

**Meeting of the Audit and Risk Committee
to be held on Tuesday 24 September 2024 at 4.00pm
by Hybrid Attendance at **Ayr Dam Park Campus (G89)** and via Microsoft Teams**

AGENDA

1. Welcome and Declarations of Interest
 2. Apologies
 3. Minute of the meeting held on 04 June 2024
 - ARC Action & Decision TrackerPaper 1 (C/P)
Paper 1A (P)
 4. Matters arising
- Part A – For discussion, decision and approval**
5. 2023-24 External Audit Progress Report (8) Paper 2 (R) ARi
 6. 2024-25 Committee Terms of Reference and Workplan (1) Paper 3 (P) HD
 7. 2023-24 Audit and Risk Committee Annual Report (11) Paper 4 (R) SM
 8. 2024-25 Internal Audit Plan (2/5/14) Paper 5 (P) ARi
 9. Business Continuity Plan (7) Paper 6 (P) ARi
- Part B – Regular Reporting/Monitoring**
10. Rolling Audit Action Plan (7) Paper 7 (R) LW
- Part C – Risk Management**
11. Strategic Risk Register (15) Paper 8 (R) ARi
- Part E – For information**
12. AOB

Date of Next Meeting – Tuesday 10 December 2024 at 4.00pm

(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(R) Papers will not be published for reasons of commercial sensitivity or for reasons of personal data confidentiality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 Microsoft Teams
Thursday 04 June 2024**

Present:

Steven Wallace	Chair
Sharon Morrow	Vice – Chair
Jason Currie	Non-Executive Board Member
Alison Sutherland	Non-Executive Board Member
Matthew Wilson	Non-Executive Board Member

In attendance:

Anne Campbell	Vice Principal, Skills and Enterprise
David Davidson	Vice Principal, People, Performance and Transformation
Hilary Denholm	Board Governance Advisor & Minutes
Alan Ritchie	Vice Principal, Finance & Infrastructure
Liz Walker	Head of Financial Services
Stephen Pringle	Wylie & Bisset – Internal Auditors
Adrian Kolodziej	Azets – External Auditors
Fiona McQueen	Chair, Board of Management (Shadowing from Item 6)

1. Meeting with external auditors

No College staff were present for this discussion around the list of regulatory questions that the External Auditor needed to ask members of ARC in advance of the audit starting. To assist in the process, questions were circulated before the meeting to the Non-Executive Board members within the ARC Committee.

2. Welcome and Declarations of Interest

The Chair, Steven Wallace, welcomed all present to the meeting, including to their first ARC meeting, Jason Currie, new Non-Executive Board Member.

There were no Declarations of Interest presented.

The meeting was confirmed as quorate.

3. Apologies

Apologies were received from Andy Reid Director from Azets, who was only present for the private meeting before the full Committee meeting took place.

4. Minutes of the Previous Meeting held on 19 March 2024 (Paper 1) C/P

The minutes were approved as a correct record, with one small change of date.

Proposed: Alison Sutherland **Seconded:** Matthew Wilson

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

The Committee noted there were no outstanding actions.

5. Matters Arising

There were no other outstanding matters arising from the minutes.

7i. Internal Audit Report – IT Security (*Paper 3*) (*P*)

S Pringle introduced Paper 3 as presented which provided an overview of the recently conducted internal audit review into IT Security.

The Committee was requested to consider and approve the report.

The Committee noted:

- The purpose of this audit was to review cyber security arrangements in place to ensure appropriate controls were in place to mitigate loss of business-critical information due to cyber-attack or failure of key systems/suppliers.
- The overall assurance was substantial (2nd highest rating), with eleven areas of good practice highlighted.
- The College accepted 3 medium and 1 low grade recommendations which will be added to the Rolling Audit Action Plan.

Discussion and questioning took place around some of the recommendations, and the actions, systems and processes in place to address them. A Ritchie advised of ongoing cyber security exercises and future business continuity testing that is planned. In addition, the onboarding and learning & development processes and monitoring for cyber security were discussed.

Action: ARC44-A01 Arrangement for presentation of a cyber security report to be organised for a future Committee meeting.

The Committee noted the report and gave their approval.

Decision: ARC44-D02 The Committee approved the Internal Audit Report – IT Security

7ii. Internal Audit Report – Corporate Governance (*Paper 4*) (*P*)

S Pringle introduced Paper 4 as presented which provided an overview of the recently conducted internal audit review into Corporate Governance.

The Committee was requested to consider and approve the report.

The Committee noted:

- The purpose of the audit was to ensure the College has appropriate governance arrangements in place and that these are embedded throughout the whole College.
- The review looked to provide assurance that the College's Corporate Governance arrangements were appropriate and represent good practice.

- The overall assurance was strong, with several areas of good practice identified.
- There were no recommendations raised.
- The amount of excellent work by staff, including the Board Governance Adviser, was acknowledged.

The Committee noted the positive report and gave their approval.

Decision: ARC44-D03 The Committee approved the Internal Audit Report – Corporate Governance

7iii. Internal Audit Report – Overall Financial Controls (Paper 5) (P)

S Pringle introduced Paper 5 as presented which gave an overview of recently conducted internal audit review into the Overall Financial Controls in operation at the College.

The Committee was requested to consider and approve the report.

The Committee noted:

- The purpose of the audit was to perform high-level review of key financial controls in place at the College, to provide assurance that key financial controls were suitably designed and operated effectively.
- The review sought to assess processes relating to purchasing, income, cash and banking, payroll, and fixed assets.
- The overall assurance was strong.
- The College accepted 3 low grade recommendations which will be added to the Rolling Audit Action Plan
- The amount of excellent work by the Finance Team was acknowledged.

The Committee noted the positive report and gave their approval.

Decision: ARC44-D04 The Committee approved the Internal Audit Report – Overall Financial Controls

7iv. 2023-24 Internal Audit Progress Report as at June 2024 (Paper 6) (P)

S Pringle introduced Paper 6 as presented which summarised the audits already completed, and those still planned, with key dates agreed.

The Committee noted:

- Detailed assignment plans are 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 is agreed and signed off by an appropriate sponsor from the College.
- All audits had been completed with exception of the three funding audits planned for the Autumn which will be reported on at the September Committee meeting.

The Committee noted the report.

7v.2024-25 Internal Audit Plan (Paper 7) (P)

A Ritchie introduced Paper 7 which presented to the Audit and Risk Committee the final 2024-25 Internal Audit Plan for approval.

The Committee noted:

- The draft plan had been discussed at the March Committee meeting.
- The areas of high (red) risk are subject to either an internal audit assignment during the 5-year planning cycle, or alternative assurance will be provided to the Committee.
- Financial systems auditing will always be included annually due to the risk level.

Decision: ARC44-D05 The Committee reviewed and approved the final 2024-25 Internal Audit Plan for consideration and approval to the Board, and welcomed the risk based approach.

8. External Audit Annual Plan 2023-24 (Paper 8) (P)

A Kolodziej introduced Paper 8 giving an overview of the external auditor's audit planning and approach in relation to the financial statements of the College for year ended 31 July 2024, and an overview of significant risks and key judgement areas.

The Committee was requested to consider and approve the 2023-24 External Audit Annual Plan.

The Committee noted:

- The Plan largely follows last year's plan.
- Significant risks are management override of controls; fraud in revenue recognition and in expenditure recognition; valuation of land and buildings; pension net asset/liability, and valuation of PFI provision.
- Valuation of PFI provision is a new risk as the College's PFI contract for the Kilwinning Campus is due to expire in June 2025.
- Financial sustainability is a standard risk for all colleges.
- The proposed timetable for presentation of the audit reports.
- Azets have set their 2023-24 fee at £54,030 (2022-23: £50,970) a 6% increase, which is within the range set by Audit Scotland.
- Materiality is slightly up from last year.

The Committee noted the very comprehensive plan and gave their approval.

Decision: ARC44-D06 The Committee approved the External Audit Annual Plan 2023-24

13.AOB

It was noted that this was the last Committee meeting for the current Chair, Steven Wallace. Thanks were given for his dedication, professionalism, wisdom and experience.

The new Committee Chair will be the current Vice Chair of the Committee, Sharon Morrow.

Date of Next Meeting – Tuesday 24 September 2024 at 4pm

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

DRAFT

Audit & Risk Committee - Action and Decision Log Meeting No 45 – 24 September 2024

Meeting Date	Agenda Item	Reference	Details	Action Owner	Due Date	Action Decision	Open Complete Approved Declined
04.06.24	2024-25 SFC Funding Implications	ARC44: D01	The Committee reviewed and approved the College approach to the treatment of estate maintenance funding.	NA	NA	Decision	Approved
04.06.24	Internal Audit Report 2023-24 – IT Security	ARC44: D02	The Committee approved the Internal Audit Report – IT Security	NA	NA	Decision	Approved
04.06.24	Internal Audit Report 2023-24 – IT Security	ARC44: A01	Arrangement for presentation of the cyber security report to be organised for a future Committee meeting.	A Ritchie	10.12.24	Action	
04.06.24	Internal Audit Report 2023-24 – Corporate Governance	ARC44: D03	The Committee approved the Internal Audit Report – Corporate Governance	NA	NA	Decision	Approved
04.06.24	Internal Audit Report 2023-24 – Overall Financial Controls	ARC44: D04	The Committee approved the Internal Audit Report – Overall Financial Controls	NA	NA	Decision	Approved
04.06.24	2024-25 Internal Audit Plan	ARC44: D05	The Committee approved the final 2024-25 Internal Audit Plan to the Board for approval	NA	13.06.24	Decision	Approved
04.06.24	External Audit Annual Plan 2023-24	ARC44: D06	The Committee approved the External Audit Annual Plan 2023-24	NA	NA	Decision	Approved
04.06.24	Audit and Risk Committee 2023-24 Report (Draft)	ARC44: A02	All Committee members to feedback any suggestions for this draft report to A Ritchie by Friday 29 November latest.	All	29.11.24	Action	
04.06.24	Strategic Risk Register	ARC44: D07	The Committee recommended the Strategic Risk Register to the Board for approval.	NA	13.06.24	Decision	Approved

Title of Meeting:	Audit & Risk Committee
Date:	24 September 2024
Title:	Committee Terms of Reference and 2024/25 Work Plan
Purpose:	To complete an Annual review of the Committee's Terms of Reference and the Committee Workplan for AY 2024/25
Recommendation:	<p>The Committee is asked to review and approve the revised Terms of Reference and the 2024/25 Work Plan for the Audit & Risk Committee.</p> <p>The Committee is asked to note the current Committee Membership.</p>

1. Executive Summary

At the first quarterly meeting of the Committee, in each academic year, the Committee will consider its Terms of Reference and corresponding work plan for the forthcoming academic year.

- The Committee work plan is designed to ensure that the Committee is in fulfilment of the requirements as set out in its Terms of Reference.
- The Terms of Reference and corresponding work plan will be submitted to the October meeting of the Board of Management for formal approval.

2. Associated Risks

There is a risk that the Committee could fail to demonstrate that it was fulfilling the requirements of the Terms of Reference because it has not prepared, approved, and implemented a work plan, resulting in a failure to evidence compliance with governing legislation and regulation, and the Board's governance requirements.

3. Equality and Diversity Impact Assessment

None required in this instance.

4. Publication

This paper will be published on the College's website.

1. Background

At the first quarterly meeting of the Committee, in each academic year, the Committee will consider its Terms of Reference and corresponding work plan for the forthcoming academic year.

2. Current Situation

The 2024/25 Terms of Reference and work plan have been reviewed in discussion with the Vice Principal, Finance & Infrastructure, the Vice Principal, Skills & Enterprise, and the Vice Principal, People, Performance and Transformation.

3. Proposals

The Executive Leadership Team has been engaged in developing the proposals.

Terms of Reference: Minor changes only are proposed as highlighted.

Work Plan 2024/25: the current plan as presented reflects any legislative reporting requirements as well as reporting against key strategic programmes of work and is in alignment with the proposed Terms of Reference.

Direct reference is made to the numbered Duties and the reporting as itemised in the workplan.

This will not preclude reporting on any other significant issues within the Committee remit, as they occur.

Committee Membership: for information only, the current committee membership is included and may be subject to review.

4. Resource Implications

None required in this instance.

5. Consultation

The 2024/25 Terms of Reference and work plan have been reviewed in discussion with the Vice-Principal, Skills & Enterprise and the Vice Principal – Finance & Infrastructure.

6. Conclusion

Following approval by the Committee, the Standing Orders of the Board will be updated accordingly.

**Hilary Denholm
Board Governance Adviser
05 September 2024**

Audit and Risk Committee

Terms of Reference 2024-25

Introduction

The Audit and Risk Committee is identified as a Committee of the Ayrshire College Board of Management. The approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the College Standing Orders.

The Committee is a Standing Committee of the Board of Management. For the purposes of the Terms of Reference, unless otherwise indicated, 'the Board' means the Ayrshire College Board of Management.

Remit

The Committee will be responsible for overseeing and providing assurance to the Board on all matters related to the external audit, internal audit and risk management of the College and provide assurance to the Board that the requirements of the Code of Audit Practice published by Audit Scotland are observed along with all other relevant regulations and legislation. The Committee will have a particular engagement with internal and external audit, financial reporting issues and ~~corporate~~ strategic risk management.

Committee Membership

The Committee membership shall consist of a minimum of four non-executive Board members who shall be independent and objective in terms of their Audit and Risk Committee function and, in line with good practice, will not include either the Principal or the Chair of the Board.

At least one member of the Audit and Risk Committee must have recent relevant financial or audit experience.

Committee members are all recommended to complete the College Development Network online training module College Audit Committees.

The Committee Chair will be appointed by the Board.

Committee membership will be reviewed annually by the Board.

Quorum

50% of the total membership of the Committee will constitute a quorum.

Attendance

The Committee may co-opt additional individuals as appropriate. Details of proposed co-opted individuals will be notified to the Chair of the Board in advance. The role, remit, and term of membership of co-opted individuals will be determined by the Committee.

External and Internal Auditors shall normally attend meetings and will be invited to all meetings.

The Vice Principal - Finance & Infrastructure, and the Chief Financial Controller responsible for Finance, the Assistant Principal of Finance, Student Funding and Estates and where appropriate other staff will be invited to attend meetings of the Committee to provide information and reports as appropriate.

Meetings

The Committee shall normally meet on a quarterly basis but shall meet on a minimum of three occasions per annum.

Any member of the Committee may request to convene additional meetings of the Committee as and when required by giving a minimum of ten working days' notice to the Board Governance Professional to call a meeting.

The Committee Chair will instruct the Board Governance Professional to call meetings of the Committee. The agenda and supporting papers will normally be made available to members at least five working days before the day of the meeting.

The Committee may meet privately without any non-members (with the exception of the Board Governance Professional) for all or part of a meeting if they so decide.

The Committee will normally meet with the external and internal auditors annually without any non-members (with the exception of the Board Governance Professional) being present.

Duties

- 1) Consider and propose strategies within the Committee's overall remit and recommend for approval by the Board of Management
- 2) Reviewing and advising the Board of Management on the effectiveness of the College's financial and other internal control environment.
- 3) Reviewing and advising the Board of Management on corporate governance requirements including the strategic processes for risk, control and governance and the governance statement
- 4) Reviewing and advising the Board of Management on the effectiveness of the College risk management procedures, the presentation of the Ayrshire College Corporate Strategic Risk Register and the maintenance of an appropriate balance between risk and opportunity.
- 5) Appointing the College's Internal Auditors on a contractual basis and agreeing on the terms of reference for an audit service.
- 6) Reviewing the scope and effectiveness of the work of the internal and external auditor using appropriate performance indicators.
- 7) Considering issues raised in audit reports, annual management letter and reporting to the Board of Management on the adequacy of the management response.

- 8) Consider the College's accounting policies, Financial Statements and external auditor's report, including the process for review of the Financial Statements prior to submission for audit, prior to submission to the Board of Management by the Business, Resources, and Infrastructure Committee. Recommending to the Board the adoption of the audited Annual Accounts.
- 9) Agreeing an internal and external audit plan.
- 10) Advising the Board of Management on internal and external value for money reviews which secure the effective use of College resources.
- 11) The Committee will provide the Board with an Annual Report, timed to support finalisation of the accounts and the governance statement, summarising its conclusions from the work it has done during the year.
- 12) Reviewing reported cases of impropriety to establish whether they have been appropriately handled.
- 13) Agree the proposal for tendering for internal audit services or for purchase of non-audit services from contractors who provide audit services.
- 14) Agreeing the Internal Auditors fee and agreeing the External Auditors fee are within the parameters set by Audit Scotland.
- 15) At each meeting receive and consider the **Corporate Strategic** Risk Register and comment accordingly to the Board of Management.
- 16) The consideration and approval of the College Business Continuity Plan on a regular basis.
- 17) Approve the College Counter Fraud, Risk and Bribery Policy and Whistleblowing processes and any arrangements for special investigations.

Authority

The Committee is authorised to investigate any matters which fall within its Terms of Reference.

The Committee is authorised to seek and obtain any information it requires from any senior manager or employee of the College, its advisors or member of the Ayrshire College Board of Management whilst taking account of policy and legal rights and responsibilities.

Reporting Arrangements

At the end of each meeting, the Committee may further decide on the business of the meeting that will be fully published on the College website, should this differ from that recorded on the meeting agenda. Unless otherwise recorded, it would be expected that complete minutes and papers will be published: except where the exclusions listed in paragraph 2.8 of these Standing Orders apply.

Minutes will be kept of the proceedings of the Committee by the Board Governance Professional. These will be circulated, in draft form normally within ten working days to the appropriate senior leadership representatives for checking and then to the Chair

of the Committee for consideration. It is expected that minutes will be checked timeously, and any amendments advised to the Board Governance Professional.

The Chair of the Committee shall report on the work and recommendations of the Committee to the next scheduled Board meeting for information/approval and submit confirmed Committee minutes to the first meeting of the Board immediately following their approval.

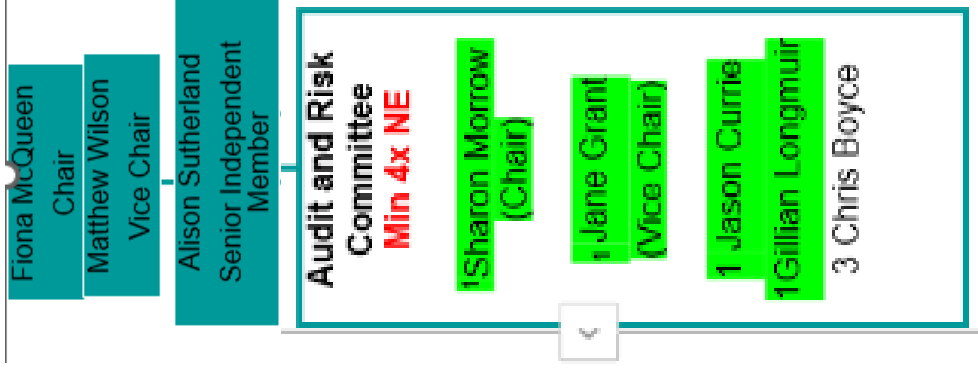
Audit and Risk Committee Work Plan 2024-25

Remit	24 September	10 December	18 March	10 June
Governance / Strategy	Reports to this meeting	Reports to this meeting	Reports to this meeting	Reports to this meeting
	2024-25 Committee Terms of Reference and Work Plan (1)	Meeting between Committee and External Auditors without non-members present (6)	Meeting between Committee and Internal Auditors without non-members present (exception Board Governance Adviser) (6)	
	2023-24 Audit and Risk Committee Annual Report (11)	2023-24 Audit and Risk Committee Annual Report (11)		2024-25 Audit and Risk Committee Draft Annual Report (11)
		Annual review of the effectiveness of Internal Auditor (6)	Annual review of the effectiveness of External Auditor (6)	Review effectiveness of Audit and Risk Committee (3)
		National Fraud Initiative (7 / 9)		2024-25 Financial Compliance Report (3)
		ICT Update including cyber security arrangements		2024-25 Fraud, Risk and Bribery Update Report (17)
				2024-25 SFC Funding Implications (8)
		2023-24 Freedom of Information Annual Report (7 / 9) ¹		
		2023-24 Complaints Annual Report (7 / 9)		
Financial Statements / External Audit	2023-24 External Audit Progress Report (8)	Internal Audit – Wbg (8) 1. 2023-24 Credits Audit Report 2. 2023-24 EMA Report 3. 2023-24 Student Support Funds Report 4. 2023-24 SAAS Report Internal Audit Annual Report (8)		2024-25 External Audit Plan (8 / 14)

¹ Taken from BRIC and put into ARC agenda as seen as better considered here to allow audit plan to be amended if trends or issues identified

Remit	24 September	10 December	18 March	10 June
	Reports to this meeting	Reports to this meeting	Reports to this meeting	Reports to this meeting
		External Audit – Azets (8) 2023-24 Financial Statements: 1. 2023-24 BOM Report & Financial Statements 2. 2023-24 Audit Report to the BOM and Auditor General 3. Letter of Representation		
Internal Audit	2024-25 Internal Audit Plan (2 / 5 / 14)		Draft 2025-26 Internal Audit Plan (2 / 5 / 14)	2025-26 Internal Audit Plan (2 / 5 / 14)
		Internal Audit Reports (2 / 10) *	Internal Audit Reports (2 / 10) *	Internal Audit Reports (2 / 10) *
			Internal Audit Progress Report (6)	Internal Audit Progress Report (6)
	Rolling Action Plan (7)	Rolling Action Plan (7)	Rolling Action Plan (7)	Rolling Action Plan (7)
			Internal Audit Service Contract Renewal (5 / 6 / 13)	
Risk Management	Business Continuity Plan Review (1 / 16)			Review performance relating to risk management (1 / 3)
	Strategic Risk Register (15)	Strategic Risk Register (15)	Strategic Risk Register (15)	Strategic Risk Register (15)

ARC Committee Membership AY 24/25



Index

1 Non-Executive Board Member

2 Elected Member, Student President/Vice President

3 Elected Member, Curriculum Staff

4 Elected Member, Service Staff

5 Principal/CEO – Ex-officio Board Member

6 Co-optee Committee Member

Title of Meeting:	Audit and Risk Committee
Date:	24 September 2024
Subject:	2024-25 Internal Audit Plan
Purpose:	This paper presents the 2024-25 Internal Audit Plan for noting along with the rationale for the selected audit assignments.
Recommendation:	The Audit and Risk Committee is requested to note the finalisation of the 2024-25 Internal Audit Plan.

1 Executive Summary

The Audit and Risk Committee is required to annually agree the Internal Audit Plan for the following year. The 2024-25 Internal Audit Plan was discussed and approved by the June 2024 Committee meeting. The planning dates and responsible staff for the audit assignments required to be confirmed and this has been completed. The final Internal Audit Plan, including the rebranding update, is attached at **Appendix 1** for the Committee's information.

The background to the rationale for selecting the areas to be included in the 2024-25 plan and proposed 2025-26 plan has been included at **Appendix 2**. This is to allow new Committee members to gain an understanding of the reasons for selecting the work proposed.

The Internal Audit Plan will continue to be reviewed during the year and any amendments will be discussed and agreed with the Committee.

Wylie & Bisset LLP were appointed with effect from 1 August 2022 for an initial three-year period to 31 July 2025 with the option to extend this contract by a further two years. The Committee will during 2024-25 will review the effectiveness of the Internal Audit function and consider the option to extend the contract for a further two years.

The prime responsibility of the Internal Audit Service (IAS) is to provide the Board of Management, via the Audit and Risk Committee, with an objective assessment of the adequacy and effectiveness of management's internal control systems. The Internal Auditor objectively examines, evaluates, and reports on the adequacy of internal control thus contributing to the economic, efficient, and effective use of resources and to the reduction of the potential risks faced by the College. Also, the operation and conduct of the Internal Auditor must comply with the standards and guidelines set down by the Chartered Institute of Internal Auditors.



Ayrshire College

Internal Audit Plan 2024/25

August 2024

Table of Contents



Section	Page number
Introduction	3
Operational Plan 2024/25	4
Appendices:	
A. Summary of Internal Audit Input	15
B. Grading Structure	17
C. Key Performance Indicators	18
D. Training Topics	19

Introduction



Background

Wbg Services LLP (Wbg) (formerly Wylie & Bisset LLP) were appointed as Internal Auditors by the College with effect from 1 August 2022 until 31 July 2024 with the option to extend the contract for a further year. The option to extend the contract was taken by the Audit & Risk Committee.

Internal Audit

The prime responsibility of the Internal Audit Service (IAS) is to provide the Audit & Risk Committee, the Principal and other Senior Management of the College, with an objective assessment of the adequacy and effectiveness of management's internal control systems.

The IAS objectively examines, evaluates and reports on the adequacy of internal control thus contributing to the economic, efficient and effective use of resources and to the reduction of the potential risks faced by the College. Also, the operation and conduct of the IAS must comply with the guidelines set down by the Institute of Internal Auditors, the Public Sector Internal Audit Standards and any guidelines issued by the Scottish Funding Council.

Terms of Reference – Internal Audit

The provision of the IAS by Wbg is covered by the letter of engagement dated 16 August 2022.

Preparation of Audit Plan

This Plan was developed following discussions with the Vice Principal Finance and Infrastructure.

Formal Approval

The original Audit Needs Assessment was presented to the Audit & Risk Committee for approval on 13 September 2022. This Plan covers the period 2024/25 and will be presented to the Audit & Risk Committee for approval on 24 September 2024.



Operational Plan

2024/25

Overall Financial Controls



Audit area	High level indicative summary scope	Total number of days
Overall Financial Controls	<p>The purpose of this assignment is to perform a high-level review of the key financial controls in place at the College, to provide assurance that key financial controls are suitably designed and operating effectively. This review will include a review of the processes relating to purchasing, income, cash and banking and fixed assets.</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none">➤ Efficient and effective procedures and controls are in place for key finance processes.➤ Adequate segregation of duties are in place.➤ There is adequate management oversight of finance processes.	4

Payroll Review



Audit area	High level indicative summary scope	Total number of days
Payroll Review	<p>Our review will look at the payroll system at the College to ensure this is operating as expected and that the appropriate controls exist. We will look to ensure that the payments being calculated by the system are accurate and are based on bona fide hours worked and we will also consider all deductions and additions to salaries to ensure that these are correctly calculated and properly authorised.</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none"> ➤ Amendments to the payroll are appropriately reviewed and authorised prior to being processed through the payroll system. ➤ Wages and salaries are accurately stated in the accounting system. ➤ The College has robust processes in place for changes made to employees' bank details. ➤ Staff are only paid for the hours that they have worked. ➤ Leavers are appropriately removed from the system and final payments are accurately pro-rated. ➤ New starts are accurately entered onto the payroll system and are paid appropriately. ➤ The payroll is subject to checking and approval by a senior member of staff prior to being finalised. ➤ Severance packages have been calculated in accordance with the terms of the scheme. ➤ Access to the payroll system is restricted. There are appropriate access rights in place for payroll staff. 	5

Student Recruitment



Audit area	High level indicative summary scope	Total number of days
<p>Student Recruitment</p>	<p>We shall undertake a review of the arrangements in place surrounding student recruitment. Our review will consider the suitability of the arrangements for gaining information in relation to courses, access to support, and course enrolment to ensure that the student experience is effective. We will review the suitability of the policies and procedures in place surrounding student recruitment.</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none"> ➤ The College has robust policies and procedures in place surrounding student recruitment. ➤ The College has robust mechanisms in place with clear links between application, interview, acceptance, and enrolment to ensure it manages student recruitment and enrolment in an efficient and effective manner. ➤ Responsibility for student recruitment is clearly defined throughout the College. ➤ The arrangements in place for gaining information in relation to courses, and access to support is well communicated and easily accessible by potential students. ➤ The College has sufficient, generic as well as targeted marketing campaigns to raise the awareness of its courses, support, and facilities to potential students. ➤ Methods of feedback (for both staff and students) are in place at the College regarding the recruitment process which contribute to the evaluation process. 	6

Staff Recruitment and Retention



Audit area	High level indicative summary scope	Total number of days
<p>Staff Recruitment and Retention</p>	<p>The purpose of this assignment is to review the College's recruitment arrangements and ensure that the College has systems in place to ensure the retention of staff members. We will review the steps taken by the College to ensure that recruitment needs for staff are fully assessed and fulfilled. We will also assess the steps undertaken by the College to ensure staff recruited are retained following their probation period.</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none"> ➤ The arrangements in place within the College for the recruitment of new staff are robust, fit for purpose and in line with current legislation, enabling the College to attract the best candidates for the job and also attract diverse candidates. ➤ Recruitment procedures are robust and as well as ensuring that the most suitable candidate is employed, ensure that a fair and transparent recruitment process is undertaken. ➤ The relevant pre-employment checks (right to work, DBS, references etc.) have been undertaken prior to any new employee commencing their employment at the College. ➤ New employees receive a comprehensive and effective induction on the commencement of their employment at the College, which equips them to be able to do their job. ➤ The College has an appropriate performance management and development process in place to help retain staff following their probation period. ➤ The College has robust processes in place to enhance staff retention. 	5

IT Systems Administration



Audit area	High level indicative summary scope	Total number of days
IT Systems Administration	<p>We will undertake a review of the IT Administration arrangements in place within the College. This will consider the policies and procedures, the roles and responsibilities, the structure of the IT Department and staff resourcing. Our review will consider the procedures for areas such as backups, new starts, leavers, and the treatment of redundant accounts.</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none">➤ There are appropriate policies in place to provide governance and control over the College's IT systems.➤ There are appropriate solutions in place to control access to the College's information systems.➤ The IT Department is appropriately organised in terms of staff resourcing and structure.➤ There are appropriate policies in place for starters, movers, and leavers and that these policies are understood by all relevant staff with the changes communicated and documented.	5

Audit area	High level indicative summary scope	Total number of days
GDPR/FOI	<p>The purpose of this review is to look at how personal data is held and managed within the College to ensure the College are complying with the requirements of the General Data Protection Regulation (GDPR). We will also review the steps in place to ensure compliance with Freedom of Information (FOI).</p> <p>Our objectives for this review are to ensure:</p> <ul style="list-style-type: none">➤ The College is compliant with the legislative guidance of the Freedom of Information Act.➤ The information provided by the College in response to Freedom of Information requests meets the requirements as set out in the Freedom of Information Act.➤ There is sufficient reporting in place with regards to the progress with achieving Freedom of Information compliance.➤ The College is compliant with the General Data Protection Regulation (GDPR).➤ The College has completed actions identified in the action plan in order to ensure compliance.➤ The College has documented plans in place to address any remaining areas of non-compliance.➤ There is sufficient reporting in place with regards to the progress with achieving GDPR compliance.➤ Staff have received appropriate training on GDPR and FOI.	6

Funding Reviews and Follow Up Reviews



Audit area	High level indicative summary scope	Total number of days
EMA	Mandatory review of the Education Maintenance Allowance Return.	4
SSF	Mandatory review of the Student Support Funds Return.	4
Credits	Mandatory review of the Credits Return.	6
Follow Up Review	<p>The purpose of this ongoing review is to assess whether the College has appropriately implemented the internal audit recommendations made in 2023/24 and earlier years. Our review will consider all outstanding recommendations to provide the Audit & Risk Committee with independent assurance that we are satisfied that these recommendations have been fully implemented by the College and can therefore be removed from the rolling audit action plan.</p> <p>Our objective for this review is to ensure that:</p> <ul style="list-style-type: none"> ➤ The College has appropriately implemented any outstanding internal audit recommendations made in prior years. 	4

Assignment Plans & Dates



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.

Key Dates

Visit	Name	No. of audit days	Key college personnel	Provisional start date for visit	Provisional date of issue of draft report	Provisional date for reporting to Audit & Risk Committee
1	Payroll	5	Liz Walker	28 October 2024	15 November 2024	10 December 2024
	GDPR/FOI	6	Alan Ritchie			
2	Student Recruitment	6	Anne Campbell	27 January 2025	14 February 2025	18 March 2025
	Staff Recruitment and Retention	5	Gillian Brown			
3	Overall Financial Controls	4	Liz Walker	22 April 2025	9 May 2025	10 June 2025
	IT Systems Administration	5	Brad Johnstone			



Assignment Plans & Dates

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.

Key Dates

Visit	Name	No. of audit days	Key college personnel	Provisional start date for visit	Provisional date of issue of draft report	Provisional date for reporting to Audit & Risk Committee
4	EMA	4	Louise Park	25 August 2025 & 15 September 2025	26 September 2025	December 2025
	SSF	4	Louise Park			
	Credits	6	Richard Simson			

Appendices

- A – Summary of Internal Audit Input**
- B - Grading Structure**
- C – Key Performance Indicators**
- D – Training Topics**

A – Summary of Internal Audit Input



1 August 2022 to 31 July 2025		Operating Plan (No. Of days)			
System	Audit Area	2022/23	2023/24	2024/25	
Financial Systems	Overall Financial Controls	6	4	4	
	Budgeting and Monitoring		6		
	Payroll				5
	Fraud Awareness	5			
Non-Financial Systems	IT Security		5		
	IT Systems Administration				5
	GDPR/FOI				6
	Estates Management		6		
Governance	Corporate Governance		5		
	Risk Management	5			
Student	Student Recruitment and Retention				6
	Safeguarding and Child Protection	5			
	Student Enrolment Procedures	5			
	Student Retention		5		
	c/f	26	31	26	15

A – Summary of Internal Audit Input



1 August 2022 to 31 July 2025		Operating Plan (No. Of days)			
System	Audit Area	2022/23	2023/24	2024/25	
	b/f	26	31	26	
People	Staff Recruitment and Retention				5
Mandatory	Credits Audit	6	6		6
	SSF Audit	4	4		4
	EMA Audit	4	4		4
Required	Follow Up Review	4	4		4
	Audit Management	6	6		6
	Total Days	<u>50</u>	<u>55</u>		<u>55</u>

B – Grading Structure

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

Assurance	Classification
Strong	Controls satisfactory, no major weaknesses found, some 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

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

Grading	Risk	Classification
High	High Risk	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	Medium Risk	Significant issue or weakness which should be addressed by the College as soon as possible
Low	Low Risk	Minor issue or weakness reported where management may wish to consider our recommendation

C – Key Performance Indicators



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

Performance Indicator		Target
Internal audit days completed in line with agreed timetable and days allocation		100%
Draft scopes provided no later than 10 working days before the internal audit start date and final scopes no later than 5 working days before each start date		100%
Draft reports issued within 10 working days of exit meeting		100%
Management provide responses to draft reports within 15 working days of receipt of draft reports		100%
Final reports issued within 5 working days of receipt of management responses		100%
Recommendations accepted by management		100%
Draft annual internal audit report to be provided by 31 December each year		100%
Attendance at Audit & Risk Committee meetings by a senior member of staff		100%
Suitably experienced staff used on all assignments		100%

D – Training Topics



As a firm we offer a wide range of training topics to our clients and we have listed below some of the topics which we would be able to offer Ayrshire College.

Summary	
Risk Management	This can cover risk awareness, assessment of risks, responsibilities for monitoring risks, risk appetite and the scoring of risks. This is usually done as a workshop to ensure buy-in from management and committee members to the risk management process.
Role of the Board	This would cover the roles and responsibilities of Board members, including the Chair. This has been particularly useful when new Board members have been appointed and allows members to obtain some knowledge on what the expectation of a Board member is and what they should be looking out for.
Role of Internal Audit	We would provide a short session on what the internal audit function should be delivering to the College and the added value which we would bring.
Finance for Non-Financials	This is useful for committee members who do not have a finance background and covers areas such as the management accounts, budget reporting and the statutory accounts.
Fraud Awareness	We would cover the importance of having a strong control environment and areas to be aware of in relation to fraud. We would discuss some real-life examples of where we have identified or been asked to investigate allegations of fraud and the results of these investigations.

Audit Needs Assessment (ANA)

The ANA is split into sections and a commentary on the 2024-25 assignments is noted below:

Financial Systems

- Overall Financial Controls / Health Check
 - Given the high-risk rating in this area, the College will annually review a specific aspect of the financial control environment.
- Review of Financial Regulations
 - The College would propose to undertake a specific financial control review of the Financial Regulations in 2025-26 to ensure that they are compliant with the SFC Financial Memorandum / Scottish Public Finance Manual.
- Procurement and Tendering
 - College will be subject to a review of procurement and tendering during 2024 by APUC. Results of this review will be fed back to the Committee. No further assurance felt to be necessary.
- Alternative / Non-SFC Funding Sources
 - This area is subject to a current staff structure review and will be reviewed in 2025-26 to allow for the new structure to embed itself into College operations.
- Treasury & Cash Management
 - The College has no control over who it banks with and is required to only hold cash as needed. No impact of a review being undertaken and to be removed from the Audit Needs Assessment.
- Payroll Review
 - Given the high-risk rating and that payroll is circa 70% of the College expenditure this function will be subject to a review in 2024-25.

Non-Financial Systems

- The overall area is rated as medium to low risk with the highest risk areas being internal and external communications.
- The College will undertake a review of the effectiveness of its external communications in 2025-26 as the College website is subject to renewal in the summer of 2024.

Strategy

- Potential areas for review are noted and can be considered should the Committee feel there is a material risk to the achievement of the College strategic objectives in these areas.
- The College has undertaken to draft an updated Infrastructure Strategy by the end of 2024. To allow time for the revised strategy to become embedded into College operations it is proposed to undertake a review in 2025-26
- IT Strategy is a high-risk area for the College. The College believes that the assurance provided through the 2023 work of the external auditors (see Rolling Audit Action Plan for update) and the audit assignments highlighted in the IT Systems section below, provides sufficient assurance that the risks in this area are being addressed.

Student

- It would be anticipated that student related activities are the subject of at least one audit assignment per year and student recruitment is scheduled for review in 2024-25
- It would be proposed that either student voice or student support is reviewed in 2025-26 although it may be that another area becomes more relevant, and the work plan can be adjusted accordingly.

People

- Much like student activity, it would be anticipated that staff related activities are the subject of at least one audit assignment per year. The original 2024-25 plan had 5 days allocated to Human Resources.
- The College would propose using the 5 days to review staff recruitment and retention procedures. Continuing Professional Development is the subject of a staff development project which will lead to a review and refresh of the current process. This area could be reviewed in 2025-26

IT Systems

- The College is currently undertaking a significant amount of work to enhance its IT infrastructure and architecture through several transformation projects. The IT controls are also subject to review as part of the external audit process and reported upon annually.

Paper 5 (2) – Internal Audit Plan Audit Needs Assessment

- Given the medium risk level associated with IT Systems it is proposed that an IT Systems Administration review is undertaken in 2024-25 with Cyber Incident Response Planning being reviewed in 2025-26
- There is likely to be a degree of overlap in terms of the work that the external auditors have undertaken, and the work currently being undertaken regarding IT Security. The College will discuss the outcomes from the current work and whether the IT Systems Administration review will provide further assurance.

Governance

- Business Continuity and Disaster Recovery will be subject to a separate audit / scenario exercise to be undertaken by the College insurance provider. They are experts in this field and will report back on the current College BCP arrangements.
- Work will now be undertaken to review both GDPR and Freedom of Information policies and procedures.

Funding and Required

- These are set days to undertaken statutory audits and the management of the internal audit contract.

Paper 5 (2) – Internal Audit Plan Audit Needs Assessment

System	Primary Strategic Risk	Residual Risk	Audit Area	Internal Audit Plan				
				2021-22 Actual	2022-23 Actual	2023-24 Actual	2024-25 Planned	2025-26 Planned
Financial Systems	SR001-Operational Pressures	20	Overall Financial Controls / Health Check		6	4	4	
	SR001-Operational Pressures	20	Review of Financial Regulations					5
	SR001-Operational Pressures	20	Budget and Monitoring			6		
	SR001-Operational Pressures	20	Procurement and Tendering ⁱ	5				
	SR001-Operational Pressures	20	Alternative / Non-SFC Funding Sources					5
	SR001-Operational Pressures	20	Treasury & Cash Management ⁱⁱ					
	SR003 – Job Evaluation	16	Payroll Review				5	
Non-Financial System								
	SR005 – People and Culture	12	Fraud Awareness		5			
	N/a		Covid-19 Health and Safety	5				
	SR005 – People and Culture	12	Project Management					
	SR005 – People and Culture	12	Complaints Handling	5				

Paper 5 (2) – Internal Audit Plan Audit Needs Assessment

System	Primary Strategic Risk	Residual Risk	Audit Area	Internal Audit Plan				
				2021-22 Actual	2022-23 Actual	2023-24 Actual	2024-25 Planned	2025-26 Planned
	SR007 – Curriculum Offer	9	Marketing	5				
	SR005 – People and Culture	12	External Comms – Website					5
	SR005 – People and Culture	12	Internal Comms - Intranet					
	N/a		Assurance Mapping					
Strategy								
	SR005 – People and Culture	12	Digital Strategy					
	SR005 – People and Culture	12	Curriculum Strategy					
	SR006 – Climate Change	12	Sustainability Strategy					
	SR002 – Investing in College Estate	16	Estates Strategy					5
	SR004 – Data Security	16	IT Strategy					
	SR005 – People and Culture	12	People Strategy					
	SR005 – People and Culture	12	Communications and Marketing Strategy					
Student								
	SR007 – Curriculum Offer	9	Curriculum Planning & Timetabling					

Paper 5 (2) – Internal Audit Plan Audit Needs Assessment

System	Primary Strategic Risk	Residual Risk	Audit Area	Internal Audit Plan				
				2021-22 Actual	2022-23 Actual	2023-24 Actual	2024-25 Planned	2025-26 Planned
	SR007 – Curriculum Offer	9	Student Voice	5				5
	SR007 – Curriculum Offer	9	Student Retention			5		
	SR007 – Curriculum Offer	9	Student Recruitment				6	
	SR007 – Curriculum Offer	9	Student Enrolment Procedures		5			
	SR005 – People and Culture	12	Safeguarding and Child Protection		5			
	SR007 – Curriculum Offer	9	Student Support	5				
People								
	SR005 – People and Culture	12	Continuing Professional Development					
	SR008 – Recruitment and Retention	9	Succession Planning					
	SR008 – Recruitment and Retention	9	Staff Recruitment and Retention				5	
	SR005 – People and Culture	12	Sickness and Absence Reporting					
IT Systems								
	SR004 – Data Security	16	IT Systems Administration				5	
	SR004 – Data Security	16	Response to IT Incident					5

Paper 5 (2) – Internal Audit Plan Audit Needs Assessment

System	Primary Strategic Risk	Residual Risk	Audit Area	Internal Audit Plan				
				2021-22 Actual	2022-23 Actual	2023-24 Actual	2024-25 Planned	2025-26 Planned
Required	N/a		Follow Up	5	4	4	4	4
	N/a		Audit Management	7	6	6	6	6
Total Days				50	50	55	55	55

i Procurement will be subject to an audit by APUC during 2024 with the outcome being feedback to the Committee.
 ii The College is required to comply with the SPFM banking regulation which requires limited cash holding and no investments. No requirement to audit College treasury management practices.

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

Date: **24 September 2024**

Title: **Business Continuity Plan**

Purpose: To present to the Audit and Risk Committee the updated Business Continuity Plan for review, discussion and approval.

Recommendation: The Committee are asked to approve the College's Business Continuity Plan.

1. Executive Summary

During 2023-24 the College has looked to streamline the overall business continuity planning process and documentation. It has created a Teams site for ease of access, refined the Business Continuity Plan (BCP) and introduced a training plan. It will be engaging with the College insurers during the year to gain an external perspective on how the College is likely to address any major incident.

2. Associated Risks

The BCP addresses several key risks which the College may face, including for example denial of access and loss of computer records and data. The BCP aims to address these risks through a structure approach to any incident.

There are no further risks identified in this paper.

3. Equality and Diversity Impact Assessment

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

4. Publication

This paper will be published on the College website.

Alan Ritchie
Vice Principal Finance and Infrastructure
24 September 2024

1. **Background**

Business Continuity is seen as the activities required to maintain and recover College operational effectiveness against threats or events which, if realised, may materialise as incidents and ultimately escalate into a full-scale emergency or crisis.

A Business Continuity Plan (BCP) is required to guide actions and responses in a structured manner in the event of a sudden or unseen event that could seriously disrupt College operations and impair its ability to operate services efficiently and effectively.

The College developed its first Business Continuity Plan in November 2014. The most recent BCP was approved by the Audit Committee in March 2022.

2. **Current Situation**

During 2023-24 the College has refocused the Business Continuity Plan Steering Group to include several key staff namely estates, ICT and Health, Safety and Welfare. The Group met on a quarterly basis to review and consider any business continuity events that have taken place and to assess the College's response to the event

The purpose of the Group is to:

- Ensure the College's BCP is monitored and up to date.
- Update the BCP, where relevant, after each meeting.
- Conduct a full formal review of the BCP on an annual basis.
- Oversee the testing of the BCP arrangements.

The Audit and Risk Committee's Terms of Reference state that the Business Continuity Plan will be approved annually.

During 2023-24 the College has undertaken several other changes to the BCP processes including:

- The previous BCP has been fully reviewed and streamlined to remove items which can be stored separately, resulting in a smaller document.
- The creation of a Teams site which allows real time access to current BCP documents including:
 - Business Continuity Plan
 - Insurance arrangements
 - IT Disaster Recovery and Incident Response Plan
 - Information on BCP
 - Training materials

- The Teams site is available to all previous members of the BCP Steering Group, Senior Leadership Team, all Heads and relevant Managers across the College.
- Enlisted the assistance of the College insurers to undertake several training sessions during the year. This will allow the College to gain from an external perspective in relation to how it would intend to respond to an incident. This service is provided as part of the College insurance arrangements.
- Established a programme of desk top exercises with College staff who may be called upon to oversee a BCP incident. The College will over the course of 2024-25 ensure that all senior staff are involved in one or more exercises.
- The College plays an active part in the Local Resilience Committee which includes local authorities and blue light services. This allows the College to access wider resources should it be involved in a major incident.

At **Appendix 1** is a copy of the Business Continuity Plan for review, consideration and approval.

Business Continuity Plan

Version: V1

Date: August 2024

Owner: Vice Principal Finance and Infrastructure

Contents

1. Introduction	4
2. Scope.....	4
4. Activation of BCP - Who to contact	5
5. Incident Management Hierarchy	7
Incident Management Team (IMT)	7
6. Command Centres.....	8
7. Recording and Monitoring	9
8. Investigation and Analysis.....	10
9. Communications	10
Emergency Communications	10
Communication to Staff / Unions.....	11
10. Closure Protocol.....	11
11. Loss of Premises.....	13
12. Loss of IT	13
13. In the Event of a Fire.....	13
14. Other Issues including Staffing.....	13
Appendix A – Critical Incident Log Sheet.....	15
Appendix B –Enquiry Log	16
Appendix C – Plan Test / Exercise Log	17
Appendix D – Incident Assessment Checklist.....	18
Appendix E – Business Continuity Plan for a Fire	20

Version Control

Version	Modified on	Modified by	Details

Updated versions of Business Continuity Plan will be issued on the Teams site and a note sent out to all Team members that an updated version is available.

1. Introduction

- 1.1 The purpose of the Business Continuity Plan (BCP) is to assist the College to prepare and respond to incidents that could cause significant disruptions to normal activities. To keep the BCP up to date and relevant, it will be reviewed annually or following any critical incident; any significant changes to the hardware and critical systems covered in the BCP; or following any significant changes to our organisational structure or processes. When changes are made an updated version of BCP will be made available on the Teams site and a notification sent to all members of the Team. Access to the Teams site will be limited to those members of staff who require to access the information and it will not be publicly available.
- 1.2 The BCP will be held securely as follows:
- An online copy in the [Business Continuity Teams](#) site
 - A printed copy will be held in the battle boxes at each of the following locations:
 - Kilmarnock – Estates Office
 - Kilwinning – Bellrock Office
 - Ayr – Estates Office
- 1.3 An up-to-date contact list for key stakeholders or organisations that may be involved in any incidents which includes staff, internal and external stakeholders, suppliers, and emergency services will also be included within the Teams site ([Business Continuity Key Contact List](#)).
- 1.4 The BCP is the main reference document for use following a major incident. It sets out the generic response to any incident. In addition to the College main BCP, further BCPs maybe developed to address specific scenarios.

2. Scope

- 2.1 The BCP sets out how the College will respond to incidents causing significant disruptions to normal operations. The BCP is not supposed to cover every possible disruption. It is written to establish clear roles and responsibilities that will allow the management of the College to respond quickly and effectively to significant disruptions. The BCP applies to incidents happening at any College site. It may also have to be used following incidents off site that involve College students or staff.
- 2.2 The BCP is not intended to cover day to day operational disruptions that managers deal with regularly. It is to be used when there could be significant effect on operations, students, staff, the environment and the reputation of the College, but to address potential risks identified during the risk analysis stage.

3. Definition of an Incident

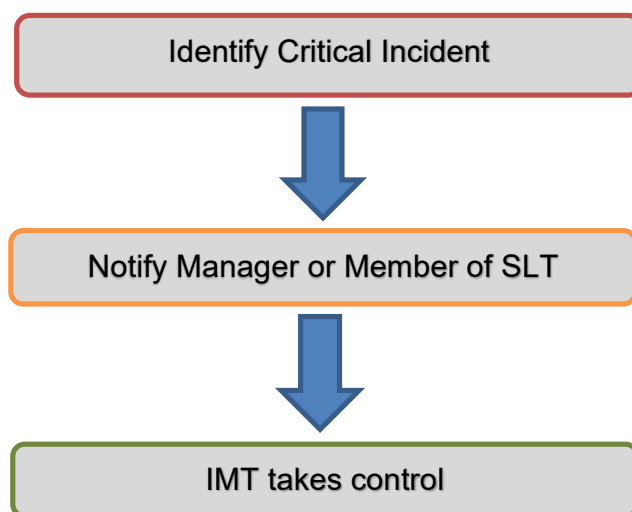
3.1 Incidents are events that have the potential to cause significant disruption to normal operations. The following list is not exhaustive, however there is an expectation a member of the **Incident Management Team (IMT)** would be notified and then decide if the BCP should be invoked:

- Any incident that would cause a closure of any College site for one working day or more e.g. extreme weather, fire, flood or loss of utilities or too few staff available to continue operations
- Loss of access or damage to a critical room within a building likely to cause 1 day or more disruption to business as usual. Critical rooms could include catering facilities, Plant room, data centres or specialist teaching facilities
- Any incident that has or could result in a reportable incident under RIDDOR (Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations) or that could trigger a Health & Safety Executive investigation
- Any violent incident, or threat of violence, involving staff or students
- Any threat (terrorist or otherwise) made against the College
- Any incident that requires emergency services to be called to a College site
- Any violent incident involving a member of the public, contractor or visitor on a College site
- Where there is a risk of personal harm or danger
- Any incident that could have a significant reputational impact, e.g. a negative story in a local paper

4. Activation of BCP - Who to contact

4.1 A manager may become aware of a potential incident which has a possibility of becoming a material or significant incident. In such a case the manager should inform a member of the **Senior Leadership Team (SLT)** as soon as possible. An outline of the incident should be provided, and that the manager will continue to investigate the matter and report back to the SLT member. It possible a timescale should be established to ensure that the matter is not discarded. This is a precautionary stage which will allow the SLT member to put on notice the IMT members that they may be required. This precautionary stage should be conducted by phone rather than email to ensure that the message has been received. Instant messaging can be used if unable to make contact by phone and only by email as a last resort.

- 4.2 As soon as a critical incident has been identified, the member of staff must notify their line manager. The line manager will contact a member of the **Senior Leadership Team (SLT)**. If the line manager is not available, then contact the nearest manager or a member of the SLT.
- 4.3 For contact details of all relevant staff / stakeholders please see Teams site – [Business Continuity Key Contact List](#).
- 4.4 The College maintains an Executive Leadership Team and Senior Leadership Team WhatsApp groups which should be used to inform either the ELT or SLT of a critical incident. The members of these WhatsApp Groups will be reviewed at least annually in line with the requirement to review the overall Business Continuity Plan. The use of WhatsApp should be limited to general information and not specific data / critical information. Where specific information needs to be shared the Business Continuity Teams site should be used for this purpose.
- 4.5 Once notified of a critical incident, the SLT / Manager will pull together the **Incident Management Team (IMT)** led by a Vice Principal (VP) who will assume lead responsibility. Where the VP is unavailable when an incident takes place, another member of the SLT will assume the authority to make any decisions required. Staff will be co-opted onto the IMT depending on the nature of the incident.



- 4.6 The decision to activate this Plan will normally be made by a member of the College Senior Leadership Team.
- 4.7 The member of staff who is activating the BCP should take charge of ensuring that all members of the IMT are contacted. The information to be conveyed to the members should include:
- Cause of the incident
 - Time, location, and nature of the incident
 - What actions are required next

- 4.8 Outside of core hours the Estates Call-Out Procedure will be followed until a member of the IMT is alerted to the incident. If the incident can be dealt with by the Estates Team, it will be closed off. However, should this not be the case, the Estates Team will contact the relevant member of staff and the BCP will be activated as required.

5. Incident Management Hierarchy

Incident Management Team (IMT)

- 5.1 The IMT is responsible for incidents. The primary role of the IMT is:

- To assess the situation by gathering information from as many sources as possible
- Agree an Action Plan to protect human life, the environment, the College's assets and the reputation of the College
- Communicate with key (internal and external) stakeholders throughout, including both teaching and support staff unions
- Review progress throughout any disruption and take appropriate decisions to get back to normal operations
- Ensure lessons are learned following any incidents to prevent future losses or be better prepared to cope if they do happen.

- 5.2 The IMT is made up of 'core' and 'non-core' team members.

Core Incident Management Team members:

- Vice Principal (IMT Leader)
- PA to Executive
- Head of Health, Safety & Wellbeing
- Estate Manager
- Head of ICT Services
- Head of HR Services
- Marketing Manager

Additional Team Members as required:

- Assistant Principals
- Head of Financial Services
- Head of Student Funding

- 5.3 It is expected all members of the core team (or their deputies) will be involved in the response to most incidents. Non-core team members may be asked to join the IMT depending on the circumstances, for example if specialist operational or technical advice is needed. All team members have a nominated deputy. Some deputies will be asked to join the IMT while others may be consulted or asked to provide technical or operational advice in the absence of the primary IMT member.

6. Command Centres

6.1 The IMT require a room to meet and manage the response to the incident from the most appropriate command centre. Each command centre should provide the following:

- Access to the College ICT networks
- Access to at least one non-VOIP phone line
- Space for all members of the IMT to get around a table
- Whiteboards or flipcharts for note taking

6.2 Command centre locations are as follows, although will be subject to change regarding the circumstances of the incident:

Pan-Ayrshire

- Ayrshire Civil Contingencies Team
 - Telephone: 0300 123 0900
 - 24 hour emergency helpline: 0345 724 0000
 - Email: acct@south-ayrshire.gov.uk

Kilmarnock

Room in the building

- Partnership Centre

Alternative location away from building i.e. fire and no access

- Halo
 - Hill Street, Kilmarnock KA1 3HY
 - Scott Darroch, Building Manager
Mobile number: 07432 219540
- Park Hotel
 - 2 Dundonald Place, Kilmarnock KA1 1UR
Telephone number: 01563 545999

Kilwinning

Room in the building

- Partnership Centre

Alternative location away from building i.e. fire and no access

- Kilwinning Academy
 - Dalry Road, Kilwinning KA13 7HD
 - Mr Tim Swan, Head Teacher
Telephone number: 01294 551316

If access is required during hours of 17:00 and 21:00

- KA Leisure require to be contacted
Telephone number: 01294 208360

- Kilwinning Library (Monday - Friday 09:00 to 17:00)
 - St Winning's Lane, Kilwinning KA13 6EP
 - Telephone number: 01294 554699
- ACES (Ayrshire Community Education & Sports) Woodwynd
 - 50 David Gage Street, Kilwinning KA13 7EF
 - Colin Young,
 - Telephone number: 07411 118135 or 01294 285282
 - Email: colin95@sky.com

Ayr

Room in the building

- G93, Dam Park Building

Alternative location away from building (i.e. fire and no access)

- University of the West of Scotland, Ayr Campus
 - University Avenue, Ayr KA8 0SX
 - Jacqueline Thomson, Head of Risk and Resilience
 - Telephone number: 07808 735844
 - Email: jacqueline.thomson@uws.ac.uk
 - Security office telephone number: 01292 886211
- Western House Hotel
 - 66 Craigie Road, Ayr KA8 0HA
 - Telephone number: 01292 264179

7. Recording and Monitoring

- 7.1 It will be essential to keep a log of actions taken and by whom to report on what happened, what was done and the results and outcomes of a critical incident. The [Critical Incident Log Sheet](#) should be used for this purpose and should be managed by a delegated member of the IMT (See Appendix A for an example of the format to be used).
- 7.2 Other formats of incident logging may be more appropriate and will depend on the circumstances – use of a whiteboard (remember to take photograph of content before wiping clear), Teams tasks can be used, Outlook tasks can also be used. The aim is to ensure that a log of actions taken, and resolutions is maintained for future reference. The incident log will be used for insurance purposes or may be required for follow up investigations.
- 7.3 A member of the IMT should be delegated to be the central point of contact for all enquiries. These enquiries should be recorded on an [Enquiry Log](#) (see Appendix B for an example of the format to be used). As the enquires are addressed they should be scored through but not deleted. This will allow any member of the IMT to pick up the Enquiry Log and continue to deal with enquiries in the absence of the delegated IMT member.

8. Investigation and Analysis

8.1 Following the [Recording and Monitoring](#) process, the Critical Incident Log (Appendix A) will form the basis of the investigation and analysis after any critical event, together with the [Incident Assessment Checklist](#). Any investigation should enable us to understand:

- What caused the incident
- Could the incident have been prevented
- Were there any underlying failures in health and safety management
- What lessons have been learned – is there anything we need to do differently?
- What actions are required to prevent or minimise a recurrence

8.2 One of the main benefits of investigating, analysing and reporting on an incident is to contribute to the corporate knowledge held by an organisation. It is therefore important that this information be discussed and shared with staff as deemed appropriate by the IMT.

9. Communications

Emergency Communications

9.1 In the event of an emergency, the Vice Principal - People, Performance and Transformation and/or the Marketing Manager should be contacted at the earliest opportunity to allow them to assess the scale and nature of possible media interest and to decide upon an appropriate response, if it is judged that a response is required.

9.2 The College has developed a [Crisis Communication Plan](#) which can be found on the Business Continuity Teams site. The manual is design to support the containment and subsequent recovery from a serious reputational issue. The manual provides practical guidance on how to assess an incident and what the potential response could be. It is advised that all staff involved in the business continuity process make themselves familiar with the contents of the manual in advance of any incident.

9.3 It is important that any response the College may choose to give is informed by all the available information and by a judgement as to what is in the best interests of the College's staff and students. Therefore, in no circumstances should any member of staff offer comment on behalf of the College to any media outlet without first liaising with the Communications Directorate. For similar reasons, all media requests for comment and broadcast interviews (live or pre-recorded) must be directed to the Communications Directorate.

9.4 Should the College choose to respond to media requests it will do so in the name of the Principal or a "College spokesperson". In the event of the Principal being unavailable, comment will be issued in the name of one of the three Vice Principals, with their prior consent. Comment will usually be issued to media outlets via email and, if practical, on the College's social media platforms.

- 9.5 Should the College accept requests for broadcast interviews, these will be conducted, whenever possible, by the Principal. In the event of the Principal being unavailable and depending on the emergency and the nature of the interview requested, the Vice Principals will decide who among themselves should conduct the interview.

Communication to Staff / Unions

- 9.6 Make sure regular updates are provided to staff and unions about the incident and how they should deal with it:
- Information will be disseminated from the IMT to all staff. This will be via a communication tree process, whereby the message is handed down from SLT level to manager level and so on.
 - The IMT should also consider at which point to inform the unions of the incident. It is likely that staff will directly approach their union representatives in the case of an incident. By keeping the unions informed this will assist in ensuring that any messaging is communicated effectively.
 - The data in the communication tree must be revised following any changes to staffing and must be accessible to all staff taking responsibility for passing on the communication.
 - The primary information channel used to communicate will depend on the issue being experienced.
 - Some communication may be required across the organisational structure. All members of SLT should therefore hold each other's emergency contact details.
 - The IMT will decide who should know what about the incident and when they should know about the incident.
 - The IMT will specify to staff what message is to go out to external stakeholders.
 - All enquiries coming in and out from the main contact phonenumber / email address should be recorded on an [Enquiry Log](#)

10. Closure Protocol

- 10.1 Decision to close any campus or the whole College must be taken by Principal and/or VP and only in exceptional circumstances will the decision to close be taken by member of SLT.
- 10.2 If decision to close a main campus is taken consideration should be given to whether the closure of local satellite sites is also merited i.e. if weather related incident occurs.
- 10.3 The College holds detailed closure plans on the MS Teams site for the following incidents:
- Significant incident (such as pandemic or flu outbreak)
 - Severe weather

10.4 Decision will be taken on advice of:

- Local Authorities who will potentially close schools and other local services
- Ready Scotland

<https://twitter.com/readyscotland>

<http://readyscotland.org/>

- Advice from Met Office

<http://www.metoffice.gov.uk/public/weather/warnings/#?tab=warnings&map=Warnings&zoom=5&lon=-3.50&lat=55.50&fcTime=1422403200>

- Local staff who are present at the campus

10.4 Based on review of above information by the IMT Leader, the decision to close will be taken by Principal / VP as early as possible.

10.5 In terms of communicating closure the following will be initiated by stated staff member or by deputy. Communication to all staff to include as a minimum whole / partial closure, reason for the closure, anticipated length of the closure, to refer to website and social media for updates:

- Communication to Principal – IMT Leader
- Communication to VP – IMT Leader
- Communication to APs / Directors – VP with direct line management responsibility
- Communication to immediate managers to inform them of closure – AP / Director
- College telephone outgoing message to be updated – Head of ICT Services
- Student (in order of priority)
 - 1) My Ayrshire App – Marketing Manager
 - 2) Website, College intranet, Facebook and X – Marketing Manager
 - 3) Student email – Marketing Manager
 - 4) Text message to students – Head of Business Intelligence and Information Systems / Head of ICT Services
- Staff (in order of priority)
 - Website, College intranet, social media (Facebook, X) – Marketing Manager
 - Staff email – Marketing Manager
 - Text message to students – Head of Business Intelligence and Information Systems / Head of ICT Services
- Media – Principal, Vice Principal, Marketing Manager

11. Loss of Premises

- 11.1 In the event of loss of one or more of our premises, where possible activity should be moved to other campuses, if this is not possible then external stakeholders must be contacted to arrange alternative temporary accommodation or remote learning is initiated.

12. Loss of IT

- 12.1 Please refer to the Vice Principal Finance and Infrastructure for the [Cyber Incident Response Plan](#) (CIRP) to be implemented. The CIRP is held on the Business Continuity Teams site and is available to permitted staff.

13. In the Event of a Fire

- 13.1 In the event of a fire or similar event the [Fire and Emergency Evacuation Procedure](#) should be followed. Staff with responsibility for addressing BC incidents should make themselves familiar with this procedure along with the technical guidance and no fire alarm procedure.
- 13.2 [Appendix E](#) provides a high-level summary of actions to be considered by the IMT Leader.

14. Other Issues including Staffing

Outbreak of Disease (e.g., influenza pandemic)

- An influenza pandemic or similar occurrence may jeopardise staffing levels, directly through staff illness, or indirectly through fear of infection or through caring responsibilities for sick relatives. It is essential information is disseminated about how to identify symptoms of flu and what to do in the event of a member of staff becoming ill with suspected flu.
- In the event of a pandemic, any staff infected by the virus must remain off work to minimise spread. Staff who display symptoms should be sent home and advised not to return to work until they have fully recovered.
- IMT should identify the key functions of the College that must continue and establish if there are any departments with key person dependencies.
- From the business impact assessments, the IMT will be able to identify at what stage the staffing level is critical and how this differs departmentally/per key function depending on the time of year. This is particularly relevant for smaller departments where very few staff absences could mean the loss of a function.
- It must be recognised that it may be necessary to limit annual leave to sustain services.

- The IMT should prioritise keeping critical systems operating so that our online facilities continue to function for our stakeholders.

Industrial Action

As far as possible, without attempting to influence staff members' legal right to take industrial action, managers should try to estimate the proportion of staff that may be available to work in order to plan work in accordance with priorities.

Severe Weather

The College takes the safety of its employees very seriously and would not expect anyone to make the journey into work if this is likely to put them in any danger. Employees are however required to consider any reasonable alternatives to their normal method of transport (e.g., taking a train or bus instead of a private car) before making the decision not to come in.

If weather conditions deteriorate during the working day, and it appears that employees could have difficulty in travelling home the Principal or any other member of the Executive may decide to close the campus / College early to ensure employees are able to get home safely.

Bomb Threat

Although generally rare, there is always the possibility that the College will receive a bomb threat.

The College has developed this protocol to provide staff with support and guidance on how to respond to emergencies of this nature - [Bomb Threat Protocol](#)

IMT members should familiarise themselves with this protocol.

When a bomb threat is received Police Scotland must be contacted in the first instance and other emergency services as deemed necessary. Advice will be taken from Police Scotland and other emergency services on the actions necessary to safeguard students, staff and visitors.

Appendix A – Critical Incident Log Sheet

Date	Time	Critical Incident description	Action Taken and by whom	Outcome	Incident closure time

Appendix C – Plan Test / Exercise Log

Date of test	Nature / description of exercise	Person responsible	Other personnel involved	Learning points of exercise	Action required (including date and person responsible)

Appendix D – Incident Assessment Checklist

The checklist is designed to be used following a major incident. Not all information will be known in the early stages. The checklist should therefore prompt the IMT to revisit what is known and what needs further investigation throughout the incident.

Questions	Response
<p>What is known about the Incident? Emergency services alerted? Has the site evacuated fully? Type of incident, e.g., fire, ICT failure etc. No. of injuries and deaths confirmed Who reported it, when and how?</p>	
<p>Is there likely to be any external organisations involved? Emergency Services HSE</p>	
<p>Have lines of communication been opened with them? Please note name & number of the contact</p>	

Questions	Response
<p>What is the impact (or anticipated impact) on normal operations? Sites or buildings affected? Consider satellite buildings in any decision process 3rd parties who use College facilities or are adjacent to College sites? Are there any special events taking place or coming up? Is this likely to disrupt a full day of 'normal' operations?</p>	
<p>Do you have any concerns about staff or student welfare resulting from the incident?</p>	
<p>Has the IMT been notified? Do all team members need to be involved? Are there any team members unavailable?</p>	

Questions	Response
<p>Is there likely to be media interest in the incident? If so ensure that the following are informed: Director of Communication, Engagement, and Student Experience Principal Chair of the Board of Management</p>	
<p>What are functional departments doing about the incident? Support departments: Estates IT Catering Student support/Funding Marketing /Communications HR MIS Finance</p>	
<p>Consider invoking the Incident Management Plan.</p>	

Appendix E – Business Continuity Plan for a Fire

No	Actions	Notes	Priority / Timing	Accountability	Complete
1	Initiate Fire Evacuation Plan		High	Evacuation Controller	
2	Hand over site to fire brigade		High	Evacuation Controller	
3	Convene IMT at appropriate command centre location		High	IMT Leader	
4	Activate Incident Management Plan		High	IMT Leader	
5	Contact Executive to advise		High	IMT Leader	
6	Assign staff member to consult with Fire Brigade		High	IMT Leader	
7	Make assessment of likely duration of incidents and impact on operation		High	IMT Leader	
8	Decide if staff and occupiers should remain on site or be sent home		High	IMT Leader	
9	Identify key internal stakeholders		High	IMT Leader	
10	Draft communication to staff		High	Marketing	