

**Meeting of the Audit and Risk Committee
to be held on Tuesday 02 December 2025 at 4.00pm
by Hybrid Attendance at Kilmarnock Campus and via Microsoft Teams**

AGENDA

1. **Meeting with External and Internal Auditors (6) without staff members (except BGA)**
2. Welcome and Declarations of Interest (at 4:10pm)
3. Apologies
4. Minute of the meeting held on 16 September 2025
 - ARC Action & Decision Tracker

Paper 1 (C/P)
Paper 1A (P)
5. Matters arising

Part A – For discussion, decision and approval

6. 2024-25 Freedom of Information Annual Report (7 / 9) Paper 2 (P) SR
7. 2024-25 Complaints Annual Report (7 / 9) Paper 3 (P) SR

Internal Audit

8. Internal Audit Reports (2 / 10):
 - External Communications – Website Paper 4 (P) SA
 - Student Voice Paper 5 (P) SA
9. Internal Audit Progress Report (6) Paper 6 (P) SA

Part B – Regular monitoring & reporting

10. No papers

Part C - Risk Management & Assurance

11. Cyber Incident Response Plan (1 / 18) Paper 7 (R) BJ
12. Assurance Map (3 / 4) Paper 8 (R) ARi
13. Strategic Risk & Opportunities Register (15) Paper 9 (R) ARi

Moved from Part A - For discussion, decision and approval – with External Auditor not present

14. Review of effectiveness of the External Auditor (6) Paper 10 (R) ARi

Part D – For information/AOB

15. AOB

Date of Next Meeting – Tuesday 17 March 2026 at 4.00pm, Ayr Campus.

(C/P) Confirmed minutes will be published;

(P) Papers will be published on the College website;

(R) Papers will not be published for reasons of commercial sensitivity or for reasons of personal data confidentiality

**Minute of the Audit and Risk Committee
Held by Hybrid Attendance at Kilmarnock Campus
Thursday 16 September 2025**

Present:

Jane Grant	Chair
Michael Ross	Vice Chair
Brian Green	Non-Executive Board Member
Chris Boyce	Elected EIS-FELA Staff Member
Marko Prorocic	Elected Professional Services Staff Member

In attendance:

David Davidson	Vice Principal, People, Performance & Transformation
Hilary Denholm	Board Governance Advisor & Minutes
Brad Johnstone	Director of Digital Infrastructure
Sara Rae	Vice Principal, Skills & Enterprise
Alan Ritchie	Vice Principal, Finance & Infrastructure
Liz Walker	Chief Financial Controller
Siobhan Hamilton	Wbg – Internal Auditor Manager
Andy Reid	Azets – Director, External Auditors

1. Welcome and Declarations of Interest

The Chair welcomed all present to the meeting including new members & attendees.

There were no Declarations of Interest presented.

The meeting was confirmed as quorate.

2. Apologies

Apologies were received Gillian Longmuir, Non-Executive Board Member.

3. Minutes of the Previous Meeting held on 10 June 2025 (Paper 1) C/P

The minutes were approved as a correct record.

Proposed: Chris Boyce **Seconded:** Gillian Longmuir (*confirmed via email post meeting*)

ARC Action & Decision Tracker (Paper 1A) (P)

The Committee noted all previous decisions and actions were completed.

4. Matters Arising

There were no other outstanding matters arising from the minutes.

5. 2025-26 Committee Terms of Reference and Workplan (Paper 3) (P)

H Denholm & A Ritchie highlighted the main proposed updates to the Committee Terms of Reference (ToR), and the associated annual workplan revisions.

The Committee was asked to:

- a) Review & approve the revised Terms of Reference (Appendix 1).
- b) Review and approve the 2025-26 Committee Work Plan (Appendix 2).
- c) Note the current Committee Membership (Appendix 3).

The Committee noted:

- Areas of strong alignment with best practice within the ToR included clear remit and scope; independence and membership; Audit oversight; risk management / reporting and transparency.
- Opportunities for enhancement to the ToR included cyber security governance, performance management, stakeholder engagement and succession planning.

Discussion took place around additional verbal alterations within membership & meeting sections which were also approved.

Decision: ARC49-D01 - The Committee reviewed and approved the revised Terms of Reference subject to additional verbal alterations and the 2025-26 Committee Workplan.

7.2025-26 Internal Audit Plan Paper 4 (P)

The Committee were presented with the final 2025-26 Internal Audit Plan following the review undertaken at the June Committee meeting. The Audit and Risk Committee were requested to approve the 2025-26 Internal Audit Plan.

The Committee noted:

- The revised plan incorporates updates from the June 2025 review including a revised contract extension to 31 July 2026 with an optional further year, updated assignment personnel, a reduction of follow-up review days from five to two and the addition of three days for assurance mapping consultancy.
- The plan maintains consistency in audit areas and days while including minor editorial refinements.

Discussion took place around training topics with agreement that cyber training would be offered in a twilight session along with BRIC members, with Risk Management and the role of the Board being offered in February 2026 for all Board members.

Action: ARC49-A01 CDN Finance for Non-Financials training information to be circulated to ARC members.

Decision: ARC49-D02 - The Committee reviewed and approved the revised 2025-26 Internal Audit Plan.

9.Assurance Mapping update Verbal (P)

The Committee received a verbal update from A Ritchie on the progress with the Assurance Mapping project to bring a visual representation of all assurance work undertaken across the College. The ELT will be reviewing the first draft next month, which will then be brought back to the Committee.

Discussion took place around information on Assurance Mapping for the new ARC members, and it was agreed to circulate the previous information on Assurance Mapping form the March ARC meeting.

ARC49-A02: Assurance Mapping information from March 2025 meeting to be circulated to new ARC members

14. AOB

There was no other business.

Date of Next Meetings:

Joint ARC & BRIC 18 November 2025 (4-5pm) – Financial Statements only

ARC Tuesday 02 December 2025 (4–5pm)

P - Papers will be published on the College Website; R - Papers will not be published for reasons of commercial confidentiality or for reasons associated with data protection legislation; C/P - Confirmed minutes will be published on the College Website

RESERVED ITEMS ON THE NEXT PAGE

Audit & Risk Committee - Action and Decision Log
Meeting No 50 – 02 December 2025

(Paper 1A)

Meeting Date	Agenda Item	Reference	Details	Action Owner	Due Date	Action Decision	Open Complete Approved Declined
16.09.25	2025-26 Committee Terms of Reference and Workplan	ARC49:D01	The Committee reviewed and approved the revised Terms of Reference subject to additional verbal alteration, and the 2025-26 Committee Workplan	NA	25.09.25	Decision	Approved
16.09.25	Internal Audit Annual Plan 2025-26	ARC49:D02	The Committee reviewed and approved the revised 2025-26 Internal Audit Plan.	NA	NA	Decision	Approved
16.09.25	Internal Audit Annual Plan 2025-26	ARC49-A01	CDN Finance for Non-Financials training information to be circulated to members	BGA	18.09.25	Action	Completed
16.09.25	Risk Management Policy and Procedure Review	ARC49:D03	The Committee reviewed and recommended the Risk Management Policy for approval to the Board of Management	NA	25.09.25	Decision	Approved
16.09.25	Risk Management Policy and Procedure Review	ARC49-A02	Assurance Mapping information from March 2025 meeting to be circulated to new ARC members	BGA	18.09.25	Action	Completed
16.09.25	Strategic Risk Register	ARC49:D04	The Committee reviewed and recommended the Strategic Risk Register for approval to the Board of Management.	NA	25.09.25	Decision	Approved
16.09.25	Strategic Risk Register	ARC49: A03	Risk Register Format review regarding addition of opportunities.	ARi	02.12.25	Action	Completed

Title of Meeting: Audit and Risk Committee

Date: 2 December 2025

Subject: 2024-25 Freedom of Information Annual Report

Purpose: The Freedom of Information (FOI) Annual Report is presented to the Audit and Risk Committee to provide assurance that the College is meeting its statutory obligations under the Freedom of Information (Scotland) Act 2002 and related regulations.

Recommendation: The Audit and Risk Committee is requested to note the content of the report and consider whether the Internal Audit Plan requires to be reviewed.

1. Executive Summary

- 1.1. The 2024-25 Freedom of Information (FOI) Annual Report (**Appendix 1 and 2**) demonstrates the College's ongoing commitment to statutory compliance, governance and risk management under the Freedom of Information (Scotland) Act 2002 and related regulations. The report is presented to the Audit and Risk Committee to provide assurance that the College maintains robust internal controls, monitors trends, and supports continuous improvement in transparency and information management.

Key Highlights

- 1.2. **Compliance and Assurance:** The College achieved a 100% on-time response rate to FOI and Environmental Information Requests (EIR) in 2024-25, improving from 95% in the previous year. This reflects strengthened internal tracking and information gathering processes.
- 1.3. **Request Volume and Nature:** There was a decrease in total requests (33 in 2024-25 vs. 39 in 2023-24), with a significant drop in EIR requests, suggesting reduced public concern over environmental issues. However, the College continues to monitor areas like RAAC in buildings and environmental management for potential risk recurrence.
- 1.4. **Stakeholder Trends:** The profile of requestors shifted, with more requests coming from private companies (24%) and fewer from unions and the Scottish Parliament. This may indicate changing stakeholder interests or increased external scrutiny, which could introduce new reputational or compliance risks.

- 1.5. **Types of Requests:** Salary and staff information remain high-interest areas, with requests focusing on principal's salary, staff earning over £50k, and staff departures. These topics are sensitive and require careful management to mitigate reputational and compliance risks.
- 1.6. **Risk Areas:** The report identifies ongoing risks in environmental compliance and the handling of sensitive staff data. The Audit and Risk Committee is advised to keep these areas under scrutiny and consider whether the Internal Audit Plan requires review.

Conclusion

- 1.7. The College's FOI performance in 2024-25 reflects positive progress in statutory compliance, stakeholder engagement and risk mitigation. Continued vigilance is recommended in environmental and HR-related disclosures to uphold public trust and accountability.
- 1.8. This oversight ensures compliance, strengthens governance and mitigates risks associated with transparency and information management. By reviewing the report, the Committee validates internal controls, monitors trends and supports continuous improvement, reinforcing the College's commitment to accountability and public trust.

2. Associated Risks

- 2.1. There are no further risks required to be considered because of this report.

3. Equality and Diversity Impact Assessment

- 3.1. An EDIA is not applicable to this paper given the subject matter.

4. Publication

- 4.1. This paper will be published on the College website

Sara Rae
Vice Principal, Skills and Enterprise
2 December 2025

1. Background

- 1.1. The College is subject to the Freedom of Information (Scotland) Act 2002 and associated Environmental Information Regulations. These documents require public bodies to respond to information requests within statutory timescales and maintain transparency in operations. A failure to comply can result in reputational damage, regulatory sanctions and loss of public trust.

Volume and Nature of Requests

- **2023–24:** 39 requests (34 FOI, 5 EIR)
Notably, there was an increase in EIR requests, with topics including RAAC in buildings, emissions, litter and fly-tipping.
- **2024–25:** 33 requests (32 FOI, 1 EIR).
The overall number of requests decreased by 6, and EIR requests dropped significantly.

- 1.2. The reduction in EIR requests indicates less of a public concern or fewer environmental issues reported. Given the previous year's spike (especially around RAAC and environmental management) the College continues to keep these areas under review for potential risk recurrence.

1.3. Timeliness of Responses

- **2023–24:**
 - 95% of requests were answered within the statutory timescale.
 - 2 requests were late—one due to a lost original request, another due to delays in gathering information.
- **2024–25:**
 - 100% of requests were answered on time.

- 1.4. The improvement in response rate is positive. However, the previous year's late responses highlight a risk around internal tracking and information gathering processes. The College continues to invest in this area to ensure robust systems are maintained to prevent future lapses.

1.5. Internal Reviews and Appeals

- **2023–24:** Three internal reviews requested (two for the same request). No appeals to the Scottish Information Commissioner.
- **2024–25:** No internal reviews or appeals.

- 1.6. The drop in internal reviews is a positive move which highlights improved satisfaction with the Colleges initial responses.

Requestor Profile and Trends

- **2023–24:** Requests mainly from Unions (23%), “What Do They Know” website (21%), and Scottish Parliament (18%).
- **2024–25:** Requests mainly from private companies (24%), Unions (21%), and Scottish Parliament (12%).

- 1.7. The shift towards more requests from private companies may indicate a changing in other stakeholder interests or scrutiny. The College will continue to monitor this trend and consider if this reflects a new reputational or compliance risk.

Types of Requests

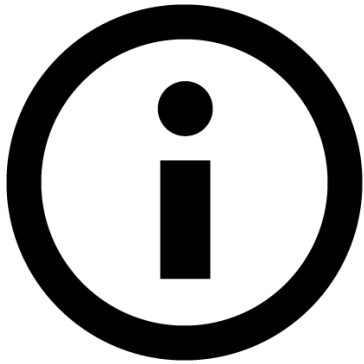
- **2023–24:** Staff information (annual leave, redundancies, job evaluation), salary/expenses (lowest paid FTE, senior leadership remuneration), student information (strike impact, foetal alcohol syndrome).
- **2024–25:** Salary information (Principal’s salary, staff earning over £50k, staff departures before pay award), staff information (headcount, FTE, individual staff queries), student information (disciplinarys, dismissals).

- 1.8. Salary and staff information remain high-interest areas, which can be sensitive and potentially reputationally risky. The College will continue to ensure transparency and accuracy in these disclosures and monitor for any patterns that could indicate underlying HR or financial risks.

Risks and Issues for Audit and Risk Committee Attention

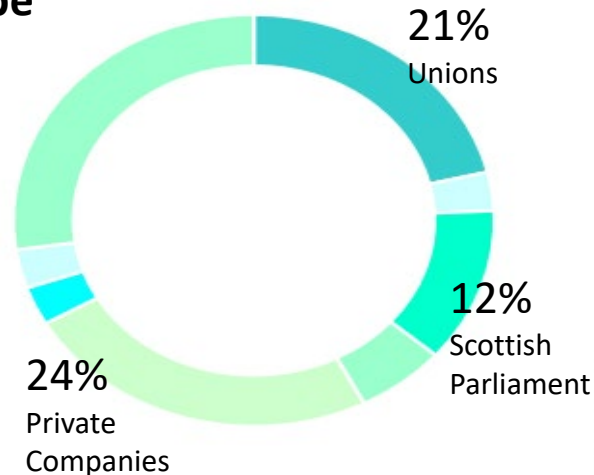
- 1.9. A review of the report indicates that the key risks areas are:
- **Environmental Concerns:** The spike in EIR requests in 2023–24 (RAAC, emissions, waste management) suggests ongoing risk in facilities and environmental compliance. Even though requests dropped in 2024–25, these areas should remain under scrutiny.
 - **Sensitive Information Requests:** Persistent interest in salary and staff data could pose reputational or compliance risks if not managed transparently and accurately.
 - **Stakeholder Shifts:** The increase in requests from private companies may signal new external scrutiny or commercial interest, which could bring different risks compared to union or parliamentary requests.

Freedom of Information – Key Facts 2024/2025 *(Paper 2(1))*



33 requests for information

Requestor Type



100% responded to in timescale



0 requests for an internal review

Top 3 Request Types

- Systems/IT Information
- Procurement Information
- Salary Information



10 subject access requests

Freedom of Information Report August 2024 – July 2025

Executive Summary

2024/2025

This report summarises the College position on Freedom of Information (FOI) and Environmental Information Regulation (EIR) requests for 2024-25.

The number of requests received has slightly decreased since 2023-24, with 6 less requests being received.

The College has responded to 100% of all requests within the required timescale.

The types of request received do not indicate any emerging risks that require to be addressed.

There were no internal reviews received and no appeals received from the Scottish Information Commissioner.

FOI/EIR Requests Received

2024/2025

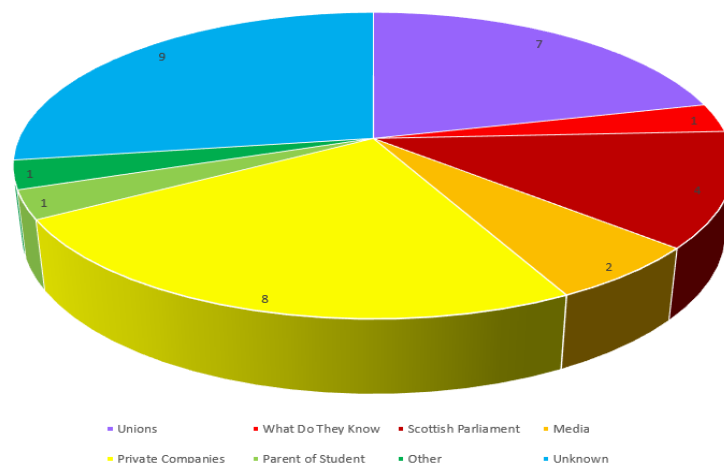
33 requests were received in total. 32 were Freedom of Information requests and 1 Environmental Information Regulation request.

The chart on the right shows the number of FOI/EIR requests received by requestor type.

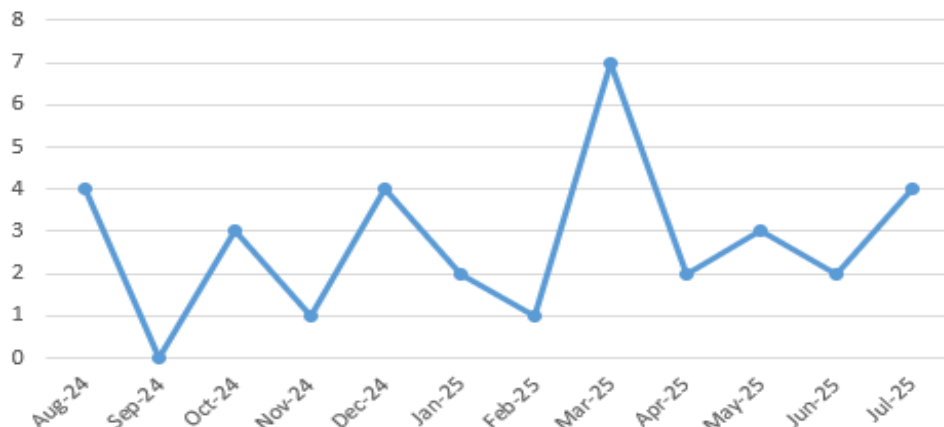
24% were received from private companies, 21% from the Unions and 12% were received from the Scottish Parliament.

The charts below show the number of FOI/EIR requests received split by month and the number of requests where an internal review was requested.

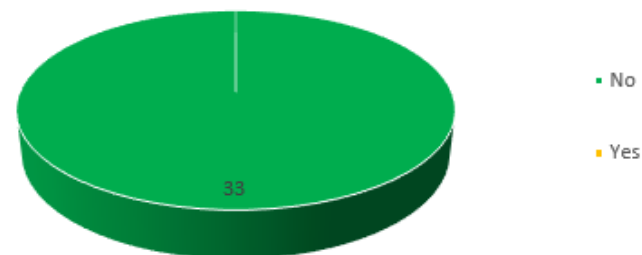
FOI/EIR requests received, split by requestor type



FOI/EIR requests received, split by month

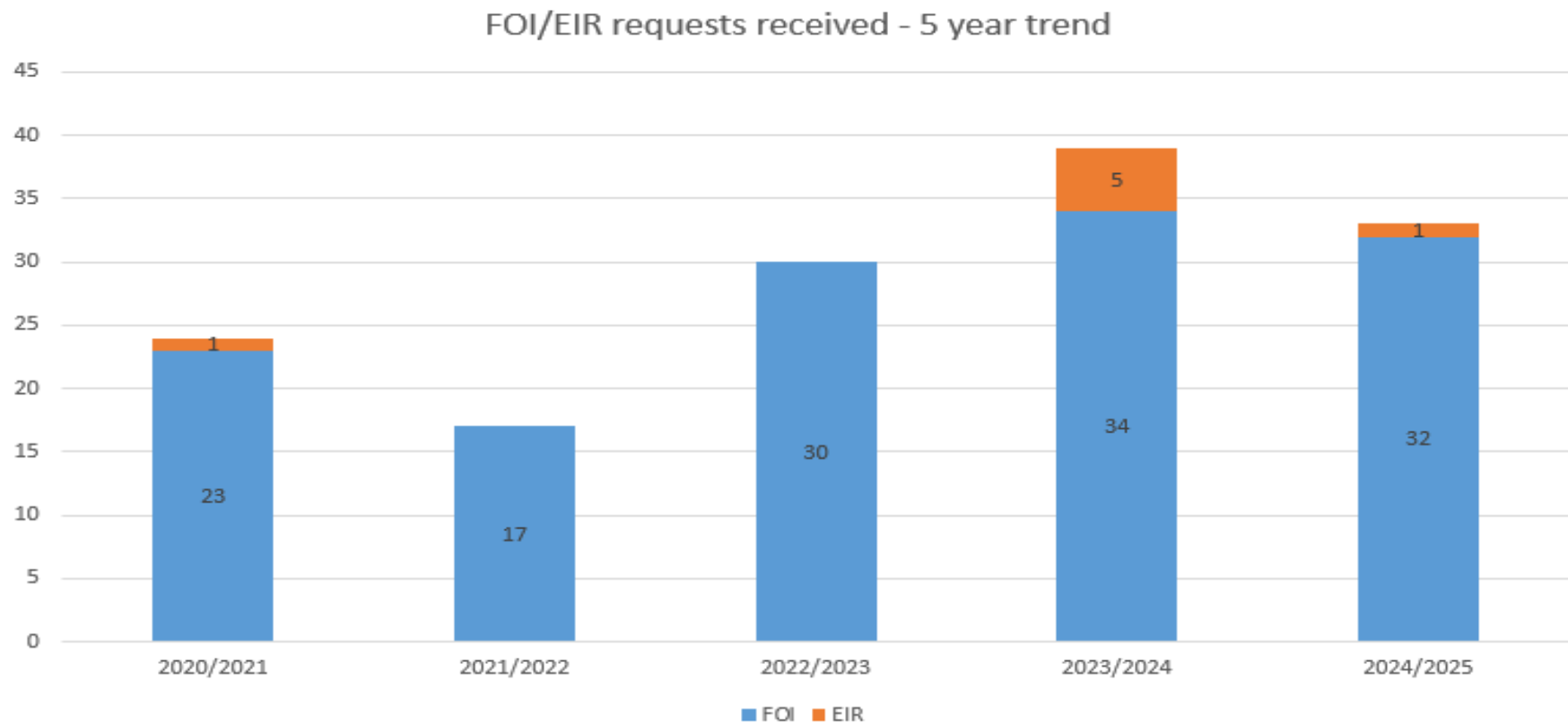


FOI/EIR requests received, split by internal review requested



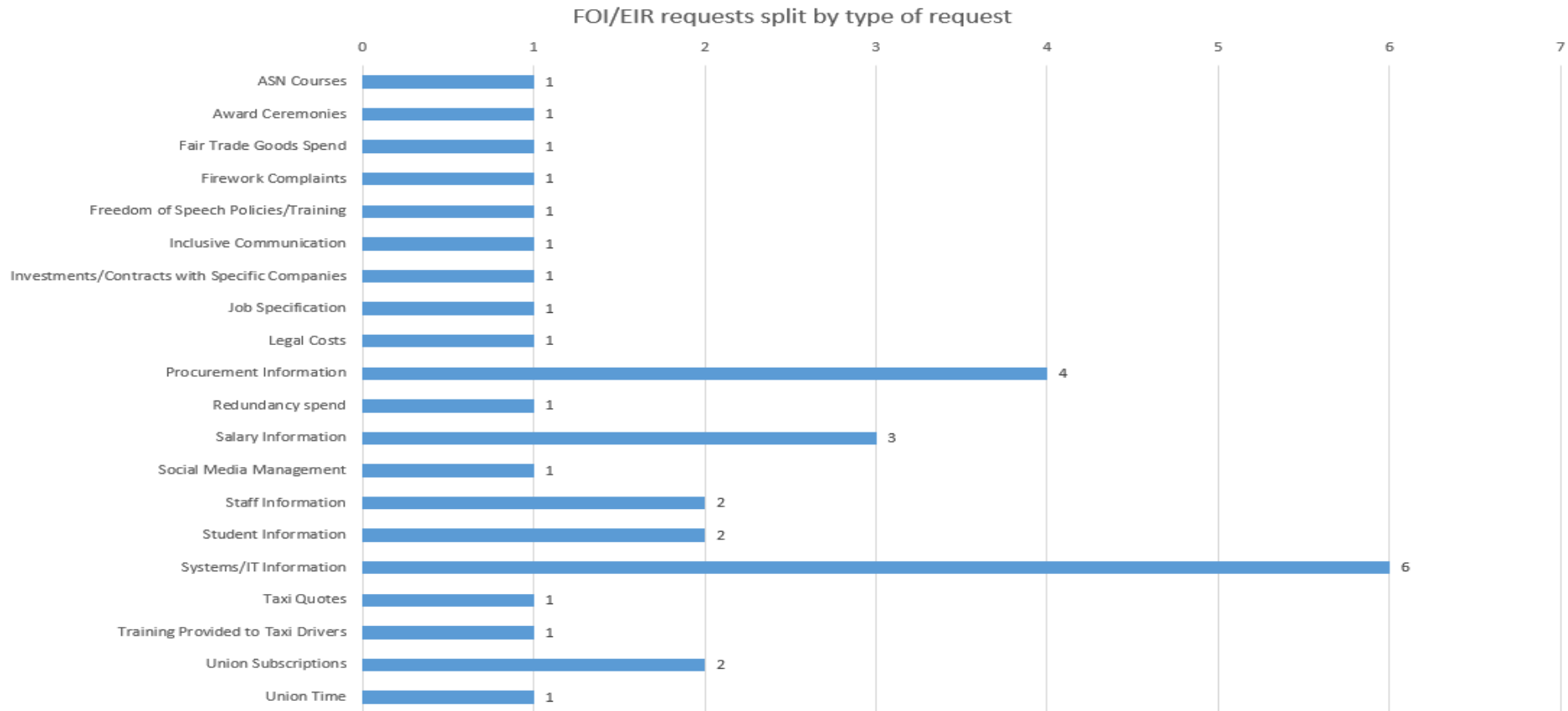
FOI/EIR Requests Received – 5 Year Trend

The chart below show the number of FOI/EIR requests received over the last 5 academic years.



FOI/EIR Request Type

2024/2025



The Salary Information category had requests for the Principal's salary, number of employees with salaries over £50,000 and information on staff numbers who left the College before the 2022 pay award.

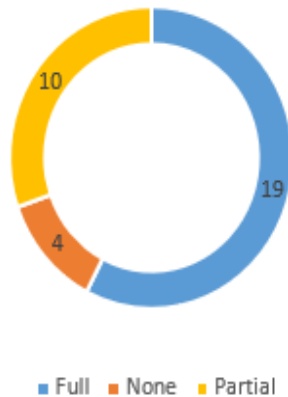
In the Staff Information category requests were received for information on a staff member and the College headcount and FTE.

We received two requests in relation to Student Information. One request asked for information about a student and the other about the number of disciplinaries and dismissals and the reasons for these.

Information Provided

2024/2025

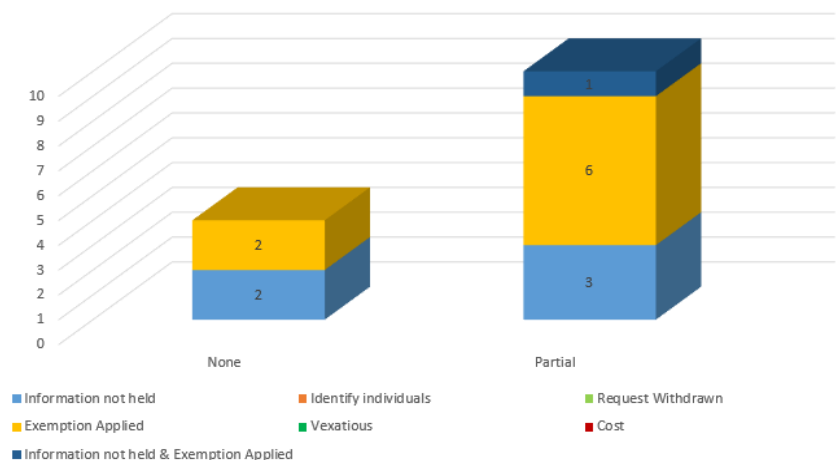
FOI/EIR requests received, split by information provided



The chart to the left shows the number of FOI/EIR requests where the information requested was provided in full, some of the information requested was provided or none of the information was provided.

The chart on the right shows the reason information was not provided, where only some of the information or none of the information requested was provided.

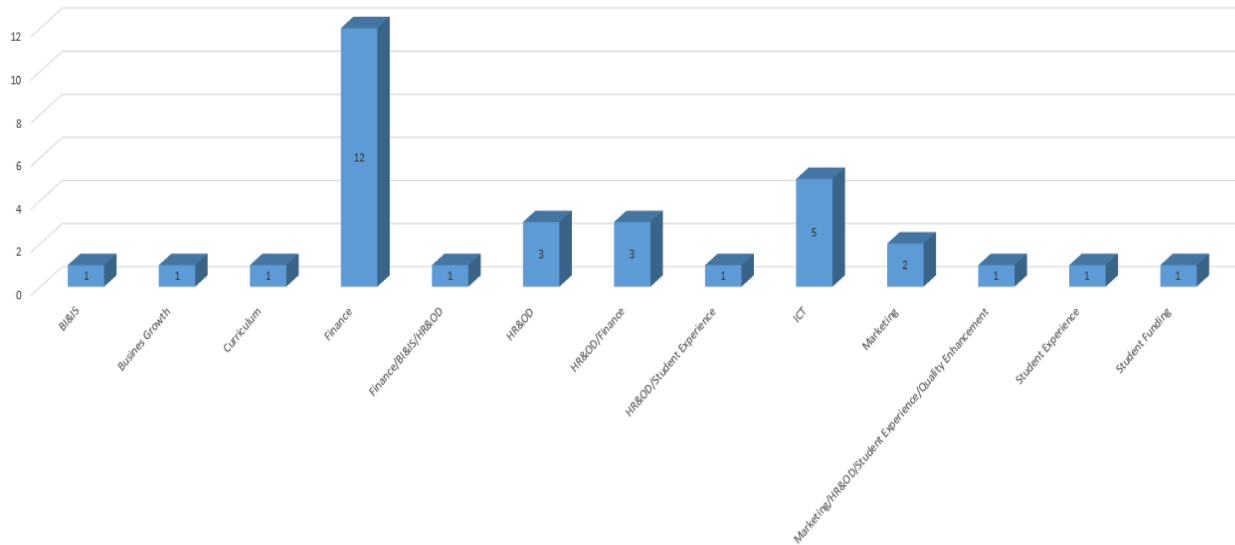
Partial/no information provided, split by reason information not provided



FOI/EIR Requests – Curriculum/Service Area

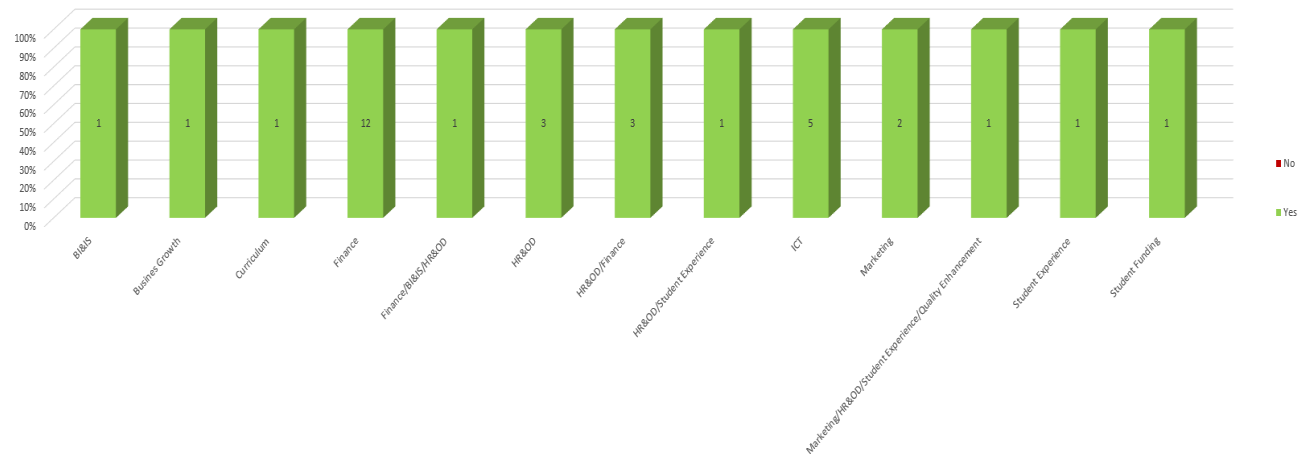
2024/2025

FOI/EIR requests received, split by curriculum/service area



The chart on the left shows the FOI/EIR requests received, split by curriculum/service area. 18% of requests received asked for information from more than one area.

Percentage of FOI requests received, closed within timescale split by curriculum/service area



The chart on the right shows the percentage of FOI/EIR requests issued within the 20 working day timescale.

Title of Meeting: **Audit and Risk Committee**

Date: **2 December 2025**

Subject: **2024-25 Complaints Annual Report**

Purpose: This paper presents the 2024-25 Complaints Annual Report for consideration by the Committee as part of the overall College assurance reporting.

Recommendation: The Audit and Risk Committee is invited to note the report findings and consider whether any adjustments to the Internal Audit Plan are required in light of the trends and risks identified.

1. Executive Summary

- 1.1. The Annual Complaints Report (**Appendix 1 and 2**) is part of the College's assurance framework, specifically as a first line of defence. This type of assurance comes directly from those responsible for delivering objectives and operations. While it may lack independence, its value lies in its direct insight into College operations, culture and day-to-day challenges.
- 1.2. This report compares the 2024-25 and 2023-24 Annual Complaints Reports, highlighting key movements, trends and areas of concern for the Audit and Risk Committee. The analysis covers overall complaint volumes, resolution performance, complaint categories, sub-category trends and notable risks or emerging issues.

Headline Movements Year-on-Year

- 1.3. The total number of issues received was up on the previous year by 14% (from 158 to 180). Of these 180 issues 156 were considered as complaints with 14 issues being treated as unrelated to College activities and 10 policy issues. Complaints have increased by 8% (from 145 to 156):
 - 2024/25: 180 issues received (156 complaints, 8 withdrawn)
 - 2023/24: 158 issues received (145 complaints, 8 withdrawn)

- 1.4. Overall, the College has seen an improvement in early resolution and timeliness of dealing with complaints: the number of complaints dealt with at Stage 1
- Stage 1 (a simple and straightforward complaint that can be responded to within five working days or less) Resolution:
 - 2024/25: 76% at Stage 1
 - 2023/24: 64% at Stage 1
 - Closed within Scottish Public Services Ombudsman (SPSO) Target Timescale:
 - 2024/25: 78%
 - 2023/24: 72%
 - Closed within Extended Timescale:
 - 2024/25: 100%
 - 2023/24: 99%

Complaint Outcomes

- 1.5. The College has seen a slight, but not material, decrease in the proportion of upheld/partially upheld complaints:
- 2024/25: 12% upheld, 12% partially upheld (total 36/148, 24%)
 - 2023/24: 15% upheld, 16% partially upheld (total 42/137, 31%)
- 1.6. The improved performance in closing complaints within target timescales is positive, but the overall increase in complaint volumes may put future pressure on resources and response times.
- 1.7. In terms of actions and service improvements there has been a slight increase in actions and completion rate, but some actions remain outstanding year-on-year. This is to be expected.
- 2024/25: 78 actions identified, 71 (91%) completed, 7 outstanding
 - 2023/24: 75 actions identified, 67 completed (89%), 8 outstanding

Key Areas of Movement by Category

- 1.8. A review of the categories of complaints highlighted the following trends:
- Staff Conduct
 - Increased from 49 to 62 complaints
 - Main driver: More complaints about how students were treated/spoken to by staff

- The rising number of complaints about staff behaviour and communication could suggest a need for a continued focus on staff training, communication standards and support for staff-student interactions. However, given the number of students who attend the College (12,000), 62 complaints is a minimal number. The level of complaints in this area will continue to be monitored.
 - Risk: Reputational risk and potential impact on student experience and retention.
- Progression, Articulation & Withdrawal
 - Increased from 3 to 10 complaints
 - Main driver: More complaints about inability to progress to next course level
 - The increase in complaints about progression could indicate issues with communication of progression criteria, support for students at risk or course management. The nature of these complaints is reviewed each quarter and the College does not consider the upward trend to be concerning.
 - Risk: Student dissatisfaction, appeals, and negative impact on progression rates.
- Maintenance, Lifts, Car Parking
 - Increased from 5 to 12 complaints
 - Main driver: More complaints about car parking and inappropriate parking
 - The significant increase in complaints about car parking and facilities points to ongoing operational challenges. The College aims to address this trend through the introduction of a car park management system at Kilmarnock campus.
 - Risk: Health and safety concerns, accessibility issues, and community relations.
- Student Conduct
 - Decreased from 8 to 1 complaint
 - Main driver: Fewer complaints about student behaviour and lack of action
- Learning & Teaching
 - Remained stable year-on-year
- Providing Learning Support
 - Not highlighted as a significant movement in 2024/25, but was an area of increase in 2023/24

2. Conclusion

- 2.1. The 2024-25 Complaints Annual Report demonstrates the College's ongoing commitment to transparency, accountability and continuous improvement in complaints handling.
- 2.2. The College has seen a notable increase in the total number of issues and complaints received compared to the previous year, rising by 14% and 8% respectively. Despite this, performance in early resolution and timeliness has improved, with a higher proportion of complaints resolved at Stage 1 and within the Scottish Public Services Ombudsman (SPSO) target timescales.
- 2.3. While the proportion of upheld or partially upheld complaints has decreased slightly, the overall increase in complaint volumes highlights the importance of maintaining robust processes and adequate resources to manage future demand.
- 2.4. The College remains compliant with all legislative requirements for complaints handling, and the publication of this report reinforces its commitment to openness. Continued focus on staff training, communication, and operational improvements will be essential to sustaining positive trends and addressing emerging challenges.

3. Associated Risks

- 3.1. There are no further risks required to be considered because of this report.

4. Equality and Diversity Impact Assessment

- 4.1. An EDIA is not applicable to this paper given the subject matter.

5. Publication

- 5.1. This paper will be published on the College website.

Sara Rae
Vice Principal, Finance and Infrastructure
02 December 2025

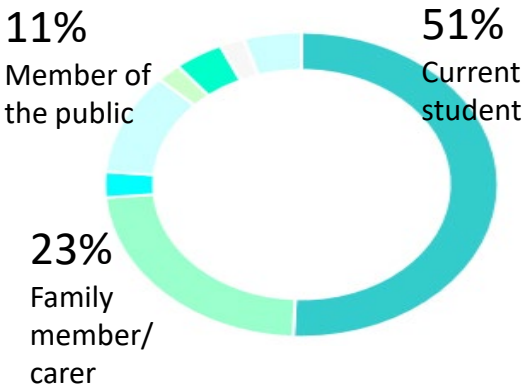
Complaints – Key Facts 2024/2025

(Paper 3(1))

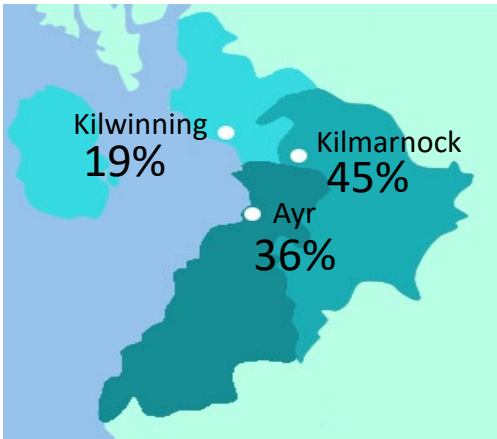
180 issues (156 complaints, 14 cannot directly assist, 10 policy issue)



Complainant Type



Campus Split



78% closed in timescale

1

76% stage 1

Top 3 Complaint Categories

- Staff Conduct
- Application, Admission, Interview, Enrolment, Induction
- Progression, Articulation & Withdrawal

Complainant Satisfaction

84%

Thought their complaint was taken seriously.

72%

Thought their complaint was thoroughly investigated.

76%

Thought they received a fair and objective response.

80%

Thought they received a clear response.

UPHELD
13%

PARTIALLY UPHELD
12%

RESOLVED
55%



78 actions logged

(Paper 3(2))

Annual Complaints Report 2024/2025

Total Issues Received

Annual Complaints Report - 2024/2025

180 issues were received. The chart on the right shows the number of issues received each month, split by the type of issue.

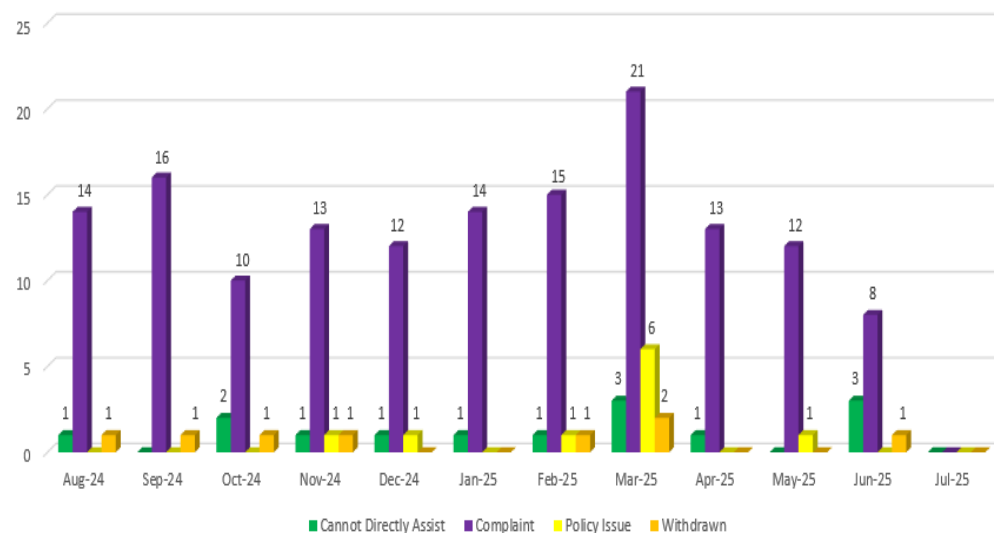
156 complaints were received, 8 of these were withdrawn. 14 issues were recorded as cannot directly assist and 10 as policy issue.

Of the 14 recorded as cannot directly assist, 5 were from parents /grandparent complaining on behalf of the student without authority, 4 complaints were about comments made by suspected students/staff on social media, 2 were anonymous complaints, where there was not enough information given to investigate the complaint, 1 from a staff member about students vaping, 1 was an allegation of an assault outwith college by an alleged student and 1 was an allegation of a threatening comment on social media of an alleged future student.

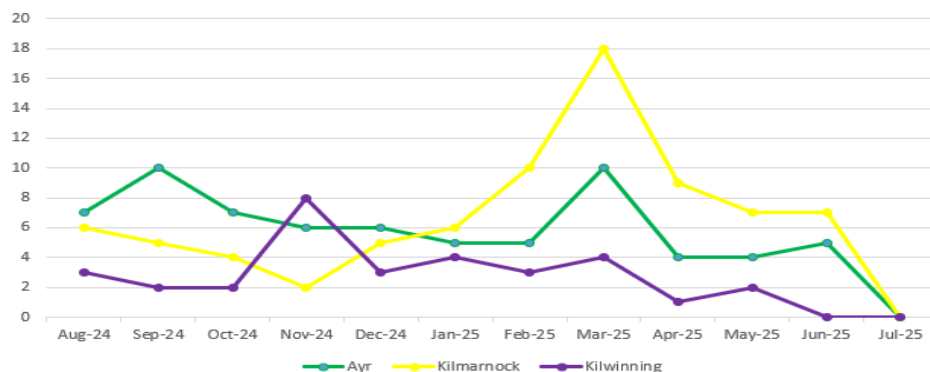
The 10 issues recorded as policy issues were all about the behaviour of students. These were referred to be dealt with through the Student Conduct policy.

The charts below show the total issues received each month by campus and the total issues received split by campus and type of issue.

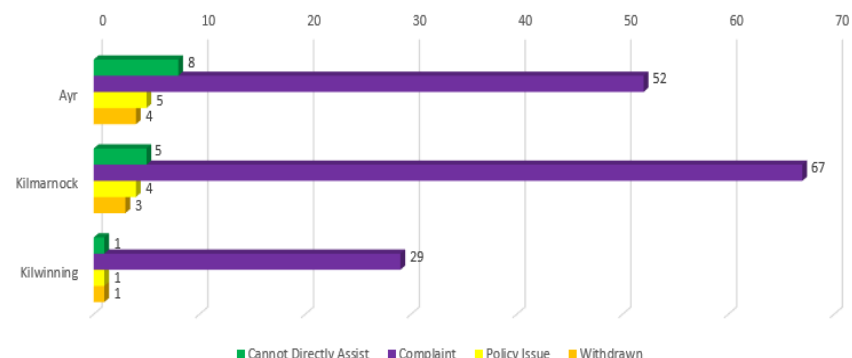
Issues received, split by month and type of issue



Issues received, split by month and campus



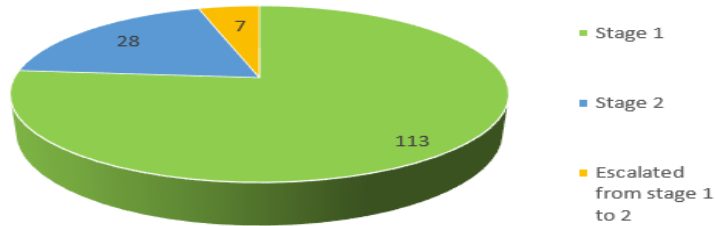
Issues received, split by campus and type of issue



Complaints Received

Annual Complaints Report - 2024/2025

Complaints received, split by stage



156 complaints were received, 8 of these were withdrawn.

The chart on the left shows the remaining 148 complaints received, split by stage.

113 out of 148 complaints received were dealt with at stage 1, which equates to 76% of complaints.

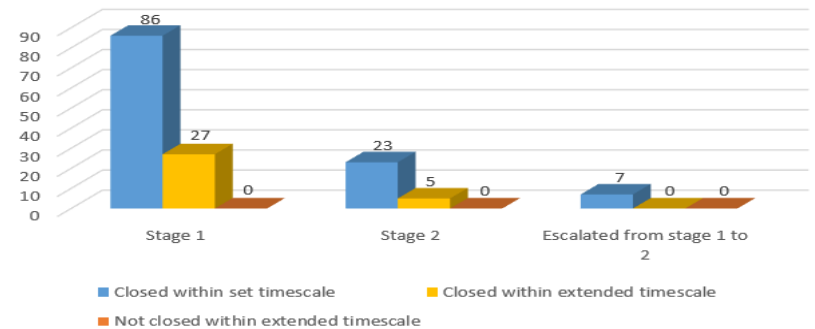
Stage 1 – SPSO set timescale is 5 working days and extended timescale is 10 working days

Stage 2 – SPSO set timescale is 20 working days and extended timescale is 40 working days

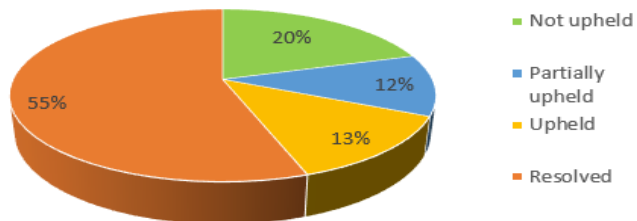
Escalated from stage 1 – 2 - SPSO set timescale is 20 working days and extended timescale is 40 working days

78% of complaints were closed within the SPSO set timescale.

Complaints received, split by stage and timescale closed in



Complaints received, split by outcome as a percentage



Of the 148 complaints received, 13% of complaints were upheld, with a further 12% partially upheld. This combines to 36 out of 148 complaints. 82 complaints were resolved.

Complaints Comparison

Annual Complaints Report - 2024/2025

COMPLAINTS HANDLING PROCEDURE INDICATORS		Q1		Q2		Q3		Q4		YTD		2023/2024	
1.0	Total number of complaints received & complaints received per 100 population	40		39		49		20		148		137	
1.1	Number of complaints Received	8395		8802		8806		7258		8806		8662	
1.2/1a	College Population and Number of Complaints received per 100 population	0.5		0.4		0.6		0.3		1.7		1.6	
2.0	Number of complaints closed at each stage and as a % of all complaints closed												
2.1/2a	Number of complaints closed at Stage 1 and % of total closed	30	75.0%	27	69.2%	41	83.7%	15	75.0%	113	76.4%	87	63.5%
2.2/2b	Number of complaints closed at Stage 2 and % of total closed	8	20.0%	10	25.7%	6	12.2%	4	20.0%	28	18.9%	41	29.9%
2.3/2c	Number of complaints closed after Escalation and % of total closed	2	5.0%	2	5.1%	2	4.1%	1	5.0%	7	4.7%	9	6.6%
2.4	Open	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
3.0	Number of complaints upheld, partially upheld and not upheld at each stage and as a % of complaints closed at that stage												
3.0	Stage 1												
3.1/3a	Number and % of complaints upheld at Stage 1	5	16.7%	3	11.1%	4	9.8%	1	6.7%	13	11.5%	17	19.5%
3.2/3b	Number and % of complaints partially upheld at Stage 1	0	0.0%	0	0.0%	2	4.9%	0	0.0%	2	1.8%	3	3.5%
3.3/3c	Number and % of complaints not upheld at Stage 1	6	20.0%	6	22.2%	2	4.9%	3	20.0%	17	15.0%	26	29.9%
3.4/3d	Number and % of complaints resolved at Stage 1	19	63.3%	18	66.7%	33	80.4%	11	73.3%	81	71.7%	41	47.1%
3.0	Stage 2												
3.5/3e	Number and % of complaints upheld at Stage 2	3	37.5%	1	10.0%	1	16.7%	0	0.0%	5	17.9%	3	7.3%
3.6/3f	Number and % of complaints partially upheld at Stage 2	4	50.0%	7	70.0%	1	16.7%	1	25.0%	13	46.4%	16	39.0%
3.7/3g	Number and % of complaints not upheld at Stage 2	1	12.5%	1	10.0%	4	66.6%	3	75.0%	9	32.1%	20	48.8%
3.8/3h	Number and % of complaints resolved at Stage 2	0	0.0%	1	10.0%	0	0.0%	0	0.0%	1	3.6%	2	4.9%
3.0	Escalated												
3.9/3i	Number and % of complaints upheld after Escalation	1	50.0%	0	0.0%	0	0.0%	0	0.0%	1	14.3%	0	0.0%
3.10/3j	Number and % of complaints partially upheld after Escalation	0	0.0%	1	50.0%	1	50.0%	0	0.0%	2	28.6%	3	33.3%
3.11/3k	Number and % of complaints not upheld after Escalation	1	50.0%	1	50.0%	1	50.0%	1	100.0%	4	57.1%	5	55.6%
3.12/3l	Number and % of complaints resolved after Escalation	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	11.1%
4.0	Total working days and average time in working days to close complaints at each stage												
4.1/4a	Total working days and average time in working days to close complaints at Stage 1	162	5.4	115	4.3	175	4.3	81	5.4	533	4.7	390	4.5
4.2	Total working days and average time in working days to close complaints at Stage 2	185	23.1	182	18.2	139	23.2	78	19.5	584	20.9	1043	25.4
4b	Escalation	30	15.0	40	20.0	36	18.0	19	19.0	125	17.9	192	21.3
5.0	Number and % of complaints closed within set timescales (S1=5 working days; S2=20 working days ; Escalated = 20 working days)												
5.1/5a	Number and % of Stage 1 complaints closed within 5 working days	19	63.3%	23	85.2%	34	82.9%	10	66.7%	86	76.1%	65	74.7%
5.2/5b	Number and % of Stage 1 complaints not closed within 5 working days	11	36.7%	4	14.8%	7	17.1%	5	33.3%	27	23.9%	22	25.3%
5.3/5c	Number and % of Stage 2 complaints closed within 20 working days	5	62.5%	9	90.0%	5	83.3%	4	100.0%	23	82.1%	26	63.4%
5.4/5d	Number and % of Stage 2 complaints not closed within 20 working days	3	37.5%	1	10.0%	1	16.7%	0	0.0%	5	17.9%	15	36.6%
5.5/5e	Number and % of Escalated complaints closed within 20 working days	2	100.0%	2	100.0%	2	100.0%	1	100.0%	7	100.0%	7	77.8%
5.6/5f	Number and % of Escalated complaints not closed within 20 working days	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	22.2%
6.0	Number and % of complaints closed at each stage where extensions have been authorised												
6.1/6a	Number and % of Stage 1 complaints closed within 10 working days (extension)	11	100.0%	4	100.0%	7	100.0%	5	100.0%	27	100.0%	22	100.0%
6.2/6b	Number and % of Stage 1 complaints not closed within 10 working days (extension)	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
6.3/6c	Number and % of Stage 2 complaints closed within 40 working days (extension)	3	100.0%	1	100.0%	1	100.0%	0	0.0%	5	100.0%	14	93.3%
6.4/6d	Number and % of Stage 2 complaints not closed within 40 working days (extension)	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.7%
6.5/6e	Number and % of Escalated complaints closed within 40 working days (extension)	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	100.0%
6.6/6f	Number and % of Escalated complaints not closed within 40 working days (extension)	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%

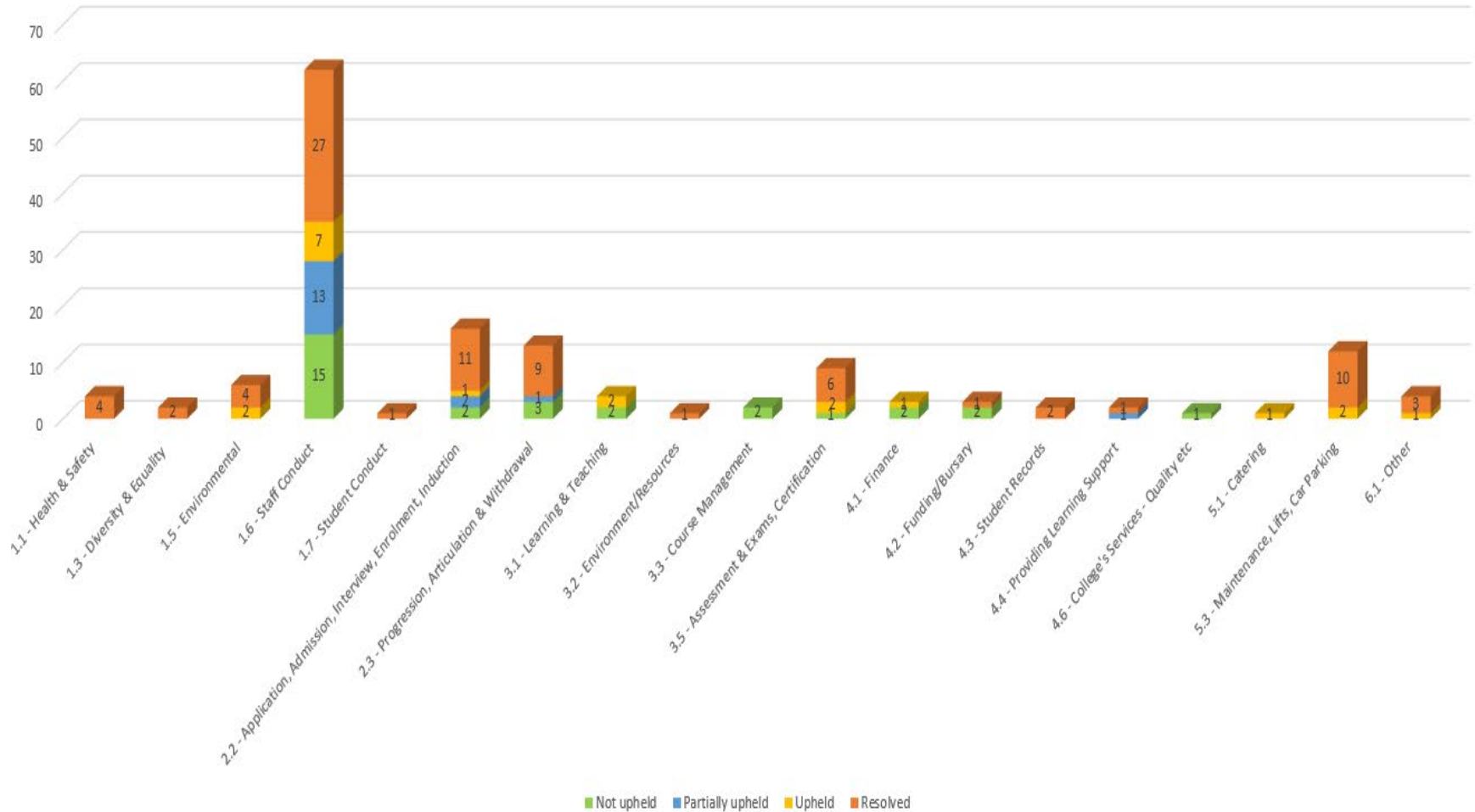
- 148 complaints received, an increase of 8% from 2023/2024.
- 76% of complaints were handled at stage 1 in 2024/2025, compared to 64% for 2023/2024.
- 78% of complaints were closed within the target timescale in 2024/2025, compared to 72% in 2023/2024.
- 100% of complaints were closed within the extended timescale in 2024/2025, 99% of complaints were closed within the extended timescale in the same period in 2023/2024.

Complaints – Sub-category

Annual Complaints Report - 2024/2025

The chart below shows the complaints received, split by sub-category and outcome.

Complaints received, split by sub-category and outcome



Complaints – Sub-category

Annual Complaints Report - 2024/2025

Noted below are the reasons for complaint in each of the top 5 sub-categories:

Staff Conduct

- Treatment of students by staff member
- Unhappy with the way they were spoken to by a member of staff
- Unhappy staff member sent survey about personal interests to class group
- Unhappy deaf awareness sessions delivered by someone who does not have a hearing impairment
- Unhappy did not follow Student Conduct Policy and went straight to a hearing
- Unhappy allowed another student to come back to college after a previous incident
- Member of staff mispronounced their name
- Staff member came behind treatment curtain and made them feel uncomfortable
- Staff member would not allow students into class who were late, unprofessional remarks made
- Unhappy with abrupt manner in interview, lack of engagement and communication
- Unhappy staff member made derogatory comments about their business during interview
- Unhappy staff member would not authorise absence
- Lack of support provided by staff member
- Lack of communication, no response to emails/Teams messages
- Not received outcome to hearing meeting and no response to emails
- Staff member was unprofessional
- Lack of information provided, incorrect information provided
- Unsupportive, did not take any action when reported other students behaviour and lack of response
- Unhappy refused to carry out phone interview and lack of empathy
- Did not receive requested feedback following an interview

*Pages 16-18 show all the categories and sub-categories available

Application, Admission, Interview, Enrolment, Induction

- Unhappy receiving emails to apply for funding/support when already withdrawn
- Offered an interview but no interview slots available
- Unhappy not offered a place on the course applied for
- Offered a waiting list place but website still showing places available
- Lack of communication about application
- Invited for an interview when course was already full
- Didn't receive email when applications opened, registered interest on website
- Unhappy unable to change interview date and lack of response
- Not advised of the conditions that were not met

Progression, Articulation & Withdrawal

- Incorrect withdrawal date recorded and provided to SAAS
- Unhappy asked to withdraw or were withdrawn from course
- Unhappy given a continuing offer, which was then withdrawn
- Unhappy unable to progress to next level
- Did not support student to complete application for next level course
- Delay in advising unable to progress, lack of support when conversation took place, no support in place for continuing interview

Maintenance, Lifts, Car Parking

- Stuck in the lift and accused of breaking the lift
- Handdryer not working and furniture dirty
- Unhappy cars parked on double yellow lines in campus car parks
- Unhappy alarm was sounding over the weekend
- Cars blocking zebra crossing/wheelchair access
- Deliveries driving down street in Ayr instead of round the back of the building
- Desks and computers in classroom not clean
- Attended campus for event and received parking ticket, as space not reserved
- Cannot get a space in carpark, as carpark being used by non-college users

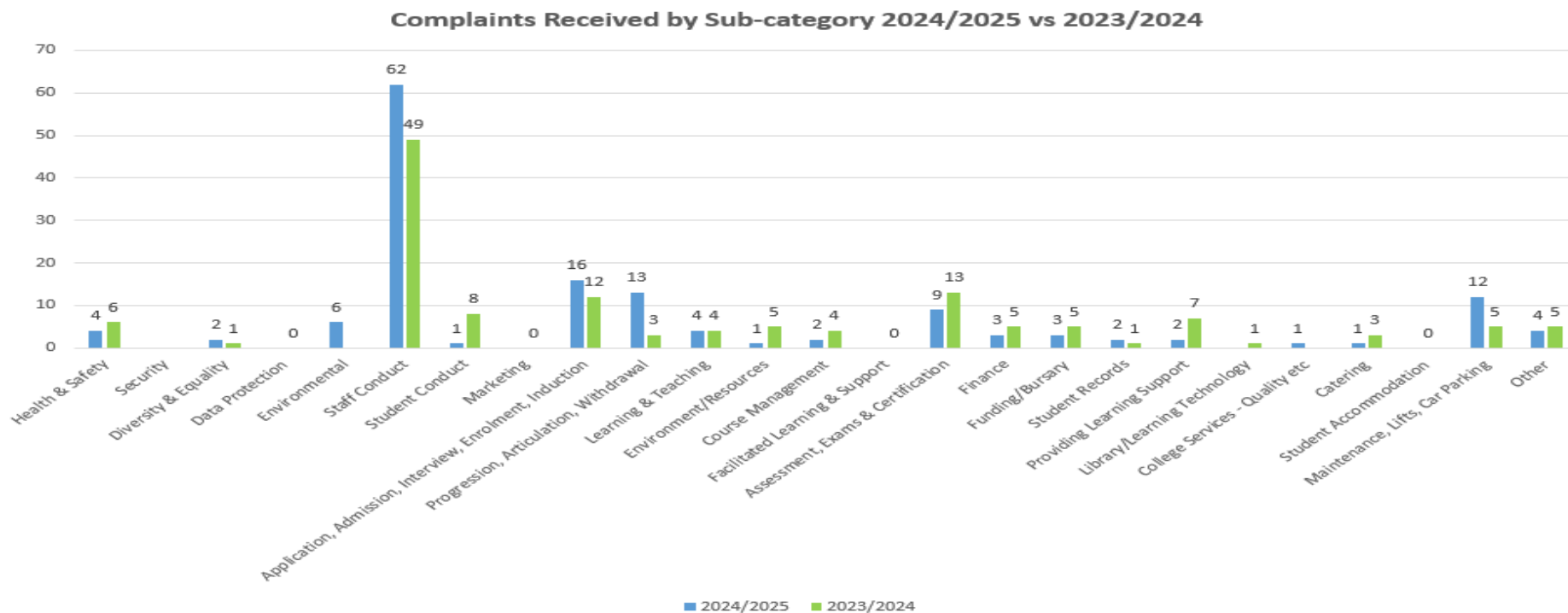
Assessment & Exams, Certification

- Unhappy results not submitted so not received qualification/cannot progress or affecting progression in work place
- Other students allowed to use own laptop during assessment
- Does not have an assessor and work submitted not assessed
- Unable to continue with placement with no explanation

Complaints – Sub-category Comparison

Annual Complaints Report - 2024/2025

The chart below shows the complaints received, split by sub-category, compared to complaints received, split by sub-category, in 2023/2024.

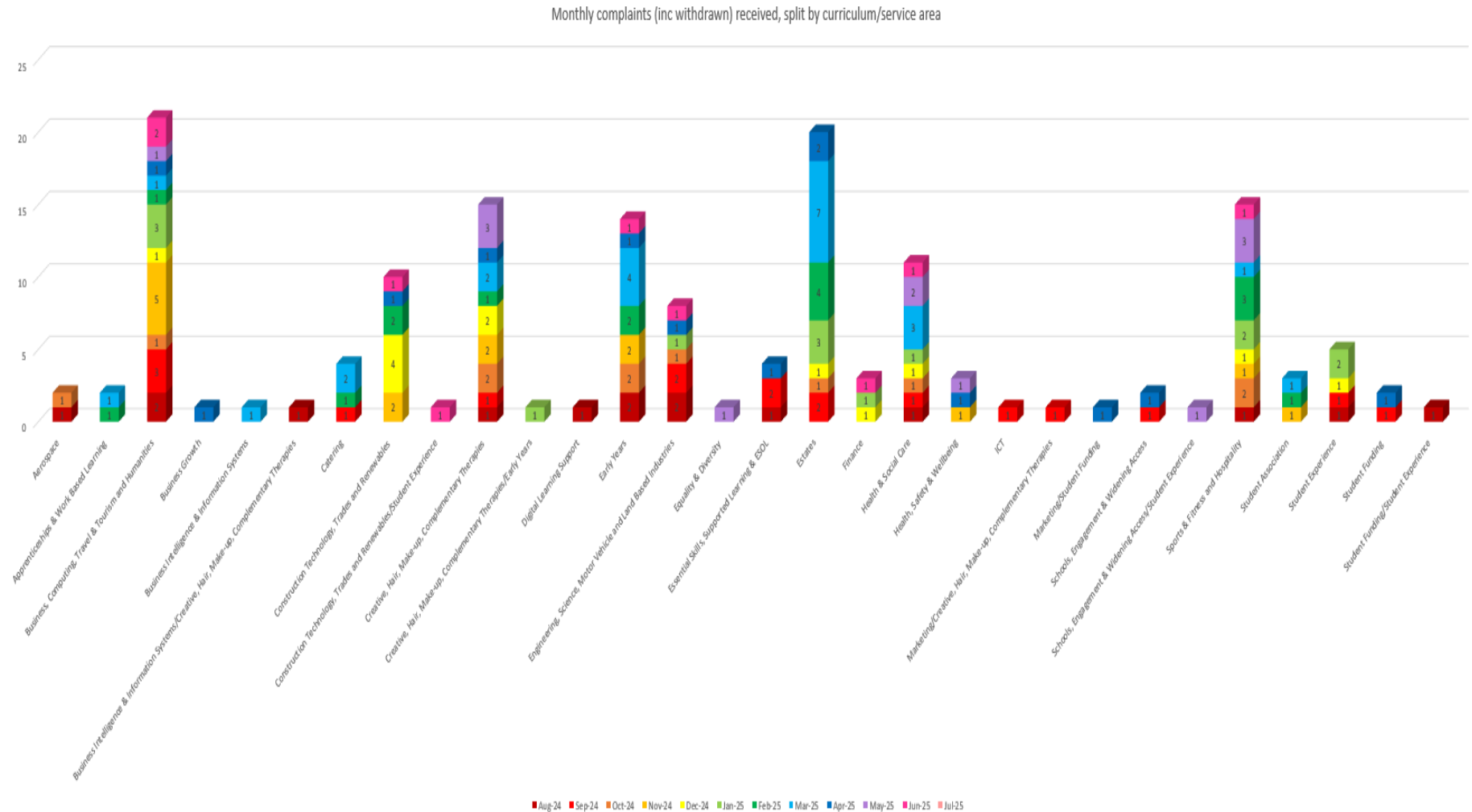


- Increase in complaints received in the staff conduct sub-category from 49 in 2023/2024 to 62 in 2024/2025. This is due to an increase in complaints about the way students have been treated/spoken to by a member of staff.
- Increase in complaints received in the progression, articulation, withdrawal sub-category from 3 in 2023/2024 to 10 in 2024/2025. This is mainly due to an increase in complaints about students not being able to progress to the next level of course.
- Decrease in complaints received in the student conduct sub-category from 8 in 2023/2024 to 1 in 2024/2025. This is due to a reduction in complaints about students' behaviour being reported and no action being taken.
- Increase in the complaints received in the maintenance, lifts, car parking sub-category from 5 in 2023/2024 to 12 in 2024/2025. This is mainly due to an increase in complaints about car parking and people parking where they shouldn't be on crossings, double yellow lines etc.
- Complaints received in the learning & teaching sub-category have remained the same from 2023/2024 to 2024/2025.

Complaints – Curriculum/Service Area

Annual Complaints Report - 2024/2025

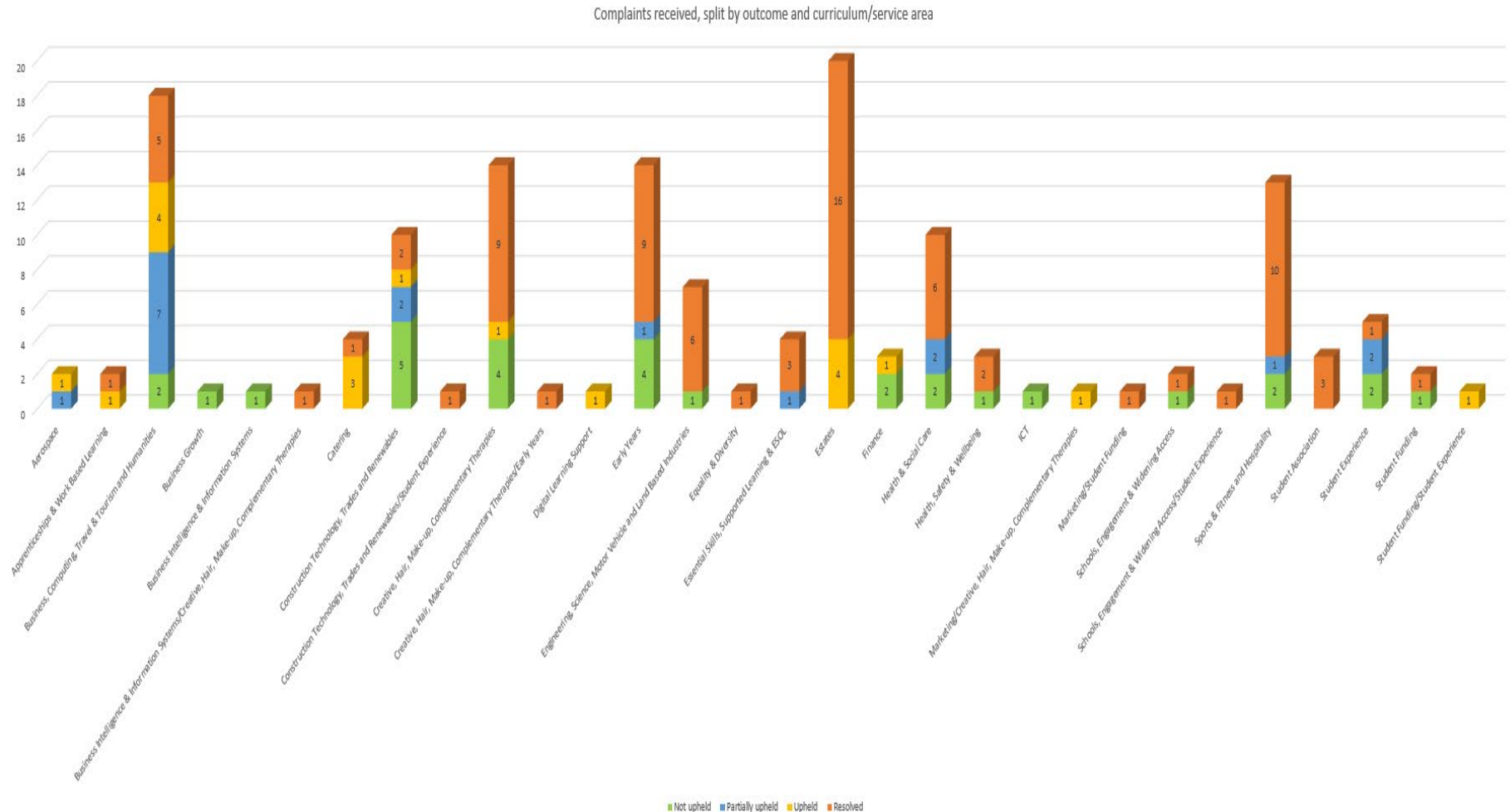
The chart below shows issues received each month, split by curriculum/service area.



Complaints – Curriculum/Service Area

Annual Complaints Report - 2024/2025

The chart below shows the complaints received, split by outcome and curriculum/service area.

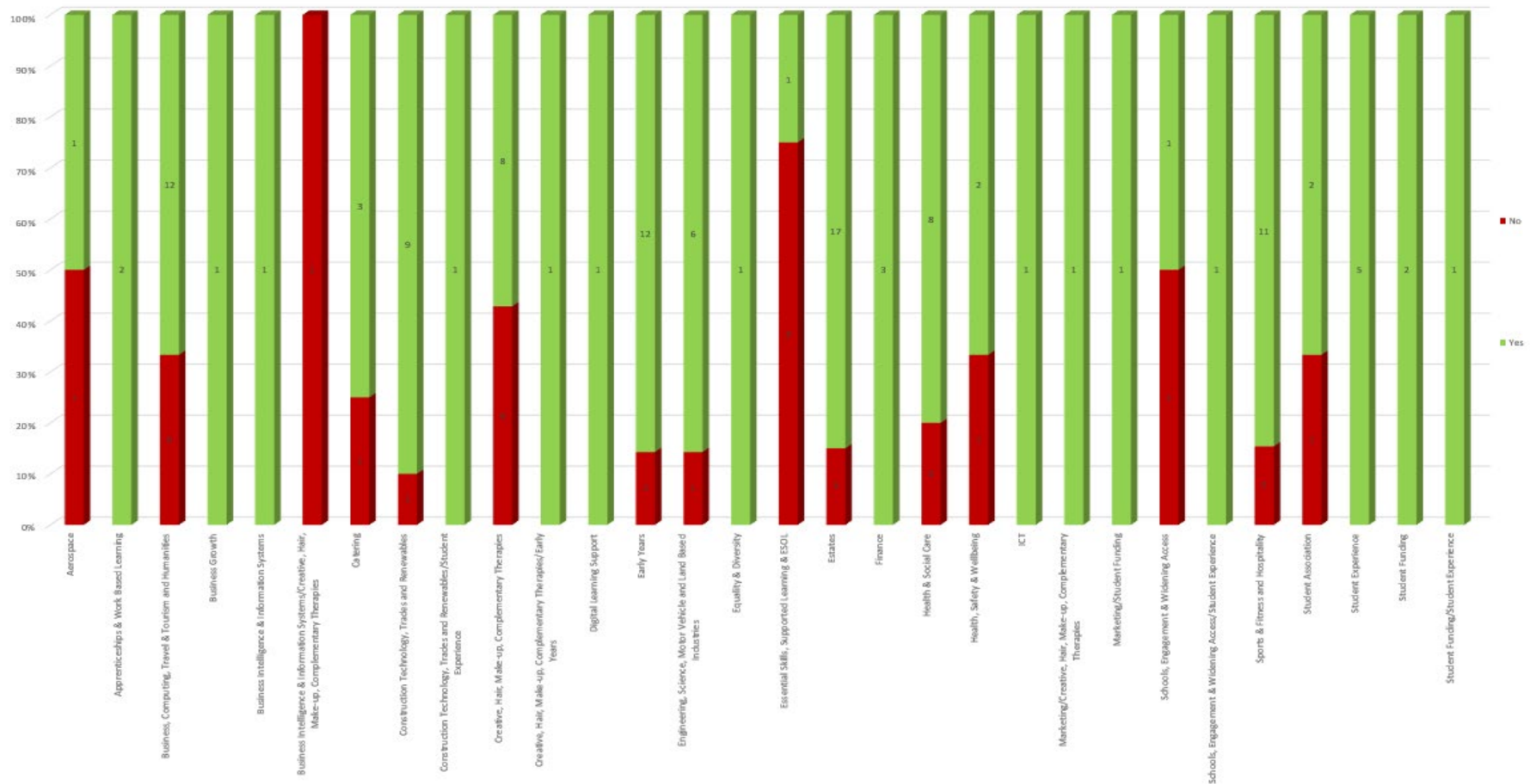


Complaints – Curriculum/Service Area

Annual Complaints Report - 2024/2025

The chart below shows the percentage of complaints received, that were closed within the SPSO set timescale (5 or 20 working days), split by curriculum/service area.

Percentage of complaints received, closed within timescale split by curriculum/service area



Actions

Annual Complaints Report - 2024/2025

Complaint Category	Number of actions	Number completed	Number outstanding
1. Customer Care	40	37	3
2. Applications, Admissions & Progression	16	15	1
3. Course Related	7	6	1
4. Services	5	5	0
5. Facilities	8	6	2
6. Others	2	2	0
Total	78	71	7

Service Improvements

Annual Complaints Report - 2024/2025

Issue	Actions
Student unhappy with the noise coming from rehearsal rooms beside classrooms, as they cannot concentrate.	Moved the whole class and another class to other classrooms away from the rehearsal rooms.
Students unhappy they were stuck in the lift and with the way they were spoken to, as were accused of breaking the lift but other students were shaking the lift doors.	Staff will be more understanding if someone is stuck in the lift and less accusatory. Quotes to be obtained to have the alarm from the lifts in the Riverside building connected to the monitoring station. Notices placed in the lift to advise what you should do if the lift gets stuck and contact numbers.
Anonymous student unhappy they have to give permission to the college over personal devices to access college email.	Updating the guidelines for installing to emphasise that we do not have a requirement to gain administrative permission on students' devices so that they can install Office. There is a tick box that does enable this.
Student unhappy one of the hand dryers in the male toilet in Kilwinning campus is not working and the sofas throughout the campus are dirty.	Hand dryers in the male toilet were checked and all in working order. Sofas were deep cleaned. Considering replacing them, depending on cost.
Parent unhappy student's name was pronounced incorrectly when read out at graduation.	Reviewed the process for requesting and providing a copy of the phonetics, given on graduation forms, so the person reading out the names is given a copy of this.
Member of the public unhappy the prices charged in the restaurant were different to the prices on the website.	Removed the sample menus from the website until they can be updated.
Student unhappy as felt member of staff degraded them in front of the class about leaving early because they needed to collect their child.	With consultation with other students in the class, class times adjusted throughout the day so class will now finish earlier.
Student unhappy students smoking and vaping at the entrance to the building, which is affecting their health condition and the College is not taking any action.	Short life working group established. Agreed that smoking shelters will be reinstated on all campuses.
Grandparent of a student unhappy with the way their grandchild was treated when they came for an interview, member of staff was abrupt and did not engage with the applicant, unaware that an aptitude test would be completed and there was no communication about the course, their current situation or feedback about why they were unsuccessful.	Aptitude test reviewed to make this more suitable for level 4 applicants. Interview process reviewed to ensure applicants have an interview/discussion with member of staff not just the test.

Service Improvements

Annual Complaints Report - 2024/2025

Issue	Actions
Students were unhappy the manager would not authorise their absence to go on holiday.	Manager and a member of the Student Experience Team spoke with all students in the class to promote positive attendance.
Student unhappy with the lack of support from Education Support, unaware a questionnaire to complete for the Educational Psychologist was needed, felt should have received forms sooner.	<p>Process updated so that Education Support students will be sent a follow-up email, detailing their needs assessment, support plans, DSA guidance, etc. This will be clarified in the initial meeting.</p> <p>Communication will be clear and detailed, considering each student's additional support needs and adjusting accordingly. This will be agreed upon at the start.</p> <p>The DSA process booklet will be up-to-date and provide clear guidance on each step, shared with students after their initial needs assessment. It will include the Educational Psychologists process within the wider DSA guidance. Process updated so this will be shared with the student immediately after the initial needs assessment if DSA is identified as the next step.</p>
Employability Facilitator unhappy a young person they support came for an interview and felt humiliated in front of other applicants.	Entry requirements on the website updated to confirm all aspects of the interview that will take place including a practical skills test, a written aptitude test and a discussion with a lecturer.
Local resident unhappy staff and students are parking in their residents' carpark in Kilmarnock and being disrespectful.	<p>Posters displayed throughout the campus reminding staff and students not to park in residents' carparks.</p> <p>Student Induction for 2025/2026 includes information about parking and that students should not park in residents' carparks.</p>
Student unhappy member of staff questioned their autism diagnosis.	Member of staff undertook autism awareness training.
Student unhappy cars are parking over the zebra crossing going from the campus building to the football parks and they are unable to cross the road at the lowered pavement, meaning they are missing out on activities	<p>Communication issued to staff and students using the carpark that they should park responsibly.</p> <p>Police style cones ordered and placed at pedestrian crossing.</p>

Service Improvements

Annual Complaints Report - 2024/2025

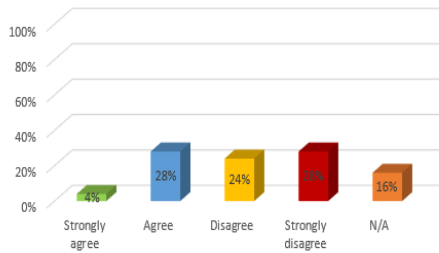
Issue	Actions
Local resident at Ayr unhappy delivery van driving up and down their street, instead of round the back of the building as the sign states.	Contacted the company and asked they remind their delivery drivers not to use Content Avenue and to go up and round the back of the College.
Local resident at Ayr unhappy deliveries being made at 02:45 causing lots of noise and waking them up, they are also using their street and not going round the back of the College and concerned for food lying outside with the potential to perish and attract gulls and rats.	Contacted the company and asked them to remind their drivers of the correct access route and that no deliveries should be made before 6am.
Student unhappy classroom at Kilmarnock campus is not to a satisfactory standard of cleanliness, desks are marked and dusty.	Arranged for the desktops to be cleaned.
Local resident at Kilmarnock unhappy alarm was sounding from 9pm on Saturday until 9am on Sunday.	Reports received from keyholders, alarm receiving centre and Dalkia, all state alarm did not activate on the Saturday at the time given. However, alarm did activate at 8am on Sunday, keyholders attended at 08:20am and fault cleared. Fault reported and has now been fixed.
Student unhappy as feels lecturer has not supported them, as not replied to Teams messages.	Curriculum team to consider adapting the assessment schedule in their pre-course delivery event for next academic year, to facilitate more ongoing assessment and the reduction of assessment burden at the end of the course. Curriculum team to review their 'Getting to Know You' activities and records, perhaps through the Personal Development log book, to facilitate a good understanding of students' needs on online courses.
Parent unhappy child only told two days before the end of the course that they were not getting to progress to the next level and not given support.	Reinforced to Curriculum Quality Managers that they should engage with Student Experience staff where students are at risk or not engaging.

Customer Satisfaction

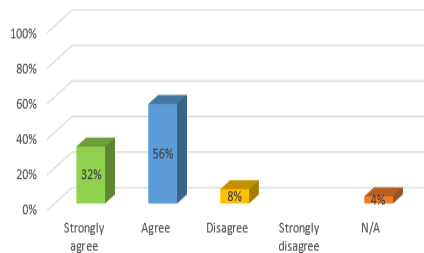
Annual Complaints Report - 2024/2025

A total of 132 surveys have been sent, with 25 responses received, this equates to a 19% response rate. The results from the responses received are shown in the charts below.

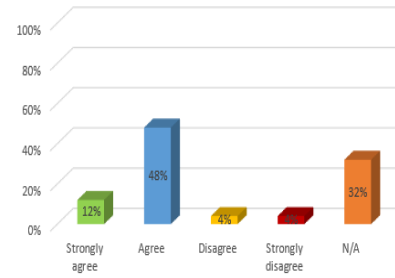
Q2 - I was aware of the complaints procedure before I needed to make a complaint



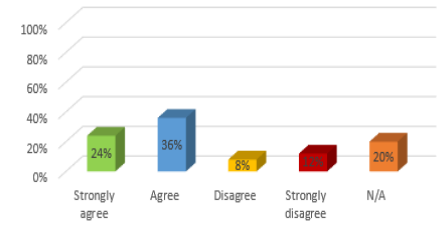
Q3 - I found the complaints process easy to access



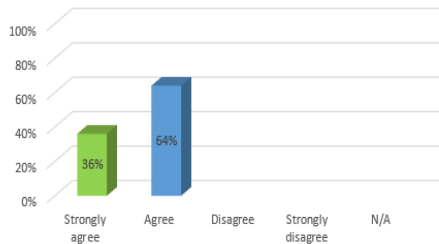
Q4 - I found the complaints form easy to use



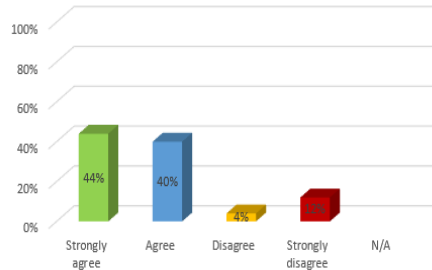
Q5 - I was able to access information and assistance in making my complaint where this was required



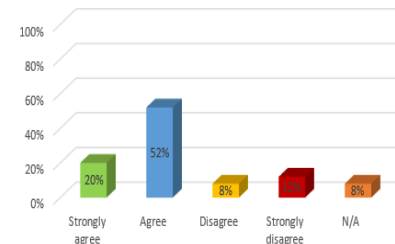
Q6 - I received a prompt acknowledgment of my complaint



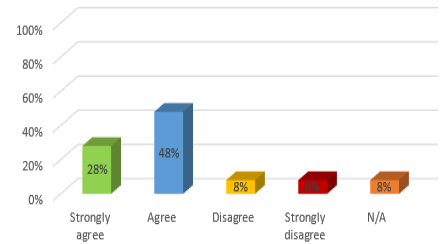
Q7 - I felt my complaint was taken seriously



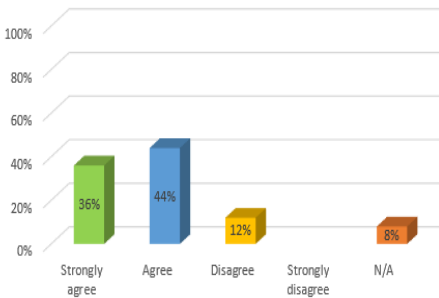
Q8 - I felt my complaint was thoroughly investigated



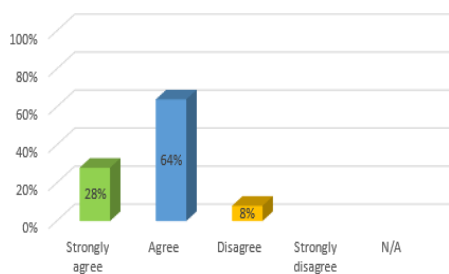
Q9 - I received a fair and objective response to my complaint



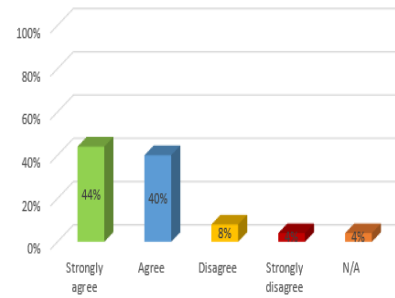
Q10 - I received a clear response to my complaint



Q11 - I received a response to my complaint within an appropriate timescale



Q12 - I was dealt with courteously at all times



Appendix

The tables below show the College Development Network categories and sub-categories, which we have adopted.

1.0	CUSTOMER CARE	
	Sub-Category	Examples
1.1	Health & Safety	<ul style="list-style-type: none"> Alleged misuse of disability car parking spaces Subject to passive smoking in no smoking area Tripping hazards in workshop
1.2	Security	<ul style="list-style-type: none"> Theft of personal property Padlock on bicycle locker cut by Estates staff
1.3	Diversity & Equality (Protected Characteristics)	<ul style="list-style-type: none"> Failure to make reasonable adjustments under the terms of Equality Act Visitor complains of poor accessibility to toilets and lifts Student not allowed to progress on course due to additional support not being available to support disability Textbook contains racist material
1.4	Data Protection	<ul style="list-style-type: none"> E-mail address divulged to other people Staff shared student personal data with others during classroom discussion
1.5	Environmental	<ul style="list-style-type: none"> Housing Association complains of students littering outside tenants' properties Neighbour complains of noise from construction work at College Residents complain that students and staff used private car-parking spaces
1.6	Staff Conduct	<ul style="list-style-type: none"> Poor customer service Failure to respond to requests by e-mail/phone etc. Requests handled impolitely, discourteously
1.7	Student Conduct	<ul style="list-style-type: none"> Student complains that disciplinary procedure was applied unfairly Students damage neighbouring properties

Appendix cont...

2.0	APPLICATIONS, ADMISSIONS, PROGRESSION	
	Sub-Category	Examples
2.1	Marketing	<ul style="list-style-type: none"> Unable to find evening class information on College website Misleading information in College prospectus
2.2	Application, Admission, Interview, Enrolment, Induction	<ul style="list-style-type: none"> No acknowledgement of application Criteria for rejecting application was unfair Placed on waiting list despite applying quickly No information on College website to inform applicant course was already full and only found out weeks later Applicant travelled long distance for interview only to be told they didn't have the necessary entry requirements Applicant invited to wrong campus for interview
2.3	Progression, Articulation & Withdrawal	<ul style="list-style-type: none"> Student unhappy that they were not allowed to progress to next level having successfully achieved the previous level Student complains withdrawal process was not followed University not supplied with student reference as requested

3.0	COURSE RELATED	
	Sub-Category	Examples
3.1	Learning & Teaching	<ul style="list-style-type: none"> Quality of teaching not to the standard expected Teaching from powerpoint for 3 hours without a break Lecturer unapproachable when requiring support
3.2	Environment/Resources	<ul style="list-style-type: none"> Classrooms/desks not fit for purpose Wifi unreliable Broken smartboard Workshops too cold Not enough computers for size of class
3.3	Course Management	<ul style="list-style-type: none"> Class cancelled at short notice No contingency for staff absence Lecturer arrives late/finishes class early
3.4	Facilitated Learning Support	<ul style="list-style-type: none"> Guidance class not held Staff do not provide printed materials in format stipulated in PLSP Staff unaware of changes to PLSP
3.5	Assessment & Exams, Certification	<ul style="list-style-type: none"> Assessments crammed into end of block Student not provided with opportunity for re-sit Delay in providing results/certificates Not receiving certificate due to College failing to attach student to group award Noise disruption during exam

Appendix cont...

4.0	SERVICES	
	Sub-Category	Examples
4.1	Finance	<ul style="list-style-type: none"> Former student unhappy to be threatened with legal proceedings for unpaid fees Student unhappy not to have course fees refunded after withdrawing from course
4.2	Funding/Bursary	<ul style="list-style-type: none"> Delay in processing bursary application Application for hardship fund handled unfairly
4.3	Student Records	<ul style="list-style-type: none"> Student personnel data is incorrect/not updated
4.4	Provided Learning Support	<ul style="list-style-type: none"> Delay in arranging DSA assessment Student unhappy that they could not have the same support worker for every class Student unhappy that additional support requirements have not been put in place
4.5	Library/Learning Technology	<ul style="list-style-type: none"> Student complained that library overdue book notification system was unfair Lack of support provided by the College with regards to provision of IT on evening class Library opening hours
4.6	College Services – Quality etc	<ul style="list-style-type: none"> Delay in handling complaint

5.0	FACILITIES	
	Sub-Category	Examples
5.1	Catering	<ul style="list-style-type: none"> Coffee shop frequently runs out of soya milk Choice on offer
5.2	Student Accommodation	<ul style="list-style-type: none"> Poor wifi service Cleanliness of accommodation
5.3	Maintenance, Lifts, Car Parking	<ul style="list-style-type: none"> Lifts out of order College does not provide sufficient car parking space College signage is misleading

6.0	OTHERS	
	Sub-Category	Examples
6.1		<ul style="list-style-type: none"> No College wide 2 minute silence on Remembrance Day

Title of Meeting: **Audit and Risk Committee**

Date: **2 December 2025**

Subject: **Internal Audit Report – External Communications - Website**

Purpose: The paper provides an overview of the internal audit review of College external communications most notably its website.

Recommendation: The Audit and Risk Committee is requested to consider and note the report.

1 Executive Summary

The External Communications - Website Report reviews the external communications methods adopted by the College to liaise with key stakeholders and, in particular, the College website.

The assignment formed part of the 2024/25 Internal Audit Annual Plan.

Overall Assurance

- The audit provides a **strong level of assurance** over the College's external communications methods.
- **One low level recommendation** was raised where it is recommended that the College enhance the Website Management Procedure and Guidance document by introducing clearly defined roles, responsibilities, escalation routes, and compliance requirements, and by establishing a regular review and update process.

The College has accepted the recommendation.

Purpose and Scope

The purpose of the assignment was to review the external communications methods adopted by the College to liaise with key stakeholders and, in particular, the College website.

The review encompassed reviewing the use of external communications channels to understand how the College engages with their stakeholders and how this shapes the Communication Framework.

Good Practices

The report identified several areas of good practice including:

- The College has a robust Communications Framework aligned with its Strategic Ambition 2024–2027, ensuring consistent and coordinated messaging across all platforms.
- The website, launched in February 2025, is well-structured, accessible (WCAG AA compliant) and governed by a comprehensive management procedure, though this document is pending formal approval.
- Communication channels are diverse (website, social media, events), with strong stakeholder engagement and data-driven performance monitoring.
- Operational controls restrict website editing to authorised personnel, supporting content accuracy and security.

The audit provides a strong level of assurance over the College's external communications and website management, with minor improvements suggested to further enhance governance and operational effectiveness.

2 Associated Risks

The report provides assurance towards the following strategic risks:

Data Security and Cyber Risk

The audit specifically reviews website governance, access controls and the robustness of external communications, including technical standards, accessibility and security requirements. It highlights the importance of restricting website editing to authorised personnel and having formal procedures for incident handling and security, directly addressing the risk of unauthorised access or cyber incidents.

Reputational Risk (Communications and Stakeholder Engagement)

The audit's purpose is to review how the College communicates with stakeholders, the effectiveness of its website and the alignment of communications with strategic objectives. It assesses whether the College's communications framework is robust, inclusive and supports the College's ambitions, which is central to managing reputational risk.

Compliance and Regulatory Risk

The report reviews compliance with accessibility standards, the existence of formal guidance and procedures and the need for regular review and approval of governance documents. The recommendation to formalise and regularly update the Website Management Procedure is aimed at reducing compliance risk.

Strategic Alignment and Operational Effectiveness

The audit evaluates whether the communications framework and website support the College's Strategic Ambition 2024–2027, and whether feedback and analytics are used to drive continuous improvement. This supports the risk register's focus on strategic alignment and operational effectiveness.

3 Equality and Diversity Impact Assessment

An equality impact assessment is not applicable to this paper given the subject matter.

4 Publication

This paper will be published on the College website.

Siobhan Archibald
Internal Audit Manager
wbg

2 December 2025



(Paper 4(1))

Ayrshire College

Internal Audit 2025-26

External Communications – Website
November 2025

Overall Conclusion

Strong

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The matters raised in this report came to our attention during the course of our audit and are not necessarily a comprehensive statement of all weaknesses that exist or all improvements that might be made.

This report has been prepared solely for Ayrshire College's individual use and should not be quoted in whole or in part without prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any third party.

We emphasise that the responsibility for a sound system of internal control rests with management and work performed by internal audit should not be relied upon to identify all system weaknesses that may exist. Neither should internal audit be relied upon to identify all circumstances of fraud or irregularity should there be any although our audit procedures are designed so that any material irregularity has a reasonable probability of discovery. Every sound system of control may not be proof against collusive fraud. Internal audit procedures are designed to focus on areas that are considered to be of greatest risk and significance.

Overview

Purpose of review

The purpose of this assignment was to review the external communications methods adopted by Ayrshire College (the College) to liaise with key stakeholders and, in particular, the College website. This review encompassed reviewing the use of external communications channels to understand how the College engages with their stakeholders and how this shapes their communication strategy.

This review formed part of our 2025/26 Internal Audit Plan.

Scope of review

Our objectives for this review were to assess whether:

- | There was an effective external communications framework in place which operated effectively in line with defined policies and procedures.
- | The College had a detailed communications framework that was designed to allow the College to communicate effectively and meet their core objectives.
- | The College adopted a variety of methods to communicate with stakeholders removing any inherent barriers to information.
- | The communication methods adopted were suitable for the College and allowed for effective operations.
- | The College effectively gathered feedback from their key stakeholders on the methods adopted and ensured actions were raised for areas of improvement.

1 Executive summary

- | The College had robust mechanisms in place to measure their communication strategies through statistical analysis and stakeholder engagement.
- | The College website was robust to ensure sufficient information was provided to key stakeholders.
- | There were appropriate controls in place to ensure only approved personnel could post on the website.

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

Limitation of scope

There was no limitation of scope.

1 Executive summary

Background

Marketing and Communications Team

The College's Marketing and Communications Team (the Team) plays a central role in delivering the College's outward-facing narrative, shaping its digital presence, and reinforcing the College's reputation across campuses and the wider region.

The Team has undergone a period of transition over the past two years, with new leadership appointments providing stability and strategic direction. The recent addition of a permanent Strategic Communications and Policy Advisor has further strengthened capacity. Supported by two Marketing and Events Officers, two Marketing Assistants, and a Creative Marketing Officer, the Team has focused on embedding consistent processes, strategic alignment, and professional standards in all communications activity. Please refer to **Section 3: Observations** for further information.

Communications Framework

The College's Communications Framework provides an overarching structure that shapes and guides all aspects of communication activity. Grounded on the principles set out within the Strategic Ambition 2024–2027, the framework ensures that communication across the College, from student recruitment and stakeholder engagement to internal messaging, is consistent, coordinated, and aligned with institutional priorities. It acts as a cohesive foundation through which the College promotes its values, enhances its reputation, and supports the achievement of strategic goals.

Messaging has evolved to go beyond full-time courses for school leavers, with the Team ensuring equitable promotion across campuses and course areas. Stakeholder engagement remains central to this approach.

With a significant proportion of the student body drawn from the Ayrshire region, the College actively collaborates with Developing the Young Workforce (DYW) Ayrshire, local authorities, and regional employers, ensuring that communications and website content reflect both local priorities and the College's strategic objectives. Communication is regarded as a "golden thread" woven through all strategic activity, supported by operational frameworks, 'Tone of Voice' guidance, and structured planning tools.

1 Executive summary

Website Management and Governance

The College's website is a key vehicle for strategic messaging, officially launched in February 2025 after a year-long development process. The site is supported by a formal Website Management Procedure and Guidance document that outlines governance, ownership, change categories, approval routes, service level agreements, and incident handling, as well as technical standards, accessibility, and security requirements. However, we noted that this document has not yet been formally approved. Please refer to **Section 2: Detailed recommendations** for further information.

Operationally, access is restricted to the main Team and Board Governance Advisor, the latter having responsibility around relevant Board of Management updates.

Clear accountability is demonstrated through designated page ownership and scheduled review dates. Content updates are guided by established principles and aligned with recognised accessibility standards. The current governance approach, coupled with a maturing Communications Framework, provides strong operational control while highlighting the potential benefits of further formalisation in policy, approval, and review mechanisms.

Accessibility, Social Media, and Analytics

The College places significant emphasis on accessibility and compliance, with independent testing confirming adherence to Web Content Accessibility Guidelines (WCAG) AA standards.

The College maintains an active presence across multiple social media channels, including Facebook, Instagram, X (Twitter), LinkedIn, YouTube, and Flickr, with other platforms under review for future use. Engagement is monitored through Hootsuite, with regular benchmarking against education sector averages.

1 Executive summary

Data-driven insights are embedded in the Team's approach, supported by a monthly performance dashboard, structured planning tools, and routine engagement with department heads. Initiatives such as the 3C Time, 'Collaboration, Consistency and Communication,' ensure that feedback, insights, and learning from internal and external stakeholders are integrated into ongoing communications activity.

Forward Focus and Continuous Improvement

Looking ahead, the College aims to build on recent progress by embedding the Communications Framework under stable leadership, strengthening formal approval and review processes, and expanding the use of storytelling and student-generated content.

Leveraging analytics and emerging technologies, including AI tools, will enhance insight-driven communications, while visual impact improvements, across all external platforms, are planned to increase engagement. Please refer to **Section 3: Observations** for further information.

The College also recognises the need to formalise governance documents to align operational guidance with policy-level oversight. Overall, the strengthened Team, supported by structured processes and strategic alignment with the College's ambitions, positions the institution to further enhance the effectiveness, consistency, and reach of its external communications, reinforcing its reputation and regional role.

1 Executive summary

Work undertaken

In line with each objective, we undertook the following work:

Objective 1: There is an effective external communications framework in place which operates effectively in line with defined policies and procedures.

- | We reviewed the College's Communications Framework and associated documentation to confirm governance, ownership, and alignment with wider strategic objectives.
- | We discussed implementation and oversight arrangements with key members of the Team to assess operational effectiveness.

Objective 2: The College has a detailed communications framework that is designed to allow the College to communicate effectively and meet their core objectives.

- | We assessed how the Communications Framework supports delivery of the College's Strategic Ambition 2024–2027 and other key strategies.

Objective 3: The College adopts a variety of methods to communicate with stakeholders removing any inherent barriers to information.

- | We reviewed the range of communication methods used (e.g., website, social media, newsletters, events) to confirm accessibility and reach.
- | We considered how the College's approach ensures inclusivity and engagement across different stakeholder groups.

Objective 4: The communication methods adopted are suitable for the College and allow for effective operations.

- | We evaluated the suitability of current communication channels in supporting the College's operational and strategic objectives.
- | We held discussions with Team staff to confirm how feedback and performance data inform ongoing improvements.

1 Executive summary

Objective 5: The College effectively gathers feedback from their key stakeholders on the methods adopted and ensure actions are raised for areas of improvement.

- | We assessed the mechanisms in place for gathering stakeholder feedback on communications and website performance.

Objective 6: The College have robust mechanisms in place to measure their communication strategies through statistical analysis and stakeholder engagement.

- | We examined the use of reports and analytics dashboards used by the Marketing and Communications Team to monitor engagement and reach.
- | We verified how performance information (e.g., web analytics, social media data, and benchmarking) is used to inform planning and reporting.

Objective 7: The College website is robust to ensure sufficient information is provided to key stakeholders.

- | We reviewed the structure, content, and accessibility of the College website, including compliance with WCAG AA standards.

Objective 8: There are appropriate controls in place to ensure only approved personnel can post on the website.

- | We examined website access permissions and user roles to confirm editing rights are restricted to authorised personnel.
- | We reviewed the Website Management Procedure and Guidance document to assess approval routes and change control arrangements.

1 Executive summary

Conclusion

Conclusion

Overall Conclusion: Strong

Following our review, we can provide a strong level of assurance over the College's external communication methods, the use of their website, and their associated policies, procedures, and controls. This is highlighted as we have raised several good practice points, one recommendation for improvement and an observation for consideration. Please refer to **Section 2: Detailed Recommendations** and **Section 3: Observations**, for further information.

Summary of recommendations

Grading of recommendations

	High	Medium	Low	Total
External Communications - Website	0	0	1	1

As can be seen from the above table there were no recommendations made which we have given a grading of high.

1 Executive summary

Areas of good practice

The following is a list of areas where the College is operating effectively and following good practice.

1.	The College has established a structured external Communications Framework that is clearly aligned to its Strategic Ambition 2024–2027. Strategic alignment is reinforced through the Draft Communications Plan and External Communications Procedure, which detail governance, workflows, and improvement processes.
2.	The College’s Communications Framework provides structured guidance to ensure effective message alignment with their strategic objectives. Clear roles, stakeholder engagement processes, consistent tone, and style guidelines support coordinated communication across all channels, with regular review and analytics used to monitor performance.
3.	The College employs a diverse range of communication channels, including their website, social media platforms, email, and direct engagement at events, ensuring accessibility for all stakeholders. The Team actively tailor messages for different audiences and maintain clear, consistent guidance through their 'Tone of Voice' and writing style documents. This multi-channel approach helps remove barriers to information and supports effective stakeholder engagement across the region.
4.	The College demonstrates a strategic and inclusive approach to communications, ensuring consistency and parity of promotion across all campuses and subject areas. Strong stakeholder engagement, including collaboration with local authorities, employers, and DYW Ayrshire, ensures messaging is relevant, regionally aligned, and supports effective operational delivery.

1 Executive summary

The following is a list of areas where the College is operating effectively and following good practice.

5.	The College has established a structured process to gather feedback and content from stakeholders, including news gathering forms, story plans, and briefing documents for key events. This demonstrates a proactive approach to capturing stakeholder input and ensures that feedback is systematically collected to inform communications and engagement activities. The use of standardised forms and briefing guides help maintain consistency and clarity in how stakeholder insights are captured across the College.
6.	The College has a structured approach to their website and social media analytics. A dashboard tracks monthly website metrics (views, sessions, events), while Hootsuite monitors engagement across Facebook, Instagram, LinkedIn, and Twitter, benchmarking performance against other education sites. Social media findings inform recommendations to improve reach. Regular reporting (e.g., impact reports, social media summaries) demonstrates a consistent and data-driven marketing strategy.
7.	The College's website is well-structured and easy to navigate, with its design rigorously validated through 'Tree Testing' for optimal usability. The site meets WCAG Level AA, ensuring broad user access. Regular reviews are in place, with page owners assigned to maintain up-to-date content.
8.	The College has implemented clear operational controls to restrict website editing to authorised personnel, with defined roles for the Team and Board Secretary. The Website Management Procedure provides strong governance over content changes, approvals, and accountability through assigned page ownership and review dates. Complementary guidance, including the Social Media Policy, reinforces consistent and secure communication practices across all digital platforms.

2 Detailed recommendations

Website Management Guidance			
Ref.	Finding and Risk	Grade	Recommendation
1.	<p>The College has developed a Website Management Procedure and Guidance document that outlines key operational controls, including governance, change categories, service level agreements (SLAs), content standards, accessibility, search engine optimisation (SEO), quality assurance, security, and incident management. These elements demonstrate that appropriate controls are in place to manage website updates, ensure content accuracy, and maintain compliance.</p> <p>While we acknowledge that the document is comprehensive, it has yet to be formally approved along with a structured process for version control and periodic review.</p> <p>Our root cause analysis identified that the document has remained at a procedural level as efforts have been directed toward improving website management practices rather than the refinement of formal governance arrangements.</p> <p>Without these additional governance mechanisms, there is a risk that key procedural elements may be overlooked or inconsistently applied, particularly by staff unfamiliar with current guidance. This could lead to delays, errors, or non-compliance with accessibility and privacy standards.</p>	Low	<p>It is recommended that the College enhance the Website Management Procedure and Guidance document by introducing clearly defined roles, responsibilities, escalation routes, and compliance requirements, and by establishing a regular review and update process. Strengthening these elements will help ensure consistency, accountability, and alignment with broader governance frameworks.</p>

2 Detailed recommendations

Management response	Responsibility and implementation date
The College will enhance the Website Management Procedure and Guidance document by introducing clearly defined roles, responsibilities, escalation routes and compliance requirements. An annual review and update process will be established.	<i>Responsible Officer:</i> Marketing and Communications Manager <i>Implementation Date:</i> 31 March 2026

3 Observations

The following is a list of observations from our review

- | | |
|----|---|
| 1. | <p>It was noted that the Team has made significant progress over the past two years in strengthening its communications framework and website management arrangements, despite experiencing a period of staff change. The recent appointment of a permanent Strategic Communications and Policy Advisor will provide appropriate expertise and greater stability to the Team. Now with an established structure and clear strategic direction, the College is well positioned to further enhance the effectiveness and consistency of its external communications. Future improvements should be balanced with recognition of the Team's ongoing efforts and current capacity.</p> |
| 2. | <p>It was noted that while the Team actively seek out stories and information to promote College activity, the formalised process for collecting feedback or key messages from College staff who attend external or strategic events is not used as extensively as it could be. Moreover, the routine capture of all such relevant information, including at Senior Management level, would help ensure that positive outcomes, innovative practice, and emerging opportunities are effectively amplified through the College's communication channels.</p> <p>Any improvements or enhancements in this area would allow the College to maintain a steady flow of authentic and timely content, further supporting the Team's emphasis on storytelling and showcasing the College's achievements.</p> |

The following is a list of observations from our review

- | | |
|----|--|
| 3. | <p>It was noted that the College is actively aiming to expand its social media content to improve Instagram engagement and enhance its overall online presence. Plans include increasing video content across all external platforms, to reach a broader demographic.</p> <p>The College use student photographers to help with this content, offering practical learning opportunities and fostering student engagement. There is agreement that involving students in video content creation could further enhance this engagement. While these engagements are commendable, several challenges were identified that may be slowing progress. These include the time required to establish a dedicated student content team and the resources available to manage content creation without overburdening current Team members. While the College has a clear vision and is taking positive steps, further support or resourcing may be needed to fully realise its external communication goals without compromising current workloads. Continued development in this area presents a strong opportunity for growth and student involvement.</p> |
|----|--|

4 Audit arrangements

The table below details the actual dates for our fieldwork and the reporting on the audit area under review. The timescales set out below will enable us to present our final report at the next Audit & Risk Committee meeting.

Audit stage	Date
Fieldwork start	27 October 2025
Closing meeting	3 November 2025
Draft report issued	7 November 2025
Receipt of management responses	20 November 2025
Final report issued	20 November 2025
Audit & Risk Committee	2 December 2025
Number of audit days	5

5 Key personnel

We detail below our staff who undertook the review together with the College staff we spoke to during our review.

Wbg			
Partner	Graham Gillespie	Partner & Head of Internal Audit	gg@wbg.co.uk
Director	Stephen Pringle	Director of Internal Audit	sp@wbg.co.uk
Manager	Siobhan Archibald	Internal Audit Manager	sma@wbg.co.uk
Auditor	Kevin McDermott	Senior IT Auditor	kmd@wbg.co.uk
Auditor	Jessica Eberhardt	IT Auditor	jee@wbg.co.uk

Ayrshire College			
Key Contacts	Michelle Wallace	Marketing and Communications Manager	michelle.wallace@ayrshire.ac
	Alistair Rodgers	Director of Enterprise Development	alistair.rodgers@ayrshire.ac
	Stuart Millar	Head of Employer Engagement	stuart.millar@ayrshire.ac
Wbg appreciates the time provided by all the individuals involved in this review and would like to thank them for their assistance and co-operation.			

For each area of review, we assign a level of assurance in accordance with the following classification:

Assurance Classification	
Strong	Controls satisfactory, no major weaknesses found, no or only minor recommendations identified.
Substantial	Controls largely satisfactory although some weaknesses identified, recommendations for improvement made.
Weak	Controls unsatisfactory and major systems weaknesses identified that require to be addressed immediately.
No	No or very limited controls in place leaving the system open to significant error or abuse, recommendations made require to be implemented immediately.

A Grading structure

For each recommendation, we assign a grading either as High, Medium, or Low priority depending on the degree of risk assessed as outlined below:

Grading	Classification
High	Major weakness that we consider needs to be brought to the attention of the Audit & Risk Committee and addressed by Senior Management of the College as a matter of urgency.
Medium	Significant issue or weakness which should be addressed by the College as soon as possible.
Low	Minor issue or weakness reported where management may wish to consider our recommendation.

Purpose of review

The purpose of this assignment is to review the external communications methods adopted by Ayrshire College (the College) to liaise with key stakeholders and, in particular, the College website. This review will encompass reviewing the use of external communications channels to understand how the College engages with their stakeholders and how this shapes their communication strategy.

This review will form part of our 2025/26 Internal Audit Plan.

Scope of review

Our objectives for this review are to assess whether:

- | There is an effective external communications framework in place which operates effectively in line with defined policies and procedures.
- | The College has a detailed communications framework that is designed to allow the College to communicate effectively and meet their core objectives.
- | The College adopts a variety of methods to communicate with stakeholders removing any inherent barriers to information.
- | The communication methods adopted are suitable for the College and allows for effective operations.
- | The College effectively gathers feedback from their key stakeholders on the methods adopted and ensure actions are raised for areas of improvement.
- | The College have robust mechanisms in place to measure their communication strategies through statistical analysis and stakeholder engagement.

- | The College website is robust to ensure sufficient information is provided to key stakeholders.
- | There are appropriate controls in place to ensure only approved personnel can post on the website.

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

Limitation of scope

There is no limitation of scope.

Audit approach

Our approach to the review will be:

- | We will review relevant documentation including policies and procedures relating to external communications, stakeholder engagement records, and evidence of website governance controls.
- | We will perform a walkthrough of the College website to assess the availability, accessibility, and relevance of stakeholder-facing information in line with good practice expectations.
- | We will meet with key staff responsible for communications and digital engagement to understand how communication strategies are developed, deployed, and monitored. This will include exploring how stakeholder feedback is obtained and used.
- | We will review examples of communication across multiple channels (e.g. social media, newsletters, events) to assess inclusivity, accessibility, and alignment with the College's objectives.
- | We will examine access control mechanisms for the College website to verify whether appropriate restrictions are in place to ensure that only authorised individuals can post or edit content.

Potential key risks

The potential key risks associated with the area under review are:

- | Lack of a formal framework may lead to inconsistent messaging, reputational harm, or miscommunication with stakeholders.
- | Without a strategy, communications may be reactive, uncoordinated, or misaligned with strategic priorities.
- | Over-reliance on limited channels may exclude certain stakeholder groups (e.g. digitally excluded or language-diverse audiences).
- | Ineffective methods may lead to misinformed stakeholders, complaints, or operational inefficiencies.
- | Failure to gather and act on feedback may result in stakeholder disengagement and perpetuate poor communication practices.
- | Without measurement, the College cannot assess whether communications are achieving intended outcomes or reaching audiences.
- | A poorly maintained or incomplete website can lead to stakeholder confusion, lack of transparency, or reputational harm.
- | Unauthorised website updates could lead to publication of incorrect, sensitive, or reputationally damaging information.

Title of Meeting: **Audit and Risk Committee**

Date: **2 December 2025**

Subject: **Internal Audit Report – Student Voice**

Purpose: The paper provides an overview of the internal audit review of College student voice arrangements.

Recommendation: The Audit and Risk Committee is requested to consider and note the report.

1 Executive Summary

The Student Voice review was undertaken to evaluate the effectiveness of current student voice arrangements in place at the College and assess the robustness of the governance structures in supporting its operation and strategic development.

The assignment formed part of the 2024/25 Internal Audit Annual Plan.

Overall Assurance

- The audit provides a **strong level of assurance** over the College's student voice arrangements.
- **No recommendations** were raised.

The College has accepted the recommendation.

Purpose and Scope

The purpose of this assignment was to evaluate the effectiveness of current student voice arrangements in place at the College and assess the robustness of the governance structures in supporting its operation and strategic development.

The reviewed aimed to address the following objectives:

- Assess the Adequacy of Arrangements
- Evaluate Effectiveness, Accessibility, and Inclusivity
- Determine Responsiveness and Impact
- Review Support for Representatives
- Benchmark Against Sector Standards

Good Practices

The report identified several areas of good practice including:

Multiple Channels for Student Feedback

The College uses a wide range of channels to capture student voice, including the Student Association, surveys, social media, focus groups and events. This ensures all students have effective means to communicate feedback.

Student Satisfaction as a Strategic Measure

Student satisfaction is recognised as a key strategic measure of success within the College.

Structured Student Association

The Student Association is well organised, with Class Ambassadors, Student Officers, a Student President and Vice-President acting as representatives. This structure supports effective feedback relay to the Board.

Board Engagement

The Student President and Vice-President are full members of the Board and present a Student Association Report at each quarterly meeting fostering a strong relationship between the Student Association and the Board of Management.

Accessibility and Inclusion

The College actively considers accessibility and inclusion when seeking student feedback, including developing focus groups for specific learner types such as British Sign Language users and Student Carer groups.

Responsiveness to Feedback

The College makes improvements in response to student feedback to enhance the overall student experience.

Comprehensive Training for Representatives

Student Representatives at all levels receive thorough training, which encourages strong communication and effective performance in their roles.

Effective Benchmarking

The College benchmarks its student surveys against sector averages and participates in networking groups to identify and adopt good practices within the sector.

2 Associated Risks

The report provides assurance towards the following strategic risks:

Student Experience and Engagement Risks

The audit provides assurance that the College has robust arrangements for capturing, acting on and benchmarking student feedback. This directly mitigates risks related to poor

student engagement, ineffective feedback mechanisms and failure to act on student concerns, which could negatively impact student satisfaction and reputation.

Curriculum Relevance and Quality Risks

By confirming that student feedback is systematically gathered and used to inform improvements, the audit supports the College's ability to align curriculum activity with current and future skills requirements and social/economic needs. This addresses strategic risks around curriculum not meeting sector or employer expectations.

Equality, Diversity, and Inclusion Risks

The audit highlights inclusive and accessible feedback mechanisms, such as focus groups for specific learner types (e.g., BSL users, carers). This provides assurance against risks of exclusion or lack of representation in decision-making processes.

Governance and Reputation Risks

The report confirms strong governance structures, with student representatives actively involved in Board and committee processes. This mitigates risks of weak governance, lack of transparency and reputational damage from not responding to student needs.

Sector Benchmarking and Continuous Improvement Risks

Assurance is provided that the College benchmarks its practices against sector standards and seeks opportunities for innovation, addressing risks of falling behind sector best practice or missing opportunities for enhancement.

3 Equality and Diversity Impact Assessment

An equality impact assessment is not applicable to this paper given the subject matter.

4 Publication

This paper will be published on the College website.

Siobhan Archibald
Internal Audit Manager
Wbg

2 December 2025



(Paper 5(1))

Ayrshire College

Internal Audit 2025-26

Student Voice
November 2025

Overall Conclusion

Strong

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1 Executive summary

Overview

Purpose of review

The purpose of this assignment was to evaluate the effectiveness of current student voice arrangements in place at the College and assess the robustness of the governance structures in supporting its operation and strategic development.

This review formed part of our 2025/26 Internal Audit Annual Plan.

Scope of review

Our objectives for this review were to assess:

- | The adequacy of the arrangements that the College has in place to capture student voice, and the alignment of these arrangements to the College's objectives.
- | The effectiveness, accessibility, and inclusivity of mechanisms in place for capturing and engaging with student feedback across all areas of the College
- | The extent to which student feedback is acted upon in a timely and transparent manner, and to assess the impact of resulting actions on the student experience.
- | The training, support, and resources provided to student representatives and staff involved in student voice processes, confirming they are sufficient to enable effective participation and engagement.
- | Whether the College benchmarks current student voice practices against sector expectations and good practice, identifying areas for enhancement and opportunities for innovation.

1 Executive summary

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

Limitation of scope

There was no limitation of scope.

1 Executive summary

Background

Student Association and Student Representatives

One of the College's keyways in which it can capture and encourage the student voice is through a dedicated Student Association. Each student at the College is automatically enrolled into the Student Association. The Student Association works to support and represent all College students. The College's Student Association is governed by a constitution. This sets out the aims and objectives of the Student Association, its powers, membership, finance and governance. It sets out the arrangements for the structure of the Student Association.

The Student Association is democratically run, with a Student President and Vice-President elected each academic year. Each can serve a maximum of two years where both are full time positions. The Student President and Vice-President are supported by the Student Association Advisor. The Student Association Advisor collaborates with the Student President and Vice-President, and the Executive Committee, providing the resources they need to succeed. The Student Association Advisor works as a link between the College and the Student Association, helping to implement feedback, starting clubs, organising fundraising events, and meeting with student representatives.

As well as the Student President and Vice-President, the Association includes Class Ambassadors and Student Officers. Class Ambassadors function as student representatives across the College. These are volunteer students who are recruited based on interest.

The College's Class Ambassadors work to pass on any feedback their class has on the course, curriculum and other elements of College life. Each Class Ambassador goes through a two-stage training process, which is facilitated by the external organisation SPARQS (Student Partnerships in Quality Scotland). Monthly Class Ambassador meetings are held, where feedback can formally be relayed to the College.

Student Officers work to represent key-areas, rather than representing specific classes. Again, these are volunteer student positions and roles are filled based on student interest, where not every role is filled in every term. Examples include:

- | Online Community Officer
- | Woman's Officer

1 Executive summary

| Wellbeing Officer.

Board and Committee Membership and Reporting

The Student President and Vice-President are both members of the Board and sit on the Learning, Teaching and Quality Committee (LTQC) & People, Infrastructure and Finance Committee. This provides them with a direct opportunity to put student feedback to the Board and Committees. Both the Board and the Committees meet quarterly.

The Student President prepares a Student Association report that goes to each Board and Committee meeting. These reports provide an update to the Board of the Student Association's activities. These follow a standard format of background, current situation, proposals (if any), resource implications, consultation and conclusion. We reviewed the four most recent Board and LTQC meetings and found that the Student Association report was reviewed and discussed in each case.

Training and Resources

The College ensures that student representatives are provided with training and resources to support them completing their role. The College works closely with SPARQS (student partnerships in quality Scotland) in order to equip their student representatives with sufficient training. Frequent training sessions are attended by the Student President and Vice-President, with other sessions focussed on Class Ambassadors and Student Officers. The College also ensures that student representatives are provided with supporting materials prepared by SPARQS, and other external organisations such as NUS.

Surveys and Focus Groups

The College performs a number of surveys throughout the year as a means of capturing the student voice. Examples of these include the First Impressions survey at the beginning of the year, regular Pulse Surveys throughout the year and the annual SFC Student Satisfaction and Engagement Survey. Survey results are reviewed by the LTQC and compared with scores across the sector where possible.

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The College also run a number of focus groups to gather student feedback on specific areas. These include general student feedback groups, specific focus groups for courses and their content, and focus groups aimed at certain types of learners, such as British Sign-Language (BSL) users or Student Carer groups. This allows students to provide feedback in a comfortable environment alongside their peers.

1 Executive summary

Work Undertaken

In line with our objectives, we undertook the following work:

Objective 1. Assess the adequacy of the arrangements that the College has in place to capture Student Voice, and the alignment of these arrangements to the College's objectives.

- | We discussed the current arrangements in place for capturing student voice with the Head of Quality Enhancement; the Assistant Principal Student Experience and Quality Enhancement; and the Student Association Advisor.
- | We also discussed the current arrangements in place with the Student President to confirm their understanding aligned with College requirements.
- | We reviewed evidence to confirm that the arrangements described reflect the College's practices.

Objective 2. Evaluate the effectiveness, accessibility, and inclusivity of mechanisms in place for capturing and engaging with student feedback across all areas of the College.

- | We assessed the College's arrangements for capturing student voice to confirm these were suitable and cohesive to the effective capture of student feedback.
- | We assessed whether the feedback channels used by the College were accessible and inclusive to all students, and whether the College sufficiently considers these factors in their capture of the student voice.

Objective 3. Determine the extent to which student feedback is acted upon in a timely and transparent manner, and to assess the impact of resulting actions on the student experience.

- | We held discussions with the Head of Quality Enhancement; the Assistant Principal Student Experience and Quality Enhancement; the Student Association Advisor; and the Student President to identify examples of how student feedback had shaped changes at the College.
- | We reviewed evidence to confirm that the College had made improvements in response to student feedback for these examples.
- | We held discussions with the Student President to understand their opinion of the College's response to student feedback.

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Objective 4. Review the training, support, and resources provided to student representatives and staff involved in Student Voice processes, confirming they are sufficient to enable effective participation and engagement.

- | We held discussions with the Head of Quality Enhancement; the Assistant Principal Student Experience and Quality Enhancement; the Student Association Advisor; and the Student President to understand the training and support provided to the College's student representatives.
- | We reviewed the training materials provided to student representatives to assess the appropriateness and quality of training provided.

Objective 5. Benchmark current Student Voice practices against sector expectations and good practice, identifying areas for enhancement and opportunities for innovation.

- | We reviewed evidence of the College's benchmarking of student feedback ratings with the sector's average ratings.
- | We reviewed the College's benchmarking results, noting that the College performs better than the sector average in 25 of 26 areas covered in the student satisfaction survey.

1 Executive summary

Conclusion

Overall conclusion

Overall Conclusion: Strong

We can provide a strong level of assurance over the arrangements in place surrounding the College's ability to effectively capture student voice and appropriately act upon feedback raised. This is further emphasised where several good practice points have been identified and no recommendations for improvement have been raised.

Summary of recommendations

Grading of recommendations				
	High	Medium	Low	Total
Student Voice	0	0	0	0

As can be seen from the above table there were no recommendations made.

1 Executive summary

Areas of good practice

The following is a list of areas where the College is operating effectively and following good practice.

1.	The College have a number of effective channels for capturing student voice and feedback, including their Student Association, surveys, social media, focus groups and events. This wide range of channels ensures all students have effective means of communicating feedback.
2.	The College recognises that student satisfaction is a key strategic measure of success.
3.	The Student Association is well structured and encourages the effective relaying of feedback to the Board. This consists of Class Ambassadors, Student Officers, the Student President and Student Vice-President acting as student representatives.
4.	The Student President and Vice-President are both full standing members of the Board and present a Student Association Report at each of their quarterly meetings. This promotes a strong relationship between the Student Association and the Board of Management and its sub-committees.
5.	The College ensures that accessibility and inclusion is considered when seeking student feedback, to encourage feedback from as many students as possible. This includes the development of focus groups aimed at specific types of learners, such as the BSL or Student Carer/Care Experienced groups.
6.	The College works to make improvements in response to student feedback in order to enhance the overall student experience.

1 Executive summary

The following is a list of areas where the College is operating effectively and following good practice.

7.	The College provides comprehensive training to Student Representatives of all levels, encouraging the strong communication of feedback and effective performance in these roles.
8.	<p>The College performs effective benchmarking of their student surveys, comparing the feedback received against sector averages.</p> <p>The College's Student Association President and Vice-President are also members of networking groups, allowing the College to identify good practice within the sector.</p>

2 Audit arrangements

The table below details the actual dates for our fieldwork and the reporting on the audit area under review. The timescales set out below will enable us to present our final report at the next Audit & Risk Committee meeting.

Audit stage	Date
Fieldwork start	28 October 2025
Closing meeting	6 November 2025
Draft report issued	7 November 2025
Receipt of management responses	17 November 2025
Final report issued	18 November 2025
Audit & Risk Committee	2 December 2025
Number of audit days	5

3 Key personnel

We detail below our staff who undertook the review together with the College staff we spoke to during our review.

Wbg			
Partner	Graham Gillespie	Partner & Head of Internal Audit	gg@wbg.co.uk
Director	Stephen Pringle	Director of Internal Audit	sp@wbg.co.uk
Manager	Siobhan Archibald	Internal Audit Manager	sma@wbg.co.uk
Auditor	CJ Scott	Internal Audit Assistant Manager	cjs@wbg.co.uk

Ayrshire College			
Key Contacts:	Doreen Wales	Assistant Principal Student Experience and Quality Enhancement	doreen.wales@ayrshire.ac.uk
	Linda Corbett	Student Association Advisor	linda.corbett@ayrshire.ac.uk
	Ann Heron	Head of Quality Enhancement	Ann.Heron@ayrshire.ac.uk
Wbg appreciates the time provided by all the individuals involved in this review and would like to thank them for their assistance and co-operation.			

A Grading structure

For each area of review, we assign a level of assurance in accordance with the following classification:

Assurance Classification	
Strong	Controls satisfactory, no major weaknesses found, no or only minor recommendations identified.
Substantial	Controls largely satisfactory although some weaknesses identified, recommendations for improvement made.
Weak	Controls unsatisfactory and major systems weaknesses identified that require to be addressed immediately.
No	No or very limited controls in place leaving the system open to significant error or abuse, recommendations made require to be implemented immediately.

A Grading structure

For each recommendation, we assign a grading either as High, Medium, or Low priority depending on the degree of risk assessed as outlined below:

Grading	Classification
High	Major weakness that we consider needs to be brought to the attention of the Audit & Risk Committee and addressed by Senior Management of the College as a matter of urgency.
Medium	Significant issue or weakness which should be addressed by the College as soon as possible.
Low	Minor issue or weakness reported where management may wish to consider our recommendation.

Purpose of review

The purpose of this assignment is to evaluate the effectiveness of current student voice arrangements in place at the College and assess the robustness of the governance structures in supporting its operation and strategic development.

Scope of review

Our objectives for this review are to assess:

- | The adequacy of the arrangements that the College has in place to capture student voice, and the alignment of these arrangements to the College's objectives.
- | The effectiveness, accessibility, and inclusivity of mechanisms in place for capturing and engaging with student feedback across all areas of the College
- | The extent to which student feedback is acted upon in a timely and transparent manner, and to assess the impact of resulting actions on the student experience.
- | The training, support, and resources provided to student representatives and staff involved in student voice processes, confirming they are sufficient to enable effective participation and engagement.
- | Whether the College benchmark current student voice practices against sector expectations and good practice, identifying areas for enhancement and opportunities for innovation.

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

Limitation of scope

There is no limitation of scope.

Audit approach

Our approach to the review will be:

- | Reviewing the relevant policies and procedures in place surrounding providing a positive experience to the students.
- | Discussions with management to determine the mechanisms in place for ensuring that the College is delivering a positive experience to its students. We shall evaluate the effectiveness of these mechanisms in practice.
- | Evaluating the College's process for promoting positive student behaviours. We shall assess these for appropriateness and to ensure these are fit for purpose. We shall also consider the arrangements in place if students do not comply with the expected behaviours.
- | Evaluating the College's methods in place to promote student attendance. We shall assess this for appropriateness and to ensure these are fit for purpose and ensure that the College has steps in place for early engagement with any students whose attendance is poor or erratic.
- | Considering the level of impact which feedback has had by assessing any consequential action taken by the Senior Management.

Potential key risks

The potential key risks associated with the area under review are:

- | The College may not have adequate Student Voice Arrangements.
- | The effectiveness, accessibility, and inclusivity of the College's mechanisms in place for capturing and engaging with student feedback may not be sufficient.
- | Student feedback may not be acted upon in a timely and transparent manner, or the resulting actions do not contribute to the student experience.
- | The training, support, and resources provided to student representatives and staff involved in Student Voice processes may not be sufficient to enable effective participation and engagement.
- | Student Voice practices may not be in line with sector expectations and good practice or may not sufficiently identify areas for enhancement or opportunities for innovation.

(Paper 6)



Ayrshire College

Progress Report

2025-26

November 2025

3. Audit Findings

Assignment Plans

A detailed assignment plan will be prepared for each audit undertaken, setting out the scope and objectives of the work, allocating resources and establishing target dates for the completion of the work. Each assignment plan will be agreed and signed off by an appropriate sponsor from the College.

Visit	Audit Areas	No. of Audit Days	Provision Start Date of Visit	Provisional Date of Issue of Draft Report	Status	Provisional date for Reporting to Audit & Risk Committee
Visit 1	External Communications – Website	5	27 October 2025	7 November 2025	Completed	2 December 2025
	Student Voice	5				
Visit 2	Financial Regulations and Compliance	4	26 January 2026	13 February 2026	-	17 March 2026
	Non-SFC Income	6				
Visit 3	Cyber Incident Response Plan	5	20 April 2026	8 May 2026	-	2 June 2026
	Strategic Planning	5				
Visit 4	SSF	7	24 August 2026 & 14 September 2026	2 October 2026	-	December 2026
	Credits	4				

We will also undertake a rolling follow up review and also undertake some assurance mapping consultancy work throughout the year.



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