

## THE BOURNEMOUTH AND POOLE COLLEGE

## MINUTES OF THE MEETING OF THE AUDIT &amp; RISK COMMITTEE HELD ON 3 FEBRUARY 2026

<b>Members Present:</b>		
Ian Jones	Board Member & Chair of the Committee	
Saba Rubaei	Board Member	
Professor Elizabeth Mytton	Board Member	
Sarah Hutchings	Chief Operating Officer	
<b>In attendance:</b>		
Marianne Barnard	Director of Governance	
Mark Davies	Director of IT Services	
Daniel Hussain	Validera, Internal Auditors	
Gavin Shirley	Director of MI & Funding	

## PART A

		Actions
016-2526	<b>APOLOGIES FOR ABSENCE</b> No apologies for absence were received.	
017-2526	<b>DECLARATIONS OF INTEREST</b> There were no declarations of interest noted.	
018-2526	<b>PART A MINUTES OF THE LAST MEETING &amp; MATTERS ARISING</b> <b>RESOLVED:</b> The Committee reviewed and approved the Part A minutes of the meeting held on 24 November 2026 as a correct record.	
019-2526	<b>INTERNAL AUDIT REPORTS</b> Validera presented the following internal audit reports:  i) Risk Management Audit Findings: The audit had a positive outcome with one amber and two green findings, along with two best practise points. Recommendations included breaking out risk appetite into nuanced areas and updating risk scoring methodology. The COO confirmed that training around this for the senior leadership team was scheduled.  ii) Bursary and Learner Support Audit: This audit received substantial assurance with no findings, however there was one best practise point to ensure learners were notified about DWP benefit impacts in bursary award letters. It was confirmed that the team had implemented this recommendation.  iii) Payroll, Expenses, and Benefits Audit: The audit resulted in adequate assurance with two findings: lack of evidence for travel expense policy review and gaps in driver compliance checks. The Director of Finance had recently established a policy monitoring schedule and had updated the travel policy. The payroll team would also be automating monthly mileage claims and annual insurance certificate monitoring	

	<p>would be incorporated into the updated expenses policy.</p> <p>iv) Work Experience Audit and Data Management: The audit resulted in adequate assurance with five findings. Issues were highlighted with manual trackers leading to data gaps, especially for SEND learners. The work experience team was implementing a new tracker and piloting a CRM system to improve data consistency. Regular meetings between placement managers and MIS were planned, and safeguarding would be involved in monitoring SEND placements. Feedback processes have been redesigned, and ProMonitor would be used for better record-keeping. An update would be provided at the next meeting.</p> <p>Internal Audit Action Tracker: The COO introduced a new status in the tracker, 'complete and audited', to distinguish between completed actions and those verified by the team at Validera. It was noted that some actions remained in progress, particularly around risk management and expenses policy updates.</p> <p><b>RESOLVED:</b> The committee received and noted the update on the internal audit reports and the action tracker.</p>	
029-2526	<p><b>RISK MANAGEMENT</b></p> <p>A recommendation from the internal audit of Risk Management completed in 2025 was to consider splitting risk appetite by category to provide a more nuanced steer on acceptable risk levels.</p> <p>The proposed new risk appetite categories, differentiating tolerance levels for areas such as safeguarding, strategic growth, and digital/IT were presented. The Board's appetite would guide RAG ratings, moving away from a blunt scoring system to a more nuanced approach.</p> <p>The revised framework applies RAG ratings based on the Board's appetite for each risk category, rather than raw scores. This allowed for more realistic and actionable risk assessments, with board actions focused on amber and red risks.</p> <p>The committee discussed standardising control design templates. Validera agreed that while some controls could be templated, sector diversity made full standardisation challenging. Minimum requirements for controls may be defined based on risk appetite.</p> <p>The internal auditors recommended moving to an even-numbered scoring scale to avoid middle scores, however the college had opted for a middle ground by providing more definition around score levels. The framework retained comparability with sector standards while reducing ambiguity.</p> <p>Best practice would be to apply a risk appetite mapping in the risk register. First by determining the main category of risk type, then through comparing the residual risk score to the threshold of the risk type to determine if the risk remains within the Board's appetite for risk. The RAG status would be applied based on the outcome of this and actions determined as necessary.</p> <p>In order to demonstrate how this would be applied in practice, the above definitions have been mapped to the current risk register.</p> <p>The Committee approved the recommendation. It was confirmed that the risk management policy would be updated accordingly and future risk registers would reflect the mapping.</p>	

	<b>RESOLVED:</b> The Committee approved the recommendations.	
030-2526	<p><b>CYBER THREAT REPORT</b></p> <p>The Director of IT Services reported on the renewal of Cyber Essentials accreditation, ongoing replacement of Windows 10 PCs, and outcomes of penetration tests by JISC. Internal systems showed strong security, with medium risks mitigated.</p> <p>The Director of IT Services described regular monitoring of credential leaks via JISC and other partners, noting that recent leaks involved active accounts but were not breached due to conditional access and multi-factor authentication policies.</p> <p>Routine cyber awareness bulletins and phishing campaigns had improved staff vigilance. Tailored training for the finance team had been completed, and plans were underway to expand bite-sized training to both staff and students, with monitoring of completion rates.</p> <p>The committee discussed AI risks, and it was confirmed that ongoing work led by the Head of Digital Education includes guidance on ethical AI use, acceptable use policies, and plans to define approved use cases for staff, particularly in teaching.</p> <p><b>Cyber Governance Code of Practice and Board Training</b></p> <p>The Director of IT Services outlined the updated NCSE guidance and recommended board actions, including formal adoption of the code and regular board-level discussion on cyber security. The committee agreed to undertake NCSE cyber training, it was also agreed to extend the opportunity to complete the training at a later date, to all Board Members.</p> <p>The Director of Governance would share details of the NCSE cyber security training with committee members who had agreed to complete the training ahead of the Board meeting taking place on 26 March 2026.</p> <p><b>Cyber Insurance Review</b></p> <p>The committee discussed and considered increasing cyber insurance cover to £3 million. It was agreed that the COO would review premiums and excess options.</p> <p><b>RESOLVED:</b> The Committee received and noted the latest Cyber Security Report.</p>	
031-2526	<p><b>ANY OTHER BUSINESS</b></p> <p>It was confirmed that there would be a Health &amp; Safety item on the agenda for the committee meeting in the summer term.</p>	
032-2526	<p><b>DATE OF NEXT MEETING:</b></p> <p>The next meeting of the Audit &amp; Risk Committee would be held on 10 June 2026, via Teams.</p>	
033-2526	<p><b>EVALUATION</b></p> <p>It was noted that the Committee had undertaken the required activities.</p>	

Daniel Hussain, Gavin Shirley and Mark Davis left the meeting.		
034-2526	<b>CONFIDENTIALITY</b> Confidential points were recorded in the Part B minutes.	