University of Portsmouth

Audit and Quality Committee

DATE / TIME / VENUE	1030, Thursday 17 February 2022, Room 0.32, St Andrews Court
PRESENT	Frances Morris-Jones, External Governor (Chair) Liz Jolly, External Governor
IN ATTENDANCE	Amy Dymond-Hobbs, Quality Manager for Apprenticeships and Work Based Learning (Min 42) Professor Graham Galbraith, Vice-Chancellor Dr Rinat Khusainov, Staff Representative Duncan Laird, External Auditor, KPMG LLP (except Min 50) Dylan Powell, Student Governor Lorna Raynes, Internal Auditor, RSM LLP (until and including Min 42) Brent Schwartz, Health and Safety Manager (Min 41) Emma Woollard, Executive Director of Finance
SECRETARIAT	Adrian Parry, Executive Director of Corporate Governance Annette Mills, Head of Governance Services

Private Sessions

- The external governors, the staff representative, the student governor and the internal auditors held a private session before the start of the main meeting at 1015 hours.
- The external governors, the Executive, the staff representative, the student governor and the secretariat held a private session after the main meeting at 1300 hours.

36 Welcome, Quoracy and Apologies

36.1 Apologies were received from: Bahram Bekhradnia, External Governor; Louise Tweedie, Internal Auditor RSM LLP; and Rees Batley, External Auditor, KPMG LLP

36.2 No conflicts of interest were declared.

36.3 The Executive Director of Corporate Governance confirmed that the meeting was quorate and could proceed to business.

37 Minutes

The minutes of the meeting held on 12 November 2021 were confirmed as an accurate record.

38 Matters Actioned Since the Last Meeting or Under Continuing Consideration and Matters Arising

Matters Actioned

38.1 Action was reported on six matters, three which were for note and three items that would be covered on the agenda.

Matters Arising

38.2 There were no other matters arising from the minutes.

39 Internal Audit

Higher Education Benchmarking Report 2020/2021

39.1 Committee received a report from the internal auditors that provided a comparison of the number of actions agreed, and the audit assurance opinions provided in similar audits performed across RSM LLP's higher education (HE) client base. The following points were noted in discussion:

(i) Each higher education institution had a different approach to the conduct of audits. Some organisations prioritised key systems and others, like the University, focussed upon areas that were known to require scrutiny and improvement. An example was the internal audit of Research Ethics. This had led to a partial assurance outcome but had identified areas for improvement that could be acted upon and resolved.

(ii) In response to a question, it was agreed that RSM LLP would confirm the number and size of the higher education institutions included within the sample.

Action: RSM LLP

39.2 The Committee noted the report.

Progress Update Report

39.3 Committee received an update on progress against the internal audit plan for 2020/2021 from Lorna Raynes, RSM LLP. The progress report provided a factual summary of progress to date. In discussion, the following points were noted:

(i) Since the report had been submitted, the Marketing Process audit report had been finalised and would be received elsewhere on the agenda.

(ii) RSM LLP were awaiting management responses on the Staff Development Processes audit. It was noted that recent senior staff changes in the Human Resources Department had impacted upon this response.

(iii)   The Controls for DBS Checks audit would commence on 9 May 2022.

(iv)   Due to an impending full foundation review of the Student Records system and the concern about the reliability of the processes, it was proposed that the Student Data Fee Processes audit should be replaced with a review of Mental Health and Wellbeing. A Student Data Fee Processes audit and a broader audit on Mental Health and Wellbeing would be undertaken in 2022/2023 or early 2023/24

(v)   The review of the framework for academic workload planning would be an advisory report and would commence on 16 May 2022.

(vi)   The Board noted the changes to the plan and the update.

Marketing Processes – Website Change Control Audit Report

39.4   Committee noted that the overall conclusion of the audit was reasonable assurance. The audit had focussed on communication with other departments and updating of the website. There were two medium and one low priority actions arising from the audit.

Follow-Up Report

39.5   The Committee received an overview report on the follow-up progress made by the University to implement previously agreed management actions in response to audit recommendations. The following points were noted in discussion:

(i)   There were 267 actions overall of which 236 actions had been implemented.

(ii)   There were 26 actions not due yet and there were five actions which were overdue and upon which no response had yet been received.

(iii)   There was discussion about the outstanding actions for the Estates Contract Management Processes. The update in the report received did not reflect the update given at the 16 September 2021 meeting as relayed from the Director of Estates and Campus Services. It was agreed that this matter would be explored outside the meeting and a written progress report provided to the Committee.
          Action: Executive Director of Finance/ Executive Director of Corporate Governance

(iv)   In response to a question about the progress of the Gender Pay Gap audit, it was noted that the University was collecting and measuring data and that the Gender Pay Gap was a standing item on the People, Culture and Engagement Committee. It was agreed the current status of the audit would be confirmed.
          Action: Executive Director of Corporate Governance

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40   Risk Management

Corporate Risk Register

40.1   The Committee received the updated Corporate Risk Register from Adrian Parry, Executive Director of Corporate Governance. The following points were noted in discussion.

(i)   Local risk registers were still evolving as part of the broader delivery of the University Strategy.

(ii)   The top 12 risks had been discussed by the University Executive Board (UEB) and remained the same as reported previously to the Committee and the Board.

(iii)   UEB had also discussed the need to focus upon the relationship between wellbeing and less effective engagement from staff; how to better engage with staff to create an improved performance culture; and the estates challenges created by the need for flexibility and agility in the way space was managed and utilised in the context of hybrid working.

(iv)   One new risk related to insurance cover had been added to the register at the request of the Infrastructure and Finance Committee. Insurance cover had become increasingly difficult to obtain as some insurers were withdrawing from the higher education market because of its perceived risk profile.

(v)   Overall the risk scores had not changed. However, some new activities and mitigations had been added to the register. These, in the main, reflected activities within the estates and infrastructure and the sustainability strands of the University Strategy.

(vi)   As agreed at the meeting held on 12 November 2021, a map plotting the inter-dependencies between risks had been provided. It was noted that there was a high degree of synergy between risks of high interdependency and the four strategic imperatives. There was some discussion as to whether a higher proportion of resources should be allocated to the mitigation of risks with high interdependencies as they would provide more leverage. Should risks with high interdependencies be considered to have higher impact.

(vii)   The target risk score could act as a proxy for the risk appetite associated with each risk. There was discussion about risks that were within and outside the control of the University and whether this might have implications for the target risk scores set. It was suggested that the meaning of the colour coding on target risk scores should be made explicit.

(viii)   In response to a query about the implication of all the civic engagement risks being assessed as low risk (green), for example, should these now be de-prioritised for resources, it was noted that the associated risk scores would be reviewed once the specific outputs and outcomes of these activities had reached their delivery phase.

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40.2 The Committee noted the update and thanked the Executive Director of Corporate Governance for his work on further developing the Corporate Risk Register.

Corporate Risk Assurance Map

40.3 The Committee received the revised Corporate Risk Assurance Map from Adrian Parry, Executive Director of Corporate Governance. The Committee noted that the Corporate Risk Assurance Map had been revised to reflect audit activity. The following points were noted in discussion.

(i) Some of the external assurance activities would need to be reviewed and updated to reflect assurance levels, for example the National Student Survey outcome.

(ii) In response to a question about a UKVI audit, it was noted that an internal review had already been undertaken to check records and files. It was likely that an external UKVI audit by the Home Office would take place in the near future. It was acknowledged that at some point in the future it might be helpful for an internal audit of UKVI-related activity to be undertaken.

40.4 The Committee noted the update.

41 Health and Safety Quarterly Report

The Committee received the quarterly Health and Safety Report for 1 August to 31 October 2020 (Quarter 1) from Brent Schwarz, Health and Safety Manager. The following points were noted in discussion:

41.1 In the reporting period, there had been 93 incidents. This was a slight increase on the previous reporting period but was to be expected as more people were now present on campus.

41.2 There were no RIDDOR incidents during this period. However, there was one report during quarter 2 that related to COVID-19. The details of this incident would be included within the report to be received by the Committee at its meeting on 19 May 2022.

41.3 Some recommendations had been made by Public Health England following its audit of laser safety. Details would be included in the report to be received by the Committee at its meeting on 19 May 2022.

41.4 In response to a question, it was confirmed that the compilation of the Chemicals Inventory had commenced four months ago and was still in progress.

41.5 In response to a question, it was confirmed that the transfer of PAT testing to the Estates and Campus Services Department was progressing.

41.6 There was discussion about the headline figure that indicated that 29% of all absences were attributable to stress and other psychiatric illness. It was

acknowledged that this figure referred to 29% of absences and not 29% of all staff employed.

41.7 Currently, there was no explicit link between health and safety incidents and HR absence records.

41.8 The report was noted by the Committee.

42 Degree Apprenticeships

The committee received a presentation from Amy Dymond-Hobbs, Quality Manager for Apprenticeships and Work Based Learning, Department of Student and Academic Administration on quality assurance arrangements for apprenticeship provision. In discussion the following points were noted:

42.1 There were currently around 700 to 750 apprentices studying on degree apprenticeship programmes at the University.

42.2 There were a number of organisations with an interest and role in the quality assurance of apprenticeship- provision: Ofsted; OfS; Education and Skills Funding Agency (EFSA); and the Department for Education. Each body had slightly different requirements. Ofsted and ESFA, for example, used different data sets. However, if the University met the Ofsted requirements then this should also mean that it was compliant with EFSA requirements.

42.3 The EFSA set out the Funding Rules and Technical Funding Rules that constituted funding conditions. All apprenticeship provision must adhere to these rules. Breach of these rules would result in financial claw back up of up to 100% of the apprenticeship funding drawn and/or deregistration of funding to provide apprenticeships. Ofsted inspection visits could be triggered by adverse quality assurance feedback.

42.4 An Ofsted monitoring visit was an initial health check inspection which would look at three areas: Quality of Education; Leadership and Management; and Safeguarding. The aim was for the University to achieve 'reasonable assurance' at this stage. It was likely that a monitoring visit would occur in the next few months. Following the monitoring visit a full Ofsted inspection would take place in 18 months' time.

42.5 During an inspection Ofsted Inspectors would seek evidence from those responsible for governance. Ofsted look to determine whether those responsible for governance:

(i) Knew the provider and understood its strengths and weaknesses;
(ii) Supported and strengthened the provider's leadership and contributed to shaping its strategic direction;
(iii) Ensured that the provider met its statutory responsibilities; and
(iv) Provided challenge and held senior leaders and managers to account for improving the quality of learning and the effectiveness of performance management systems.

42.6 There was discussion of the self-assessment report which had been carried out in preparation for an Ofsted visit. The self-assessment report had been agreed by UEB and the outcomes would inform the Quality Improvement Plan. The intention was to also undertake an additional mid-year self-assessment review.

42.7 In discussion about the self-assessment report, it was agreed that it would be helpful for the quality and performance indicators for leadership and strategic direction be developed so that the improvement over the last year could be demonstrated.

Action: Quality Manager for Apprenticeships and Work Based Learning

42.8 It was noted that some degree apprenticeship students were motivated to enrol on the courses because it enabled them to obtain a degree at no personal financial cost. However, the apprenticeship element required extra assessment of the student. If the student did not complete the end point assessment for the apprenticeship element then they could still be awarded a degree. This impacted upon the University's completion rates. This issue also had a financial impact on the University because 20% of funding was withheld if the end point assessment was not completed by the student. The University was exploring changes to its academic regulations to link the attainment of the degree with the completion of the end point assessment.

42.9 In summary the Committee noted and agreed the following:

(i) There would be a mid-year self-assessment review in April 2022. The outcome of this assessment would either be circulated to the Committee via correspondence or received at the next meeting of the Committee on 19 May 2022.

Action: Executive Director of Corporate Governance/ Quality Manager for Apprenticeships and Work Based Learning

(ii) Regular updates would be provided to the Committee. The frequency and timings of these updates would be determined outside the meeting.

(iii) The presentations provided at this meeting would be circulated to the Committee.

Action: Head of Governance Services

(iv) Two governors needed to be nominated to attend meetings with Ofsted inspectors when required. The Chair of the Committee confirmed her willingness to participate subject to her availability. It was noted another governor would be nominated in due course outside the meeting.

43 Student Related External Returns Data Quality

43.1 Annual Report 2020/2021

(i) Committee received and noted a report from Kirsty Blackburn, Principal Analyst (External Returns and Data Standards), Department of Student and Academic Administration, on the external statutory data returns made in the

academic year 2020/2021.

(ii)   The paper provided an annual summary to the Committee of the external returns undertaken during 2020/21 by the External Returns and Data Standards Team in DSAA. The report was designed to provide assurance to the Committee that the University had complied with its responsibility to provide timely and accurate data.

(iii)   The implementation of the HESA Data Futures in 2022/23 was noted. The Committee also noted the additional efforts in terms of manual workarounds required to supplement components of the SITS system which were not yet fully functional, and the continuing dependence on key consultant personnel.

(iv)   The Committee agreed that the report provided assurance that the University's processes for external data returns were robust and that it had complied with its responsibilities.

43.2   Data Returns Register

(i)   Committee received and noted the Data Returns Register as at 1 February 2022. The OfS Regulatory Notice 2 stipulated that the audit committees of higher education institutions were responsible for providing assurance to their governing bodies on the adequacy and effectiveness of the management and quality assurance of data.

(ii)   The Committee agreed that the report provided assurance that the University was alert to its key data returns, their associated timescales and any risks associated with the collection of the data.

44   Professional, Statutory and Regulatory Body (PSRB) Accreditations

44.1   Professional, Statutory and Regulatory Body (PSRB) Accreditations at the University of Portsmouth:

(i)   Committee noted a report from Sophie Mansfield, Academic Standards and Quality Adviser, Academic Standards, Quality and Partnerships, Department of Student Academic Administration, on the business processes for supporting and recording courses with Professional Statutory and Regulatory Body (PSRB) accreditation status.

(ii)   There were a number of new and renewed accreditations of courses and it was noted that these would have been subject to a rigorous approval process.

44.2   Professional Accreditations - Status of Courses (*circulation only*):

(iii)   Committee had received electronically a complete list of the professional accreditation status of courses offered by the University.

44.3   The Committee agreed that the report and the comprehensive and clear spreadsheet gave assurance to Committee that the University was actively managing its professional accreditations.

45   The University's Prevent Duty

The Committee received a report from Adrian Parry, Executive Director of Corporate Governance that provided an overview of the University's activities to deliver the Prevent Duty.

45.1   In response to a question it was confirmed that the University had an overarching Safeguarding Policy but that this was accompanied by supplementary policies where required. For example, there was a specific safeguarding policy for apprenticeships.

45.2   The Committee noted the update.

46   Non-Audit Services Provided by External and Internal Auditors

Committee noted there had been no planned services outside the core audit and ancillary services provided by the internal and external auditors during the course of 1 November 2021 to 31 January 2022.

47   OfS Publications

Committee noted the full list of OfS publications could be found at: https://www.officeforstudents.org.uk/publications/.

48   Proposed Meeting Dates 2022/2023

The Committee noted the proposed meeting dates for 2022/2023 which had been circulated electronically to members on 2 December 2021:

-    Wednesday 21 September 2022 1030 to 1300
-    Thursday 10 November 2022 1000 to 1300
-    Wednesday 22 February 2023 1030 to 1300
-    Thursday 18 May 2023 1030 to 1300

49   Date of Next Meeting

The next meeting would be held on Thursday 19 May 2022 from 1030.

50   Discussion on The Work and Performance of The Auditors on An Annual Basis – confidential