

Meeting of the Group Audit and Risk Committee

4.00 - 6.00 pm on Tuesday, 15 June 2021
via MS Teams

Supplement

<i>No.</i>	<i>Item</i>	<i>Pages</i>
19.	Supplement: subsidiaries update	3 - 48
	<ul style="list-style-type: none">• SBA internal audit report: Budget setting• SBC internal audit report: Prevent• SBC Audit Committee minutes: 10 February 2021• SBA Audit Committee minutes: 9 March 2021	

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Paper title:	Internal Audit –SBA Budget Setting
Board/Committee	Group Audit and Risk Committee
Date of meeting:	15 June 2021
Author:	BDO
Sponsor:	Fiona Morey - Executive Principal
Purpose:	For information
Recommendation:	The Committee is requested to note the report.

Summary

This report gives a moderate level of assurance in relation to both design and implementation around budget setting and control.

- Four medium level recommendations were raised
- One low level recommendation was raised.
- One medium level and one low level recommendation have already been recognised and remediated, as reported in the management responses.
- One medium level item relates to the setting of KPIs, which is currently in progress and will be the subject of another planned audit later in the year.

The remaining two medium level items relate to reporting thresholds to the SBA Board in relation to management accounts. A short paper with proposed levels of tolerances and rationale will be submitted to the SBA Board meeting in July 2021.

Recommendation:

The Committee is requested to note this report.

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SOUTH BANK ACADEMIES

INTERNAL AUDIT REPORT - FINAL

BUDGET SETTING AND CONTROL
MAY 2021

LEVEL OF ASSURANCE	
Design	Operational Effectiveness
Moderate	Moderate



LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

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DISTRIBUTION

Helena Abrahams	Trust Business Manager
Dan Cundy	Executive Principal
Fiona Morey	Executive Principal, Lambeth College



REPORT STATUS LIST

Auditors:	Chris Boyles
Dates work performed:	4 January - 10 March 2021
Draft report issued:	6 May 2021
Final report issued:	18 May 2021






LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

EXECUTIVE SUMMARY

LEVEL OF ASSURANCE: (SEE APPENDIX I FOR DEFINITIONS)

Design		Generally a sound system of internal control designed to achieve system objectives with some exceptions.
Effectiveness		Evidence of non compliance with some controls, that may put some of the system objectives at risk.

SUMMARY OF RECOMMENDATIONS: (SEE APPENDIX I)

High		
Medium		 4
Low		 1

TOTAL NUMBER OF RECOMMENDATIONS: 4

BACKGROUND:

The budget setting process starts in February/March each year and is approved by the Board in July. Although the ESFA requires a three-year forecast, SBA has produced a five-year forecast this year as it has recognised the need for long-term strategic planning.

The University Academy of Engineering (UAE) was opened in 2014 and the University Technical College (UTC) was opened in 2016. There is a relatively short history on which to base trends on, especially in terms of recruitment numbers. The Trust Business Manager joined the Trust during 2019/20 and has been through one full budget setting process (for 2020/21).

The 2021/22 budget setting process commenced at the time of our fieldwork.

Each school principal is responsible for forecasting student numbers for their own school. Student numbers is the key driver for determining the grant income received by the schools each year. As the Trust produces a five year budget forecast, any adverse variances in student numbers for the first year will impact on subsequent years. The Trust Business Manager, with the assistance of the management accountant, calculates expenditure which is usually inflationary increases on utilities, facilities management and catering from the prior year's budget. The teachers' pay award, determined by the Government for non-Trust schools, is adopted by SBA in order to attract and retain talent. SBA has to make an assumption on what the teachers' pay award will be when drafting the budget as it not determined until August each year. The budgets for both schools are consolidated for the purposes of understanding the total surplus across the Trust.

Although the initial budget is approved by the Board in July, ready for the new academic year, a reforecasting exercise takes place in November each year to take account of the actual student numbers (based on the October census figures) and the teachers' pay award.

Performance against budget is reported to and scrutinised to the Board quarterly, with the Board having access to the management accounts on a monthly basis.

The reforecast against budget that was approved by the Board in December 2020 showed total consolidated income of around £105k more than the original budget and a reduction in expenditure of £27k compared to the original budget.

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

SCOPE AND APPROACH:

We interviewed key personnel to ascertain the budget setting process in place including the processes for forecasting student numbers and identifying expenditure. We reviewed the budget setting guidance to assess whether it clearly outlines the process to be followed, including key responsibilities and timings.

We also assessed how key assumptions are determined around student number forecasting, increases in expenditure and over the teachers' pay award. We assessed whether there is appropriate scrutiny over the budget set by the Board and whether monitoring of performance against budget is robust.

We considered whether variance against budget can be identified, whether appropriate action was taken when variances were identified and if actions were monitored for effectiveness.

GOOD PRACTICE:

Finance provided both school principals with an appropriate level of information on the budget setting process in a timely manner to support consistency between the two schools in developing their budgets.

The SBA Board appears to have a good level of oversight over the budget setting process and approves the final budget. It also receives performance reports showing actuals against budget and has access to the management accounts between Board meetings.

The Board paper from July 2020 clearly outlines the assumptions that were made in setting the budget.

A suite of metrics has been developed to sit alongside the budget setting process to show, for example, the proportion of staff costs against income, average teacher costs, pupil teach ratio, proportion of budget spent on leadership costs and spend per pupil on non-pay expenditure lines.

KEY FINDINGS:

We have raised five findings as a result of our review; four of medium significance and one of low significance.

The four medium significance findings relate to there being no threshold in place over which variances against budget should be discussed at Board level, there being no threshold for when formal action needs to be taken where adverse variances arise, that performance against KPIs set during the budget setting process is not measured and that cash inflow and outflows are not accurately profiled within the cash flow forecast.

CONCLUSION:

We are able to provide moderate assurance over the design and over the operational effectiveness of the controls in place to support the budget setting and monitoring process in place at SBA.

OUR TESTING DID NOT IDENTIFY ANY CONCERNS SURROUNDING THE CONTROLS IN PLACE TO MITIGATE THE FOLLOWING RISKS:

- ✓ There is no scrutiny or approval of proposed budgets.
- ✓ Reforecasting does not take place, is inaccurate and/or based on inaccurate assumptions.


LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

- ✓ Financial information presented to the SBA Board is inaccurate and/or variances are not supported by appropriate explanations.
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LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

DETAILED FINDINGS

RISK: BUDGET VARIANCES ARE NOT IDENTIFIED NOR INVESTIGATED AND REPORTING OF VARIANCES DOES NOT OCCUR IN A TIMELY MANNER.

Ref	Sig.	Finding
1		<p>There is no threshold set for the level in which variances against budget are highlighted and discussed at the SBA Board.</p> <p>The financial Board paper is very detailed and highlights all variances against budget and reasons for the variances. All variances are then discussed at the Board.</p> <p>Whilst the level of detail provided demonstrates openness and transparency in the reporting of variances against budget, highlighting every variance may not be an appropriate use of Finance or the Board's time, especially when some variances may roll over from one period to the next.</p>

RECOMMENDATION:

The SBA Board should set a threshold for variances that should always be highlighted and discussed at Board level.

Lower level variances should still be understood by management.

Management should also consider setting key performance indicators for the budget monitoring process (or reporting these against the performance indicators set at the budget setting stage).

MANAGEMENT RESPONSE:


We agree with the audit findings and will work with the SBA Board to decide a level of variances that need to be reported.

Responsible Officer: Helena Abrahams

Implementation Date: September 2021 (start of new financial year)

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

RISK: CORRECTIVE ACTION IS NOT TAKEN WHEN ADVERSE VARIANCES ARE IDENTIFIED.

Ref	Sig.	Finding
2		<p>There is no threshold set for when variances against budget require formal correction action.</p> <p>Corrective action for variances against budget are considered on an individual basis and the relevant individual will put a plan in place. There is no formal monitoring mechanism to check if plans are being followed and whether these plans are effective.</p> <p>There is a risk that plans to rectify variances are not put in place or are not put in place in a timely manner, resulting in variances increasing.</p>

RECOMMENDATION:

A threshold should be set for when formal corrective action for variances against budget is required. These plans should be included within the Board financial paper (described in finding 1) and a formal monitoring mechanism should be in place to assess effectiveness of the plans).

MANAGEMENT RESPONSE:


We agree with the audit finding and will work with the SBA Board to agree corrective action.

Responsible Officer: Helena Abrahams

Implementation Date: September 2021 (start of new financial year)

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

RISK: PERFORMANCE AGAINST BUDGET IS NOT MONITORED.

Ref	Sig.	Finding
3		<p>Actual performance against the KPIs used during the budget setting is not measured throughout the year.</p> <p>A suite of metrics has been developed to sit alongside the budget setting process to show, for example, the proportion of staff costs against income, average teacher costs, pupil teacher ratio, proportion of budget spent on leadership costs and spend per pupil on non-pay expenditure lines. The original budget showed how the proposed budget measures against each of these over a five year period (eg total staff costs as a proportion of total expenses for 2020/21 was expected to be 67%). However, actual performance against these expected forecast outturn performance is not measured.</p> <p>Furthermore, the Budget Setting guidance includes a KPI of class sizes. However, this is not included within the suite of KPIs that support the budget presented to the SBA Board.</p> <p>There is a risk that under performance against the metrics is not identified.</p>

RECOMMENDATION:

Actual performance / expected outturn forecast performance against the KPIs set during the budget setting process should be measured and reported on throughout the year.

The KPI on class sizes referred to in the Budget Setting guidance should be included within the initial KPIs reported during the budget setting process.

MANAGEMENT RESPONSE:

We agree with the audit findings and will have an agreed set of KPIs to report to the SBA Board. There is a wider group audit due to take place for all KPIs so we will ensure that the agreed KPIs are feed into this audit.


Responsible Officer: Helena Abrahams

Implementation Date: September 2021 (start of new financial year)

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

RISK: INAPPROPRIATE BUDGETS ARE SET DUE:

- TO INCORRECT STUDENT FORECASTING,
- EXPENDITURE NOT IDENTIFIED OR INCLUDED
- INAPPROPRIATE ASSUMPTIONS BEING USED
- INCORRECT INCOME AND EXPENDITURE PROFILING ACROSS THE YEAR AND/OR NOT TAKING CASH FLOW INTO CONSIDERATION

Ref	Sig.	Finding
4		<p>Cash inflows and outflows are not profiled in line with expected cash movements within the cash flow forecast.</p> <p>Instead, income and expenditure is split by 1/12th each month and may not be representative of when inflows and outflows actual occur.</p> <p>There is a risk that that insufficient cash is available to meet committed expenditure requirements.</p>

RECOMMENDATION:

SBA should profile cash inflows and outflows within the cash flow forecast.

MANAGEMENT RESPONSE:


We agree with the audit findings and prior to this report, we have already made changes to the way the cashflow forecasting is reported.

Responsible Officer: Helena Abrahams/Om Parkash

Implementation Date: Already implemented

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

RISK: THERE IS NO SCRUTINY OR APPROVAL OF PROPOSED BUDGETS.

Ref	Sig.	Finding
5		<p>Meetings between Finance and the school Principals to discuss budgets are not documented.</p> <p>Once initial budgets have been set, Finance meets with each Principal to discuss the budgets, challenge assumptions etc and as a result, amendments are made to the budget.</p> <p>The changes discussed are not documented and there is no tracking of amendments made. If key decisions and assumptions are not documented, there is a risk that changes may be missed, or inaccurate amendments are made. There will also be no history of assumptions used to assess if accurate in future budget setting periods.</p>

RECOMMENDATION:

Actions arising from budget setting meetings should be documented to support changes that are made to the budgets.

MANAGEMENT RESPONSE:

We are now keeping a fully documented record of the changes applied to each version of the draft budget before it is agreed. We will continue to keep a record of the amendments made to the working budget.

Responsible Officer: Helena Abrahams

Implementation Date: Already implemented

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL





STAFF INTERVIEWED

BDO LLP APPRECIATES THE TIME PROVIDED BY ALL THE INDIVIDUALS INVOLVED IN THIS REVIEW AND WOULD LIKE TO THANK THEM FOR THEIR ASSISTANCE AND COOPERATION.




Helena Abrahams	Trust Business Manager
Dan Cundy	Executive Principal
Fiona Morey	Executive Principal, Lambeth College
Hitesh Tailor	SBA Board Chair

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

APPENDIX I - DEFINITIONS

LEVEL OF ASSURANCE	DESIGN OF INTERNAL CONTROL FRAMEWORK		OPERATIONAL EFFECTIVENESS OF CONTROLS	
	FINDINGS FROM REVIEW	DESIGN OPINION	FINDINGS FROM REVIEW	EFFECTIVENESS OPINION
Substantial 	Appropriate procedures and controls in place to mitigate the key risks.	There is a sound system of internal control designed to achieve system objectives.	No, or only minor, exceptions found in testing of the procedures and controls.	The controls that are in place are being consistently applied.
Moderate 	In the main there are appropriate procedures and controls in place to mitigate the key risks reviewed albeit with some that are not fully effective.	Generally a sound system of internal control designed to achieve system objectives with some exceptions.	A small number of exceptions found in testing of the procedures and controls.	Evidence of non compliance with some controls, that may put some of the system objectives at risk.
Limited 	A number of significant gaps identified in the procedures and controls in key areas. Where practical, efforts should be made to address in-year.	System of internal controls is weakened with system objectives at risk of not being achieved.	A number of reoccurring exceptions found in testing of the procedures and controls. Where practical, efforts should be made to address in-year.	Non-compliance with key procedures and controls places the system objectives at risk.
No 	For all risk areas there are significant gaps in the procedures and controls. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Poor system of internal control.	Due to absence of effective controls and procedures, no reliance can be placed on their operation. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Non compliance and/or compliance with inadequate controls.

RECOMMENDATION SIGNIFICANCE

High 	A weakness where there is substantial risk of loss, fraud, impropriety, poor value for money, or failure to achieve organisational objectives. Such risk could lead to an adverse impact on the business. Remedial action must be taken urgently.
Medium 	A weakness in control which, although not fundamental, relates to shortcomings which expose individual business systems to a less immediate level of threatening risk or poor value for money. Such a risk could impact on operational objectives and should be of concern to senior management and requires prompt specific action.
Low 	Areas that individually have no significant impact, but where management would benefit from improved controls and/or have the opportunity to achieve greater effectiveness and/or efficiency.

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APPENDIX II - TERMS OF REFERENCE

PURPOSE OF REVIEW:

The purpose of the audit is to provide assurance over the controls SBA has in place over its budget setting process and budget monitoring arrangements.

KEY RISKS:

- Inappropriate budgets are set due:
 - to incorrect student forecasting,
 - expenditure not identified or included
 - inappropriate assumptions being used
 - incorrect income and expenditure profiling across the year and/or not taking cash flow into consideration.
- There is no scrutiny or approval of proposed budgets.
- Performance against budget is not monitored.
- Budget variances are not identified nor investigated and reporting of variances does not occur in a timely manner.
- Corrective action is not taken when adverse variances are identified.
- Reforecasting does not take place, is inaccurate and/or based on inaccurate assumptions.
- Financial information presented to the SBA Board is inaccurate and/or variances are not supported by appropriate explanations.

LONDON SOUTH BANK UNIVERSITY, SBA BUDGET SETTING AND CONTROL

SCOPE OF REVIEW:

The following areas will be covered as part of this review:

- End to end budget setting process including the forecasting and profiling of income and expenditure and assumptions used
- Review and approval of budgets
- Monitoring of performance against budget including identification of variances against budget and use of virements
- Corrective action taken where adverse variances are identified
- Reforecasting process
- Financial information presented to the SBA Board.

However, Internal Audit will bring to the attention of management any points relating to other areas that come to their attention during the course of the audit. We assume for the purposes of estimating the number of days of audit work that there is one control environment, and that we will be providing assurance over controls in this environment. If this is not the case, our estimate of audit days may not be accurate.

APPROACH:

Our approach will be to conduct interviews to establish the controls in operation for each of our areas of audit work. We will then seek documentary evidence that these controls are designed as described. We will evaluate these controls to identify whether they adequately address the risks.

We will seek to gain evidence of the satisfactory operation of the controls to verify the effectiveness of the control through use of a range of tools and techniques.

Specifically we will review the end to end budget setting process including the process undertaken to predict future student numbers and forecast other income. We will also assess whether there is a robust process in place to identify all expenditure that will be incurred and assess whether there is rationale to support the assumptions used. We will also assess whether profiling of the receipt of income and outlay of expenditure takes place. This will be performed through interviewing those staff involved in the budget setting process both within Finance and the schools.

We will also assess whether profiling of income and expenditure is fed into SBA's cash flow forecasts.

We will assess whether there is an appropriate level of scrutiny and approval of proposed budgets taking place.

The timeframe and process in place to monitor performance against budget will be reviewed to assess whether appropriate and whether reports are clear and enable the user to identify variances against budget.

We will assess whether there is an appropriate process in place to take action when variances are identified and assess whether these plans are monitored for improvements.

We will assess whether periodic reforecasting takes place and assumptions used are supported by appropriate rationale.

A review of the financial information presented to the SBA Board will be performed to assess whether reporting is clear and transparent and that variations to budget are appropriately explained.

FOR MORE INFORMATION:

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	PAPER NO:
Paper title:	Internal Audit –SBC Prevent
Board/Committee	Executive
Date of meeting:	2 nd June 2021
Author:	BDO
Executive/Operations sponsor:	Fiona Morey- Executive Principal
Recommendation:	The Executive is requested to note the report.

Summary

This draft report is presented to the Executive for review and comment.

This report gives a substantial level of assurance with two low risk recommendation which have been accepted by Management.

Recommendation:

The Executive are requested to note this report.

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SOUTH BANK COLLEGES

INTERNAL AUDIT REPORT - PROPOSED FINAL

PREVENT
MAY 2021

LEVEL OF ASSURANCE	
Design	Operational Effectiveness
Substantial	Substantial



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DISTRIBUTION

Philip Cunniffe	Assistant Principal, Student Services and Designated Safeguarding Lead
Laura Ryan	Deputy Safeguarding Lead



REPORT STATUS LIST

Auditor:	Anna Rushmore
Dates work performed:	11 - 15 January 2021
Draft report issued:	26 February 2021
Final report issued:	TBC

SOUTH BANK COLLEGES, PREVENT

EXECUTIVE SUMMARY

LEVEL OF ASSURANCE: (SEE APPENDIX I FOR DEFINITIONS)

Design		There is a sound system of internal control designed to achieve system objectives.
Effectiveness		The controls that are in place are being consistently applied.

SUMMARY OF RECOMMENDATIONS: (SEE APPENDIX I)

High		
Medium		
Low		2

TOTAL NUMBER OF RECOMMENDATIONS: 2

BACKGROUND:

Section 26(1) of the Counter-Terrorism and Security Act 2015 imposes a duty on “specified authorities”, when exercising their functions, to have due regard to the need to prevent people from being drawn into terrorism. Further education institutions fall within the remit of this legislation and protecting learners from the risk of radicalisation forms part of the College’s wider safeguarding duties in line with the Prevent Duty Guidance for Further Education Institutions in England and Wales (2015).

The guidance summarises the requirements of colleges in terms of external speakers and events, partnerships, risk assessment, action plan, staff and learner training, welfare and pastoral care, IT policies and monitoring and enforcement.

Safeguarding at Lambeth College is led by the Assistant Principal Student Services and Designated Safeguarding Lead. He is supported by the Deputy Safeguarding Lead, Safeguarding Coordinator and eight learner development coaches (LDCs). There is a Prevent Risk Assessment which is reviewed and updated on an annual basis by the Assistant Principal, Student Services and Designated Safeguarding Lead and the Deputy Safeguarding Lead. Following this review, the Strategy Group meets on a termly basis to discuss safeguarding/Prevent priorities and to ensure that safeguarding at Lambeth College complies with current Department for Education (DfE) and OFSTED guidance.

Prevent-related concerns identified or disclosed are reported to the Deputy Safeguarding Lead or to a member of the Safeguarding team. Once reported, issues are risk assessed, with external agencies involved, where appropriate. Cases are subject to ongoing monitoring by the assigned member of the Safeguarding team with updates provided and progress tracked in ProMonitor.

All learners who are 16-18 years old and who are in full-time education are assigned a learning development coach (LDC), who provides a central point of contact for students. The LDC maintains regular contact with learners, following up cases of non-attendance, where appropriate. In line with the attendance tracking procedures, LDCs are required to monitor their students' weekly attendance to tutorials on ProMonitor. Any issues identified are flagged to the student’s parent/guardian, and LDCs will meet with the student upon their return to college. In cases where the LDC is unable to contact the learner and/or parent/guardian, the LDC will contact the College’s Safeguarding Officer who will then

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escalate the concern with the Designated Safeguarding Lead or Local Authority, depending on the nature of the concern.

The College has sought to forward the Prevent Agenda and increase awareness amongst teachers and learners, including within the online learning environment. Following the shift to digital learning, students are required to attend weekly tutorial sessions online, whereby the themes of Prevent/safeguarding/British values are discussed. A new e-learning Prevent module has been made available to students this year, which is accessible via the student Moodle page.

All staff and governors are required to undergo mandatory e-learning Prevent training on an annual basis. As of December 2020, 354 (86.7%) of staff had completed the annual Prevent training.

The purpose of the audit was to provide assurance over the controls to College has in place to manage its Prevent duty obligations.

SCOPE AND APPROACH:

Interviews were held with the Assistant Principal, Deputy Safeguarding Lead and members of the Safeguarding team to understand the Prevent framework in operation across the College.

We reviewed the Prevent related aspects of the Safeguarding policy to assess whether it is appropriate and in line with the College's Prevent obligations under the Department for Education's statutory guidance: Keeping children safe in education (KCSIE). We also verified whether this policy was accessible to staff on the intranet and subject to a regular review.

We assessed whether the roles and responsibilities for managing safeguarding risks were clearly defined within the Safeguarding policy, including those of the designated safeguarding leads (DSLs).

We reviewed the College's Prevent Action Plan to assess whether specific College risks associated with Prevent are identified and action taken to mitigate against them. We tested a sample of actions listed on the most recent plan, to confirm whether they have been actioned or if progress was being made. We reviewed the last three sets of minutes from the Strategy Group and the last two Safeguarding reports provided to the Board of Governors, to identify whether actions arising from the Prevent Action Plan were monitored and discussed.

The reporting lines for safeguarding concerns were inspected and a walkthrough was performed of the process for recording safeguarding concerns on the ProMonitor system. We reviewed two anonymised cases whereby a referral was made to local authorities to verify the process is consistently followed.

We reviewed the Prevent training provided to staff and governors and assessed whether it contained responsibilities relating to Prevent related risks and indicators. We also confirmed how completion of mandatory e-learning is monitored.

We confirmed whether students are provided with adequate information to understand how and whom they should ask for help if required.

We assessed whether sub-contractors delivering teaching on behalf of the College are made aware of their Prevent responsibilities throughout an annual mandatory Prevent training session.

We reviewed the risk assessment process for external speakers, visitors and events to assess whether they are appropriately risk assessed. We selected a sample of external speakers and verified whether an external speaker risk assessment (ESRA) was completed.

We walked through the IT web filtering process in place and reviewed how learners are prevented from accessing inappropriate material. We obtained a copy of the IT Security policy and confirmed whether this is kept up-to-date.

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We reviewed the Prevent processes and procedures in place for the purpose of an online/hybrid learning environment, including those for identifying when a student may be at risk.

GOOD PRACTICE:

The following areas of good practice were identified during the audit:

- The Safeguarding policy clearly articulates SBC's approach to managing and responding to its Prevent-related obligations. The accountabilities and responsibilities for managing these obligations are well defined. The policy is subject to regular review and is available to all staff on the College's intranet. Any changes to the Safeguarding policy require approval from the Board of Governors.
- There is an annual Prevent Action Plan whereby Prevent-related risks and actions taken to mitigate against them are identified and regularly reviewed.
- The College has established effective communication channels with local Prevent Coordinators and Safer Neighbourhood Police Officers to ensure that the College is kept up to date with Prevent related developments in the local area. It has also sought to foster strong relationships with parents/guardians, for example, through its monthly safeguarding newsletter.
- The College has sought to increase Prevent awareness amongst its learners through monthly email updates, through the use of posters/flyers and during weekly LDC tutorials.
- The College has revised its processes and procedures for an online/hybrid learning environment. For example, the College has consistently maintained regular contact with learners.

KEY FINDINGS:

We have raised two low significance findings which relate to the lack of formal action taken when for staff who do not complete the mandatory annual Prevent training and the risk assessment process for external speakers and events has not been reviewed for Covid-19, where events are now held virtually.

CONCLUSION:

Overall, based upon the work undertaken during this audit, we are able to provide moderate assurance for both the design of the controls and operational effectiveness of the controls in place at the College to manage its obligations in relation to Prevent.

OUR TESTING DID NOT IDENTIFY ANY CONCERNS SURROUNDING THE CONTROLS IN PLACE TO MITIGATE THE FOLLOWING RISKS:

- ✓ Policies and procedures are not being implemented to support the College's obligations with regards to the Prevent Duty Guidance for Further Education Institutions in England and Wales (2015)
- ✓ Specific College risks associated with Prevent have not been identified and action is not taken to mitigate against them
- ✓ The College not establishing effective partnerships (eg with local prevent coordinators)
- ✓ Inadequate training being provided to staff so they are unable to identify 'at risk' students
- ✓ Students not being provided with adequate information and therefore do not know who or how to ask for help


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- ✓ Sub-contractors delivering teaching on behalf of the College not being aware of their Prevent responsibilities
 - ✓ Prevent processes and procedures no longer being fit for purpose in an online / hybrid learning environment
 - ✓ Insufficient processes being in place for evaluating whether a student is 'at risk' or for determine whether a referral is required.
-

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DETAILED FINDINGS

RISK: INADEQUATE TRAINING BEING PROVIDED TO STAFF SO THEY ARE UNABLE TO IDENTIFY 'AT RISK' STUDENTS

Ref	Sig.	Finding
1		<p>There is no formal action taken when staff do not complete the mandatory annual Prevent training.</p> <p>Although current records show there 86.7% of staff have completed the Prevent training for this year, and some chasing of non-completers does take place with compliance is reported to the College Leadership Group, there is no set deadline for completing the training and no formal process to take action if those reminders are ignored.</p> <p>If staff do not complete the mandatory Prevent training they may be unaware of the risks, be unable to identify potential indicators and not know how where to report concerns to.</p>

RECOMMENDATION:

A deadline for completing the annual Prevent training should be implemented and formal escalation processes put in place for those who do not complete the training by the deadline.

MANAGEMENT RESPONSE:


The process for reporting and escalating staff non-compliance with the annual mandatory Prevent training will be reviewed and recommunicated to ensure managers are aware of the actions they need to take, and staff are aware of the consequences of non-compliance.

Responsible Officer: Crystal Blackwood; Philip Cunniffe

Implementation Date: 9 July 2021

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RISK: EXTERNAL SPEAKERS, VISITOR OR EVENTS NOT BEING APPROPRIATELY RISK ASSESSED

Ref	Sig.	Finding
2		<p>The College has not formally considered risks associated with holding external events online during Covid-19 and the External Speaker Risk Assessment form (ESRA) has not been updated to reflect additional checks required for events being held virtually (eg whether the speaker is hosting the event on a secure platform).</p> <p>The College may be unable to demonstrate that it is assessing the risks of external events online appropriately.</p>

RECOMMENDATION:

Management should review the associated risks of having external events online and adapt the contents of the External Speaker Risk Assessment form (ESRA) accordingly.

MANAGEMENT RESPONSE:

Management agrees with the recommendation and will update the ESRA form to more accurately reflect the considerations of online speakers and events.

Responsible Officer: Laura Ryan

Implementation Date: Complete - 1 May 2021

SOUTH BANK COLLEGES, PREVENT

OBSERVATIONS

STAFF PREVENT TRAINING

The Prevent training records for October to December 2020 showed that an average of 13.9% of staff had not completed their mandatory training in the last 12 months. We understand that there is no formal process for follow up on non-completion. It was explained that an email is sent to the individual by either the Senior HR Business Partner or their line manager, which is dependent upon their capacity levels.

SAFEGUARDING POLICY REVIEW

The Safeguarding policy was most recently reviewed in September 2020, but this has not been reflected on the actual document, which states November 2019

IT SECURITY POLICY

There is no set due date for the next review of the IT Security policy. It was previously updated in June 2019 and May 2014 before that. Good practice recommends that the policy is reviewed annually to check it's still up-to-date, or whenever there is a significant change in the organisational risk posture.

ESSENTIAL SECURITY AGAINST EVOLVING THREATS (ESET) SYSTEM

The report generated by the Essential Security against Evolving Threats (ESET) system, which provides details of attempts to access unlawful content does not currently include the name of the user, only the students' ID numbers. Therefore, additional steps need to be taken to identify who the user is.

Following the move to remote working and students using college laptops off site, the College adapted a web content filtering process provided by the ESET system. It was explained by the IT Services Manager that this was due to the fact that the previous product only had capability of providing any level of monitoring of devices specifically on the College's network. The move to the ESET system web control means that monitoring now happens at the endpoint (PC or laptop, on-site or remote).

Through the ESET process, the IT team is able to manually input what should be filtered, which is decided upon through liaison with Learner Support Services, including the Deputy Safeguarding Lead. A daily report is run, which contains the details of any URL which has been blocked by the filtering process, as well as user trying to access the material.

The report is sent to the Safeguarding email inbox, which is monitored by the Safeguarding Coordinator who reviews the report daily and escalates the issue further with the learner, as well as the Deputy Designated Safeguarding Lead (if required).

We have been informed that the IT team is currently in the process of resolving this issue by altering the report style to make identifying the relevant users more efficient.





SOUTH BANK COLLEGES, PREVENT

STAFF INTERVIEWED




BDO LLP APPRECIATES THE TIME PROVIDED BY ALL THE INDIVIDUALS INVOLVED IN THIS REVIEW AND WOULD LIKE TO THANK THEM FOR THEIR ASSISTANCE AND COOPERATION.

Philip Cunniffe	Assistant Principal, Student Services and Designated Safeguarding Lead
Laura Ryan	Deputy Safeguarding Lead
Gemma Dickinson	Safeguarding Coordinator
Rochelle McDonald	Safeguarding Officer
Adam Bird	IT Services Manager & ProMonitor Support
Abigail Maya	Senior HR Business Partner
Marisa Ferguson	Learner Development Coach for Early Years and Health & Social Care
Adebayo Emanuel	Business Development Specialist

SOUTH BANK COLLEGES, PREVENT

APPENDIX I - DEFINITIONS				
LEVEL OF ASSURANCE	DESIGN OF INTERNAL CONTROL FRAMEWORK		OPERATIONAL EFFECTIVENESS OF CONTROLS	
	FINDINGS FROM REVIEW	DESIGN OPINION	FINDINGS FROM REVIEW	EFFECTIVENESS OPINION
Substantial 	Appropriate procedures and controls in place to mitigate the key risks.	There is a sound system of internal control designed to achieve system objectives.	No, or only minor, exceptions found in testing of the procedures and controls.	The controls that are in place are being consistently applied.
Moderate 	In the main there are appropriate procedures and controls in place to mitigate the key risks reviewed albeit with some that are not fully effective.	Generally a sound system of internal control designed to achieve system objectives with some exceptions.	A small number of exceptions found in testing of the procedures and controls.	Evidence of non-compliance with some controls that may put some of the system objectives at risk.
Limited 	A number of significant gaps identified in the procedures and controls in key areas. Where practical, efforts should be made to address in-year.	System of internal controls is weakened with system objectives at risk of not being achieved.	A number of reoccurring exceptions found in testing of the procedures and controls. Where practical, efforts should be made to address in-year.	Non-compliance with key procedures and controls places the system objectives at risk.
No 	For all risk areas there are significant gaps in the procedures and controls. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Poor system of internal control.	Due to absence of effective controls and procedures, no reliance can be placed on their operation. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Non-compliance and/or compliance with inadequate controls.

RECOMMENDATION SIGNIFICANCE

High 	A weakness where there is substantial risk of loss, fraud, impropriety, poor value for money, or failure to achieve organisational objectives. Such risk could lead to an adverse impact on the business. Remedial action must be taken urgently.
Medium 	A weakness in control which, although not fundamental, relates to shortcomings which expose individual business systems to a less immediate level of threatening risk or poor value for money. Such a risk could impact on operational objectives and should be of concern to senior management and requires prompt specific action.
Low 	Areas that individually have no significant impact, but where management would benefit from improved controls and/or have the opportunity to achieve greater effectiveness and/or efficiency.

SOUTH BANK COLLEGES, PREVENT

APPENDIX II - TERMS OF REFERENCE

PURPOSE OF REVIEW:

The purpose of the audit is to provide assurance over the controls to College has in place to manage its Prevent duty obligations.

KEY RISKS:

Based upon the risk assessment undertaken during the development of the internal audit operational plan, through discussions with management, and our collective audit knowledge and understanding the key risks associated with the area under review are:

From SBC's risk register - *College fails to discharge safeguarding duties* as a result of:

- Policies and procedures not being implemented to support the College's obligations with regards to the Prevent Duty Guidance for Further Education Institutions in England and Wales (2015)
- Specific College risks associated with Prevent have not been identified and action is not taken to mitigate against them
- The College not establishing effective partnerships (eg with local prevent coordinators)
- Inadequate training being provided to staff so they are unable to identify 'at risk' students
- Students not being provided with adequate information and therefore do not know who or how to ask for help
- Sub-contractors delivering teaching on behalf of the College not being aware of their Prevent responsibilities
- External speakers, visitor or events not being appropriately risk assessed
- IT controls not preventing learners from accessing inappropriate content and/or do not flag if access such content is attempted
- Prevent processes and procedures no longer being fit for purpose in an online / hybrid learning environment
- Insufficient processes being in place for evaluating whether a student is 'at risk' or for determine whether a referral is required.

SOUTH BANK COLLEGES, PREVENT

SCOPE OF REVIEW:

The following areas will be covered as part of this review:

- Prevent policy
- Prevent risk assessment and action plan
- Partnerships arrangements
- Staff, governor and learner training, education and awareness
- Oversight of sub-contractor awareness and reporting arrangements
- Data sharing arrangements with regards to Prevent information
- Reporting channels for both staff and students
- Visitor, external speaker and event assessments
- IT usage policies and controls including web filtering
- Remote/ hybrid working arrangements
- Monitoring and reporting

However, Internal Audit will bring to the attention of management any points relating to other areas that come to their attention during the course of the audit. We assume for the purposes of estimating the number of days of audit work that there is one control environment, and that we will be providing assurance over controls in this environment. If this is not the case, our estimate of audit days may not be accurate.

SOUTH BANK COLLEGES, PREVENT

APPROACH:

Our approach will be to conduct interviews to establish the controls in operation for each of our areas of audit work. We will then seek documentary evidence that these controls are designed as described. We will evaluate these controls to identify whether they adequately address the risks.

We will seek to gain evidence of the satisfactory operation of the controls to verify the effectiveness of the control through use of a range of tools and techniques.

Specifically, we will review the Prevent-related aspects of the College's Safeguarding policy to assess whether this is appropriate and in line with the College's Prevent obligations.

We will review the College's Prevent Action Plan and whether it is up-to-date, subject to regular review, includes sufficient detail to identify the College's specific Prevent-related risks and has suitable actions against those risks. A sample of items on the Action Plan will be selected to assess whether these controls are in place or if actions are in process.

We will review the partnership arrangements in place at the College and assess whether the College is periodically in touch with these partners and has appropriate processes to keep up-to-date with Prevent related developments in the local area.

We will review the content of the Prevent-related training provided to staff, governor and learners to assess whether it is in line with good practice and assess whether there is appropriate records in place to support delivery of this training to those groups.

We will review the arrangements the College has in place to check whether its sub-contractors (those delivering learning activities on the College's behalf) are aware of their Prevent duties and whether there are appropriate reporting arrangements in place. This will include whether appropriate data sharing arrangements are in place as required.

We will assess whether reporting channels for both staff and students are in place, whether these are clearly advertised and/or easy to find. We will review the process the College has in place when a report is made to assess whether responsibilities are clearly assigned and clear decision making processes are in place.

The risk assessment form and process for assessing visitors, external speakers and events (internal and external) will be reviewed and sample testing performed to assess whether this process is being consistently followed.

We will review the IT usage policies in place to assess whether they are explicit in covering what is and is not permissible and whether there is specific reference to the Prevent duty. We will also review the high level IT controls in place specifically to meet Prevent obligations (eg web filtering) and how these have been set up to block specific content and whether these flag that access to specific content has been attempted.

Throughout our review we will assess whether the College's policies and processes relating to Prevent are suitable for an online/hybrid learning environment.

The arrangements in place for monitoring and reporting the College's compliance against the Prevent duty will be reviewed. We will also assess whether reports to the Board relating to Prevent (eg Annual safeguarding reports and periodic reporting of incidents if applicable) are appropriate and timely.

DATA ANALYTICS:

Data analytics are not considered appropriate for use in this audit.

FOR MORE INFORMATION:

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**Minutes of the meeting of the South Bank Colleges Audit Committee
held at 4pm on Wednesday 10 February 2021
via Microsoft Teams**

Present

Andrew Owen (Chair)
Steve Balmont
Mee Ling Ng

In attendance

Michael Broadway
Natalie Ferer
Richard Flatman
Rachel McCafferty
Fiona Morey
Jacqueline Mutibwa
Gemma Wright, BDO Internal Auditors

1. Welcome and apologies

The Chair welcomed the Committee Members to the meeting and confirmed that the meeting was quorate.

2. Declarations of Interest

The Committee noted the following declarations of interest: Mee Ling Ng is a director of LSBU.

3. Minutes of previous meeting

The minutes of the meeting held on 3 November 2020 were approved as an accurate record.

4. Matters arising

There were no matters arising from the minutes of the previous meeting. The actions had been completed or were on the agenda of the meeting.

Internal Audit Recommendation Follow up 2019/20

The report details progress being made on implementing actions agreed in previous audits.

The Committee reviewed the SBC internal audit action tracker and noted:

- that 6 out of 24 actions had been closed or completed (25%). However, a number of outstanding actions, including high and medium risks relate to the roll

out of the procure to pay process using Agresso and the automation of supplier set up and changes to supplier details. Both projects were led by LSBU and had delayed due to the inability to access Agresso but progress was now underway.

- that other outstanding actions relate to the IT security audit and an update was awaited. The outstanding actions arising from the ESFA Subcontractor Controls audit report would be included in the internal audit action tracker.

5. Internal Audit Progress Report

The Committee was provided with an internal audit progress report and the proposed changes to the 2020/21 audit plan.

The Committee reviewed the 2020/21 plan and the proposed timing changes to the following audit reviews: financial systems and controls, student admissions and enrolment and staff absence management which were due to IT problems since mid-December 2020. The auditors confirmed that the rescheduled audits would be completed by the end of 2020/21.

The Committee reviewed the audit reports on Covid19 response and Apprenticeships. The Committee discussed:

- the Covid19 response report. The auditors gave a moderate level of assurance for the design and substantial level of assurance for the arrangements the Group has in place to respond to Covid-19 risks.
- the apprenticeships report. The auditors gave a moderate level of assurance for the design of the controls and moderate assurance for the operational effectiveness of the controls in place over the apprenticeships process. A high risk had been identified relating to actions required to implement the objectives set out in the College's Apprenticeship Strategy not being fully defined and progress towards achieving the objectives not being finalised. The other risks relate to the OneFile system not being consistently used by tutors to evidence the apprentice's journey and the roles, responsibilities and reporting lines in relation to the apprenticeship processes.
- that growth in apprenticeships was a key strategic ambition for the College. The College was working closely with LSBU and key stakeholders to establish new working models that would deliver growth, quality and financial sustainability in the apprenticeship offer. The College's Apprenticeship strategy was aligned with the LSBU Apprenticeship Strategy and overall vision.
- the apprenticeship delivery challenges which were due to; recruitment during the pandemic and its management and outcomes that needed to be improved. It was noted that an update on progress being made on the audit recommendations would be provided at the meeting in July 2021.

The Committee noted the internal audit progress report and approved the proposed timing changes to some audit reviews in the 2020/21 internal audit plan.

6. Group Risk Policy and Risk Appetite Statement

The Committee was presented with the Group Risk Policy which was approved by the LSBU Group Audit Committee in June 2020. The Committee endorsed the Risk Policy and that it was recommended to the Board for adoption.

The Risk Policy set out the Group's approach to risk management which requires each individual entity of the Group to adopt its own risk appetite statement. The Committee was requested to review the level of risk appetite for the risk categories and recommend them to the Board for adoption. Having discussed in detail, the Committee recommended that SBC adopts the following risk appetite statements for each risk type:

- Financial – cautious;
- Legal and compliance – minimal;
- Academic delivery – open;
- Reputational – cautious.

It was noted that the risk management approach would be implemented by the autumn of 2021.

7. Updated Corporate Risk Register

The Committee reviewed the updated risk register (Covid19 and Non Covid19). The format had been reviewed and aligned with the LSBU risk register in terms of risk by strategic pillars, impact and how it sits in the overall framework.

The Committee discussed:

- the high risks associated with Vauxhall NESC project (costs, delays) and IT infrastructure its inability to provide sustained remote learning during the pandemic. The risks had not been appropriately assessed and that the RAG rating should be Red in the risk register.
- the mitigation column and that the actions were not sufficient to mitigate or eliminate the risks.
- the risks associated with the actions arising from the internal audit report on financial controls (February 2020), which were dependant on LSBU systems being integrated were not reflected in the risk register and needed to be addressed.

It was noted that the risk register would be further reviewed i.e. assessment of risk scores, streamlined and more strategic and also incorporate the Covid19 risk register into the corporate risk register.

8. Key Financial KPIs 2020/21

The Committee was presented with the Financial KPIs/CFAD Turnaround KPIs and targets for 2020/21.

The Committee reviewed the College's performance against the KPIs 2019/20 and the proposed KPIs and targets 2020/21 for recommendation to the Board. The Committee discussed:

- the target on staff costs as a percentage of adjusted income (H6) was 58%, which referred to the income directly delivered (excluding sub-contracts).
- the target on gross margin by course minimum average by department level (%) (H9) was 48% which seemed ambitious. The target was based on the review of faculty contribution rates as part of business planning, but it would be a challenge to achieve the higher contribution rates due to the College mix of adult/16-18 students.
- that a commentary note in the report would be helpful especially regarding setting targets for KPIs on the Financial Health Grading for ESFA and Self Assessed.
- that the KPI dashboard could be improved by not only aligning the KPIs with the College's strategic financial objectives but also with the regulatory requirements and trustees responsibilities. A trustee session on the College's performance management framework- regulatory requirements and trustees responsibilities would be arranged.

The Committee endorsed the proposed KPIs for 2020/21 which would be recommended to the Board for approval at its meeting on 17 February 2021.

9. ESFA Subcontracting Report 2019/20

The Committee discussed the report on sub-contracting activity for 2019/20 in accordance with ESFA agreements and rules on subcontracting. ESFA funding agreements require further education providers to obtain external assurance on subcontracting arrangements on an annual basis where the annual aggregate value exceeds £100k.

The Committee reviewed BDO auditors report on subcontracting controls which provided external assurance for adult education budget and apprenticeships with a signed subcontracting certificate.

The Committee noted the ESFA subcontracting activity report for the delivery of apprenticeships, adult education and training for the year 2019/20.

10. GDPR and FOI Compliance Report

The Committee noted that there was one freedom of information request and no data breach since the last meeting in November 2020.

11. Anti-Fraud, Bribery and Corruption

The Committee noted that no incidences of fraud, bribery or corruption had been identified since the last meeting in November 2020.

12. Speak Up Update

The Speak up policy had been updated and launched. The Committee noted that there were no matters that had been raised under the Speak up policy since the last meeting in November 2020.

**Date of next meeting
4pm, Thursday 1 July 2021**

Confirmed as a true record

.....(Chair)

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**Minutes of the meeting of the South Bank Academies Audit Committee
held at 4.00 pm on Tuesday, 9 March 2021
MS Teams**

Present

Richard Flatman (Chair)
Tony Giddings
James Blastland
Zac Yiallourous

In attendance

Fiona Morey
Helena Abrahams
Michael Broadway
Natalie Ferer
Dan Cundy
Ciara Carroll
Gemma Wright (BDO)

1. Welcome and apologies

The Chair welcomed the members and attendees to the meeting. Introductions were performed for the two new members of the Audit Committee.

2. Declarations of interest

No member declared any interest in any item on the agenda.

3. Minutes of previous meetings

The minutes from 3 December 2020 and 8 December 2020 were agreed by the committee.

4. Matters arising

The UTC grant item was cleared by the auditor and the action was closed. All other actions are on the agenda for this meeting and those actions are closed.

5. Internal Audit report

Group Covid-19 response report

The committee noted that this group report was written during Autumn 2020 following the restart from the first lockdown. The report was positive overall; the most significant item in relation to the academies was the need for a

business continuity risk assessment which was put in place in time for the next lockdown in December.

The committee asked how confident the trust was in its planning should further lockdowns be put in place after March 2021. It was confirmed that the trust anticipated the switch to remote learning would proceed smoothly, following the experience of the new lockdown in January 2021 and the switch to remote learning which was rapid and successful.

The committee queried whether the trust had plans to utilise what they had learned from school closures to extend delivery capacity on a permanent basis. It was explained that the trust is quite restricted in its funding terms in relation to teaching hours but that the remote offer from the school was highly commended by Southwark Council and the trust would be supporting partner organisations in Croydon.

Progress report

The committee reviewed the internal audit plan and discussed the necessary changes. The committee noted that the LSBU IT outage had little impact on the trust's operations as it was using cloud-based servers distinct from those used by the university; however, there would be unbudgeted expenditure this year as every part of the group moved to strengthen its IT security.

The committee noted that the internal audit report on budget setting was being finalised.

Following a request from BDO, the committee confirmed that the finding in the financial controls internal audit report could be closed off as the PSF functionality was no longer available. *The committee was assured that alternative controls were in place which would act as mitigating factors.*

6. **External audit progress review**

The committee reviewed the progress on the outstanding recommendations from the external audit.

ParentPay debtor

All necessary information has now been gathered and the request to write-off the balance will be submitted to the ESFA in the immediate future following the committee meeting.

UTC lease agreement

The committee noted the delay in agreeing a lease for the UTC site. The draft lease was being negotiated with the Department for Education's lawyers. The Chair requested that Buzzacott be kept informed of the matter.

Missing HR contract

The work to move all employee files to an electronic format will take place over the Easter holidays.

The Chair requested that a further report be brought to the next meeting in May 2021.

The Committee requested a confirmation that all possible anti-fraud measures have been implemented to protect against fraud while the trust is working from home during the pandemic. It was confirmed that the standard processes function in the same manner whether employees are working at home or in the office and the risk of fraud and error remains the same. The external audit was conducted remotely, and no concerns were raised by the auditors. The committee was assured that the Group take the issue of cyber crime very seriously and has been significantly strengthening its protection since the IT incident in December 2020.

7. **SRM self-assessment checklist**

The committee noted that this checklist is a tool required by the DfE to support schools and trusts to use their resources efficiently.

The trust will be using this resource plus the integrated curriculum and financial planning tools to support its budget planning for 2021-22. The committee noted the benchmarking information for both schools and noted that this was less relevant for the UTC due to its differences to other secondary schools.

The committee agreed to recommend the checklist to the board for final approval, subject to minor alterations and review by the CEO.

8. **Risk management**

The committee noted the Group risk policy and the decisions made in relation to risk appetite at Group level. The committee was requested to review the risk appetite matrix and recommend a risk appetite for the trust, as each entity is required to set its own appetite.

Following extensive discussion, the committee agreed the following levels of risk appetite:

Financial: Cautious
Legal Compliance: Minimal
Academic Activity: Seek
Reputation: Cautious

The committee agreed to recommend the risk appetite profile to the Board for approval.

The new format of the risk registers was received by the committee. It was agreed that the risk ratings on some of the items may need to be reviewed to ensure that they are correct; this is likely due to the transfer from the old register format to the new.

A new risk related to cyber crime has been added to the register following the IT incident at LSBU. The committee discussed the related spending that will be required to meet the recommendations of the IT security internal audit and the necessary upgrades that are required following the incident. Further costs are also required to manage the increased use of remote learning.

9. **Anti-fraud, bribery and corruption report and Anti-fraud policy**

The anti-fraud report was noted.

The anti-fraud policy updates were agreed subject to a minor clarification.

The policy is to be brought to the SBA Board meeting on 18 March 2021.

10. **Speak up report and annual review of Speak Up policy**

The speak-up report was noted.

The annual review of the Speak Up policy was noted, and the policy was agreed by the committee.

**Date of next meeting
4.00 pm, on Tuesday, 25 May 2021**

Confirmed as a true record

..... (Chair)