

**Part A Non-Confidential Minutes of the Audit Committee meeting  
Held on 11<sup>th</sup> February 2025 at 4.00pm  
In the 4H07, University Centre Grimsby, and via Teams**

**Governors Present:** Robin Atkinson (RA), Tracey Gyte (TG), George Lee (GLee), Guy Lonsdale (Chair - GLon), Mark Riley (MR)

**Apologies:** None.

**In Attendance:** David Hoose (DH - Forvis Mazars – part), Rob Morton (RM), Tausif Taj (TT – TIAA - part), Jon Troop (JT), Maria Turnbull-Kemp (MTK – Chief Finance Officer) and Antonia Praud (AP – Director of Governance)

**Apologies:** Adrian Clarke (AC) and Martin Ritchie (MR – TIAA)

1	<p><b>Welcome, Apologies for absence, Declarations of Interest and Confidential items</b> Members were welcomed to the meeting and a warm welcome was extended to Tausif Taj, representing Martin Ritchie. Apologies were received from Adrian Clarke and Martin Ritchie which were accepted with consent. There were no declarations of interest.</p>	
2	<p><b>Update from the pre-meet</b> The External Auditors agreed to share sector update with the Audit Committee and detail relevant changes to the audit code of practice that is currently being rewritten and the update to SORP, at the next appropriate meeting. DH left the meeting.</p>	1
3	<p><b>Internal Audit Update</b></p> <p><b>Internal Audit report on Absence Management</b> The audit confirmed an assessment of “Substantial Assurance”. There were two routine recommendations:</p> <ul style="list-style-type: none"> <li>• Updating the policy to reflect practice to allow Trigger Level Review meetings to be incorporated within Return-to-Work discussions.</li> <li>• After errors were identified in testing, recommendations were made to ensure accuracy. This involves reminding Managers when notifying HR of absence of the importance of recording accurate start dates and then a process to ensure this is reconciled when received by HR.</li> </ul> <p>Both of the recommendations were accepted by the management team.</p> <p>The report also confirmed evidence of strong practice including:</p> <ul style="list-style-type: none"> <li>• There is a suite of comprehensive policies to facilitate effective absence management.</li> <li>• The Partnership closely monitors trends and patterns of staff absence through its reporting processes. The absence percentage for 2023/24 decreased from 3.96% to 3.27%. The current absence target is 4% which has increased from 3% in previous years to reflect sector averages and labour norms.</li> <li>• Audit fieldwork confirmed appropriate mechanisms are in place to monitor repeated short-term and long-term absences.</li> <li>• All absences exceeding seven working days were confirmed to be medically certified.</li> <li>• Compliance testing confirmed that staff on long term absences are offered various avenues of support including reasonable adjustments, occupational health referrals and phased returns.</li> <li>• All absences are recorded and certified electronically utilising the Partnership’s payroll and HR system, iTrent.</li> </ul>	

The Committee noted their congratulations and thanks to staff and took assurance from the report that the current system is effective.

**Scoping Documents:**

Scoping documents had been included for the upcoming audits with TIAA. The Committee confirmed they wanted the audit activity to add value to current processes.

Governors asked for the following changes:

- To adapt the self-assessment response questions to ensure they are relevant to the topic/ area.
- To cross reference with any comments at the last Ofsted inspection – this will be useful evidence, especially if it is referenced, addressed and comments are made.

**Dates:**

The committee received confirmation that all dates for the remaining audits this year have been agreed with the key stakeholders in the group.

**Safeguarding Audit:**

Governors reflected that in the last full Ofsted visit, there were a couple of processes and procedures that had been highlighted. Whilst not mentioned in the more recent Ofsted monitoring visit, they would like the audit to include this so they could take assurance, and it would demonstrate impact since the previous review.

Governors also questioned why it did not mention Prevent requirements in the review and if the scope could be widened. After discussion, governors took some assurance that aside from updating policies and education for students, there has been a lot of work completed within staff development. Executive team members questioned if it might be more appropriate to include this within the staff development audit. The merit of both were considered and it was confirmed the Auditors would include Prevent within this review. They would also widen the scope of the staff development audit to include Prevent, and confirmed they would look at both scoping documents to ensure best fit and avoid duplication.

Governors questioned if Martyn’s law and terrorism should be included in either of the audits too. After discussion, it was confirmed different elements could be added to the scope of the two audits.

Governors also asked TT if the scoping documents were more heavily focused on process, and whether it was possible to comment on the testing and impact of controls.

It was confirmed that the audits would:

- Test the adequacy and efficiency of processes.
- Ensure compliance to policies in place.
- The safeguarding audit could also follow up specific areas of interest. Governors confirmed that in this audit they would want to have a link to Smoothwall.

TT confirmed they would update the scoping documents in a section headed “Incident Management”.

**Staff recruitment and retention**

As noted in the previous item, it was confirmed the scope would be amended to include Prevent and Martyn’s law.

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	<p>The committee confirmed that having the scoping documents in advance and together was useful and should be continued in future years.</p> <p><b>Capital Delivery Processes:</b></p> <p>It was confirmed that the board were requesting an additional audit this year – into capital delivery processes. This would be a specialist audit and the Executive team are grateful to governors who have been sharing their wisdom, expertise, and recommendations for external contacts to complete this review. The request came after the board recently received updates on two large capital projects, and noted concerns linked to projects running over budget, and timescales slipping too. Detailed reviews had been completed but it did highlight that scoping and project management at the earliest stages could have been improved. The audit is intended to provide an opportunity to look at how the group approaches capital programmes, and if we have the experience and staff needed at the initial stage of a project involved.</p> <p>It was noted that the need to replace the car parking had been identified in the initial stages of the Animal Care project but had then been removed as part of the value engineering activities. The Audit committee confirmed that it would be useful to review the process followed to ensure the tendering and scope of large capital projects were effective.</p> <p>The group had already asked a specialist to look at the current projects and identify where the processes followed could have been improved. Scoping the project currently will be important so we are not told what we already know, but can learn to improve processes and make recommendations for our approach to major contracts in the future.</p> <p>MR offered his expertise to support the scoping of the exercise. It was confirmed that this would need to go through a tender process, which would be led by the Purchasing Manager. MR also volunteered his services to conduct a review, as his day job is capital management (over £100m a year) and the committee noted thanks but also raised caution. Governors are being supportive, but there needs to be clarity of intent and ensure they are not stepping from a strategic to an operational role. GLon agreed to speak to ABr to clarify the best approach.</p> <p>TT left the meeting.</p> <p><b>Internal Audit Tender:</b></p> <p>The group have gone out to tender for internal audit services with a deadline of 27<sup>th</sup> February. It was agreed the tender will be assessed by a panel of 4-5 staff, and GLons will be invited to represent the committee on the panel.</p>	<p>3</p> <p>4</p> <p>5</p>
3	<p><b>External Audit</b></p> <p><b>Review of the year and Performance of the External Auditors</b></p> <p>Governors confirmed that at the pre-meet, DH had confirmed the process had been smooth and well led, and there were no recommendations to bring forward. MTK confirmed that there is a very positive relationship that has been developed over the last three years with the Auditors, and we continue to be pleased with the service level and support received. See confidential minutes.</p> <p><b>Tender for external audit services.</b></p> <p>It was confirmed that the group had also gone out to market for external audit services. This is seen as best practice. There has been some interest already, and it was noted that the market is competitive and pricing may increase for future years. Governors asked for assurance that the tender process would relate to the value of the services (ie quality) over pricing concerns, and it</p>	

	<p>was confirmed that the criteria had been updated for the current process, as agreed at an earlier meeting.</p> <p>Governors also questioned if Forvis Mazars could retender, and it was confirmed this was the case. An option the committee could consider, if reappointed, would be a change in Audit Partner, after a period of time.</p> <p>MTK will invite GLons to be a member of the selection panel.</p>	6																																								
4	<p><b>Approval of the Minutes of 6<sup>th</sup> and 26<sup>th</sup> November 2024</b></p> <p>The committee confirmed both sets of minutes were accurate records of the meetings, and gave their approval.</p> <p><b>Matters Arising:</b></p> <p><b>Action Points from the meeting of the Audit Committee on 6<sup>th</sup> November 2024</b></p> <table border="1" data-bbox="145 663 1369 1644"> <tr> <td data-bbox="145 663 209 898">1</td> <td data-bbox="209 663 836 898">The Internal Auditors are working to a deadline of 12<sup>th</sup> November for the GDPR Audit with ELT members and the GDPR Audit and Final Audit reports will be finalised shortly thereafter. The deadline for papers for 26<sup>th</sup> November is understood.</td> <td data-bbox="836 663 959 898">TIAA</td> <td data-bbox="959 663 1123 898">12 November</td> <td data-bbox="1123 663 1369 898">Deadline met</td> </tr> <tr> <td data-bbox="145 898 209 1016">2</td> <td data-bbox="209 898 836 1016">The Internal Auditors will share the scoping documents with the committee for the completed audits in the 2023-24 year</td> <td data-bbox="836 898 959 1016">TIAA</td> <td data-bbox="959 898 1123 1016">As soon as possible</td> <td data-bbox="1123 898 1369 1016">Completed</td> </tr> <tr> <td data-bbox="145 1016 209 1099">3</td> <td data-bbox="209 1016 836 1099">Scoping documents to be shared for future Internal Audits</td> <td data-bbox="836 1016 959 1099">TIAA/ MTK</td> <td data-bbox="959 1016 1123 1099">Ongoing</td> <td data-bbox="1123 1016 1369 1099">In Pack</td> </tr> <tr> <td data-bbox="145 1099 209 1368">4</td> <td data-bbox="209 1099 836 1368">Share provisional dates for the Internal Audits, prioritising 1. Absence Management 2. Safeguarding</td> <td data-bbox="836 1099 959 1368">TIAA</td> <td data-bbox="959 1099 1123 1368">ASAP</td> <td data-bbox="1123 1099 1369 1368">Absence management brought forward to December 2024 and report in pack</td> </tr> <tr> <td data-bbox="145 1368 209 1570">5</td> <td data-bbox="209 1368 836 1570">Request for a deep dive into HE recruitment and retention with oversight from the Curriculum and Quality Oversight</td> <td data-bbox="836 1368 959 1570">ELT AL</td> <td data-bbox="959 1368 1123 1570">TBC</td> <td data-bbox="1123 1368 1369 1570">Deep dive underway. Report to Committee on 4<sup>th</sup> March 2025</td> </tr> <tr> <td data-bbox="145 1570 209 1644"></td> <td data-bbox="209 1570 836 1644">Share any final feedback on the reports to AP by 19<sup>th</sup> November</td> <td data-bbox="836 1570 959 1644">All</td> <td data-bbox="959 1570 1123 1644">19 November</td> <td data-bbox="1123 1570 1369 1644">Completed.</td> </tr> </table> <p><b>Action Points from the Joint meeting on 26<sup>th</sup> November 2024</b></p> <table border="1" data-bbox="145 1760 1369 2112"> <tr> <td data-bbox="145 1760 209 1995">1</td> <td data-bbox="209 1760 820 1995">Confirm the level of sampling in the data protection assessment (within GDPR audit)</td> <td data-bbox="820 1760 943 1995">TIAA</td> <td data-bbox="943 1760 1123 1995">ASAP</td> <td data-bbox="1123 1760 1369 1995">There were 3 DPIAs available for review and all 3 were reviewed.</td> </tr> <tr> <td data-bbox="145 1995 209 2112">2</td> <td data-bbox="209 1995 820 2112">Share update on new process for central document governance, if a new process or system is introduced.</td> <td data-bbox="820 1995 943 2112">MTK, AC</td> <td data-bbox="943 1995 1123 2112">If relevant</td> <td data-bbox="1123 1995 1369 2112"></td> </tr> </table>	1	The Internal Auditors are working to a deadline of 12 <sup>th</sup> November for the GDPR Audit with ELT members and the GDPR Audit and Final Audit reports will be finalised shortly thereafter. The deadline for papers for 26 <sup>th</sup> November is understood.	TIAA	12 November	Deadline met	2	The Internal Auditors will share the scoping documents with the committee for the completed audits in the 2023-24 year	TIAA	As soon as possible	Completed	3	Scoping documents to be shared for future Internal Audits	TIAA/ MTK	Ongoing	In Pack	4	Share provisional dates for the Internal Audits, prioritising 1. Absence Management 2. Safeguarding	TIAA	ASAP	Absence management brought forward to December 2024 and report in pack	5	Request for a deep dive into HE recruitment and retention with oversight from the Curriculum and Quality Oversight	ELT AL	TBC	Deep dive underway. Report to Committee on 4 <sup>th</sup> March 2025		Share any final feedback on the reports to AP by 19 <sup>th</sup> November	All	19 November	Completed.	1	Confirm the level of sampling in the data protection assessment (within GDPR audit)	TIAA	ASAP	There were 3 DPIAs available for review and all 3 were reviewed.	2	Share update on new process for central document governance, if a new process or system is introduced.	MTK, AC	If relevant		
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3	Share proposed timetable for Internal Audit activities for 2024-25	TIAA	29/11/2024	In pack
4	Share draft scoping documents for the Internal Audits	TIAA	ASAP	In pack
5	Begin tender process for the Internal Audit service	MTK	ASAP	Update on agenda
6	Review tender for external audit services	MTK	January 2025	Update on agenda
7	Add "no" on page 4 of the report	Forvis Mazars	ASAP	Completed
8	Share final amends with the external auditors on the annual report	MTK	ASAP	Completed
9	Recommend the annual report and accounts to the corporation	GL	10 December 2024	Completed
10	Recommend the Annual report of the Audit Committee and Self Assessment Regularity Questionnaire to the corporation	GL	10 December 2024	Completed
11	Develop an automated process, that links with the CFFR reports, to report on cashflow forecasts	MTK	Summer 2025	
12	Deliver People and Culture Strategy engagement session on 3 <sup>rd</sup> December. All governors are welcome.	MTK and A Hall	3 <sup>rd</sup> December 2024	Session rearranged and on 13 <sup>th</sup> February
13	Share update on the action plan for the building in Hull	AC	Next meeting	To next Finance and Resources meeting
14	Offer from AB to review the scope of the PPM tender	AC and AB	ASAP	AB has been supporting the projects team
15	Deep dive into our statutory compliance processes and update on progress at our next meeting	AC	Next meeting	Update on agenda
16	Share update on the potential interest at Lady Edith Drive and response for the agents	AC and MTK	ASAP	Completed at corporation
17	Develop a new process to capture apprenticeships and correlation to income	KW, KG, AO and MTK	When ready	
18	Keep committee abreast of developments linked to use of Modal building	AC	As relevant	
19	Recommend to corporation that Finance and Resources Committee have responsibility for oversight of opportunities in the strategic risk register	GL	10 December 2024	Completed
5	<b>Cyber Security report</b> Following the JISC audit assessment last year, the department had agreed to work on a number of recommendations, Details In private business.			

As a result, we have added mitigations and rebuilt some systems. There are a number of positives to note:

- We have had first-hand experience of an attack.
- We are confident in the team's ability to respond and mitigate in a tight timeframe.
- The systems we had in place have been fully tested.
- The SOC provided significant help and advice.
- Since the attack, we have implemented some additional controls.
- We have introduced MFA. (multi factor authentication).
- We have revised areas where there was weaker encryption.
- We have introduced improved alerting policies.
- We have isolated the back-up systems from the main system.
- We have new hardware which means our systems are even better protected.
- The group have employed a Cyber Security Officer, in a governance role. This is working particularly well. They share alerts, and it means the team are working more efficiently and effectively.

Plans include:

- Introducing new password policies - the group are taking a three-phase word approach.
- Developing a MS365 platform.
- Implementing mobile device management.
- Taking a zero-trust approach.
- Looking to segregate "doors".
- All computers and servers are being modernised.
- Staff are receiving training and policy awareness - the training is to be mandatory and is currently at 50% take up).
- There will be a cycle of continual review of MFA.
- All staff must complete regular Boxphish training.

Governors questioned the change to simplifying passwords as it felt counter intuitive, and were informed there was less likelihood of staff writing down passwords if it was less complex.

Governors noted the defences are only as strong as the weakest link and questioned what this would be. It was confirmed that some students do not have access to a smart phone. Governors questioned how this would be addressed. It was confirmed that these students could be given conditional access to protect our systems when off site, but students would then have full access when based in a trusted location. (e.g. process to follow when on own PC to begin with but then it will follow a repeated pattern) If they do not have their own device, it would be possible to verify the student via an SMS message (weaker but do-able).

Governors noted concern if this would impact on the learner's ability to access needed information and received assurance that many students do not log on at all when not on site

Governors questioned the threat of attack from abroad and the vulnerabilities of students or staff if they use a VPN. New processes introduced have added additional mitigations and protection. The threats are now more restricted. It was agreed GLons would update the board on the latest report, and supported making some training mandatory for staff.

The committee asked if the group have a generative AI policy? There is a teaching and learning policy which has been updated for AI, and the group are working on adding it to the IT Acceptable Use Policy. We need to embrace AI.

	<p>Governors recommended the use of testing the workforce to see if they reacted or recognised potential malware. It was confirmed that the group already do this. However, the group cannot rest on its laurels as new threats are being developed each day.</p> <p>Having been through an attack, the committee asked if the emergency response procedure had been effective. It was confirmed it was, but it could be developed further. It was also suggested that the group have an incident test without the Head of IT to see how senior staff would react.</p> <p>The committee thanked RM for attending and confirmed it was good to have an opportunity to discuss developments and take assurance directly from key personnel. They asked for an update session to be included as a standing item in future schedule of business for the committee.</p>	7 8
6	<p><b>Risk Update</b>  <b>Strategic Risk Register:</b>  The committee thanked MTK for the progress update and asked for more detail on the compliance issues identified within estates management.</p> <p>There are a number of positives to note, as notwithstanding significant changes in staffing, there has been significant progress made in responding to legislative requirements and improved facilities management including:</p> <ul style="list-style-type: none"> <li>• There is a fully updated asbestos register in place.</li> <li>• The group have appointee Oakleaf, external surveyors, to undertake reviews in 8 core areas for compliance and assurance (including fire, legionella) across the entire estate.</li> <li>• The group have purchased new radios for the security and estates team</li> <li>• The actions needed in the kitchens (fire safety) for our insurance provider, have been signed off and are underway.</li> <li>• The planned programme to replace CCTV cameras in Grimsby is well underway with all CCTV being moved over to Milestone.</li> <li>• A new Q2 system has been purchased (a computer based facilities management and assurance system) and additional modules are being added to track and monitor all mandatory checks</li> <li>• Details in private business.</li> </ul> <p>The committee reviewed the risk register and noted:</p> <ul style="list-style-type: none"> <li>• ELT are looking into a new system to automate processes supporting the build and recording of the Risk Register, replacing the Excel version and process currently used. MTK will keep the committee abreast of developments.</li> <li>• The ELT have also recognised that they need to review and reinvigorate our focus on sustainability. A working group has been reestablished.</li> <li>• Capital projects – see separate agenda item</li> <li>• The aging fleet needs to be considered. It is under review.</li> <li>• HE recruitment is a considerable concern. A deep dive will be received at the Curriculum and Quality Oversight Committee meeting on 4<sup>th</sup> March.</li> <li>• Vet awarding powers needs to be secured – the group have a 12-month stay of execution.</li> </ul> <p>The committee noted the range of deep dive activities underway and noted the assurance this gave.</p>	9 10

7	<p><b>Major builds projects update</b> It was confirmed that other than the two major builds projects, all other projects were on track.</p> <p><b>Skegness</b> The project has fallen behind (timescales), but they have appointed an additional site manager who is making a difference. The project is going well overall. The site is watertight, and the main delay and use of the contingency funds was due to the weather conditions on the site in the early stage of the project. The team are not forecasting an overspend.</p> <p>Section 278 – (for amendment to the road and footpaths) Lincolnshire County Council Highway Authority are asking for considerable additional funds, for works to significantly improve the drainage, road and pavement and cover the cost of moving an ANPR camera. We are currently in talks with them, and are looking to the Connected Coast for support. We have confirmed that the group is not in a position to cover this additional cost itself. It has paid a £400k surety bond to the Council that will be held in a high interest deposit account.</p> <p>ABe has been consulted and has been supportive to the team. Governors questioned if there had been any conditions on the land or in the planning conditions at the start of the project that could be relevant and took assurance that this was not the case. It was also questioned if there was a section 106, for community gain, and again confirmed this was not the case.</p> <p>It was confirmed that the detail would be reviewed by the Finance and Resources Committee on 11<sup>th</sup> March. The committee would be raising a request for a deep dive into the capital programme process the group followed, and wanted this to include both plans for major projects, and capacity within the team. This would require specialist support.</p> <p>The committee confirmed their support for the additional deep dive.</p>	
8	<p><b>Funds Fraudulently obtained report – verbal</b> It was confirmed there was nothing to report.</p>	
9	<p><b>Policies</b></p> <p><b>Delegation of Contract Approval and Signature Authority Policy</b> The Committee noted the amendments to role titles and sign off limits. They challenged a key management risk if the CFO was not available, and it was confirmed it would default to the CEO.</p> <p>The committee challenged the level of sign off and if it could delay operations, however it was confirmed that it applies for all costs except payroll, but these checks and balances were necessary when dealing with public money.</p> <p>The committee confirmed they would recommend the policy to the corporation:</p> <p><b>Financial regulations.</b> The committee confirmed they would recommend the financial regulations to the corporation.</p> <p><b>Health and Safety Policy</b> The Committee agreed to recommend the extension of the approval of the Health and Safety policy by one meeting (to July).</p> <p><b>GDPR Policy</b> The Committee agreed to recommend the updated policy to the corporation.</p>	11

	<p><b>Privacy Policy</b> The committee agreed to approve the updated privacy policy.</p> <p><b>Subject Access Request Guidance</b> This has been updated in line with the guidance from the Internal Auditors. The committee approved the updated guidance and footers.</p> <p><b>Modern Slavery Statement</b> The committee agreed to recommend the updated modern slavery statement to the corporation.</p>	
	<p><b>Health and Safety Update</b></p> <p><b>Other policy updates</b> The Educational Visits Policy will also be brought to the next meeting for review and approval. Other policies will be reviewed in light of DfE guidance and to reflect Martyn’s Law. The group have established a steering group and an amended policy will be considered in due course.</p> <p><b>Fire</b> The group have had no regulatory visits (usually have 5-6 a year), and there are 13 fire assessments in need of review. There have been 16 fire alarm activations – some of which were planned. Mapping issues from the tests have been noted and are currently being addressed. An individual became stuck in a lift at STEC, and the system has since been updated.</p> <p><b>Accidents and Incidents:</b> There has been a 14% increase in reporting in comparison to this time last year. There has been a deep dive into the numbers. ABe and MR met with AH and JT a fortnight ago. The meeting and review was incredibly useful, and it has been agreed to introduce regular meetings together. Reasons for the data include:</p> <ul style="list-style-type: none"> <li>• Changing the reporting to be more consistent</li> <li>• Pockets of higher incidence that is being followed up</li> </ul> <p>Other actions from the meeting include sharing of best practice and reporting tools, and JT will attend a behavioural safety course, and will share key learnings and develop practice with the team.</p> <p>It was noted that Hospitality continues to be the highest reporting area, but their incidents are down by 13% on last year. The team looked for patterns and confirmed a reduction in reporting at STEC but an increase at ERC.</p> <p><b>Days lost:</b> The group have identified that this is an area to tighten up on, as they have identified reasons for absence are not always recorded consistently, which means the team are not confident in the current accuracy of reporting. A Hall is actively looking at this process. Currently the group can only report on staff, but they are working with the MIS team to see if it is possible to report on learners too.</p> <p><b>RIDDOR Reporting:</b> There have been 10 incidents this year to date, higher than the same time last year.</p> <p><b>Training:</b></p>	

	<p>Specific training is on IProtectU, and some training modules have been made compulsory for all staff. The plan was quite ambitious and the Staff Development Team are supporting to ensure compliance. Currently Critical incident training is being pushed (at 74% complete to date). It is hoped to also move risk assessments onto IProtectU too.</p> <p><b>Health and Safety Deep Dive by ABe and MR:</b>  AH and JT were very open and receptive to the review. They discussed trends in the data, and noted the upward trends reflected a more receptive and transitional organisation. The group have been actively pushing reporting to staff, which is positive, and the impact of this can be seen in the reports. Some of the increases are also due to the organic growth of the Partnership itself.</p> <p>Where the data flagged potential concern, they looked into the results for assurance. On reflection, it is predominantly a result of being a learning organisation. Together they discussed the safety triangle, and ways to manage the current cultural change. As a result, they suggested benefits from safety leadership training, which JT is due to attend.</p> <p>In the future it was confirmed it would be good to invite a health and safety expert to a staff management away day as part of the programme of continual learning and development.</p> <p>Positives noted included:</p> <ul style="list-style-type: none"> <li>• They are encouraging the Estates team to manage their own risk assessments.</li> <li>• They are recommending a cross departmental audit programme.</li> </ul> <p>There was great engagement and it was agreed to continue these meetings, in addition to Lead Governor activities, with ABe and MR two or three times over the year.</p>	12
14	<p><b>Review of the meeting</b>  The committee reviewed the meeting and confirmed there had been:</p> <ul style="list-style-type: none"> <li>• Excellent time management.</li> <li>• Good discussion and challenge. Discussions reflected restorative action and reflection.</li> <li>• It was especially helpful to have RM and JT attend. They had added insight and assurance into practice. They also added significant value by attending and having open discussions, than by purely receiving the written reports.</li> <li>• It was good to hear different perspectives in the session.</li> <li>• The risk register is developing, and it was good to note the range of deep dive activities underway.</li> </ul>	