Thing" we could do better

As this is the third academic session the Early Experience Survey has been issued, we are able to make comparisons to sessions 23-24 and 22-23, where the questions remained the same.

A high number of positive comments were received in relation to Questions 1- 6. This is a reflection on the positive ratings received. Specific curriculum/support area data, including comments has been shared with the relevant manager. Action grids have been produced to allow opportunity to feedback on the comments raised and to record any cross-college trends. This will form part of the College You Said We Did process.

## **Key Observations**

- Overall participation increased by 15%
- Overall satisfaction rating 4.6 out of 5
- Thighest participation increase achieved was 31% (Early Years/Childcare)
- Thigh satisfaction ratings maintained for all curriculum areas (4.5 and above)
- 7 Question 1 8 curriculum areas achieved higher ratings than the previous session
- 7 Question 2 6 curriculum areas achieved higher ratings than the previous session
- 7 Question 3 6 curriculum areas achieved higher ratings than the previous session
- 7 Question 4 9 curriculum areas achieved higher ratings than the previous session
- 7 Question 5 10 curriculum areas achieved higher ratings than the previous session
- 7 Question 6 9 curriculum areas achieved higher ratings than the previous session
- 4 curriculum areas increased in all 6 rated questions (Early Years/Childcare, Creative Industries, Lifeskills Employability and Pathways and Renewable Transport)

## **Survey Participation**

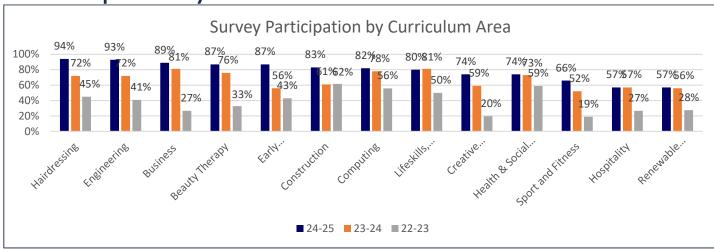
Overall participation in the survey was extremely positive with 1289 responses in total.

Session	2024-2025	2023-2024	2022-2023	
Responses per session	1289	1055	722	
	(80%)	(65%)	(40.5%)	

80% of the total eligible current student population took part. The 80% return is a 15% increase on the response, and a 39.5% increase on the 2022-2023 return.

The response rates varied across curriculum teams, with the highest response rates being from Hairdressing (94%) and Engineering (93%). For the majority of curriculum areas there was a significant increase in the participation rates on comparison to the previous sessions.





The most significant participation increase was for Early Years/Childcare, increasing by 31% from 2023-2024. Hairdressing and Construction both increased by 22%. Participation for Lifeskills, Employability and Pathways decreased slightly by 1%, with no change to the participation rate for Hospitality.

Due to some schools having a strict no mobile phone use policy, to maximise the participation, paper copies of the survey were utilised. This yielded 12 responses (0.9%) in one curriculum area.

## **Overall Results**

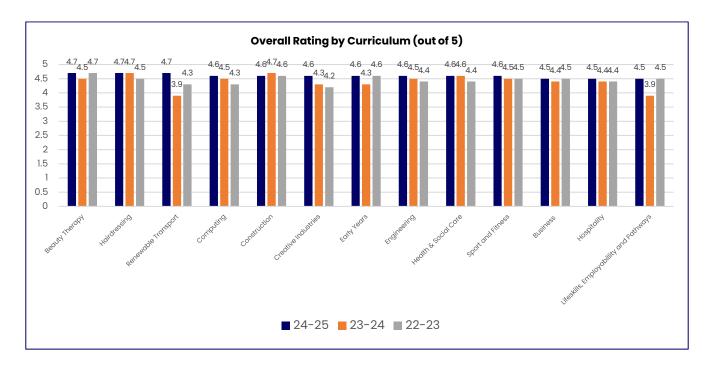
The average overall rating across all questions was 4.6 out of 5, a slight increase on the rating achieved for the two previous sessions. The retainment of this average for a third consecutive session is extremely positive.

Average rating (out of 5) across all Curriculum areas by Question:



Questions/Average ratings out of 5	2024-2025	2023-2024	2022-2023
Overall rating	4.6	4.5	4.5
Feeling Welcome and Valued	4.6	4.5	4.4
Learning Experience so far	4.6	4.5	4.5
Our Curriculum Staff	4.7	4.4	4.7
Our Support Staff	4.5	4.4	
Our Support Services	4.5	4.3	N/A
Places and Platforms	4.6	4.3	4.3

The charts below display the overall satisfaction rating by Curriculum Areas and by the count of results by each rating (1 to 5):



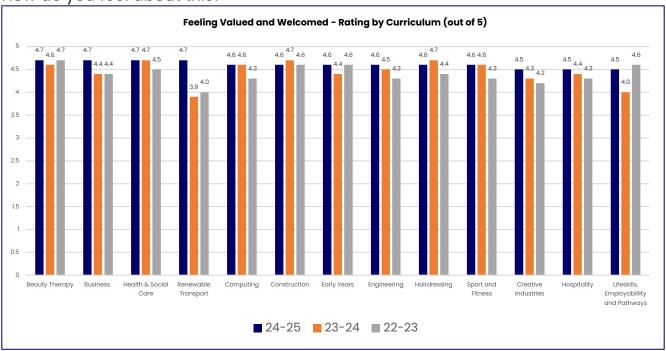
Ten of the curriculum areas noted increases in the overall satisfaction rating. Two areas, Hairdressing and Health and Social Care, maintained the same rating. One area, Construction noted a decrease of 1% in the overall satisfaction rating.

As all ratings are 4.5 and above out of 5 we have continued to maintain a high overall rating across all curriculum areas.

## **Results by Question**

Question 1 - Feeling Welcomed and Valued

Students were asked - things like welcome activities, induction processes, sense of belonging, staff and fellow students, feeling that you are cared about as a student. How do you feel about this?



On comparison to Session 23-24, 8 of the curriculum areas had higher ratings, 2 had decreased ratings and 3 remained the same. These ratings were comparable to those achieved in 22-23.

Renewable Transport achieved the highest increase, +0.8, with Lifeskills, Employability and Pathways achieving +0.5 and Business +0.3.

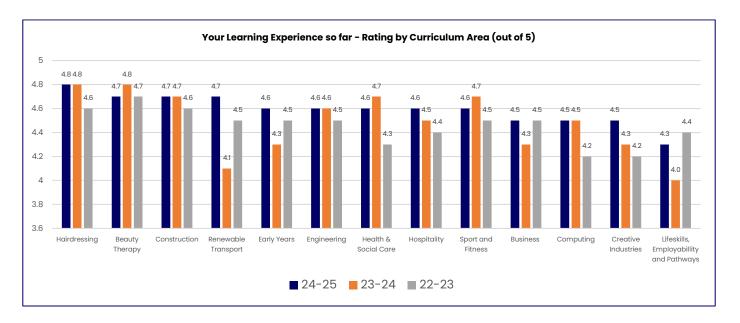
Students were given the opportunity to make comments relating to each of the six questions. The majority of comments referred to staff being welcoming and that the induction process was positive. A selection of individual comments from the Feeling Welcomed and Valued question are:

Being an older student, I was very nervous and did have some misgivings about doing the course but all the staff were very welcoming, helpful and reassuring. I have really enjoyed my first few weeks at the college.

- Teveryone in the college has made me feel very welcome coming into the college and the staff are very kind and helpful.
- Everyone is including and approaching
- fantastic course, really interesting and lecturers really friendly and helpful
- 1've felt very welcome and well informed during the lead up and start of my course.

## Question 2 - Your Learning Experience so far

Student were asked - things like your course and classes, your expectations, being engaged and making progress, getting feedback. What is your experience?



On comparison to Session 23-24, 6 of the curriculum areas rated higher, 3 rated lower and 4 remained the same. The number of areas achieving a higher rating has reduced, on comparison to session 23-24.

Renewable Transport achieved the highest increase, +0.6, with Lifeskills, Employability and Pathways and Education achieving +0.3.

Students were given the opportunity to make comments relating to each of the six questions. The majority of comments referred to the learning experience so far being very positive and interesting.

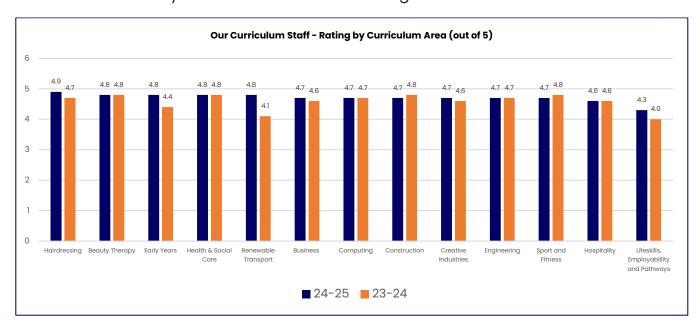
A selection of individual comments from the Learning Experience so far question are:

- As a class I think we're progressing really quickly and have learnt a lot in a short amount of time
- Teverything is explained properly and my lecturer makes sure we all understand
- I always feel like I'm included in the course and that my input towards learning is always valued
- My learning experience so far has been positive, expectations of the course has been clearly stated. The coursework/assessments have been explained, as well as the course classes.
- Really enjoy practical side of my course and the skills this develops and well taught due to constant feedback from lecturer so you know what is needed while completing tasks

## **Question 3 - Our Curriculum Staff**

This was a new question for Session 23-24 so there is no comparison to session 22-23.

Students were asked - things like how helpful and approachable are your lecturers, Personal Tutor, Curriculum Manager. Do you feel supported as a student and an individual by our staff? How are we doing?



On comparison to Session 23-24, 6 of the curriculum areas rated higher, 2 rated lower and 5 remained the same.

Renewable Transport achieved the highest increase, +0.7, with Early Years achieving +0.4 and Lifeskills, Employability and Pathways achieving +0.3.

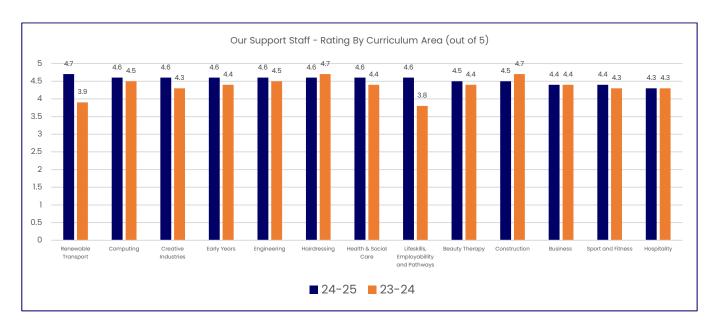
Students were given the opportunity to make comments relating to each of the six questions. The majority of comments noted that students felt supported by lecturing staff and that they are approachable. A selection of individual comments from the Our Curriculum Staff question are:

- Yes. I feel supported by lecturers. They're all so lovely and make you feel welcome and you don't feel silly if you don't understand something.
- Yes I do feel supported. I was referred to learning zone for extra support and I am happy to be taking this step.
- Lecturers are very helpful and always explain things in better ways if I am struggling
- I feel my lecturer is amazing and she makes sure we understand everything and doesn't rush through things too quickly but still has a good pace
- The lecturers are supportive. Although, we are studying online it is good to have some regular access in person to the lecturers at the college, where we can discuss studies or things we cannot find online.

## Question 4 – Our Support Staff

This was a new question for Session 23-24 so there is no comparison to Session 22-23.

Students were asked - things like how helpful and approachable are specialist student support staff. Do you feel supported as a student and an individual by our specialist support teams? How are we doing?



On comparison to Session 23-24, 9 of the curriculum areas rated higher, 2 rated lower and 2 remained the same.

Renewable Transport and Lifeskills, Employability and Pathways achieved the highest increase, +0.8, with Creative Industries achieving +0.3.

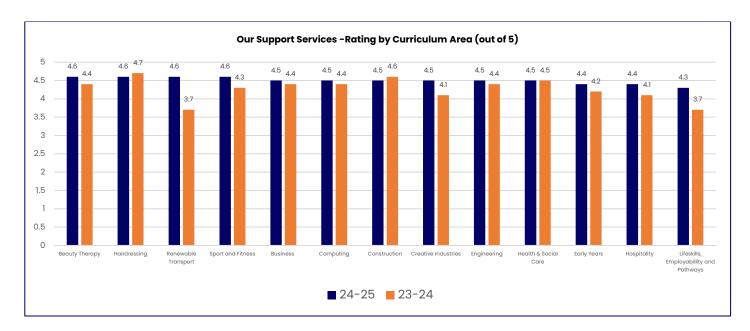
Students were given the opportunity to make comments relating to each of the six questions. The majority of comments referred to support staff being helpful and approachable. A selection of individual comments from the Our Support Staff question are:

- 7 I feel seen, safe and supported at this college.
- 7 I'm yet to use any of the support staff but just having them available is great.
- Support staff helped me a lot with my bursary I really appreciate them.
- Yes been made to feel very welcome by support staff and due to meeting some of them on induction means I feel comfortable to approach them with any questions I may have
- the student support team have really helped me since I have started at college with my additional support needs. welcoming and caring

## **Question 5 – Support Services**

This was a new question for Session 23-24 so there is no comparison to Session 22-23.

Students were asked – How effective are our specialist support services such as the application proves, enrolment process, onboarding activities? Do you feel our support services enhanced the overall student experience? Please tell us about your experience.



On comparison to Session 23-24, 10 of the curriculum areas rated higher, 2 rated lower and 1 remained the same.

Renewable Transport achieved the highest increase, +0.9, Lifeskills, Employability and Pathways achieving +0.6 and Creative Industries achieving +0.4.

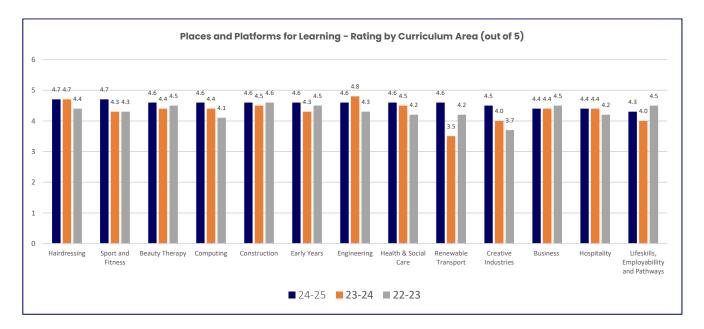
Students were given the opportunity to make comments relating to each of the six questions. The majority of comments referred to our support services as being really effective and our application process being straightforward. A selection of individual comments from the Our Support Services question are:

- During my application process I feel I was supported very well, whenever I had a question they emailed me back very quickly
- Excellent enrolled very easily
- The support services has helped my experience.

- I came to the open day session and I feel this was a great experience to engage with staff and students from different courses and get a eye opener or the campus.
- The support services and student advisers are great with helping in any aspect of college life.

## Question 6 - Places and Platform for Learning

Students were asked - things like college spaces - buildings, studios and workshops and online learning environments. Please tell us about your experience.



On comparison to Session 23-24, 9 of the curriculum areas rated higher, 1 rated lower and 4 remained the same. The number of areas achieving a higher rating has reduced, in comparison to session 23 -24.

Renewable Transport achieved the highest increase, +1.1, a vast improvement on the -0.7 variation achieved between sessions 22-23 and 23-24. Creative Industries achieved a +0.5 rating increase and Sport and Fitness +0.4.

Students were given the opportunity to make comments relating to each of the six questions. Most comments confirmed that our college environment is a good place for learning. A selection of individual comments from the Platforms and Places for learning question are:

- Good facilities nice and new, library space is large and airy
- Very good, great experience with the online learning environment
- There's lots of good places to quietly study
- The computing lab is brilliant. Clean, comfortable and no shortage of equipment to keep up to date with course learning.
- All learning platforms so far have been easy to use.

## Question 7 - "One thing"

Students were asked - If there is one thing we could do to make your experience at College better what would that be?

There were 310 comments logged, noting areas where we could do better. These are free text responses which have been examined for key themes.

Session	24-25	23-24	22-23
Number of comments received	310	359	217

The themes are comparable to the previous sessions and a summary of the most common themes is provided below:

Theme	24-25	23-24	22-23
Catering provision, choice and pricing	21.9%	25.6%	26.7%
Curriculum	50.2%	43.7%	34.1%
Estates	5.1%	10.6%	13.4%
IT	3.5%	6.1%	4.6%
Support/Funding	2.3%	2.8%	4.1%
Transport	6.8%	4.5%	7.4%
On campus activities	9.3%	6.1%	9.7%
Other	1.0%	0.6%	0.0%

There has been a decrease in the number of comments submitted in relation to 'one thing we could do better' in comparison to last session. A number of key themes have been identified and these include the following:

- Online and Hybrid Learning (across all questions we have received comments from those who like it and those who don't)
- Better Wifi Connection required (6 comments)
- Bring back bottled water on campus (8 comments)
- Cheaper Food Prices and Better Options (26 comments)

A large quantity of these provided positive feedback and were not related to a particular theme. A sample are provided below:

- Nothing, lovely environment to be in and makes you feel incredibly welcomed by all
- 7 I'm content with my college experience
- Everything is great and I've thoroughly enjoyed learning so far!
- Nothing as I have felt welcomed and supported as soon as I started

The number of comments relating to Transport increased by 2.3% from session 23-24 with many students wishing for free travel and an increase on the bus services travelling to and from College.

On Campus activities was another theme which saw an increase, with the number of comments increasing by 3.2%. These comments have been passed to the Active Campus Co-Ordinator and the Student Association for consideration.

The increase percentage in the number of comments relating to the Curriculum was a result of fewer overall comments being received. The number of curriculum related comments only increased by 1 (157 curriculum comments in 24-25 and 156 in 23-24).

'One thing' comments relating to curriculum areas are comparable to the previous sessions and a summary of the most common themes is provided below:

Theme	24-25	23-24	22-23
Number of curriculum related comments	156	157	74
Course content/management	51.9%	42%	59.5%
Hybrid learning	14.7%	10.8%	21.6%
Rooms/tools/facilities	14.4%	23.6%	6.8%
Start times/breaks	10.3%	17.8%	9.5%
Support	8.3%	5.7%	2.7%
Other	0.6%	0%	0%

Feedback from curriculum and support managers will be gathered as part of the College You Said We Did process.

The Performance Team October 2024