MEETING OF ARGYLL COLLEGE BOARD OF GOVERNORS

Friday, 15th March 2019 1pm to 4pm

Lunch available from 12.30 VC Code 54934

A G E N D A
To be held in Room LO7 at the Lorne St Centre, Lochgilphead

'For information' items will be taken as read, unless a governor wishes to raise a specific issue arising from these papers.

ITEM	SUBJECT	STATUS	
19.1.1	Welcome and apologies		
19.1.2	Declarations of Interest		
19.1.3	Minutes of previous meeting: 14th December 2018	To approve	Attached
19.1.4	**Matters arising** (*not covered elsewhere in agenda*) **i)** Nursery Care Inspectorate visit **ii)** Board secretary update **iii)** Update on Helensburgh **iv)** Audit Chair's report update **v)** UHI Programme Board **vi)** DYW update	To note To note To note To note To discuss To note	Oral report Oral report Oral report Oral report Attached Oral report
19.1.5	**Chair's Report**: **Overview of activity and key issues**	To note	Oral report
	RESOURCES		
19.1.6	**Draft Finance & General Purposes Committee minute of 1 March 2019**	To approve	Attached
19.1.7	**Management accounts for period to end of Jan 2019**	To note	Attached
19.1.8	**NRPA** **i)** **Issues paper** **ii)** **Letter from SFC**	For discussion To note	Attached Attached
19.1.9	**Draft Audit Committee minute of 1 March 2019**	To approve	Attached

19.1.10	**Draft tender for internal audit 2019-2021**	To note	Attached
19.1.11	**Health And Safety** (standing item) : H&S issues	For information	Oral Report
	STRATEGY AND PERFORMANCE		
19.1.12	**Principal's Report for period ended 31 January 2019**	For consideration	Tabled
19.1.13	**Minutes of Learning, Teaching & Engagement committee held on 1 March 2019**	To approve	Attached
19.1.14	**Update on How Good is Our College Evaluative Report and Enhancement Plan**	To note	Oral report
19.1.15	**FE KPIs 2017/18 comparison with rest of college sector**	To note	Attached
19.1.16	**Early and further withdrawal for full time FE courses to date 2018/19**	To note	Attached
19.1.17	**Update on progress towards targets – 2018/19**	To note	Attached
19.1.18	**HE FTE predictions 2019/20**	For information	Attached
19.1.19	**Student surveys** a) **UHI region Early Student Experience survey (ESES)** b) **National Student Survey (NSS)** c) **SFC student satisfaction and engagement survey (SSES)** d) **College Leaver Destination survey**	To note	Attached
19.1.20	**Risk Register**	For consideration	Link To follow
	PEOPLE		
19.1.21	**Draft minutes of HR&Re committee meeting of 1 March 2019**	To note	Attached
19.1.22	**Summary of Recruitment and HR in last quarter**	To note	Attached

	BOARD GOVERNANCE AND DEVELOPMENT		

19.1.23	**Any other business**
	    i) Nursery Infection Control Policy
	    ii) Nursery Medication Policy
	    iii) Anti-Bribery policy
		To note
		To note
		To note
			Attached
			Attached
			Attached

19.1.24	**Date of next meeting – 7th June 2019 at 1pm**		

MINUTES OF MEETING OF ARGYLL COLLEGE BOARD
Held on Friday 14 December at 1 pm
at the Oban campus and by VC

Present: Andrew Campbell (AMC) Chair, Martin Jones (MJ), John Colston (JC) Vice Chair, Ken Jones (KJ), Stella Leitch (SL), Scott Matheson (SM), Jim Findlay (JF), Gillian McCready (GMC), Lesley McInnes (LMI), Amber Crowley (AC), Jennifer Swanson (JS), Laura Hogg (LH) by VC until 2pm

Apologies: Tony Dalgaty (TD)

In attendance: Ailsa Close (AEC), Elaine Munro (EM)

No	Minute	Who	Action	Date
18.4.1	**Welcome and apologies for absence.** The Chair welcomed all governors to the meeting and particularly Martin Jones to his first board meeting at Principal. Apologies from Tony Dalgaty.			
18.4.2	**Declarations of interest & to determine any items as confidential.** No declarations of interest.			
18.4.3	**Minutes of the last meeting.** These were approved by the board and signed by the Chair as an accurate record of the meeting.			
18.4.4	**Matters arising**. (i) Nursery - EM updated on the secondment of a manager from A&BC for a 6 month period, the support from various colleagues within the council to ensure policies and procedures are fit for purpose and the impending Care Inspectorate visit. (ii) NRPA – AEC paper provided a summary of current position. At the end of this process, there will be a total increase in costs to the college of ~ £1million (£900k teaching staff, £100k support staff costs). A job evaluation process starts in January 2019 for all support roles. (iii) Board Secretary update – MJ confirmed the current position that it is possible to have a shared post ie board secretary who has an additional college function as long as that does not involve close working with the executive team			
18.4.5	**Chair's report.** In addition to his paper, AMC updated the board on the following: • UHI programme board – limited progress made to date. Programme board large. 4 workstreams have been identified: student equivalence, financial sustainability, staff development and progression, governance and accountability. Papers are available to all staff			

	on Sharepoint. Communications strategy developed and communications expected to be issued to all staff. AC also a member of the programme board and gave an update. • Oban as a University Town (OaUT) – SAMS, Argyll College, Ballet West and Oban High School are main delivery partners. AMC will now chair the Steering Group.			
	RESOURCES			
18.4.6	**Draft joint Audit and Finance and General Purposes** Minute Approved			
18.4.7	**(i) External Audits** Main points noted: - Unqualified opinion on accounts - Noticed large surplus – due to pension. - No concerns on control environment - Costs associated to Helensburgh centre but not received funds or a letter confirming funds - Nursery income continues to be a concern - No immediate going concern issues - NRPA remains an on-going issue **(ii) Covering letter – letter of representation** **(iii) Letter of representation** - signature by Chair			
18.4.8	**Annual report and financial statements for year ended 31 July 2018** Approved			
18.4.9	**Internal auditors annual report** Noted			
18.4.10	**Annual internal Audit Plan** Approved			
18.4.11	**Audit chairs annual report to the board** Terms of Reference to be attached to the report Executive team asked to find out how other small colleges support the chair of audit to produce an annual report Estate strategy requested	AEC		

		STRATEGY AND PERFORMANCE			
18.4.12		**Management Accounts** Projecting a break even figure, however AEC indicated there may be additional costs associated with achieving credit and HE FTE targets related to teaching costs. Management accounts approved.			
18.4.13		**Health & Safety (standing item): H&S Issues** Issues re Tobermory premises for engineering were discussed. Board requested sight of the internal H&S audits or an action plan on items that need to be addressed.			
18.4.14		**Chairs of finance committees meeting – JC updated the committee on the following items** Top slice for FE below 1% HE top slice is 35% of SFC recurrent funding – committee asked for a breakdown of where this 35% is spent. MJ asked to investigate further in meetings with EO.	MJ		Next board
		STRATEGY AND PERFORMANCE			
18.4.15		**Principal's report for period ended 30 November 2018** MJ spoke to tabled paper outlining initial observations on the College and set out the need for immediate strategy development as well as a staff survey			
18.4.16		**Minutes of Learning, Teaching and Engagement committee held on 16th Nov 2018** Approved			
18.4.17		**How Good is our College Evaluative Report and Enhancement Plan** Board endorsed the report Noted that during the Education Scotland endorsement process the college grade for Leadership and Quality Culture had been increased to GOOD			
18.4.18		**Summary of Argyll College UHI Key Performance Indicators (KPIs)** Noted			
18.4.19		**Policies for noting and approval** (i) SQA courses with externally assessed components - noted (ii) Nursery Recruitment policy – noted (iii) Health &Safety policy – approved (iv) UHI Intellectual property policy - approved			

18.4.20	**Risk Register** MJ and AEC have refreshed the risk register but indicated further work required particularly to ensure that it aligns correctly within UHI framework Roger Sendall, EO has been very supportive.			
	BOARD GOVERNANCE AND DEVELOPMENT			
18.4.21	**Updated Communication Strategy** Noted the role of centre managers in understanding and responding to their local socio-economic environment and the increase in evening courses offered within centres.			
18.4.22	**Minute of HR&Re meeting** Noted			
18.4.23	**(a) DYW Strategy** Approved **(b) DYW Update** MJ provided an update on recent staffing changes and noted the strategy will continue to evolve and become more focussed over time. The benefits to the college will be the increased engagement with employers and schools and improved market intelligence re training required by employers including current and future skills needs of each local economy within which the college operates. The DYW Officers are engaging with college staff to ensure they are more aware of the curriculum offered by the college.			
18.4.24	**Board meeting schedule for 2019** Agreed The possibility of a Board away day discussed – doodle poll to agree date.			
	FOR INFORMATION			
18.4.25	**AOCB** (i) Annual HR Report - noted (ii) Update on Programme Board – discussed within Chairs Report (iii) Financial Memorandum with UHI – paper requested from ET highlighting any issues that should be brought to the attention of the board. (iv) Board thanked the catering and hospitality tutors and students for providing a delicious Christmas lunch prior to the meeting.			
18.2.1	**Date of next meeting.** March 2019			

	.... Date			
	Signed by Chair of meeting			

UHI Partnership

Committee	Boards of Management / UHI Court
Subject	Evidence base for change
Action requested	Discuss and approve
Brief summary of the paper	This paper asks boards of management and the UHI court to consider the evidence that our governance structure impedes our operational delivery.
Resource implications (If yes, please provide detail)	None
Risk implications (If yes, please provide detail)	None
Date paper prepared	12/02/19
Date of committee meeting	TBC
Author	Programme Director
Link with strategy Please highlight how the paper links to, or assists with: • compliance • partnership services • risk management • strategic plan/enabler • other activity (eg new opportunity) – please provide further information.	Will assist with the effective delivery of the strategic plan.
Equality and diversity	N/A
Status (eg confidential)	Open
Freedom of Information Can this paper be included in "open" business?	Yes
Consultation How has consultation with partners been carried out? (Summary of response should be included in the paper)	

Governance and operational delivery

Background

A clear message that came from many participants at the Partnership Assembly in September 2018 was that the governance structures of the UHI Partnership impede the operational delivery of our services; that UHI is succeeding despite, not because of the structure. This is a sentiment that has been expressed in other forums outside the Partnership Assembly and would appear to be a commonly held view by colleagues who work across the institutions that make up the UHI partnership.

The Governance and Accountability working group has been tasked by the Programme Board to consider a range of challenges that were raised at the assembly. The group agreed that challenging the veracity of the perception that our governance and decision-making arrangements impede operational delivery was a key element of their work.

On 5th February 2019 the working group held a meeting in Inverness and asked Dr Gary Campbell, Vice-Principal (Strategic Developments) for a staff view of some of these perceived challenges to supplement the assembly input and their own experiences. Dr Campbell presented a compelling set of evidence, some of which has been discussed at Partnership Council over the last year.

The view of the working group is that the evidence they have seen and discussed does demonstrate that the governance and decision-making arrangements lead to operational challenges in how we are able to regionally organise and deliver.

Furthermore, that the impact of this, in terms of;

- the fragility of our regional offering;
- the resource spent by senior leadership and staff managing the complications in our decision-making processes;
- the pace at which we can respond to opportunities and develop new courses;
- the impact that national bargaining and the new FE contract has on the provision of degree level courses;
- the constraints on staff to progress academic careers in an FE contractual framework;

require the UHI Partnership to explore how we can change the operational model to overcome these challenges.

The explicit objective of any proposed changes would be to ensure that we can release a greater capability and capacity of our staff and senior leadership to focus on delivering

high quality education across the Highlands and Islands, both locally and regionally, rather than managing resource draining delays and failures in our current decision-making arrangements.

We ask College Boards of Management and the UHI Court to consider the presentation, this paper and the advice of your Principal and respond to us by confirming or not that you agree that our arrangements for governance and decision making are impeding our ability to operationally deliver regionally.

Receiving this agreement from you, at this early stage in the process, will allow us to move forward to the frankly more difficult task of working with the assembly and colleagues from across the partnership to identify and consider the solutions to the operational challenges noted in the presentation.

The working group will then be able to assess the different options brought forward, what changes would be required in decision making arrangements to make them work, and present an options appraisal back to Boards and Court in due course.

I would be grateful if you could respond directly to me at Brian.Crichton.perth@uhi.ac.uk

Evidence Base

The working group has requested that Dr Campbell record a copy of his presentation and we hope that you have had the opportunity to review it before considering this paper. The presentation notes a number of challenges in organising and delivering regional provision in the context of current arrangements.

Planning regional provision regionally is in all probability more effective than planning it locally and trying to knit the sum of those plans and resources together coherently. The examples of how and why planning and coordination are failing in respect of regional provision, and how the structures of our decision-making are adding to that, are stark.

What was also evident from the presentation is that the operational challenges our governance and decision-making arrangements cause are not because of mischief, bad intent or poor local decision-making. In fact, it is quite the reverse, individual partners are making the right and rational decisions locally, but the sum of these at a regional level often do not make sense.

Two illustrative examples that struck us in particular were;

<u>BSc (Hons) Psychology</u>

As the Psychology programme increased in popularity, the number of students grew to more than 150 as did the number of academic partners contributing to delivery. The team also validated an online MSc in Psychology and both this and the undergraduate programme were accredited by the British Psychological Society (BPS). Among other things, the BPS accreditation was conditional on the recruitment of at least one more member of *research active* staff with a particular specialism.

There then followed around 20 months of discussions across the management of the involved academic partners, subject network and faculty to agree who would employ this member of staff. Eventually the matter was escalated to Partnership Council where a decision was finally made. This was always going to be the outcome; any rational person would make the decision to employ the additional staff. However, to solve the issue, a Principal was required to employ staff with limited additional income attached, an increase in costs straight to the bottom line. A decision, in these difficult financial times, that is not easy to make.

If we are to be frank about this issue.
- It shouldn't have occurred in the first place as the consequences of failure to recruit appropriately qualified and research active staff to meet BPS requirements should never have been a question.
- When it did occur, it should have been resolved straight away rather than consuming significant senior management time to make a decision that was always going to be taken.
- The funding / employment regime for the course should have the flexibility to allow for the employment of these staff without detriment to an individual partner.

Whilst this example highlights psychology, the challenges identified apply to a number of our regionally delivered courses.

<u>Curriculum planning</u>

The diversity of the UHI Partnership is one of our greatest strengths and providing remote and rural locations with a full range of FE and HE courses is fundamental to our purpose. We will never match other institutions for their head count in courses, in fact, we would be failing in our mission if we do.

However, Dr Campbell's presentation demonstrates the significant lack of co-ordination in how we plan our curriculum. This limits our ability to invest and grow those areas of our regional business that are most successful and will raise income for all partners and

limits our ability to identify and proactively support and cross-subsidise local courses, that are not financially viable in terms of numbers, but are essential for our diverse local communities.

It is inconceivable to think that a single partner, undertaking and implementing a curriculum review in isolation will not have unintended consequences for other partners. It encapsulates again that rational local decisions, made with the best of intentions, result in sub-optimal provision when added up to the regional level.

We are asking our senior executive leadership to manage the inconsistencies in these decision-making processes, rather than adapting the process to deliver a stronger and more coherent regional and local curriculum offering. One that releases the capacity and capability of our staff, builds on and strengthens our diversity and releases senior staff to focus on delivery.

The working group has also heard examples of where UHI have developed innovative sector defining courses.

<u>BSc (Hons) Software development</u>

This programme was developed after analysis of the existing curriculum and the developing requirements of actual and potential inward investors in the UHI region. It was also a product of the strategic imperative to develop work-based learning programmes in response to changes in expectations of students, employers and the Scottish Government. Using European funding (ESIF) it was possible to employ, two well qualified and 'industry fresh' academics, to work alongside a dedicated educational developer (EDU) and a Curriculum Development Engagement Officer (CDEEO). Their brief was to 'start from scratch' to develop an innovative programme which would produce highly adaptive and employable graduates.

In brief, the result is a programme which will be available in 2020, incorporates such a range of topics, values, projects, real world experience, and innovative pedagogy that IBM have asked to partner with us in its delivery and have their name associated with it. The programme is fully compliant with the SDS requirements for a Graduate Apprenticeship, should we wish to take that path. Crucially, it is anticipated that the graduates of the programme will be in such demand that we can help break the circle of - few UHI computing graduates as there are few jobs in the region – few employers will set up here as there are insufficient graduates.

In short, this, and a few other key examples, demonstrate that this university is at least the equal of any in the sector with regard to innovative curriculum design, when the resource, planning and crucially staff 'headspace' are aligned. In this case, this 'luxury'

was afforded us via external funding, the challenge is to be able to mainstream this approach.

Moving to solutions

The working group recognise that the presentation and the detail noted within this paper are illustrative of issues, rather than providing a full evidence base for change. In discussions with key staff these examples do represent a few of the many "sticking plasters" that staff have applied to ensure we can deliver despite our decision-making arrangements.

As a Partnership we know these problems exist and we know they are not limited to the examples that have been given here, they are systemic to how we are organised. The working group believes that it is counter-productive to spend the next three months identifying and cataloguing our failures of partnership decision making for presentation in June. It would be a divisive process to go through, it would only demonstrate what we already know and it would waste valuable time in developing the options available to us to address these challenges.

We are therefore seeking confirmation from Boards of Management and the Court that you agree that our arrangements for governance and decision-making are impeding our ability to operationally deliver regionally and you are content for the working group to move on to considering the options we have to resolve these issues with the assembly and colleagues from across the partnership.

Recommendations

Boards of Management and UHI Court are asked;

- To discuss the paper and Dr Campbell's presentation as part their March Board / Court meetings;
- To respond to Brian Crichton indicating whether the Board / Court agree that our arrangements for governance and decision-making are impeding our ability to operationally deliver regionally
- To note that should agreement be received, developing the options for changing regional operational arrangements with the assembly and colleagues from across the partnership will begin.

University of the
Highlands and Islands
Argyll College

**Minutes of the
Finance & General Purpose committee
held at 2.30pm on Friday, 1st March 2019
at the Lorne Street, Lochgilphead campus**

Present:	John Colston (JC), Chair, Jim Findlay (JF) by VC, Martin Jones (MJ), Scott Matheson (SM) by VC.
Apologies:	Andrew Campbell (AC)
In Attendance:	Ailsa Close (AEC), Elaine Munro (EM)

No	Item	Action
19.1.1	**Welcome –** JC welcomed all committee members to the meeting.	
19.1.2	**Apologies & declarations of interest**. Apologies were received from AC. JF declared his position as a local authority councillor.	
19.1.3	**Minutes of previous meetings.** Minute of joint Audit and F&GP meeting on 30th November 2018 was approved. **Minute to be signed by the respective chairs as an accurate record of the meeting.**	
19.1.4	**Matters arising.** **(a) NRPA** MJ updated the committee about a recent meeting with SFC of the 4 UHI colleges that are shadowing the NRPA process. Following the meeting a letter from John Kemp, SFC jointly signed by Diane Rawlinson, VP FE, UHI was received, seeking agreement from the colleges to sign up to NRPA. The committee discussed the challenges of this, and will got to Board for further discussion. **(b) Update on funding for Helensburgh** A grant letter from UHI has now been received and the offer accepted, however to date no funding has been received as, per UHI Executive Office, one of the conditions of funding was that a 5 year lease was to be obtained. The college has explained the reasons for this not having been taken forward to the Finance Director at UHI when he indicated that UHI COO had expressed concern about a previous minute regarding the lease. The existing 2 year peppercorn lease expires Sept 2019. MJ and AEC are meeting with A&BC on 18th March to discuss conditions on any future lease of the Helensburgh centre. **(c) Update on sale of Riverside premises** AEC updated the committee that following delays, on the purchaser's side, the sale now appears to be proceeding.	MJ MJ/AEC

19.1.5	**Management accounts to 31st January 2019** The accounts were noted. The committee agreed the management accounts to be presented to the next board meeting.	AEC
19.1.6	**Properties update** MJ gave an update on college estates as a whole. It was agreed to have a strategic pause on property options in Dunoon. The committee noted that there was agreement with Islay High school that the college can extend into an adjoining room in the school, which would provide two additional VC rooms for college use.	
19.1.7	**AOCB** a) Anti-bribery policy – The policy was approved and will be forwarded to the board for noting. Agreed that a system be put in place to formally record gifts and hospitality that staff receive, and this would be added to the existing Financial Procedures. b) Update on visit to Rothesay Pavilion – MJ and AEC had a productive visit. Potential to deliver art related provision. Connections will be made between local centre manager in Rothesay and Pavilion staff to build relationship.	AEC
19.1.8	**Date of next meeting –** Friday 24th May 2019 at Lorne Street, Lochgilphead	
19.1.9	**Signed by** …………………………………………… Date ……………………… **Chair of Finance & General Purpose Committee**	

Management accounts to 31 Jan 2019

The accounts for the first quarter of the year are showing a surplus of £777k. This is reflected in our bank balances, which have increased since the year end by just under £600k, and by a reduction in our creditors since the year end.   This is due to income being received in advance for credits income.

This result is however not reflective of what we anticipate the year end outcome will be, which we are tentatively forecasting at a surplus of £16k.   The tentative nature of this is due principally to National Bargaining (NB) - our understanding when the budget was put together was that we would be receiving £991k. Indications currently from UHI/NHC are that we are due to receive £485k for the year, but when queried on this huge reduction UHI has told us that it is due to amounts being held back until the pension arrangements were finalised for our staff. We have informed them that we have now joined the Teachers Pension Scheme and that all relevant staff have been enrolled on this. It would appear that Scottish Funding Council is under the impression that, like our partner West Highland College, we do not have a pension scheme in place for our support staff, and it may be that some of the £991k will not be forthcoming since that is a cost we already incur.   There are also a number of issues which we will have to deal with with regard to some of the terms of NB. From April 2019, the tutor salaries will be increased by @£4k per annum per FTE. The support staff will be paid a further 2-3% from 1 April 2019.

Grant funding of £135k for Helenburgh has been included in forecast income. We finally received a letter and grant offer for Helensburgh from UHI, but no funding has been received in the meantime. The application for this funding was submitted on 28 Feb 2018.   I am told that the delay in any funding being forthcoming is related to UHI's condition that a 5 year lease on the building is taken out.

The organisation is keeping a tight control on costs. We are reasonably confident that staff costs will be within budget, but there may yet be implications of NB that we have yet to account for.

Ailsa E Close
22/02/2019

Argyll College UHI Ltd

INCOME	Actual 31/01/19	Budget 2018/19	Expected Outturn 2018/19	
SFEFC SUMs Income	1,824,042	2,582,378	2,772,070	Per NHC figures
SFEFC SUM's Income - ESOL	3,000	15,000	6,844	
UHI Income - RAM	298,476	633,235	579,580	Based on HE FTEs at Nov 2018
UHI Income - PGDE	29,532	56,435	64,200	Per UHI
UHI Income - Other	98,534	102,700	246,550	Flatrate £20k, SSC£109k, Helensburgh £118k
SAAS Income	23,520	309,000	270,000	Will be lower than budget because of lower HE numbers
ILA Income	8,602	11,000	11,000	
DYW income/other govt	116,870	136,140	150,000	
Bursary Income/Student support	32,920	45,000	45,000	
Other PPE reimbursement/CITB/Fdn Apprenticeships	0	50,000	10,000	CITB/FA accounted for under DYW/other govt
Maintenance/Capital Grant income	146,832	253,000	149,000	£193k (less £120k capitalised) backlog maintenance, £76k for usual maintenance
ESF	0	0	0	
Bank Interest Received	0	1,000	3,000	
FE Student Fees	74,883	100,000	100,000	
HE Student Fees - Taught	17,902	20,000	18,000	
Commercial Training Activity	14,867	30,000	30,000	
Commercial Training Activity - CSCS Income	4,903	8,000	8,000	
Nursery Income - Fees	93,388	220,000	180,000	
Property Lease Income	1,437	0	3,500	Leased building delay in sale
Room/Facility Hire - With Own Insurance	440	7,000	2,000	
Room/Facility Hire - Without Own Insurance	320	100	500	
Vending Machine Income	1,422	7,000	7,000	
Hairdressing Income - General	5,101	9,100	9,100	
Hairdressing Income - Retail	0	500	500	
Hairdressing Income - Other	0	0	0	
Catering Income	8,231	10,500	10,500	
Feed-In Tariff	6,241	4,000	6,241	
Other income	2,334	0	41,500	Greenfleet grant funding £40k
National Bargaining Grant funding	308,326	991,000	735,269	Subject to change
Income from Staff	444	300	500	
Graduation Income	550	400	550	
Branded clothing income	460	500	500	
	3,123,577	5,602,788	5,460,904	
LESS: EXPENDITURE				
MicroRam	0	137,711	137,711	As per Micro Ram figures at 31/3/18
Staffing Costs - Salaries	632,247	1,424,969	1,321,000	2-3% NB increase, lower than budgeted
Staffing Costs - Employer's NI	57,658	128,247	120,000	
Staffing Costs - Employer's Pension	84,804	307,793	175,000	
Staffing Costs - Maternity Pay	0	1,000	1,000	
Staffing Costs - Sick Pay	59,932	10,000	75,000	Principal, Nursery mgr, Centre admin
Staffing Costs - Travel and Subsistence	4,461	20,000	20,000	
Staffing Costs - Training	551	6,000	6,000	
Staffing Costs - Disclosure	709	1,000	1,000	
Staffing Costs - Recruitment	2,938	5,000	5,000	
Staffing Costs - Other	0	15,263	15,263	Apprenticeship Levy in 2018/19
Teaching Staff Costs - Salaries	737,393	1,627,684	1,627,684	
Teaching Staff Costs - Employer's NI	56,598	135,781	135,781	
Teaching Staff Costs - Employer's Pension	69,429	292,553	239,000	Teachers pension increases by addnl 5% from 1 Apr 2019
Teaching Staff Costs - Maternity Pay	0	1,000	1,000	
Teaching Staff Costs - Sick Pay	20,186	10,000	30,000	Various tutors, 1 on long term sickness absence
Teaching Staff Costs - Travel and Subsistence	6,776	12,000	12,000	
Teaching Staff Costs - Training Other	1,424	12,000	12,000	
Teaching Staff Costs - Disclosure	670	1,300	1,300	
Teaching Staff Costs - Recruitment	0	3,000	3,000	
Teaching Staff Costs - Other	404	5,000	5,000	
Payments to Subcontractors	42,946	50,000	70,000	Additional costs for Nursery secondment and DYW contractor
Learning Resources/Matls	24,818	80,000	70,000	
Student PPE/Kit	14,082	15,000	20,000	
Payments to Awarding Bodies - SQA	11,838	54,000	54,000	
Payments to Awarding Bodies - CITB	2,463	5,000	5,000	
Payments to Awarding Bodies - BCS	7,998	2,000	8,000	
Payments to Awarding Bodies - Activ Training	533	3,500	3,000	
Marketing and Promotion	17,727	50,000	50,000	
Health and Safety Costs	13,573	25,000	25,000	
Non Chargeable Catering Costs	963	5,000	5,000	
Property Costs - General maintenance	47,449	253,000	135,000	£120k capitalised
Property Costs - Lease Costs	35,679	72,000	72,000	
Property Costs - Venue Costs	3,506	10,000	10,000	
Property Costs - Rates and Water Charges	522	17,000	17,000	

Item	Actual	Budget	Forecast	Notes
Property Costs - Utilities	51,115	80,000	80,000	£9k for Helensburgh
Property Costs - Cleaning	15,004	26,000	30,000	Helensburgh and Oban costing over £1k per month
Property Costs - Other Property Costs	2,430	4,000	4,000	
Insurance	24,782	31,000	27,000	
ICT Maintenance and Support	77,105	117,000	176,000	SSC £130260
Equipment repairs	11	5,000	5,000	
Equipment Lease Costs	20,743	40,000	40,000	Printers mostly
Company Vehicle Costs - Fuel	2,655	8,000	8,000	
Company Vehicle Costs - Repairs and Maintenance	1,335	3,000	2,000	5 new leased vehicles so lower repairs
Company Vehicle Costs - Road Tax	30	300	300	
Company Vehicle Costs - Other	1,577	40,000	40,000	
Supplies and Copying	4,517	21,650	10,000	
Postage	4,171	12,000	10,000	
Telecoms	12,024	22,000	22,000	
Other expenses	845	4,000	4,000	
Donations	345	0	500	
Subscriptions	11,043	27,000	27,000	HISA, other licences
Professional Fees - Audit and Accountancy	10,800	13,000	13,000	
Professional Fees - Legal	2,926	12,000	12,000	
Professional Fees - Other	4,995	5,000	5,000	
Payments To/On Behalf of Students - Travel & Subsiste	9,434	5,000	20,000	
Payments To/On Behalf of Students - Hardship	2,112	10,000	10,000	
Payments To/On Behalf of Students - Sanitary products	1,001	5,500	10,500	
Payments To/On Behalf of Students - Graduation	4,111	5,000	5,000	
Payments To/On Behalf of Students - Other	285	3,500	3,500	
Governance Costs - Travel & Subsistence	916	1,500	1,500	
Governance Costs - Other	112	100	112	
Bank Charges	288	250	550	
Loan Interest - BoS Fixed Rate	0	2,000	2,000	
Bad debts	0	1,500	1,500	
Vending Machine Costs	2,500	12,000	6,000	
Hairdressing Supplies - General	4,897	8,500	8,500	
Hairdressing Supplies - Retail	0	600	600	
Hairdressing Costs - Other	106	400	400	
Food Purchases	10,666	20,000	20,000	
	2,245,158	5,345,602	5,093,701	
Operating surplus	878,418	257,186	367,203	
Non Capital Fixed Assets	6,405	40,000	15,000	
Loss on sale of asset (building)	0		136,442	Riverside Building in Lochgilphead
Depreciation	94,546	185,000	200,000	
Net surplus/(deficit) for the year	777,468	32,186	15,761	

Argyll College UHI Ltd
Statement of Financial Activities
For the period ended 31 Jan 2019
(including an Income & Expenditure Account)

	Notes	Unrestricted funds £	Restricted funds £	Total funds £	2018 £
Incoming resources					
Incoming resources from voluntary funds					
Voluntary income		2,618,810	0	2,618,810	3,128,642
Activities for generating funds		102,108	0	102,108	23,546
Investment income		0	0	0	1,308
Incoming resources from charitable activities		401,649	0	401,649	980,445
Other incoming resources		1,010	0	1,010	295
Total incoming resources		3,123,577	0	3,123,577	4,134,235
Resources expended					
Costs of Generating Funds					
Costs of generating voluntary income		2,500	0	2,500	3,592
Fundraising trading; costs of goods sold and other costs		0	0	0	0
Investment management costs		0	0	0	0
Charitable activities		2,244,725	57,459	2,302,184	4,435,780
Governance costs		41,425	0	41,425	32,517
Other resources expended		0	0	0	0
Total resources expended		2,288,651	57,459	2,346,109	4,471,889
Net incoming /(outgoing) resources before transfers		834,926	(57,459)	777,468	(337,654)
Transfers		0	0	0	0
Transfers between funds		0	0	0	0
Net incoming resources before other recognised gains and losses		834,926	(57,459)	777,468	(337,654)
Other recognised gains and losses					
Gains on revaluation of fixed assets for charity's own use		0	0	0	0
Actuarial Gains / losses on pension scheme		0	0	0	54,000
Net movement in funds		834,926	(57,459)	777,468	(283,654)
Reconciliation of Funds					
Balance at 1 August 2018		1,629,506	3,189,977	4,819,483	3,724,750
Balance at 31 Jan 2019		2,464,432	3,132,519	5,596,951	3,441,096

Argyll College UHI Ltd
Balance Sheet
As at 31 Jan 2019

	31/01/2019	2018
Tangible fixed assets	3,990,738	4,013,423
Debtors		
Trade debtors	58,980	53,538
Prepayments	8,357	8,357
Other debtors	88,518	189,591
Deferred tax asset	0	0
	155,855	251,487
Cash at bank	1,764,210	1,116,166
	1,920,065	1,367,653
Creditors <1yr		
Trade Creditors	31,140	119,697
Bank Loans	19,240	19,240
Accruals	132,714	166,998
Deferred Income	36,101	36,101
Tax & Social Security creditor	60,000	61,950
Other creditors	29,395	26,159
	308,591	430,145
Net current assets	1,611,474	937,507
Creditors >1yr		
Bank Loans	5,262	17,403
Net Assets	5,596,950	4,933,527
Reserves		
Unrestricted funds	2,464,432	1,743,550
Restricted funds	3,132,519	3,189,977
	5,596,951	4,933,527

Argyll College UHI Ltd
Restricted Fund movements
For the period ended 31 Jan 2019

	Balance at 1 August 2018 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 Jan 2019 £
Capital Reserve	3,126,057	120,000	56,485	0	3,189,572
Beam Suntory	8,374	0	0	0	8,374
Princes Trust	10,000	0	0	0	10,000
SFC - Transitional Funding					
Scottish Govt Greenfleet	29,917	0	0	0	29,917
DYW	0	0	0		0
Foundation Scotland	2,000	0	0	0	2,000
Muir of Laurieston Trust	13,629	0	974	0	12,656
	3,189,977	120,000	57,459	0	3,252,519
Per SOFA	*3,189,977*	*0*	*57,459*	*0*	*3,132,519*

Board Meeting 15 March 2019

Agenda item 19.1.8 i)

NRPA Briefing Paper

The purpose of this paper is to update the Board on the rollout of the revised pay and conditions relating to teaching staff within the College and to provide a basis for discussion on two issues which are yet to be resolved. As these issues continue to emerge, the Board should be aware that whilst a final position does not need to be taken at this point, we may need the Board's approval on a course of action at some point between now and the next scheduled Board meeting. This may necessitate an extraordinary meeting.

To summarise the changes to date, we have implemented the changes to salary, pensions, holidays, and working week in line with the national position. The final phase of uplifted salaries will therefore be effected from April 2019.

1. Shadowing

Despite implementing the changes highlighted above, our position remains that we are not signed up to the national process. Throughout the negotiations (and indeed any current or future ones) relating to pay, we remain as observers shadowing the process and are not strictly bound by their outcome. Within UHI, there are three other institutions in the same position as us (West Highland, Orkney and Shetland).

Whilst this was a prudent and defensible position taken at a time when signing up would have immediately threatened the financial sustainability of the College, such a threat receded with the provision of extra funds to the college sector from the Scottish Funding Council.

This funding only covers the period until April 2020.

We are therefore in the position of having taken the money to implement changes which we are not formally obliged to do given our shadow status. This position is, however, more difficult to sustain and is one which the SFC is seeking to change. Martin Jones attended a meeting at SFC in January attended by the other shadowing UHI colleges and representatives from Executive Office of UHI.

The meeting generated a follow up letter signed jointly by SFC and UHI and which is included in the Board papers.

We therefore need to discuss the Board's position on this.

2. Promoted Lecturer Pay

Under the national agreement, provisions were made to deal with those lecturers who undertook an enhanced role encompassing elements of leadership and management. These elements were benchmarked at three levels depending on the nature and extent of the role. The pay points for promoted roles sit at £43850, £46925 and £50000 respectively.

The College made a return to SFC in early 2018 that there were no such posts in Argyll. This appears to have been an error.

In the academic year following restructure, a decision was taken to give more responsibility to the roles of a number of tutoring staff and a new post of Curriculum Lead was created. The CLs were given a payment of £2000 on top of their basic salary and a number of remitted teaching hours, depending on the breadth of the curriculum area they led. Whilst the college sector undertook a mapping exercise in 2017/18 as part of NRPA to match existing roles into the new three level structure, this was not undertaken in Argyll.

We have therefore embarked on the matching process and we are taking advice from both Colleges Scotland and other colleges who have experienced the process.

The Board need to be aware that we are an outlier within the sector as it is a settled issue pretty much everywhere else. It is also a matter that is on the radar of the EIS nationally.

Our shadowing status notwithstanding, there is a real potential for this to have a serious financial impact on the college. In parallel to the matching process, we are scoping out options for the structure of promoted lecturers within the College.

Scottish Funding Council
Promoting further and higher education

University of the
Highlands and Islands
Oilthigh na Gàidhealtachd
agus nan Eilean

23 January 2019

Mr Martin Jones
Principal and CEO
Argyll College UHI
West Bay
Dunoon
PA23 7HP

Dear Martin

I am writing to follow up the very useful meeting on 11th January regarding the possibility of the four assigned colleges within UHI, currently not signed up to the national bargaining arrangements, doing so.

At the meeting we all recognised that, having shadowed national bargaining, it would be difficult for colleges not to continue to do so. Given that, it was likely that the costs of being in national bargaining – whether shadowing or as signatories to the national agreement – would have to be built into future plans whether or not a college was a signatory to the National Recognition and Procedures Agreement (NRPA). As was noted in John Kemp's letter of 10th December, SFC is minded to make it a condition of the additional funding for 2019-20 that colleges do sign up to the NRPA.

At the meeting some colleges recognised that while the costs of the transition to harmonisation were being fully met until the end of the 2019-20 academic year, they had concerns about the affordability of the terms and conditions in future and the risk that this created for the college. Both SFC and UHI are aware of the burden on individual colleges. While SFC does intend to transition back to a funding model that operates largely on a price times volume system, both SFC in its allocation to the Highlands and Islands and UHI in it the way that it allocates that funding will need to be mindful of institution sustainability as well as transparency of funding. We will also want to continue to support rural provision.

Another way to control the risk of being committed to future obligations over which the college has no control is by being a part of the Employer's Association and therefore having a voice alongside other colleges in the future costs.

We hope the meeting, and this letter, give you and your Board information that will allow you to move towards fully participating in national bargaining.

Yours sincerely

John Kemp
Director of Policy and Strategic Development
Scottish Funding Council
Apex 2
97 Haymarket Terrace
Edinburgh
EH12 5HD
www.sfc.ac.uk

Diane Rawlinson
Vice Principal, Further Education
University of the Highlands and Islands
Executive Office
Ness Walk
Inverness
IV3 5SQ
www.uhi.ac.uk

**Minutes of the Audit committee
held at 12.30pm on Friday, 1ˢᵗ March 2019
at the Lorne Street, Lochgilphead campus**

Present:	Lesley McInnes (LI) Chair, by VC, Ken Jones (KJ), Amber Crowley (AC), Tony Dalgaty (TD)
Apologies:	Gillian McCready (GMcC)
In Attendance:	Roger Sendall for item 19.1.4, Ailsa Close (AEC), Elaine Munro (EM), Martin Jones (MJ)

No	Item	Action
19.1.1	**Welcome** The chair welcomed members to the committee meeting	
19.1.2	**Apologies & declarations of interest**. Apologies were received from Gillian McCready	
19.1.3	**Minutes of joint Audit and F&GP meeting held on 30ᵗʰ November 2018 were approved.** The minutes to be signed by the respective chairs as an accurate record of the meeting.	LMcI
19.1.4	**Presentation on Risk Register by Roger Sendall, UHI Head of Governance and Records Management** Roger outlined the common and consistent approach that is being developed across the UHI partnership in relation to risk management, with all risk registers now stored in Sharepoint. A risk register group reviews all academic partner risk registers. Roger gave a presentation on risk management, which was followed by a question and answer session. The Committee felt that the move from a spreadsheet format for the recording of risk was a very positive improvement.	
19.1.5	**Matters Arising** a) **Update on Health & safety issues at CERC** – Following the H&S Consultant visit to CERC in December there were a number of areas that the college needed to address. This was followed by a visit to CERC by MJ and TG. Improvements were noted, but agreed there was a need to continue to discuss broad cultural issues, with TG suggesting a number of initiatives the college could implement. b) **Update on funding for Helensburgh** – no funding has yet been received from UHI for the centre in Helensburgh following the successful bid for strategic funds in 2018. UHI concern centres on the lack of a 5 year lease with A&BC for the Kirkmichael Centre. MJ meeting Clive Mulholland to further discuss the engagement with the Royal Navy at Faslane and in	MJ

		particular the issues surrounding the mode of delivery and standard of learning and teaching materials provided by UHI.	MJ
19.1.6	**AOCB**		
		(a) Draft tender for Internal Audit services Aug 2018 to Jul 2021 Agreed committee members would submit suggestions for areas to be covered within internal audit to AEC by 22nd March 2019.	All
		(b) Support for Audit Committee LMcI had asked what support other partner organisations provided to Audit Committee. MJ outlined support was available via UHI internal auditor, regional committee of audit chairs, and also through Board Secretary. The recruitment process for a Board Secretary for Argyll College is currently underway.	
		(c) Membership of Audit Committee External auditor had indicated that the Audit Committee membership should include the Student rep to allow breadth of scrutiny. It was agreed that the student rep (Laura Hogg) would be invited to join the Audit Committee.	AEC
19.1.7	**Date of next meeting –** Friday 24th May 2019 at Lorne Street Centre, Lochgilphead		
	Signed by ……………………………………… Date ……………………… **Chair of Finance & General Purpose Committee**		

Mini Competition for

Provision of Internal Audit Services For Argyll College

REF: CS–AC-12914

Project	Provision of Internal Audit Services
Publication of Mini Competition	2019
Issuer	Charyleen Emslie, Supply Chain Manager
Ref	CS-AC-12914
Bid return date	By 12.30pm 5th April 2019

The following words and expressions used within this Mini Competition shall have the following meanings (to be interpreted in the singular or plural as context requires):

Term	Meaning
"Institution"	means Argyll College UHI Ltd
"online portal"	Means the Public Contracts Scotland (PCS) Portal
"Conditions of Tender"	means the Terms and Conditions set out in the Framework Agreement document relating to the submission of the Tender.
"Contract"	means the Contract to be entered into by the Institution (s) and the Contractor following any award under the procurement exercise.
"Contractor"	means the successful Tenderer who will be party to the Contract responsible for supplying the services
"Mini Competition"	means this Mini Competition document and all related documents published by the Institution and made available to Tenderers
"Regulations"	means The Public Contracts (Scotland) Regulations 2015
"Tender Response(s), or Mini Competition Response"	means a Tenderer's formal response to this Mini Competition
"Tenderers"	means the organisations responding to this Mini Competition

Argyll College

Dear Supplier,

MINI COMPETITION FOR PROVISION OF INTERNAL AUDIT SERVICES
FRAMEWORK: PFB1028 LOT 2
REF: CS-AC-12914

As a supplier under Framework PFB1028 AP Lot 2 for the Provision of Internal Audit Services you are invited by Argyll College to tender for the above all in terms of, and in accordance with, the Mini Competition of which this Letter forms part.

Your bid must be submitted in accordance with this Mini-Competition Letter attached Schedules and Annexes, all of which shall be deemed to form and to be read and to be construed as part of this Mini-Competition.

Bids must be submitted via The Public Contracts Scotland Quick Quote facility www.publiccontractsscotland.gov.uk **by 12:30pm on 5th April 2019.** Correspondence connected with the bid that requires attention before the deadline should be submitted online via the Quick Quote facility.

It is the responsibility of all tenderers to ensure that their bid is submitted no later than the appointed time. Bids received after that time may not be considered.

Argyll College UHI is not bound to accept the lowest or any bid. Argyll College UHI reserves the right to cancel or suspend this procurement procedure at any time. Argyll College UHI may award this contract in part if deemed appropriate.

APUC Ltd is administering the process on behalf of Argyll College UHI. Contact details are as follows: Charyleen Emslie, APUC Ltd, Tel 07920889210, cemslie@apuc-scot.ac.uk.

Yours sincerely,

Charyleen Emslie
Supply Chain Manager
APUC Ltd

OVERVIEW OF REQUIREMENTS

1. General Overview

Argyll College UHI are looking to award a contract to a single supplier for the provision of Internal Audit Services.

2. General Scope of Goods & Associated Services:

The appointed Contractor shall:

- Provide the Services as described in Schedule 3 – Specification.

3. Period of Contract

This contract is for an initial period of 3 years with the option to extend for two further 12 month periods, subject to ongoing requirement, budget and contractor performance.

4. Procurement Timetable

Tender Issued	4th March 2019
Deadline for Supplier Questions	19th March 2019
Deadline for Publication of Question Responses	26th March 2019
Tender Return	5th April 2019
Contract Award Date	1st August 2019

STATEMENT OF REQUIREMENTS

1. Background

Argyll College UHI Ltd is a non-incorporated College which operates through the medium of a Company Limited by Guarantee holding Charitable Status.

The Board of Governors is aware of the need for effective internal financial control and acknowledges its responsibility for the systems operated by the College as an element of its duty to manage and conduct the College.

To this end, the College utilises an internal audit service contracted to external firms, the work of which concentrates on areas of key activities determined by an analysis of the areas of

greatest risk. Internal audit work is delivered in accordance with the annual internal audit plan approved by the Audit Committee. The internal auditors report to the Principal and to the Audit Committee and have direct access to the Chair of the Board of Governors and to the Audit Committee.

2. Control

The College has developed a committee structure which enables the Board of Governors to exercise its function at a strategic level whilst maintaining proper oversight of operational matters through monitoring and control systems.

3. Funding

The College's largest source of income comes from the Scottish Funding Council (SFC) currently through UHI (EO). In 2019-20 grants from the SFC through UHI will make up 82% of projected income. In addition, tuition fees are received from the Scottish Awards Agency for Scotland (SAAS) and there are commercial fees received from a number of sources. The College also has responsibility for administering student support funding received from the SFC, SAAS and the Educational Maintenance Allowance programme.

4. Budget Financial Year 2019-20

The budget for the financial year ending 31 July 2019 will be in the region of £6 million gross. Payroll costs accounts for approximately 70% of budgeted expenditure. The College will deliver approximately 6700 credits in 2019-20, and places for 220 HE students.

5. ONS Reclassification

Argyll College UHI Ltd has not been reclassified and does not therefore need to transfer any surpluses to an Arms-Length Charitable Foundation.

6. Terms of Reference

The Internal Audit Service is responsible for conducting an independent appraisal of all the College's activities, financial and otherwise, with the exception of the academic process. It should provide a service to the whole organisation, including the Board of Governors and all levels of management. It is not an extension of, nor a substitute for, good management. The Internal Audit Service is responsible for giving assurance to the College's Board of Governors and to the College Principal on the control arrangements as defined in the approved audit needs assessment. It also assists management by evaluating and reporting to them on the effectiveness of the controls for which they are responsible. It remains the duty of management, not the internal auditor, to operate an adequate system of internal control. It is for management to determine whether or not to accept audit recommendations and to recognise and accept the risks of not taking action.

7. Scope

(i) All the College's activities, funded from whatever source, fall within the scope of the Internal Audit Service. The Internal Audit Service will consider the adequacy of arrangements for risk management, control and governance and for economy, efficiency and effectiveness. This will include all operations, resources, staff and services. It will assess whether management has taken the necessary steps to

achieve these objectives. The scope of internal audit work should cover all operational and management controls, including those at centre level, and should not be restricted to the audit of those systems and controls necessary to form an opinion on the financial statements. This does not imply that all systems will be subject to review, but that all will be included in the audit needs assessment and hence considered for review in the context of assessed risk. The audit needs assessment will therefore be prepared initially without regard to constraints such as the time and resources which may be available.

(ii) The scope and detail of the terms of reference must be such that they enable the Head of the Internal Audit Service to provide the Board of Governors with the appropriate quality of assurance on the adequacy, reliability and effectiveness of the College's internal control system.

(iii) The Head of Internal Audit Service must advise the Board of Governors of the risks to which it, and the College, may be exposed if the scope of the audit coverage is limited in any way. Where the Head of Internal Audit Service believes that any limitations are unacceptable, his or her views and opinion on the associated risks must be formally reported to the Chair of the Board of Governors, the Chair of the Audit Committee and the College Principal.

(iv) It is not within the scope of the Internal Audit Service to question the appropriateness of policy decisions. However, the Internal Audit Service is required to examine the arrangements by which such decisions are made, monitored and reviewed and report on their impact if felt necessary.

(v) The Internal Audit Service may also conduct any special reviews requested by the Board of Governors, Audit Committee or College Principal, provided such reviews do not compromise its objectivity, independence or achievement of the approved audit plan.

8. Responsibilities

(i) The Head of the Internal Audit Service should give an annual opinion to the Audit Committee, on the adequacy and effectiveness of the College's arrangements for risk management, control and governance and economy, efficiency and effectiveness. This opinion will be based on the agreed audit strategy and on the areas reviewed in the year. He or she should also comment on other activities for which the Board of Governors is responsible, and to which the Internal Audit Service has access.

(ii) To provide the required assurance the Internal Audit Service will undertake a programme of work over a cycle authorised by the Board of Governors on the advice of the Audit Committee, or directly by the Audit Committee under delegated authority. The work to be carried out by the internal auditor will be determined by an analysis of the areas of greatest risk and be defined within an internal audit plan. The programme will have the following objectives:-

    a. To appraise the soundness, adequacy and application of the whole internal control system.

    b. Evaluate those systems, identify inappropriate or inadequate controls, and recommend improvements in procedures or practices.

     c.   Ascertain that those systems of control are laid down and operate to promote the most economic, efficient and effective use of resources.

     d.   Draw attention to any apparent uneconomical or otherwise unsatisfactory result flowing from decisions, practices or policies.

     e.   Liaise with external auditors.

9. Approach

(i)   The Internal Audit Service's work will be performed with due professional care, in accordance with appropriate professional auditing practice.

(ii)   In achieving its objectives, the Internal Audit Service should:

     a.   Identify all elements of control systems on which it is proposed to rely, and establish a review cycle.

     b.   Evaluate those systems, identify inappropriate or inadequate controls, and recommend improvements in procedures or practices.

     c.   Ascertain that those systems of control are laid down and operate to promote the most economic, efficient and effective use of resources.

     d.   Draw attention to any apparently uneconomical or otherwise unsatisfactory result flowing from decisions, practices or policies.

     e   Liaise with external auditors.

10. Reporting

The internal auditors formally report to the Audit Committee and have direct access to the Chair of the Board of Governors and to the Audit Committee.

The Audit Committee is currently scheduled to meet four times during each financial year.

The Audit Committee will receive and approve the following reports from the internal auditors:

- an annual internal audit plan, setting out the intended scope of works for the year;

- reports on specific studies finalised since the last meeting;

- an annual internal audit report at the end of each year, reviewing the work over the period, recommendations made, progress in implementation of recommendations, and implications for future years' internal audit work;

- any other reports which the internal auditors, together with the Secretary to the Board of Governors and Chair of the Audit Committee, believe to be cognisant to the work of the Committee.

In carrying out strategic and operational audit planning, the internal auditors will liaise in the first instance with the Finance Director who has operational responsibility for the work of the

internal auditors and for implementing their recommendations, agreed through the Audit Committee. Internal Auditors will also be required to undertake regular liaison with the Finance Director to review the progress of specific studies and performance against the approved audit plan.

The Head of the Internal Audit Service should report to the Audit Committee any serious weaknesses in internal control systems, significant fraud, or major accounting or other control breakdown discovered during the normal course of audit work.

Internal audit should produce a draft report to the Finance Director of areas under audit normally within 20 days of the conclusion of each audit assignment. The draft report should set out the findings and recommendations arising and also an opinion on the adequacy and effectiveness of that part of the system of internal control reviewed.

All recommendations made in internal audit reports should be appropriately graded. The Finance Director should formulate, with the approval of the Audit Committee, criteria for grading recommendations.

The draft report should normally be discussed with College representatives and the factual accuracy and balance agreed with them prior to issue of the final report. College representatives should be required to respond to audit reports, normally within 30 days stating their proposed action with a time plan for implementing agreed recommendations and the person responsible for each action point. The Finance Director should assist in the timely completion of reports and appropriateness of responses in the context of overall planning and resource allocation.

The information must be incorporated in the final version of the report. Internal audit must follow up recommendations to ensure that appropriate remedial action has been or will be taken within an acceptable timeframe. The outcome of this follow up should be reported to the Audit Committee.

The Head of Internal Audit Service must produce an annual report on their activities. The report should be addressed to the Chair of the Audit Committee as part of the full Annual Audit Report for The Board of Governors and should be considered by the Audit Committee. The report should be for the College's accounting period and be submitted to the audit Committee when it is available, It is important that the Audit committee receives the IAS's report in time to give it due consideration before producing its annual report to the Board of Governors.

As a minimum, the report produced by the Head of Internal Audit Service should include:

- The Head of Internal Audit Service's opinion on the adequacy and effectiveness of the College's arrangements for risk management, control and governance and economy, efficiency and effectiveness. This opinion needs to be considered in a context in which audit coverage should be based which is the work undertaken as agreed in the Audit Needs Assessment. In arriving at an opinion, the Head of IAS should take into account findings and conclusions from the systems that have been audited during the year, as well as in previous years (including, as appropriate, opinions from previous auditors) and any known significant changes to the College's risk profile that are likely to impact on future audit coverage.

- The Head of Internal Audit Service's opinion on whether proper arrangements are in place to promote and secure value for money;

- An analysis of common or significant weaknesses arising;

- An executive summary of each Internal Audit Service report;

- A comparison of the Internal Audit Service's achieved performance during the year with that planned, placed in the context of the internal audit needs assessment and incorporating information regarding slippage/ reprioritisation of work during the year;

- Details of any major audit findings where management action appears to be desirable, but has not been taken, including that identified in previous years' Internal Audit Service reports, and which, therefore, needs to be brought to the Board of Governors attention;

- The extent of achievement of any objectives which may have been agreed for the internal audit service; and

- The operational plan for the year following the year in which the report is written, including narrative explanation of variances from strategic plan.

The Head of Internal Audit Service or agreed appropriate representative will be required to attend each Audit Committee meeting unless requested not to do so by the Chair of the Audit Committee.

11. Independence

Independence enables internal auditors to appraise the internal control system in the impartial and unbiased manner essential to the proper conduct of audits. Recognition of the independence of internal audit is fundamental to its effectiveness. For the individual auditor, independence is essentially an attitude of mind characterised by integrity and an objective approach to work.

The Head of Internal Audit Service should determine the Service's own priorities within a plan prepared after consultation with senior management and approved by the Board of Governors, on the recommendation of the Audit Committee.

In considering the work to be undertaken by the Internal Audit Service, the following key points must be considered:

- Internal auditors must avoid any official, professional and personal relationships or interests which might cause them to limit the extent, approach or nature of their audit.

- If the Internal Audit Service is called upon to carry out specific investigations, such reviews must not compromise its objectivity or independence and should not, if avoidable, compromise significantly the achievement of its audit plan.

- The Internal Audit Service, therefore, must be a separate function from the management of the College and should not have any management responsibilities other than for internal audit.

- To be effective, the Head of Internal Audit Service must have sufficient status and be seen to have the respect and support of the College's senior management as well as that of The Board of Governors.

12. Right of Access

The Internal Audit Service has rights of access to all of the college's records, information and assets which it considers necessary to fulfil its responsibilities. Rights of access to other bodies funded by the college should be set out in the conditions of funding. The Head of the Internal Audit Service has a right of direct access to the Chair of the Board of Governors, the Chair of the Audit Committee and the College. The Internal Audit Service will agree to comply with any requests from the external auditors for access to any information, files or working papers obtained or prepared during our audit work that they need to discharge their responsibilities.

13. Confidentiality

All information obtained during the course of any audit and all reports prepared shall be treated as confidential and remain the property of the college. Any such information or report shall not be divulged to any other party whatsoever without the express approval in writing of either the Principal or Board of Governors.

14. Internal Audit Standards

The internal audit service's work will be performed with due professional care, in accordance with appropriate professional auditing practice. It will have regard to Treasury and IIA standards. Internal auditors must also have regard to relevant advice provided by professional auditing and accountancy bodies, and any guidance produced by SFC. Reference should also be made to the relevant sections of the Government Internal Audit Manual, issued by HM Treasury for Guidance.

In achieving its objectives the internal audit service will develop and implement an audit strategy that assesses the institution's arrangements for risk management, control and governance and for achieving value for money

The Head of Internal Audit Service should implement measures to monitor the effectiveness of the service and compliance with standards. In addition, the Audit Committee will consider and approve the performance measures used by internal audit, and will also consider asking the external auditor to provide an independent assessment of internal audit's effectiveness.

15. Performance Audit

The Audit Committee will undertake an annual review of performance against objectives and plans and will undertake an objective review of the overall performance of internal audit and its compliance with relevant policies and standards.

Internal audit, as an integral part of the systems based approach, should evaluate the control arrangements established and operated by management to achieve the economic, efficient and effective use of resources.

Over the complete audit cycle, Internal Audit Service must provide a comprehensive appraisal of management's arrangements for achieving value for money.

16. Relationship with External Auditors

The internal auditor is required to liaise with the college's external auditors to enhance the level of service provided and avoid duplication of effort. The external auditors shall have access to the internal audit files.

17. Quality Standards

The successful tenderer is required to produce a high quality service to meet the requirements for Internal Audit Services of the College.

18. Contract Management

The successful tenderer shall have in place a team of professionally trained, adequately experienced staff under Senior Management Control.

There shall be a proper management structure in place as well as control methods with adequate staffing to ensure service requirements are met at all times.

The successful tenderer shall have in place appropriate performance and service delivery controls.

Management information shall be provided to the College on an annual basis providing level of staff, number of hours and cost.

The Internal Audit Services shall be carried out between the hours of 9am and 4.30pm. An out of hours service may be required from time to time.

19. Continuous Improvement

The successful tenderer shall ensure that continuous improvement measures are incorporated into the contract and that quality of the service is reviewed on an ongoing basis.

The College strives to ensure that it is getting value for money at all times. The successful tenderer shall ensure that procedures are in place to carry this out throughout the contract term.

20. Change of Internal Auditors

In the event of a change to the contractor providing the service or the arrangements for the provision of an internal audit service, relevant information will be passed to the head of the new audit service provider.

21. Variation in Fees

The fees applied to this agreement will be fixed for the duration of the contract. Following this initial 3 year period, the fees may vary up or down in accordance with the % increase/decrease

in RPI/CPI during the preceding twelve month period as shown in latest published indices at the time of the request. Variations must be agreed by the college.

22. Freedom of Information Act

Argyll College UHI Ltd undertakes to use reasonable endeavours to hold confidential any information provided in the proposal submitted, subject to the College's obligations under law, including the Freedom of Information Act 2000 and the Public Contracts Regulations 2006 as amended by the Public Contracts (Amendment) Regulations 2009.

If the tenderer considers that any of the information submitted in the proposal should not be disclosed because of its sensitivity, then this should be clearly stated in your response with your reason for considering it sensitive. The College will then consider the sensitivity statement before replying to any request received under the Freedom of Information Act 2000.

23. Equal Opportunities

The college is committed to equal opportunities and diversity and the successful applicant must comply with the college's aspirations.

SCHEDULE 4

TERMS AND CONDITIONS

The prevailing terms and conditions of Framework Agreement Reference PFB1028 AP.

SCHEDULE 5

TENDER EVAULATION

Award Criteria	Weighting
Technical	**50%**
Technical Questions	
1. Service Delivery Management	10%
2. Staffing & Resources	10%
Presentation Questions	
1. Service Delivery	15%
2.Value Added Services	5%
3. Quality Assurance & Continuous Improvement	10%
Commercial	**50%**
	100%

Technical Evaluation – 50%

Sub-Criteria division:

Responses will be assessed and scored (0-3) in line with the following scoring methodology:

Good	3	The response fully meets the requirement and demonstrates Tenderer's relevant ability, understanding, experience, skills, resource & quality measures required to supply the goods / services. The response identifies factors that will offer potential added value, with evidence to support the response.
Acceptable	2	The response addresses most of the key points in detail OR the Tenderer has provided all the key points but lacks detail in answering the question fully. The response provides confidence that the supplier can supply the required equipment/service to the satisfactory level.
Minor Concerns	1	Satisfies the requirement with minor reservations. Considerable reservations of the Tenderer's relevant ability, understanding, experience, skills, resource & quality measures required to supply the goods / services, with little or no evidence to support the response.
Major Concerns	0	The Tenderer has failed to address the question, submitted a nil response or any element of the response gives cause for major concern.

Commercial Evaluation – 50%

Total Cost for the Provision of Internal Audit Services. (LOWEST bid received/YOUR bid) x 50 (Total maximum potential score of 60)

Example provided for:
Bid A   (£10,000/£10,000) x 50 = 50%
Bid B   (£10,000/£14,500) x 50 = 34%
Bid C   (£10,000/£16,000) x 50 = 31%

SCHEDULE 6

PRICING SCHEDULE

Please complete and return Appendix I – Pricing Schedule and upload to PCS as an excel document. Please do not upload any documents as a PDF and do not amend the format of the sheet.

Variation in the Charges

Charges and discounts will remain fixed for the first 3 years of the Contract.

Invoicing & Payment

The Contractor will be required to submit invoices monthly in arrears for work completed to the satisfaction of Argyll College in accordance with the Terms & Conditions. Value Added Tax, where applicable, shall be shown separately on all invoices as a strictly net extra charge. Each invoice shall be uniquely identified and shall specify the following minimum information:

Order number (where relevant)
Contract title & reference number
Deliverable details
Charges and total due including a deduction for any applicable discounts

Any travel and subsistence expenses claimed (where pre-agreed)
Total value excluding VAT

Payment will be made to the Contractor within 30 days of receipt of a valid invoice

<u>Tenderers must note that:</u>

- The day rates/hourly rates/discounts/total cost is fixed for 36 months from the Commencement Date
- All Charges must be shown exclusive of VAT but be inclusive of materials, overheads and profit
- All day rates will be based on 7 hours and 30-minute working days, exclusive of lunch breaks.

SCHEDULE 7

TECHNICAL QUESTIONS

Q1. Service Delivery Management • Please provide a detailed implementation plan that will ensure the delivery of a high standard service from contract commencement of the contract. • Please provide 3 examples of audit reports that would be submitted to the Audit Committee.	**10%**
4Q1 Response:	
Q2. Staffing & Resources • Please provide a maximum two-page CV of the service delivery team demonstrating their understanding and technical ability to effectively project manage the contract and meet the requirements under the Statement of Requirements. • Please provide a brief of how you manage business continuity should the service delivery team no longer be available. • Please provide details on any area of the requirement that will be sub-contracted out and the controls that are in place to monitor and manage any sub-Contractor (details should also be provided on the process and checks carried out when appointing any sub-Contractor).	**10%**

Q2 Response:

PRESENTATION

30% of the Technical Evaluation will be awarded on a presentation to representatives from the Audit Committee on <mark>xx xx xx 2019</mark> at Argyll College UHI, <mark>xx Campus</mark>. Each tenderer must prepare a presentation based on the questions below. A copy of the presentation will be required to be provided post presentation.

Please contact cemslie@apuc-scot.ac.uk at your earliest convenience to book a suitable presentation slot. It is anticipated presentations should take a maximum of 1 hour.

Service Delivery	15%
Please discuss your approach and methodology to servicing this contract, answers should include but are not limited to; • What sets you apart from other audit providers? • What experience and knowledge you provide specific to the structure and geography of the institution relating to the statement of requirement • Details of how the transition will be managed to take over the service provision from the incumbent service provider. • Details of how work will be managed, appropriately allocated, appropriately supervised and quality assured. • Details of how audit risk is assessed and proposed approach to preparation, review and issue of reports • Action to keep abreast of Scottish Funding Council policy.	

Value Added Services	5%
Please outline any added value services that your organisation would provide to the Institution as part of this Contract, which should be at no extra cost to the Institution. Answers should include as a minimum: • The added value service(s) being offered • An overview of the benefits of the proposed added value services to the Institution, including how this can be quantified (e.g. costs savings, quality/other benefit) • How long any added value services offered would be open for acceptance of by the Inverness College UHI • Any conditions/exclusions attached to any of the added value services proposed	

Quality Assurance & Continuous Improvement	10%

Please detail how your organisation would ensure expected quality standards are maintained throughout the duration of this Contract, and how your organisation will seek to continually improve the services delivered under this Contract.

Answers should include:
- Any best practice, quality control measures, systems or processes that you would implement to ensure services are continually delivered to expected standards
- Any review or continuous improvement measures that you would implement to ensure continuing quality and value for money throughout the contract

Where a sub-contractor (s) is used, you must demonstrate your answer in line with use of sub-contractor (s)

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SCHEDULE 8

</div>

FORM OF TENDER

Provision of Internal Audit Services

REF: CS-AC-12914

Pursuant to the Mini Competition document issued by the Contracting Authority to the Tenderer, we the undersigned undertake that we have read the terms of the Mini Competition and agree to be bound by such terms and have submitted a Tender Response in accordance with the terms of the Mini Competition.

We *the* undersigned undertake as follows; to execute and deliver the specification of requirements, in accordance with the terms of the Contract and the Pricing Schedule submitted to the Contracting Authority as part of our Tender Response; and

1. confirm that we have not included any condition qualifying our Tender in any unauthorised manner or altered any aspect of the Mini Competition in any way; and

2. to confirm that our Tender Response shall remain open for acceptance by the Contracting Authority for a period of 90 Working Days from the date of this undertaking and we shall not withdraw this Tender during this period; and

3. to execute the Contract in the form contained within this tender and under these Terms and Conditions; and

4. understand that appointment to the Contract shall be valid upon acceptance and signature by both parties of the Contract. We confirm that our Tender Response

together with your acceptance thereof in writing shall constitute a binding Contract between us; and

5. understand that the award of the Contract will be based on establishing the Most Economically Advantageous Tender (MEAT) and the Contracting Authority is not bound to accept the lowest Tender Response or any Tender Response that fails to meet the stated mandatory requirements; and

6. we have submitted a bona fide Tender, intended to be competitive and we have not fixed or adjusted our price by or under or in accordance with any agreement or arrangement with any other Tenderer.

7. we have not and we undertake that we will not do at any time before the hour and date specified for the return of the Tender in the Mini Competition any of the following acts:

- communicate to a person other than an appropriate member of the Contracting Authority our Price to be included in our Tender, except where the disclosure, in confidence, of such Price (or any component thereof) is necessary to obtain information/advice required for the preparation of the Tender; or

- enter into any agreement or arrangement with (I) any other person resulting (whether directly or indirectly) in that person refraining from submitting a Tender or (ii) another Tenderer concerning any rates/fees submitted or to be submitted by that Tenderer in any Tender; or

- offer to pay or give or agree to pay or give any sum of money or valuable consideration directly or indirectly to any person for doing or having done or causing or having caused to be done in relation to any other Tender or proposed Tender for the Works any act or thing of the sort described above.

8. to confirm that we have not colluded, and will not collude, with any other potential or actual Tenderer in relation to the Contract, the Pricing Document and/or the Mini Competition in any way; and

9. having made relevant and comprehensive enquiries of our organisation and all the organisations referred to in our Tender and our professional advisers, at the date of this undertaking we are aware of no Conflicts of Interest (whether professional or commercial) nor, to the best of our knowledge, is there likely to be any Conflict of Interest, should the Tenderer and the organisations referred to in our Tender be appointed to perform the Contract; and

10. as soon as we become aware or ought to have become aware of any actual or potential Conflict of Interest which may impact on the Tenderer's performance of the Framework Agreement, we shall notify the Contracting Authority in writing.

11. we agree to bear all cost incurred by about the preparation and submission of this Tender and to bear any further costs incurred prior to the award of this Contract.

12. we confirm that all the information provided in this Tender Response is complete, true & accurate and I am authorised by relevant persons within this organisation to provide this information. We understand that failure to disclose information, or providing information which later proves to be false may result in our exclusion from this procurement process.

Signature:	
Name:	
Job Title:	

Duly authorised to sign Tenders for and on behalf of:

Name of Tenderer	
Telephone No	
E-mail	
Date	

SHEDULE 9

<u>Freedom of Information</u>

We would ask that Argyll College UHI withhold the following information from release under the Freedom of Information (Scotland) Act 2002/Environmental Information (Scotland) Regulations 2004 as appropriate:

Tender for: **The Provision of Internal Audit Services**
Reference: **CS–AC-12914**

Information <u>Not</u> to be Disclosed	Reason it should <u>not</u> be disclosed	Proposed Time the Restriction Should Apply For

Signature:	
Name:	
Designation:	

Duly authorised to sign Tenders for and on behalf of:

Name of Tenderer	
Date	

Appendixes

Appendix I –   Pricing Schedule
Appendix II –   Annual Internal Audit Plan
Appendix III – Strategic Planning Draft
Appendix IV – Risk Register
Appendix V –   Statutory Accounts

<u>CHECKLIST</u>

Your completed tender should be uploaded to the PCS Quick Quote facility prior to the closing date detailed in the Procurement Timetable.
Please allow sufficient time to upload and submit your tender response.

All documents should be titled:

Company Name – Document Name

All documents should be uploaded as separate individual documents in the relevant format as detailed below and throughout this Mini Competition document.

The documents you are required to return are as follows;

Appendix I – Pricing Schedule – In Microsoft Excel format
Schedule 7 – Technical Questions – In Microsoft Word
Presentation – Power point (please note this is due 5th April as part of the tender)
Schedule 8 – Form of Tender – In Microsoft Word or PDF format
Schedule 9- Freedom of Information- In Microsoft Word or PDF format

Pricing Schedule   **Appendix I**

Amount to be budgeted?

Annual Internal Audit Plan   **Appendix II**

Areas to be audited?

Strategic Plan   **Appendix III**

Risk Register   **Appendix IV**

Statutory Accounts   **Appendix V**

Minute of Learning, Teaching & Engagement Committee
held at 11 am on Friday, 1st March 2019 at Lorne Street, Lochgilphead

Present: Stella Leitch (SL) Chair; Andrew Campbell (AC); Martin Jones (MJ); Amber Crowley (AmC)
In Attendance: Elaine Munro (EM); Ailsa Close (AEC)

	Item	Action
19.1.1	**Welcome & apologies for absence.** Apologies from LH.	
19.1.2	**Declarations of interest & any items deemed to be confidential.** There were no declarations of interest.	
19.1.3	**Minute of previous meeting held on 22nd Nov 2018.** The minutes of the meeting were approved as an accurate record of the meeting and were signed by the Chair. **Action: These will be taken to the Board for noting**	EM
19.1.4	**Matters arising.** The committee noted the change in HGIOC grades. Leadership and quality changed from Satisfactory to Good by Education Scotland and SFC during the endorsement process. Committee delighted and feel this is the correct grading.	
19.1.5	**FE KPIs 2017/18 comparison with rest of college sector** FT KPIS we are very good compared to the rest of the sector. We were the second highest performing College in Scotland, lower only than Shetland College. At PT level, we're below the UHI average, and 4% below the national average. Further analysis of the data is required to identify the key areas of concern. One known area is high withdrawal within schools link courses. Schools will be issued with data relating to their courses and further discussions will take place to identify how we can improve this position. Engagement with A&BC education lead will also raise this as an issue. The committee wish further data on schools link KPIs to ebb rough to the next meeting. Noted we have appointed a new Schools Link person within the College and they are currently meeting with all the schools.	EM
19.1.6	**Early and further withdrawal for full time FE courses to date 2018/19** Not as good a picture as last year. Early withdrawal – 10%. Further withdrawal - 9%. Noted there will be further withdrawal between now and the end of the year. Issues with VC and IT network outages due to contractors working at Dunbeg digging up the connections. Only SAMS and Argyll College are affected. Agreed an all student email will be issued to explain what has occurred.	MJ
19.1.7	**Update on progress towards targets – 2018/19** a) FE Credits - currently achieving 91% of our FE target for this year, quietly confident that the target will be achieved in the year	

	b) HE FTEs – likely to achieve our revised ESR target of 199FTE, but that was revised down by 20 from our original target.		
19.1.8	**HE FTE predictions 2019/20** First predictions submitted for next year – just over 200 FTEs forecast for next year based on this year's actual numbers, but noted that it is difficult to forecast what recruitment will be year on year.		
19.1.9	**Internal operational Learning and Teaching committee remit** Strategy was approved this time last year for LT&E. Need a remit for an internal L & T committee to embed the strategy within the college and to inform the HGIOC reports in future years. This is for initial approval by the Board committee and then will be discussed and refined further by the staff committee. The committee felt the objectives could be made simpler in the report and suggested bullet points within a number of over arching headings. Concept approved but needs to be re-worded.	EM	

19.1.10	**Update on learning, teaching and enhancement items in last quarter:**
	    a) **Successful ESIF bid to fund 1FTE curriculum developer for HNC/D Production Horticulture/Horticulture Landscaping** – Noted
	    b) **Approval of CPD Leadership and Management programme in Tourism and Hospitality** – Noted. Does this tie in with H & I Emerging Leaders Programme? Will investigate.
	    c) **Pilot of new regional process for review of learning and teaching – Agreed as a key area by UHI Quality Forum.** Moray and Argyll are piloting the proposed process.
	    d) **UHI VLE migration – Blackboard to Brightspace – Noted.** Quite time intensive to migrate all of our materials over to the new Brightspace, but time frames are tight as everyone has to be moved over by Sept for the new academic year. Needs to be the teaching team who carry out this work. Opportunity to enhance existing learning and teaching materials and only migrate what is fit for purpose.
	    e) **New professional standards for lecturers in Scotland's Colleges –** Noted. Hosting a number of workshops across Scotland, interactive workshop, one hosted by WHC and staff being encouraged to attend that.
	
	Noted this was a helpful paper, and also how helpful the monthly bulletin is. EAC to check the January bulletin has been issued Board members.
		EM
		
		AEC	

19.1.11	**Student surveys**
	    a) **UHI region Early Student Experience survey (ESES)**
	    b) **National Student Survey (NSS)**
	    c) **SFC student satisfaction and engagement survey (SSES)**
	    d) **College leaver destination survey**
	
	Reports noted, and noted that Argyll College fairs well in the surveys.
	There is a need to highlight to FE students that the Centre Managers are their Personal Academic Tutors (PATs). Each HE student is allocated a PAT but this is not current practice for FE students.
	
	Schools Link students do not complete these surveys, but plans are to submit a different survey to school students with more relevant questions. There is an on-going need to ensure all tutors encourage their students to complete the surveys.		

19.1.12	**Any other business** There is a need to recruit an additional member to the L, T & E committee and preferably someone with tertiary education experience.		

19.1.13	**Date of next Learning, Teaching & Engagement Committee.** The next meeting will be held on 24th May 2019	
	Signed by ……………………………………………………………………… Date ……………………………………………. **Chair of Learning, Teaching & Engagement Committee**	

50 Suppression Threshold

Total FE/HE FT/PT = 1,423

Argyll College 17-18 Performance Indicators

Chart A. Outcomes for FE on recognised qualifications (full-time)

Year		Completed Successful	Partial Success	Withdrawal	Total
12-13	Full Time	167	34	75	276
13-14	Full Time	173	27	95	295
14-15	Full Time	137	17	59	213
15-16	Full Time	141	5	49	195
16-17	Full Time	145	19	44	208
17-18	Full Time	139	11	33	183

Year		% Completed Successful	% Partial Success	% Withdrawal	Total
12-13		60.5%	12.3%	27.2%	276
13-14		58.6%	9.2%	32.2%	295
14-15		64.3%	8.0%	27.7%	213
15-16		72.3%	2.6%	25.1%	195
16-17		69.7%	9.1%	21.2%	208
17-18		76.0%	6.0%	18.0%	183

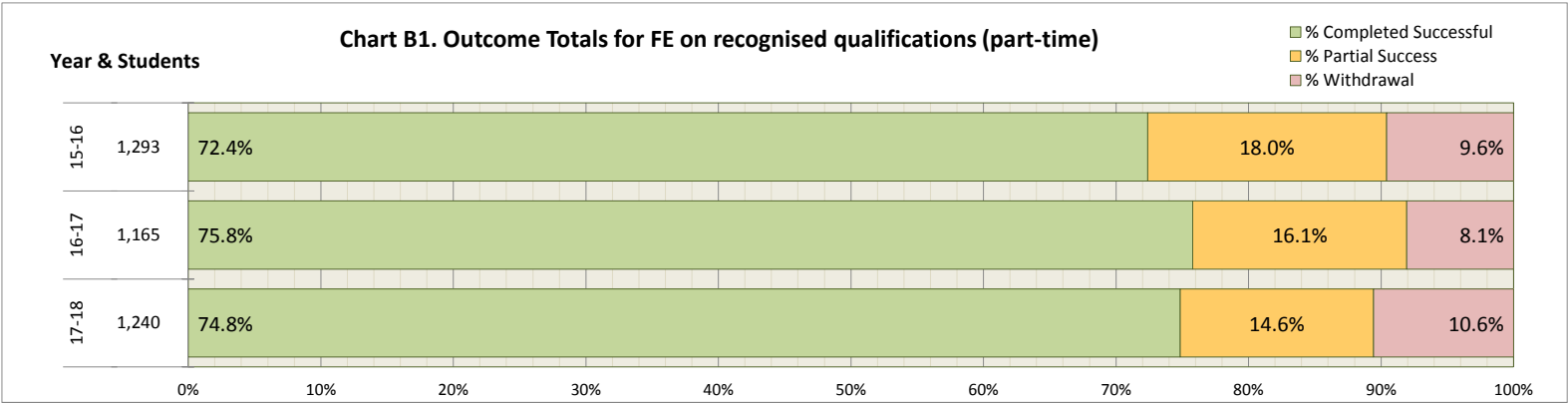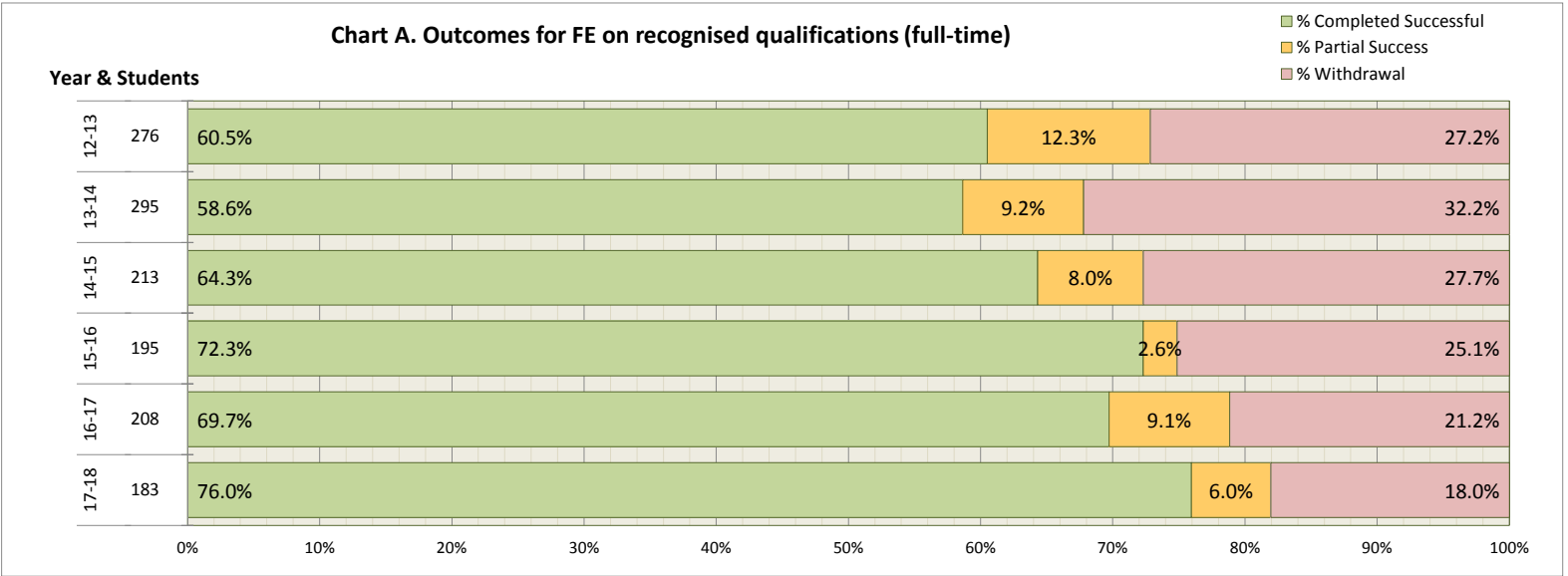**Chart A. Outcomes for FE on recognised qualifications (full-time)**

Year & Students

Chart B1. Outcome Totals for FE on recognised qualifications (part-time)

Year		Completed Successful	Partial Success	Withdrawal	Total
15-16	Total Part-Time FE	936	233	124	1,293
16-17	Total Part-Time FE	883	188	94	1,165
17-18	Total Part-Time FE	928	181	131	1,240

Year		% Completed Successful	% Partial Success	% Withdrawal	Total
15-16		72.4%	18.0%	9.6%	1,293
16-17		75.8%	16.1%	8.1%	1,165
17-18		74.8%	14.6%	10.6%	1,240

Chart B1. Outcome Totals for FE on recognised qualifications (part-time)

Year & Students

Chart B2. Outcome Breakdown for FE on recognised qualifications (part-time)

Year		Completed Successful	Partial Success	Withdrawal	Total
15-16	under 10 hours	195			195
	10 up to 40 hours	79	36	10	125
	40 up to 80 hours	239	59	18	316
	80 up to 160 hours	124	41	22	187
	160 up to 320 hours	249	90	69	408
	320 hours up to FT	50	7	5	62
16-17	under 10 hours	340			340
	10 up to 40 hours	27	38	13	78
	40 up to 80 hours	111	49	27	187
	80 up to 160 hours	109	29	21	159
	160 up to 320 hours	280	71	29	380
	320 hours up to FT				
17-18	under 10 hours	248			248
	10 up to 40 hours	85	22	10	117
	40 up to 80 hours	121	25	24	170
	80 up to 160 hours	46	20	11	77
	160 up to 320 hours	367	97	74	538
	320 hours up to FT	61	17	12	90

Year		% Completed Successful	% Partial Success	% Withdrawal
15-16	under 10 hours 195	100.0%		
	10 up to 40 hours 125	63.2%	28.8%	8.0%
	40 up to 80 hours 316	75.6%	18.7%	5.7%
	80 up to 160 hours 187	66.3%	21.9%	11.8%
	160 up to 320 hours 408	61.0%	22.1%	16.9%
	320 hours up to FT 62	80.6%	11.3%	8.1%
16-17	under 10 hours 340	100.0%		
	10 up to 40 hours 78	34.6%	48.7%	16.7%
	40 up to 80 hours 187	59.4%	26.2%	14.4%
	80 up to 160 hours 159	68.6%	18.2%	13.2%
	160 up to 320 hours 380	73.7%	18.7%	7.6%
	320 hours up to FT			
17-18	under 10 hours 248	100.0%		
	10 up to 40 hours 117	72.6%	18.8%	8.5%
	40 up to 80 hours 170	71.2%	14.7%	14.1%
	80 up to 160 hours 77	59.7%	26.0%	14.3%
	160 up to 320 hours 538	68.2%	18.0%	13.8%
	320 hours up to FT 90	67.8%	18.9%	13.3%

Chart C. Achievement for FE students with partial success

Number of students who complete their course without gaining any units / credits	31	25.0%
Number of students completing their course achieving up to 25% of planned units	8	6.5%
Number of students completing their course achieving 25 to 50% of planned units	15	12.1%
Number of students completing their course achieving 50 to 75% of planned units	17	13.7%
Number of students completing their course achieving at least 75% of planned units	53	42.7%
	124	**100%**

Chart B2. Outcome Breakdown for FE on recognised qualifications (part-time)
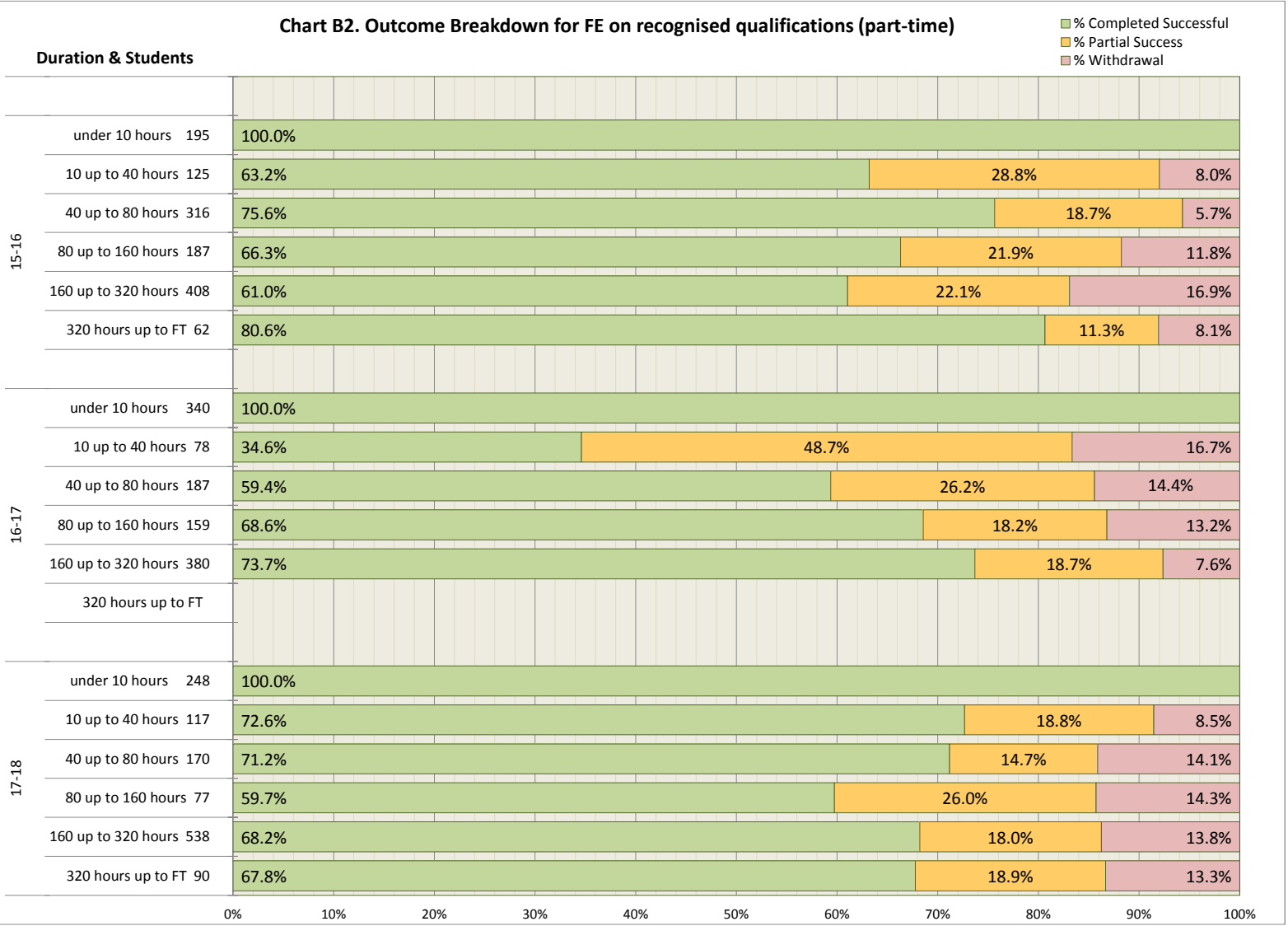Duration & Students

Chart C: Level of achievement for students funded by the SFC completing an FE course of 160 hours or more who did not achieve 'full' success (An overview of the 'Partial Success' group above)

- Number of students who complete their course without gaining any units / credits
- Number of students completing their course achieving up to 25% of planned units
- Number of students completing their course achieving 25 to 50% of planned units
- Number of students completing their course achieving 50 to 75% of planned units
- Number of students completing their course achieving at least 75% of planned units

Total FE/HE FT/PT =   1,423

Argyll College 17-18 Performance Indicators
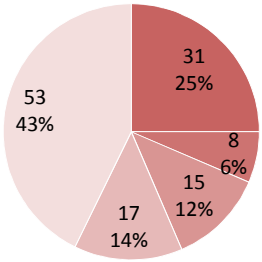
Chart D. Enrolments by age group on courses lasting 160 hours or more

	Completed Successful	Partial Success	Withdrawal	Total
under 18	334	86	73	493
18-20 year olds	52	10	14	76
21-24 year olds				
25-40 year olds	80	17	16	113
41 and Over	80	4	10	94

	% Completed Successful	% Partial Success	% Withdrawal
under 18 493	67.7%	17.4%	14.8%
18-20 year olds 76	68.4%	13.2%	18.4%
21-24 year olds			
25-40 year olds 113	70.8%	15.0%	14.2%
41 and Over 94	85.1%	4.3%	10.6%

Chart D. Enrolments by age group on courses lasting 160 hours or more

- % Completed Successful
- % Partial Success
- % Withdrawal

Age Group & Students

Age Group	% Completed Successful	% Partial Success	% Withdrawal
under 18 493	67.7%	17.4%	14.8%
18-20 year olds 76	68.4%	13.2%	18.4%
21-24 year olds			
25-40 year olds 113	70.8%	15.0%	14.2%
41 and Over 94	85.1%	4.3%	10.6%

Chart E. FE Enrolments by ES subject group on courses lasting 160 hours or more

	% Completed Successful	Completed Successful	Partial Success	Withdrawal	Total
Sport and Leisure					
Special Programmes					
Social subjects					
Science					
Performing arts					
Nautical studies					
Media					
Languages and ESOL					
Land-based industries	58.1%	50	17	19	86
Hospitality and tourism					
Hairdressing, Beauty and Complementary Therapies	74.8%	86	9	20	115
Engineering	79.7%	55	6	8	69
Education and training					
Construction	61.2%	41	10	16	67
Computing and ICT					
Care	79.8%	217	40	15	272
Business, Management and Administration					
Art and design					

	% Completed Successful	% Partial Success	% Withdrawal
Care 272	79.8%	14.7%	5.5%
Engineering 69	79.7%	8.7%	11.6%
Hairdressing, Beauty and Complementary Therapies 115	74.8%	7.8%	17.4%
Construction 67	61.2%	14.9%	23.9%
Land-based industries 86	58.1%	19.8%	22.1%

Chart E. FE Enrolments by ES subject group on courses lasting 160 hours or more

- % Completed Successful
- % Partial Success
- % Withdrawal

Subjects & Students

Subject	% Completed Successful	% Partial Success	% Withdrawal
Care 272	79.8%	14.7%	5.5%
Engineering 69	79.7%	8.7%	11.6%
Hairdressing, Beauty and Complementary Therapies 115	74.8%	7.8%	17.4%
Construction 67	61.2%	14.9%	23.9%
Land-based industries 86	58.1%	19.8%	22.1%

Total FE/HE FT/PT =   1,423

Chart F. Enrolments by level and gender on courses lasting 160 hours or more

	Completed Successful	Partial Success	Withdrawal	Total
FE Females	369	74	55	498
FE Males	197	50	64	311
HE Females				
HE Males				

	% Completed Successful	% Partial Success	% Withdrawal
FE Females 498	74.1%	14.9%	11.0%
FE Males 311	63.3%	16.1%	20.6%

Chart F. Enrolments by level and gender on courses lasting 160 hours or more

Chart G. Enrolments by key group on courses lasting 160 hours or more

	Completed Successful	Partial Success	Withdrawal	Total
All enrolments over 160 hours	567	125	119	811
10% Most deprived postcode areas				
20% Most deprived postcode areas	51	9	16	76
Fees paid by employer	71	9	4	84
Ethnic minority				
Disability	105	30	19	154
Year of study greater than first year				
Care Experienced				

	% Completed Successful	% Partial Success	% Withdrawal
All enrolments over 160 hours 811	69.9%	15.4%	14.7%
10% Most deprived postcode areas			
20% Most deprived postcode areas 76	67.1%	11.8%	21.1%
Fees paid by employer 84	84.5%	10.7%	4.8%
Ethnic minority			
Disability 154	68.2%	19.5%	12.3%
Year of study greater than first year			
Care Experienced			

Chart G. Enrolments by key group on courses lasting 160 hours or more

Chart H. Credit targets and achieved (core plus ESF where applicable)

	Credits/WSUMs	Year	Percentage
WSUMs achieved	6,707		
15-16 WSUM target	6,617	15-16	101.36%
Credits achieved	6,693		
16-17 Credits target	6,617	16-17	101.15%
Credits achieved	7,151		
17-18 Credits target	6,617	17-18	108.07%

Chart H. Credit targets and achieved (core plus ESF where applicable)

Chart J. Percentage of Full-time permanent teaching staff with a teaching qualification

	Permanent full-time teaching staff	Number with a Teaching Qualification	Year	Percentage
15-16	10	10	15-16	100.0%
16-17	6	6	16-17	100.0%
17-18	14	10	17-18	71.4%

Chart J. Percentage of Full-time permanent teaching staff with a teaching qualification
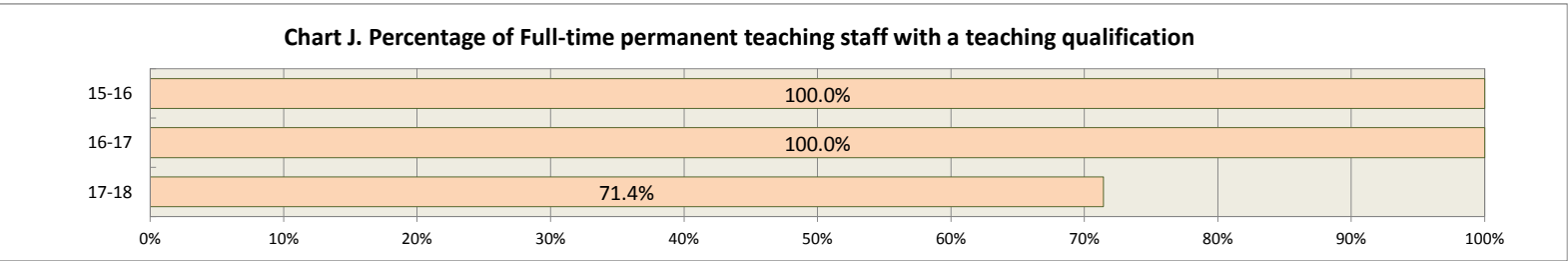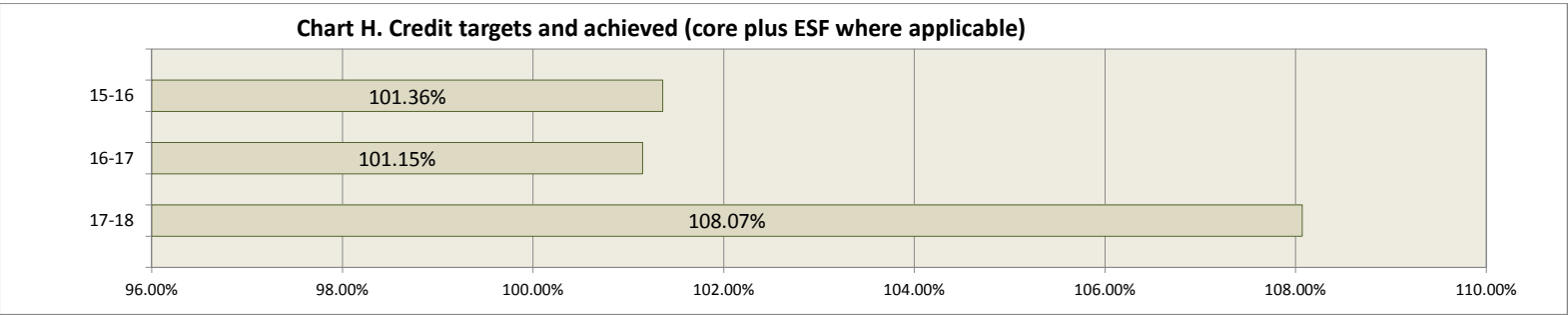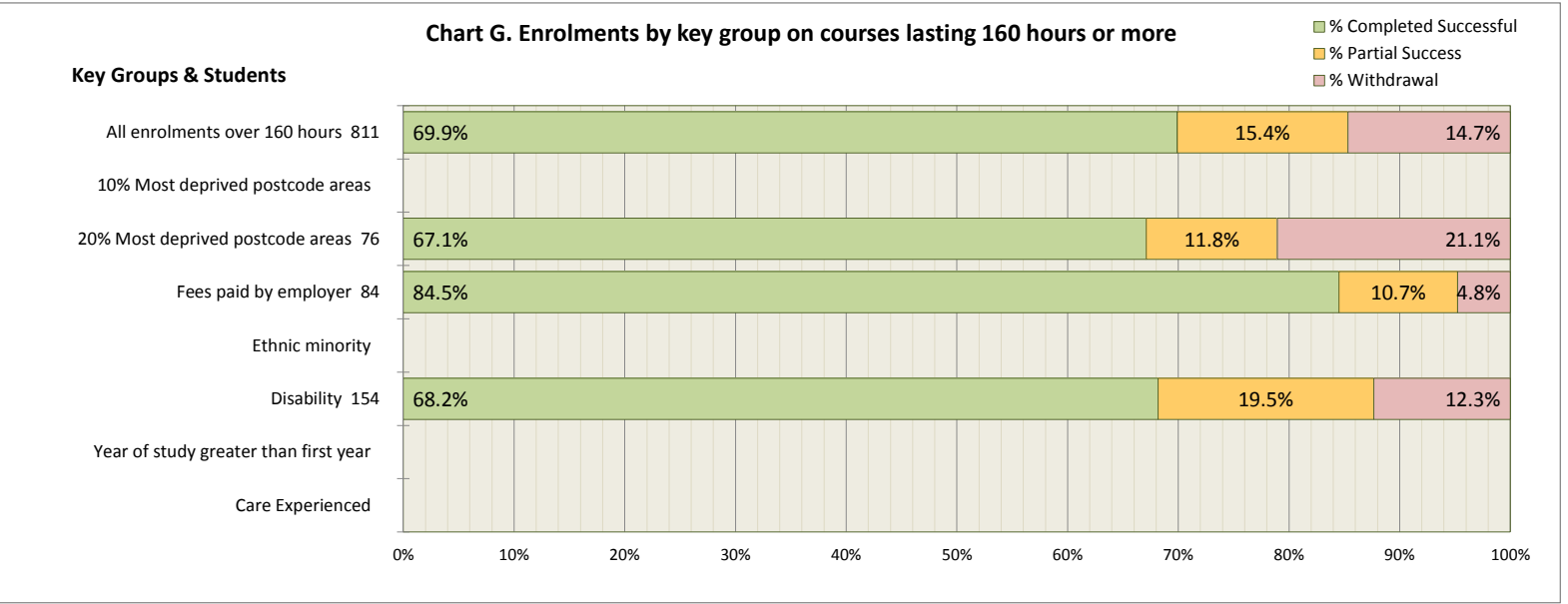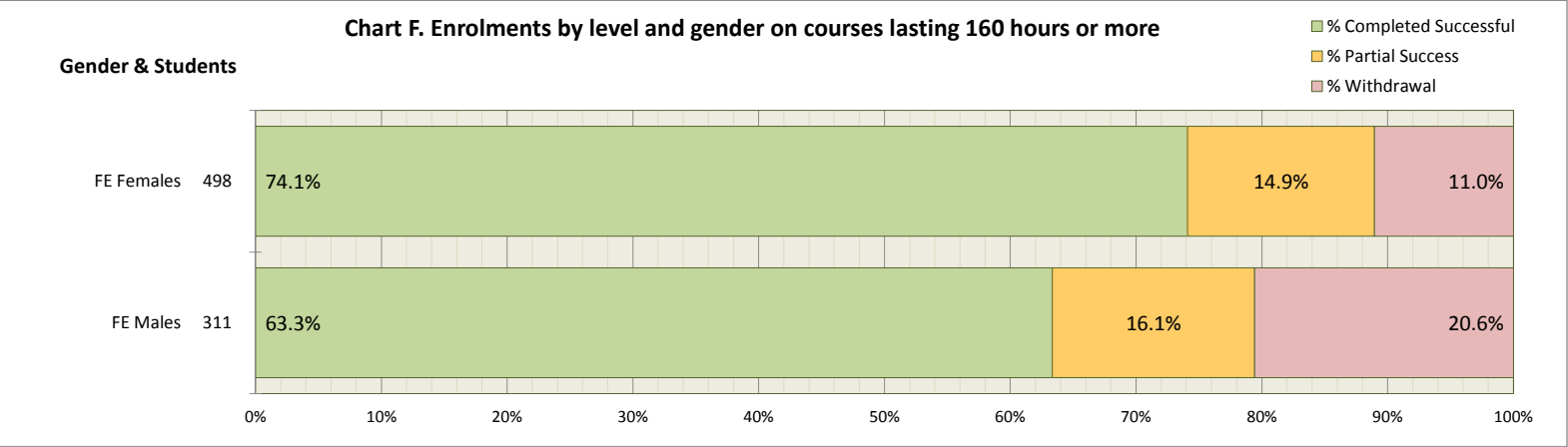
To: **Board meeting**

Date: **1 March 2019**

Status: **To Note**

Subject: **FE KPIs 2017/18 Comparison with rest of college sector**

Attached are the detailed KPI statistics for academic year 2017/18 in the format that we receive from the Scottish Funding Council (SFC). These are issued by SFC in Jan/Feb relating to the previous academic year and it is a requirement that each college in Scotland publish these KPIs on their website.

With regionalisation, mergers etc the number of colleges in Scotland has dropped from 45 in 2010 to 26 today – with 9 of the 26 being UHI partner colleges.

KPI comparison of Argyll College data with the overall college sector in Scotland and with the UHI sector:

Full time FE

	Success	Partial Success	Withdrawal
Overall college sector	66.1%	8.8%	25.1%
UHI colleges	70.3%	7.5%	22.2%
Argyll College	76.0%	6.0%	18.0%

Argyll College has the second highest success KPI for full time FE in Scotland just behind Shetland at 77.8%. We are 23.9 percentage points above the lowest performing college in Scotland (Newbattle at 52.1%) in 2017/18

SFC have set a target success KPI for full time FE for 2019/20 of 73.2%. Of the current 26 colleges in Scotland only 4 have exceeded this target in 2017/18 – Dundee & Angus, Shetland, Orkney and Argyll.

Students studying for more than 160 hours in the following subject areas had a higher successful outcome in Argyll College compared to the average success rate for these areas across all colleges in Scotland: Care, Childcare, Engineering, Art and Design, Hairdressing and Beauty, Computing and ICT, Hospitality and Catering.

Part time FE

	Success	Partial Success	Withdrawal
Overall college sector	78.2%	11.6%	10.2%
UHI colleges	84.9%	9.1%	6.1%
Argyll College	74.8%	14.6%	10.6%

We are below the Scotland sector success KPI and significantly below the UHI partnership for part time FE – in fact we are third lowest within the 9 UHI partner colleges.

The data is further analysed to show KPIs by duration of course:

Duration of course	Student numbers	Success	Partial Success	Withdrawal
Under 10 hours	248	100%		
10 – 40 hours	117	72.6%	18.8%	8.5%
40 – 80 hours	170	71.2%	14.7%	14.1%
80 – 160 hours	77	59.7%	26.0%	14.3%
160 – 320 hours	538	68.2%	18.0%	13.8%
320 – full time	90	67.8%	18.9%	13.3%

Almost half of all part time students are studying courses of duration 80 -160 or 160-320 hours. These are mainly schools link students studying Skills for Work courses or students (either schools link or students who have left school) studying Highers or National 4/5 courses.

There is a high withdrawal rate in schools link courses and a high partial achievement. These are areas that we continue to work closely with schools to address: encouraging schools to stop the practice of selecting pupils for college courses and allow pupils to self select college courses during options choices, as well as ensuring pupils have the appropriate information to make an informed decision on course selection, understand the commitment required and involving all school pupils in an interview process before being accepted onto the course.

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To: **Board meeting**

Date: **1 March 2019**

Status: **To Note**

Subject: **Early withdrawal and Further Withdrawal KPIs – full time FE 2018/19**

The early withdrawal statistic is any student who has withdrawn before 1st November. 18 full time students have withdrew before 1st November, giving an early retention percentage of 90% or an early withdrawal percentage of 10%.

Further withdrawal is any student withdrawing from their course after 1st November. Currently an additional 16 students have withdrawn, giving a student retention percentage or 81% or a further withdrawal percentage of 9%

This means that to date 19% of all full time FE students who enrolled on courses this year have already withdrawn. This is already higher than the total overall withdrawal of full time FE students last year (AY 2017/18 - 18% withdrawal), with more students likely to withdraw before the end of this academic year. There will be further engagement with teaching teams to assess the reasons for this increase in student withdrawal to inform actions that can be put in place to mitigate this in future.

The table below provides detail of the number of students enrolled on each full time FE course, the early withdrawal figures and current further withdrawal:

Course	Students enrolled in 2018/19	W/d before 1st Nov 2018	Further w/d
SVQ Professional Cookery at SCQF levels 4,5,6	12	1	1
NC Computing with Digital Media	5	0	1
Access to HN Business, Admin & Computing	18	4	1
NC Social Science	11	4	3
NPA Construction	10	1	1
NC Engineering Systems	5	0	0
Art and Design	5	0	0
NC Sport and Fitness	8	1	2
SVQ Hairdressing at SCQF levels 4,5, 6	18	2	0
NC Early Education and Childcare	12	0	2
SVQ Social Services (Children & Young People) at SCQF level 6 & 7	53	5	5
Education for Life – 3 different programmes	22	0	0
TOTALS	**179**	**18**	**16**
Percentage withdrawal		**10%**	**9%**

To: **Board meeting**

Date: **15 March 2019**

Status: **To Note**

Subject: **FE and HE progress towards target 2018/19**

FE 2018/19

The FE credit target for 2017/18 is 6682, consisting of 6582 core credits and 100 ESF funded credits. This is the first year the college has been allocated ESF funded credits from the region. For the last three years our credit count has been 6617, so a slight increase this year in response to over achieving our credit target last year by over 100 credits.

To date our credit count is 6108, which is 91% of target and where we would expect to be at this time of year. With current planned activity and a continued focus it is expected that the credit target will be achieved.

HE 2018/19

HE FTEs are below predicted numbers for the first time in several years. Predicted FTEs made in November 2017 were 220 FTE, the revised prediction made at ESR in December 2018 was 199 FTE and the current count is 193.1 FTE

There may be some slight increase in the next few months, once all unit and module attachments have been made to all students, however it is unlikely that the final count will achieve the revised ESR prediction.

The reduction is in full time student numbers: 26 fewer full time students enrolled on HE courses this year with the majority of this reduction on courses taught by the college. The following courses did not recruit sufficient students to run this year: HNC Applied Science, HNC and HND Agriculture and HNC Sport & Fitness. In previous years we have taught HND Business but in 2018/19 there was a faculty decision to progress students from HNC Business to year 2 of the Business degree and cease delivery of the HND. While these students will still be enrolled and supported by Argyll College the teaching comes from other UHI partners.

The table below compares FTEs and student headcount for the last 4 academic years:

		Headcount		
	FTEs	Total	Full time	part time
2018/19	193.1	262	169	93
2017/18	221.6	290	195	84
2016/17	180.5	226	165	61
2015/16	165.5	212	146	66

To: **Board meeting**

Date: **15 March 2019**

Status: **To Note**

Subject: **HE FTE predictions 2019/20**

The first round of predictions for HE FTEs for 2019/20 have been submitted and are shown below:

	Full Time		Part time		Totals
	Taught	HAP	Taught	HAP	
FTE	123	53	9.1	15.35	200.45 FTEs
Headcount	123	53	13	43	232 Heads

The table below shows the FTE and Headcount totals for the last 4 academic years as a comparison.

		Headcount		
	FTEs	Total	Full time	part time
2018/19	193.1	262	169	93
2017/18	221.6	290	195	84
2016/17	180.5	226	165	61
2015/16	165.5	212	146	66

To: **Board meeting**

Date: **15 March 2019**

Status: **To Note**

Subject: **Student Surveys**

Below is a brief description of the main student surveys carried out each year.

a) **UHI Regional Early Student Experience Survey (ESES)**
   This survey is a UHI regional survey conducted in October/ November each year to gauge student satisfaction related to their application and pre-enrolment period through the first few weeks at college. The regional report related to 2018/19 is attached for information.

b) **National Student Survey (NSS)**
   The National Student Survey (NSS) is a UK-wide survey which asks final year undergraduates about their experience on their course. The survey is administered by Ipsos Mori and responses are anonymous.

   The NSS results are published on the Unistats website and the data is intended to help potential students and their advisers compare subjects and make informed choices about what and where they study. The results from the NSS are used by most institutions to enhance learning and teaching and NSS scores influence a university's reputation and the recruitment of new students. Students in their final year of study are eligible to complete the NSS and this year Argyll College has sufficient numbers for our results to be analysed in their own right rather than aggregated with other smaller cohorts within UHI, providing we can achieve a high response rate. The survey runs until mid April and results will be available from September onwards.

c) **SFC student satisfaction and engagement survey**
   The Student Satisfaction and Engagement Survey (SSES) is conducted over a four week period between mid-March and the end of April – colleges can choose when they actually run the survey during this time. This survey is for all students studying more than 4 credits or carrying out more than 160 hours of study time but does not include students eligible for the NSS. The first 10 questions are set by the Scottish Funding Council (SFC) and the analysis of these questions will be returned to SFC so that the results can be compared nationally.

   This year the UHI region have agreed to have a further bank of approximately 20 questions that will be used across most of the partners to enable benchmarking across the region. These questions are still being finalised, but will be ready in time for the survey to launch around the 11th of March. Argyll College is aiming to achieve a 60% response rate in this survey. This is an ambitious target but we would hope to at least be very close to it if we do not completely meet it.

d) College leaver destination survey

The SFC College Leaver Destination Survey tracks the destinations of full time further education students who completed their studies in the academic year 2017/18. Argyll College staff attempt to contact all last year's leavers to confirm what they are currently doing. This information is then returned to SFC at the end of March so that destinations can be compared for all college leavers across Scotland. The final analysis of this survey will then be published by SFC in the Autumn.

Early Student Experience Survey Summary Report

Contents

1   Introduction

This is the first year of conducting the Early Student Experience Survey (ESES) as a UHI-wide regional survey. This report summarises the region-wide results of the 2018/19 survey. Key results are covered in sections 3-6 with full results given in the appendix.

2   Background and methodology

In the lead up to the survey Quality Forum (QF) created a regional working group with membership from Inverness, North Highland, Perth and Moray Colleges, led by West Highland. The regional approach initiates a common and structured way to survey students across the partnership. Notably the agreed approach consists of:

- Use of one online survey system
- A common set of questions (demographic data plus 24 core questions)
- Defined and relevant target groupings of students
- Fully online with responses directly from individual students
- Ability to benchmark against regional results

The agreed student sample for the regional survey was:

FE students	Full time and substantive part time
HNC students	Full time and substantive part time
HND students	Year 1 students only. Full time and substantive part time
UG degree students	Students in years 1-3. Full time and substantive part time. Stand-alone infill students EXCLUDED

3   Headlines

- 4901 of 8552 targeted students responded to the survey giving an overall response rate of **57%**
- Satisfaction is extremely high with 96.7% of FE students, 94.47% of HE students and 95.84% of all agreeing with statement "Overall, I'm satisfied with my student experience so far".
- A higher proportion of students declaring "I have a disability, impairment or medical condition" selected Disagree or Strongly Disagree in relation to this first question than within other demographic categories.
- Questions concerning awareness of PATS and class reps showed the largest variation with awareness of PATS ranging from 64.29%-100% and awareness of class reps ranges from 37.5%-91.04%.
- Awareness of PATs tends to be higher among HE than FE students but awareness of class reps is higher among FE than HE students
- Student awareness of HISA is very healthy with a regional score of 83.34%. Awareness is lowest among students enrolled through EO (60%). Awareness is slightly higher among FE than HE students.

4   Response rates[1]

	AC	IC	LLC	MC	NHC	OC	PC	SAMS	SC	EO	WHC	Region
Target number of students		3655	260	1401						44	397	8552
Number of responses		1876	134	934						8	283	4901
Response rate		51%	51%	67%						18%	71%	57%

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[1] At the time of writing I was unable to access response rates for all colleges. HAF

5   Overall satisfaction

Figure 1 below shows results for the first question, giving the percentages of respondents selecting each option in relation to the statement "Overall, I'm satisfied with my student experience so far". Scores for this question were extremely high with the percentage of students selecting 'Strongly Agree' or 'Agree' being 96.7% for FE students, 94.47% for HE students and 95.84% for all students.
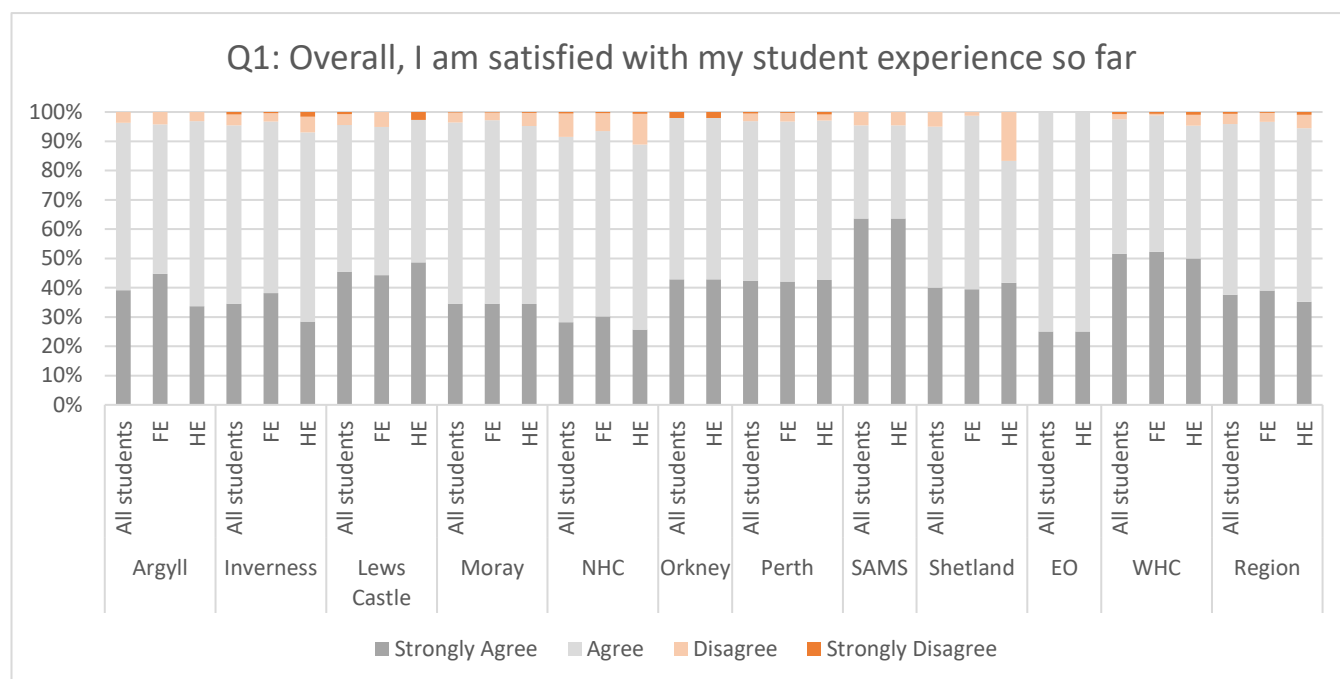

Figure 1: ESES 2018-19. Results for question 1, disaggregated by college and FE/HE

Figure 2 below shows results for the first question, by student characteristics: age, gender, disability and care experience. A higher proportion of students declaring "I have a disability, impairment or medical condition" selected Disagree or Strongly Disagree than within other categories.
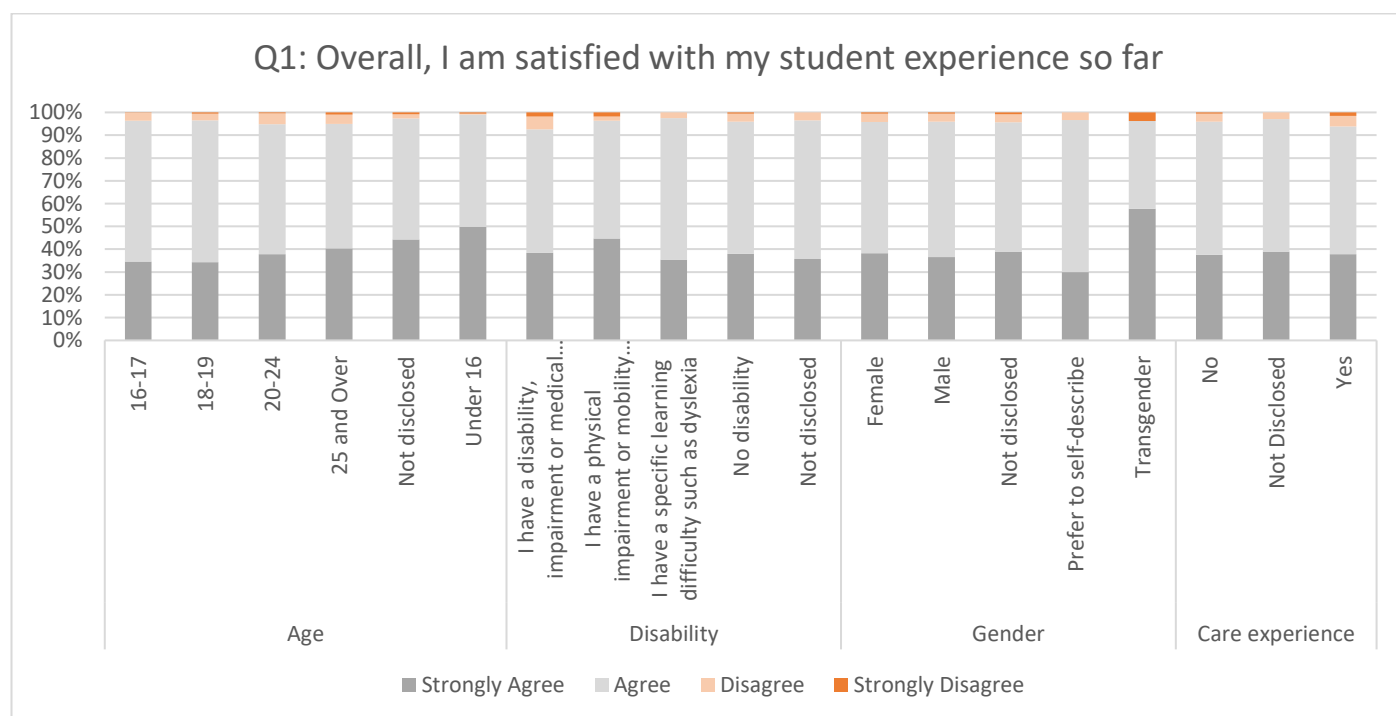

Figure 2: ESES 2018-19. Results for question 1, disaggregated by student characteristic

6   Awareness of support services

The following two radar charts (figures 3 and 4) show the percentage of students who chose agree or strongly agree against each statement relating to their awareness of various support contacts and services. The first chart shows rates as a region and the second chart shows rates by college. The relatively high region-wide scores disguise a lot of variation at college level with awareness of PATS ranging from 64.29%-100%. Similarly, awareness of class reps ranges from 37.5%-91.04%.
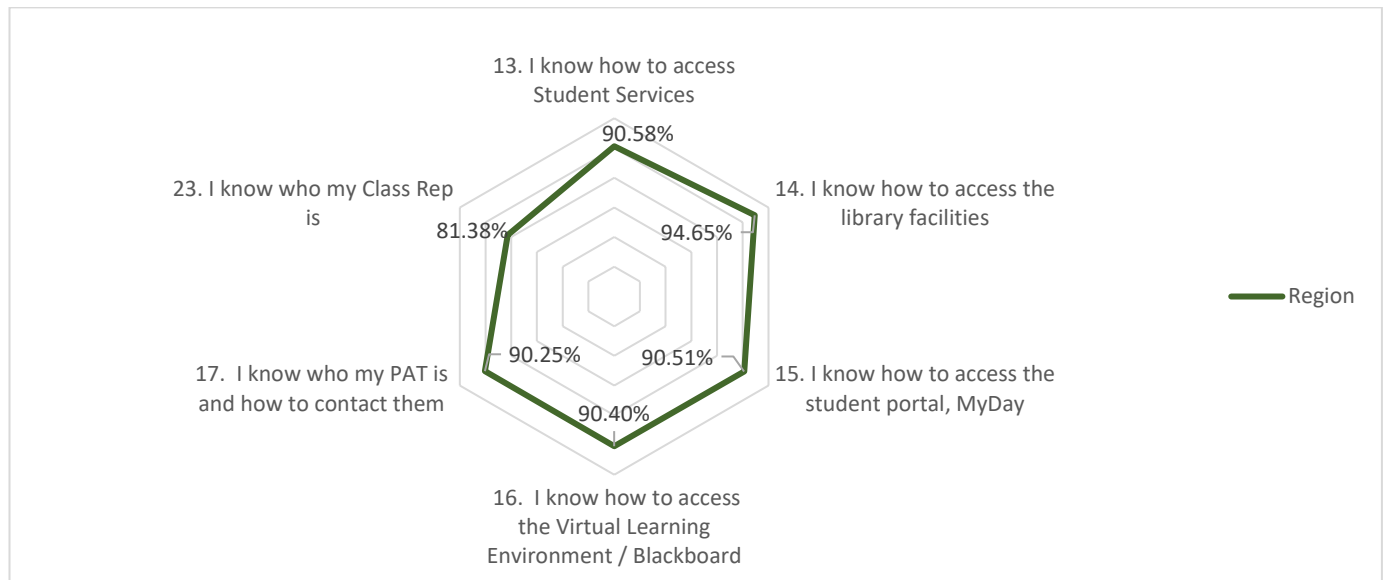

Figure 3: ESES 2017-18. All students, % agree for questions 13-17 and 23, for UHI Region overall
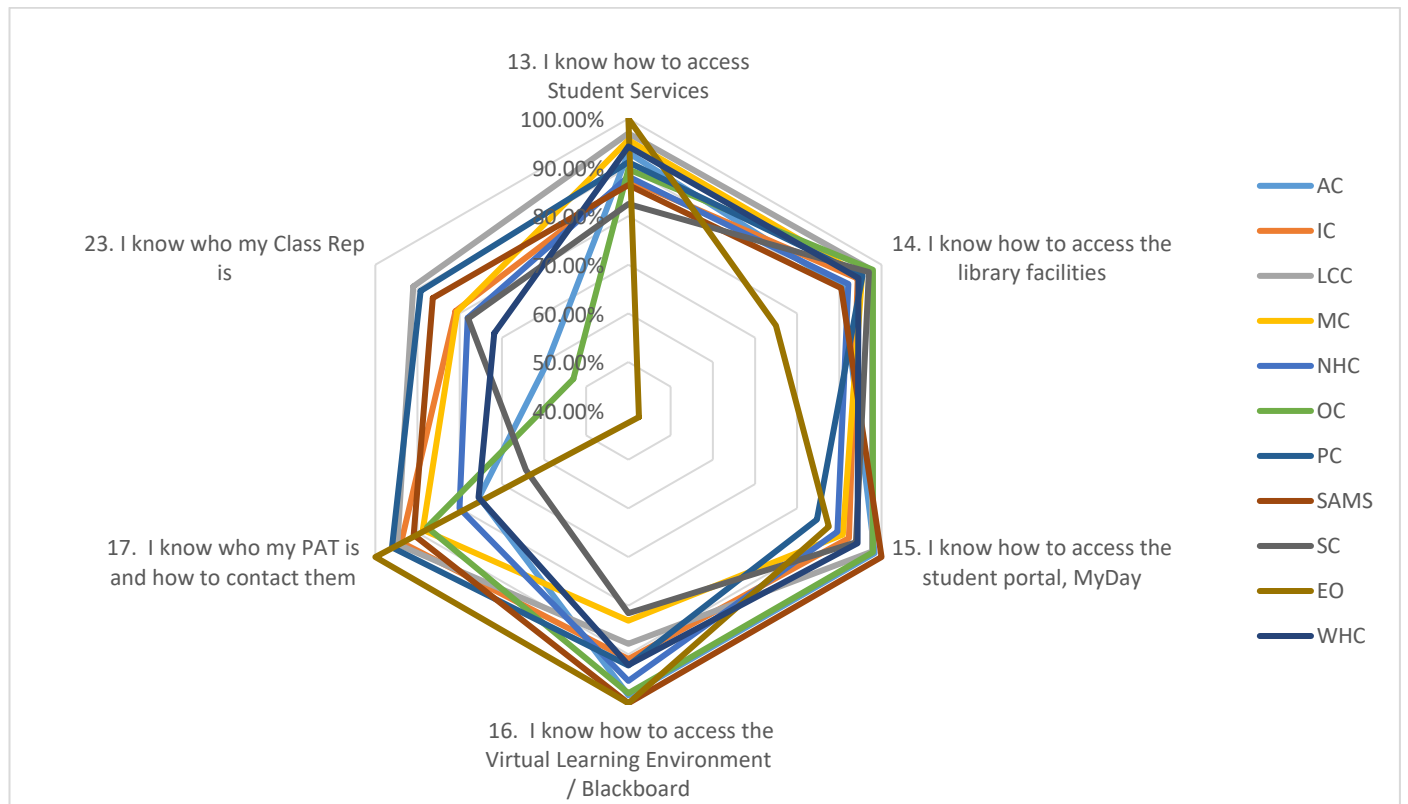

Figure 4: ESES 2017-18. All students, % agree for questions 13-17 and 23, by college

Further analysis shows that awareness of PATs tends to be higher among HE than FE students (see figure 5) but awareness of class reps higher among FE than HE students (see figure 6).
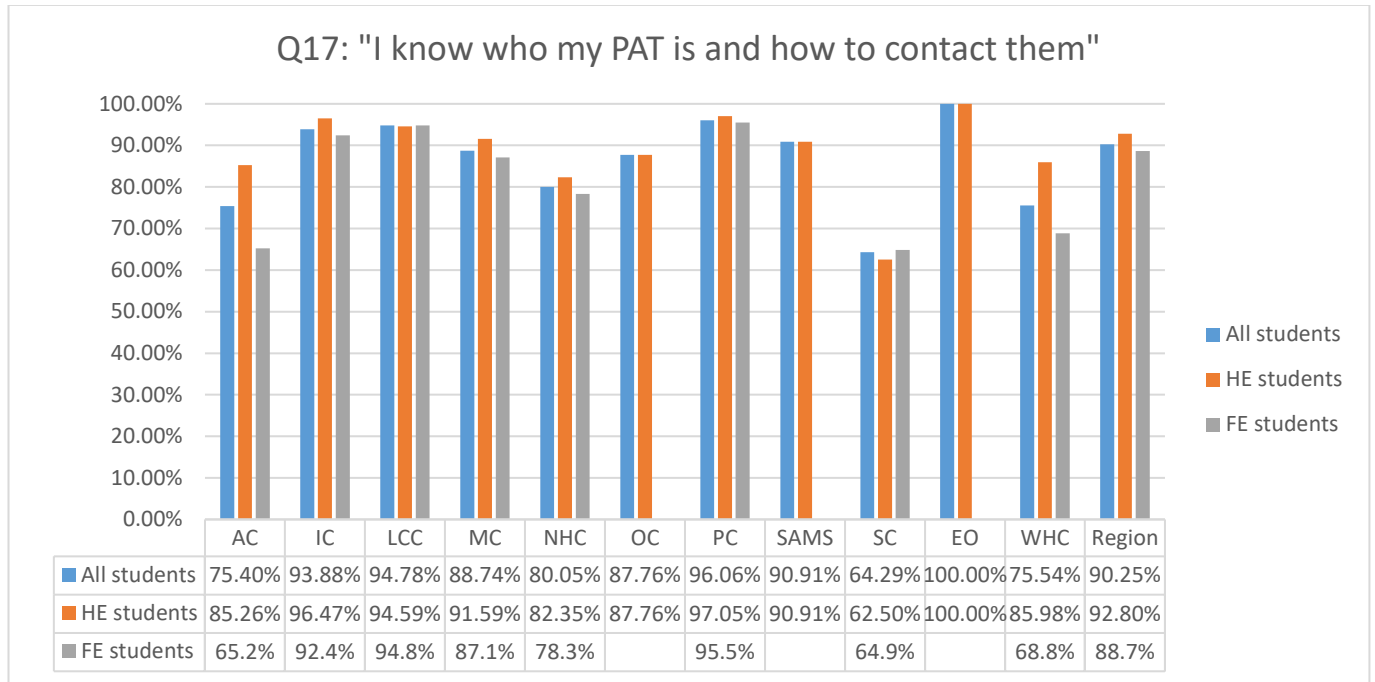
Q17: "I know who my PAT is and how to contact them"

	AC	IC	LCC	MC	NHC	OC	PC	SAMS	SC	EO	WHC	Region
All students	75.40%	93.88%	94.78%	88.74%	80.05%	87.76%	96.06%	90.91%	64.29%	100.00%	75.54%	90.25%
HE students	85.26%	96.47%	94.59%	91.59%	82.35%	87.76%	97.05%	90.91%	62.50%	100.00%	85.98%	92.80%
FE students	65.2%	92.4%	94.8%	87.1%	78.3%		95.5%		64.9%		68.8%	88.7%

Figure 5: ESES 2018-19. % agree for question 17, disaggregated by college and level of study (HE/FE)

Q23: "I know who my class rep is"

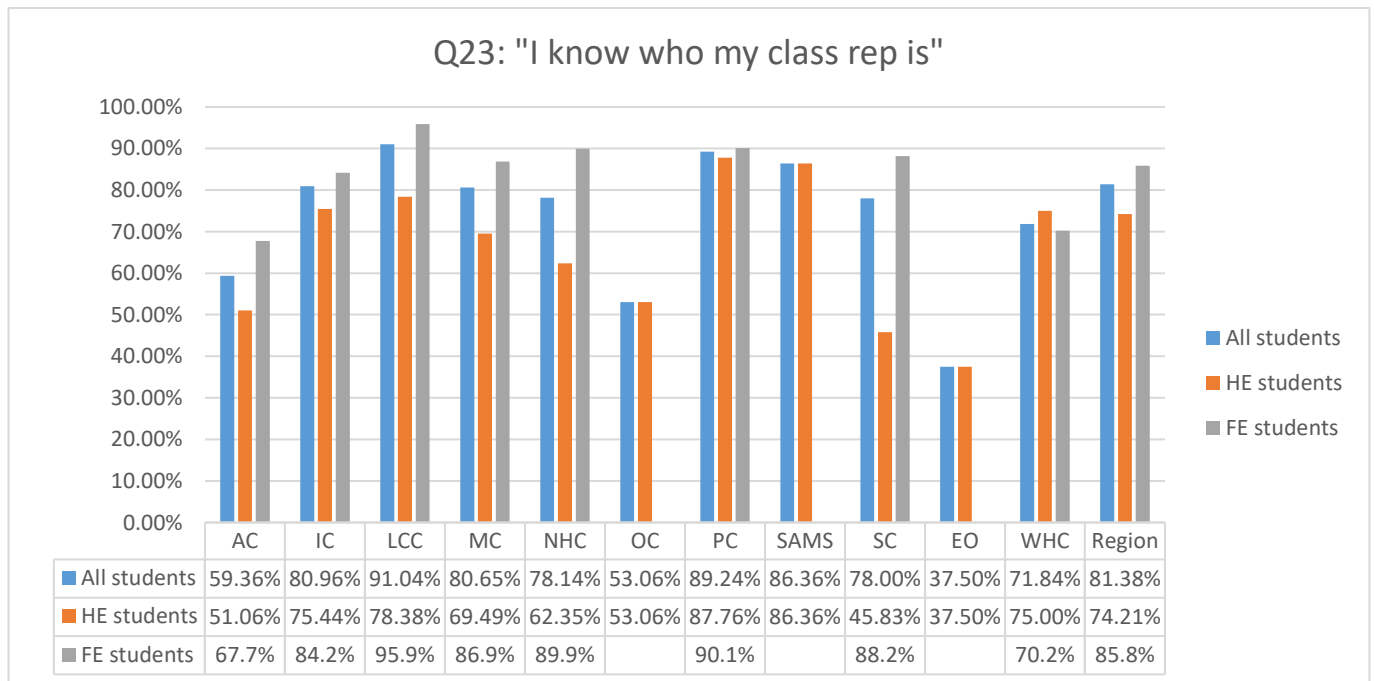|	AC	IC	LCC	MC	NHC	OC	PC	SAMS	SC	EO	WHC	Region
All students	59.36%	80.96%	91.04%	80.65%	78.14%	53.06%	89.24%	86.36%	78.00%	37.50%	71.84%	81.38%
HE students	51.06%	75.44%	78.38%	69.49%	62.35%	53.06%	87.76%	86.36%	45.83%	37.50%	75.00%	74.21%
FE students	67.7%	84.2%	95.9%	86.9%	89.9%		90.1%		88.2%		70.2%	85.8%

Figure 6: ESES 2018-19. % agree for question 23, disaggregated by college and level of study (HE/FE)

7   Awareness of HISA

Student awareness of HISA is very healthy with a regional score of 83.34%. Awareness is lowest among students enrolled through EO (60%); awareness is slightly higher among FE than HE students (see Figure 7 below).

Q23: "I am aware of the role of the Highlands and Islands Student Association (HISA)"

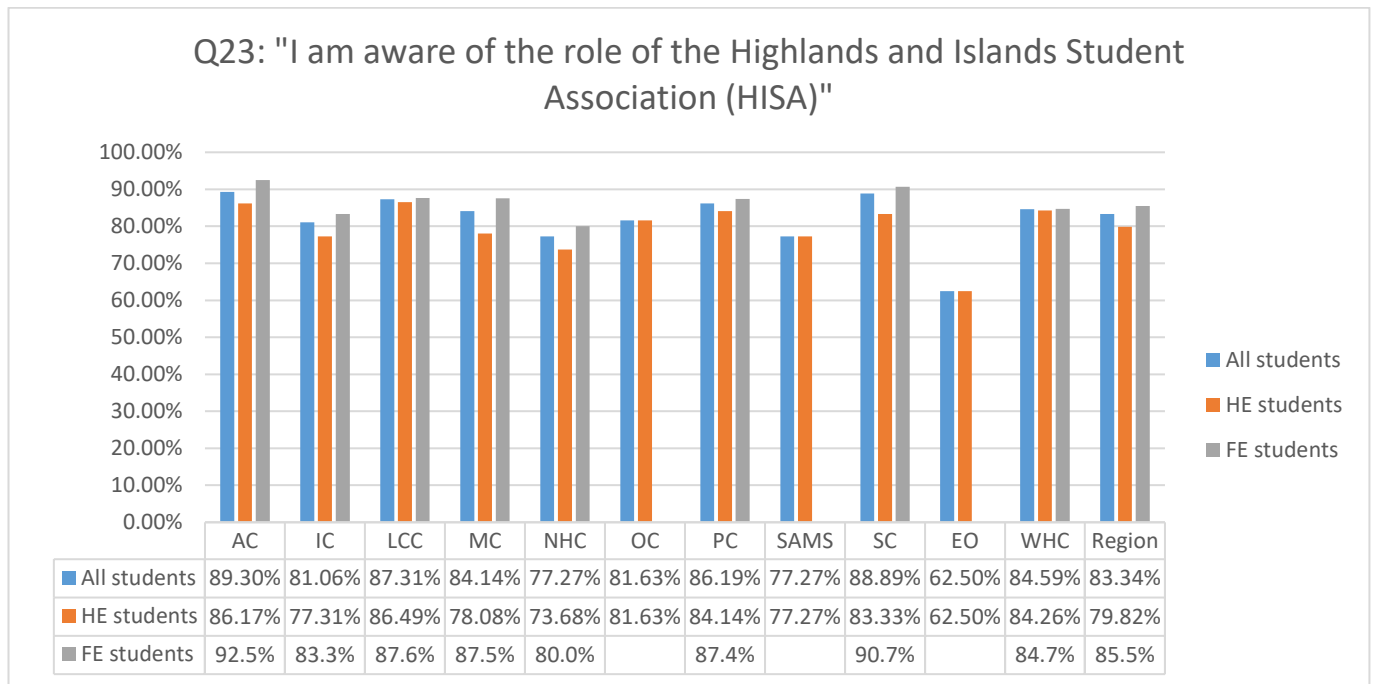|	AC	IC	LCC	MC	NHC	OC	PC	SAMS	SC	EO	WHC	Region
All students	89.30%	81.06%	87.31%	84.14%	77.27%	81.63%	86.19%	77.27%	88.89%	62.50%	84.59%	83.34%
HE students	86.17%	77.31%	86.49%	78.08%	73.68%	81.63%	84.14%	77.27%	83.33%	62.50%	84.26%	79.82%
FE students	92.5%	83.3%	87.6%	87.5%	80.0%		87.4%		90.7%		84.7%	85.5%

Figure 7: ESES 2018-19. % agree for question 24, disaggregated by college and level of study (HE/FE)

8   Appendix: Full results

8.1   All results: FE students

FE students (% agree)									
2018/19 ESES Question	AC	IC	LCC	MC	NHC	PC	SC	WHC	Region
1. Overall, I'm satisfied with my student experience so far	95.7	96.8	94.8	97.2	93.4	96.7	98.7	98.9	96.7
2. My initial enquiry provided me with the info I required to take the next step/apply for the course	97.8	95.4	97.9	95.8	95.7	96.5	94.4	97.7	96.0
3. Applying to my course was easy	96.7	94.2	96.8	94.5	91.2	95.9	89.0	96.5	94.6
4. I was provided with clear info about the funding I could apply for.	94.5	81.2	84.4	80.1	68.9	79.2	73.0	83.6	80.0
5. My funding application was dealt with effectively	88.2	81.7	85.9	76.3	64.9	68.6	73.6	78.6	76.1
6. The information I received before my course started helped me prepare	91.5	90.0	90.6	89.0	90.3	92.3	86.8	90.1	90.4
7. I was made to feel welcome in the first week	100.0	98.1	97.9	97.8	98.2	97.9	100.0	98.8	98.2
8.It was easy to enrol onto my course	93.5	96.4	95.8	96.4	91.2	95.9	92.0	96.5	95.7
9. I found induction a useful preparation	95.7	92.6	91.7	90.5	89.7	92.6	85.3	90.5	91.8
10.The fresher's activities provided me the opportunity to mix with other students	90.2	83.6	87.3	84.1	74.1	84.1	67.3	82.1	82.9
11.My Course Handbook contains accurate information	96.8	89.4	95.9	91.8	87.9	93.5	89.3	96.5	91.6
12. My Course Handbook explains the different ways I will be learning	96.8	87.9	96.9	89.6	88.3	91.7	88.0	94.7	90.1
13. I know how to access Student Services	94.5	87.1	96.9	96.2	89.3	91.8	80.0	93.6	90.8
14. I know how to access the library facilities	94.4	93.9	97.9	95.1	91.6	96.7	97.4	91.3	94.8
15. I know how to access the student portal, MyDay	97.8	90.1	96.9	89.6	86.1	84.0	92.0	93.0	88.8
16. I know how to access the VLE	97.8	86.2	87.8	79.6	92.8	89.7	75.4	89.7	86.6
17. I know who my PAT is and how to contact them	65.2	92.4	94.8	87.1	78.3	95.5	64.9	68.8	88.7
18. I am treated fairly and equally by staff	96.7	97.0	97.9	96.5	98.7	97.4	98.7	100.0	97.4
19. I feel I am on the right course	96.8	96.7	97.9	96.8	95.2	95.8	96.1	97.6	96.5
20. I am happy with the way my course is taught	91.4	94.1	88.5	93.6	90.8	94.5	96.1	98.8	93.9
21. I know when my assessments are due	91.5	93.1	93.8	90.1	91.2	89.7	95.9	94.7	91.7
22. I know how I can provide feedback to improve learning and teaching	94.7	91.8	93.8	91.1	85.9	92.1	88.2	93.0	91.4
23. I know who my Class Rep is	67.7	84.2	95.9	86.9	89.9	90.1	88.2	70.2	85.8
24. I am aware of the role of HISA	92.5	83.3	87.6	87.5	80.0	87.4	90.7	84.7	85.5

Table 1: ESES 2019-28. FE students % agree by question by college, and UHI Region overall

8.2   All results: HE students

2018/19 ESES Question	AC	IC	LCC	MC	NHC	OC	PC	SAMS	SC	EO	WHC	Region
HE students (% agree)												
1. Overall, I'm satisfied with my student experience so far	96.8	93.1	97.3	95.2	88.9	98.0	97.1	95.5	83.3	100	95.4	94.5
2. My initial enquiry provided me with the info I required to take the next step/apply for the course	96.8	94.0	97.3	96.3	97.3	97.8	97.4	90.5	91.3	87.5	95.3	95.7
3. Applying to my course was easy	94.6	96.7	94.6	96.9	98.2	100	98.1	100	91.7	100	97.2	97.1
4. I was provided with clear info about the funding I could apply for.	88.2	83.7	89.2	83.0	82.9	91.5	84.3	81.8	83.3	87.5	83.0	84.1
5. My funding application was dealt with effectively	91.0	90.5	78.8	86.6	86.9	92.3	89.0	94.4	85.7	33.3	88.5	88.8
6. The information I received before my course started helped me prepare	86.3	79.4	86.5	83.2	75.4	89.6	88.6	86.4	62.5	87.5	88.9	83.0
7. I was made to feel welcome in the first week	100	96.3	97.3	96.7	97.3	97.9	97.7	100	95.7	100	98.1	97.1
8.It was easy to enrol onto my course	95.8	93.8	100	96.4	88.8	87.8	96.8	100	91.7	87.5	92.5	94.5
9. I found induction a useful preparation	82.8	82.9	86.5	86.1	73.2	91.7	85.4	95.5	70.8	87.5	87.7	83.7
10.The fresher's activities provided me the opportunity to mix with other students	73.0	58.1	72.2	64.2	66.7	80.0	71.1	100	58.3	100	84.1	66.3
11.My Course Handbook contains accurate information	92.6	87.9	94.4	87.4	88.0	93.8	90.6	100	86.4	87.5	97.2	89.6
12. My Course Handbook explains the different ways I will be learning	92.6	87.2	88.6	84.6	86.9	95.9	89.9	95.5	81.8	87.5	96.3	88.4
13. I know how to access Student Services	91.5	88.1	97.2	94.4	86.5	89.6	89.7	86.4	90.9	100	95.3	90.2
14. I know how to access the library facilities	87.2	95.1	97.2	95.8	92.9	98.0	93.5	90.5	95.8	75.0	99.0	94.5
15. I know how to access the student portal, MyDay	98.9	95.9	100	93.1	94.1	98.0	85.6	100	100	87.5	96.2	93.2
16. I know how to access the VLE	98.9	98.4	87.9	89.2	98.8	98.0	96.4	100	100	100	95.4	96.2
17. I know who my PAT is and how to contact them	85.3	96.5	94.6	91.6	82.4	87.8	97.1	90.9	62.5	100	86.0	92.8
18. I am treated fairly and equally by staff	97.9	97.6	100	98.2	93.5	100	98.3	100	91.7	100	99.1	97.7
19. I feel I am on the right course	97.9	95.9	100	97.6	95.9	93.9	97.5	95.5	91.7	100	97.2	96.7
20. I am happy with the way my course is taught	85.1	84.4	94.6	89.1	81.3	85.7	90.7	95.5	75.0	87.5	96.3	87.3
21. I know when my assessments are due	95.7	94.6	100	92.5	94.1	98.0	94.1	90.9	91.7	100	96.3	94.4
22. I know how I can provide feedback to improve learning and teaching	86.2	85.5	91.9	85.3	73.1	79.6	87.4	95.5	70.8	75.0	95.4	85.3
23. I know who my Class Rep is	51.1	75.4	78.4	69.5	62.4	53.1	87.8	86.4	45.8	37.5	75.0	74.2
24. I am aware of the role of HISA	86.2	77.3	86.5	78.1	73.7	81.6	84.1	77.3	83.3	62.5	84.3	79.8

Table 2: ESES 2018-19. HE students % agree by question by college, and UHI Region overall (Figures to one decimal place)

8.3 All results: All students

<table>
<tr><th colspan="13" style="text-align:center">All students (% agree)</th></tr>
<tr><th>2018/19 ESES Question</th><th>AC</th><th>IC</th><th>LCC</th><th>MC</th><th>NHC</th><th>OC</th><th>PC</th><th>SAMS</th><th>SC</th><th>EO</th><th>WHC</th><th>Region</th></tr>
<tr><td>1. Overall, I'm satisfied with my student experience so far</td><td>96.3</td><td>95.5</td><td>95.5</td><td>96.5</td><td>91.5</td><td>98.0</td><td>96.8</td><td>95.5</td><td>95.0</td><td>100</td><td>97.5</td><td>95.8</td></tr>
<tr><td>2. My initial enquiry provided me with the info I required to take the next step/apply for the course</td><td>97.3</td><td>94.9</td><td>97.7</td><td>96.0</td><td>96.4</td><td>97.8</td><td>96.8</td><td>90.5</td><td>93.7</td><td>87.5</td><td>96.8</td><td>95.9</td></tr>
<tr><td>3. Applying to my course was easy</td><td>95.7</td><td>95.1</td><td>96.2</td><td>95.4</td><td>94.2</td><td>100</td><td>96.7</td><td>100</td><td>89.7</td><td>100</td><td>96.8</td><td>95.6</td></tr>
<tr><td>4. I was provided with clear info about the funding I could apply for.</td><td>91.3</td><td>82.1</td><td>85.7</td><td>81.1</td><td>74.9</td><td>91.5</td><td>81.1</td><td>81.8</td><td>75.5</td><td>87.5</td><td>83.5</td><td>81.6</td></tr>
<tr><td>5. My funding application was dealt with effectively</td><td>89.7</td><td>85.2</td><td>83.9</td><td>80.1</td><td>74.2</td><td>92.3</td><td>76.4</td><td>94.4</td><td>77.0</td><td>33.3</td><td>82.6</td><td>81.2</td></tr>
<tr><td>6. The information I received before my course started helped me prepare</td><td>88.9</td><td>86.1</td><td>89.5</td><td>86.9</td><td>83.9</td><td>89.6</td><td>90.9</td><td>86.4</td><td>81.0</td><td>87.5</td><td>89.7</td><td>87.6</td></tr>
<tr><td>7. I was made to feel welcome in the first week</td><td>100</td><td>97.5</td><td>97.8</td><td>97.4</td><td>97.9</td><td>97.9</td><td>97.8</td><td>100</td><td>99.0</td><td>100</td><td>98.6</td><td>97.8</td></tr>
<tr><td>8.It was easy to enrol onto my course</td><td>94.7</td><td>95.5</td><td>97.0</td><td>96.4</td><td>90.2</td><td>87.8</td><td>96.3</td><td>100</td><td>91.9</td><td>87.5</td><td>95.0</td><td>95.3</td></tr>
<tr><td>9. I found induction a useful preparation</td><td>89.2</td><td>89.1</td><td>90.2</td><td>89.0</td><td>82.7</td><td>91.7</td><td>89.9</td><td>95.5</td><td>81.8</td><td>87.5</td><td>89.5</td><td>88.7</td></tr>
<tr><td>10.The fresher's activities provided me the opportunity to mix with other students</td><td>83.7</td><td>75.2</td><td>84.3</td><td>78.6</td><td>71.5</td><td>80.0</td><td>79.5</td><td>100</td><td>65.6</td><td>0.0</td><td>82.9</td><td>77.4</td></tr>
<tr><td>11.My Course Handbook contains accurate information</td><td>94.7</td><td>88.9</td><td>95.5</td><td>90.3</td><td>88.0</td><td>93.8</td><td>92.4</td><td>100</td><td>88.7</td><td>87.5</td><td>96.8</td><td>90.8</td></tr>
<tr><td>12. My Course Handbook explains the different ways I will be learning</td><td>94.7</td><td>87.7</td><td>94.7</td><td>87.8</td><td>87.7</td><td>95.9</td><td>91.0</td><td>95.5</td><td>86.6</td><td>87.5</td><td>95.4</td><td>89.4</td></tr>
<tr><td>13. I know how to access Student Services</td><td>93.0</td><td>87.5</td><td>97.0</td><td>95.6</td><td>88.1</td><td>89.6</td><td>91.1</td><td>86.4</td><td>82.5</td><td>100</td><td>94.3</td><td>90.6</td></tr>
<tr><td>14. I know how to access the library facilities</td><td>90.8</td><td>94.3</td><td>97.7</td><td>95.4</td><td>92.1</td><td>98.0</td><td>95.5</td><td>90.5</td><td>97.0</td><td>75.0</td><td>94.5</td><td>94.6</td></tr>
<tr><td>15. I know how to access the student portal, MyDay</td><td>98.4</td><td>92.3</td><td>97.7</td><td>90.8</td><td>89.5</td><td>98.0</td><td>84.6</td><td>100</td><td>93.9</td><td>87.5</td><td>94.3</td><td>90.5</td></tr>
<tr><td>16. I know how to access the VLE</td><td>98.4</td><td>90.9</td><td>87.8</td><td>83.1</td><td>95.4</td><td>98.0</td><td>92.3</td><td>100</td><td>81.5</td><td>100</td><td>92.2</td><td>90.4</td></tr>
<tr><td>17. I know who my PAT is and how to contact them</td><td>75.4</td><td>93.9</td><td>94.8</td><td>88.7</td><td>80.1</td><td>87.8</td><td>96.1</td><td>90.9</td><td>64.3</td><td>100</td><td>75.5</td><td>90.3</td></tr>
<tr><td>18. I am treated fairly and equally by staff</td><td>97.3</td><td>97.3</td><td>98.5</td><td>97.1</td><td>96.5</td><td>100</td><td>97.8</td><td>100</td><td>97.0</td><td>100</td><td>99.6</td><td>97.5</td></tr>
<tr><td>19. I feel I am on the right course</td><td>97.3</td><td>96.4</td><td>98.5</td><td>97.1</td><td>95.5</td><td>93.9</td><td>96.4</td><td>95.5</td><td>95.0</td><td>100</td><td>97.5</td><td>96.6</td></tr>
<tr><td>20. I am happy with the way my course is taught</td><td>88.2</td><td>90.6</td><td>90.2</td><td>92.0</td><td>86.8</td><td>85.7</td><td>93.1</td><td>95.5</td><td>91.0</td><td>87.5</td><td>97.9</td><td>91.4</td></tr>
<tr><td>21. I know when my assessments are due</td><td>93.6</td><td>93.6</td><td>95.5</td><td>91.0</td><td>92.4</td><td>98.0</td><td>91.3</td><td>90.9</td><td>94.9</td><td>100</td><td>95.4</td><td>92.7</td></tr>
<tr><td>22. I know how I can provide feedback to improve learning and teaching</td><td>90.4</td><td>89.5</td><td>93.3</td><td>89.0</td><td>80.4</td><td>79.6</td><td>90.4</td><td>95.5</td><td>84.0</td><td>75.0</td><td>93.9</td><td>89.1</td></tr>
<tr><td>23. I know who my Class Rep is</td><td>59.4</td><td>81.0</td><td>91.0</td><td>80.6</td><td>78.1</td><td>53.1</td><td>89.2</td><td>86.4</td><td>78.0</td><td>37.5</td><td>71.8</td><td>81.4</td></tr>
<tr><td>24. I am aware of the role of HISA</td><td>89.3</td><td>81.1</td><td>87.3</td><td>84.1</td><td>77.3</td><td>81.6</td><td>86.2</td><td>77.3</td><td>88.9</td><td>62.5</td><td>84.6</td><td>83.3</td></tr>
</table>

Table 3: ESES 2018-19. All students % agree by question by college, and UHI Region overall (Figures to one decimal place)

Minute of the Argyll College Management Board
Human Resources & Remuneration Committee
held at 2pm on Friday, 1 Mar 2019
in room LO7, Lochgilphead Centre

Present: Ken Jones (Chair); Andrew Campbell (AMC); Jennifer Swanson (JS)

In Attendance: Ailsa Close (AEC); Elaine Munro (EM); Martin Jones (MJ)

No	Item	Action
19.1.1	**Welcome & apologies for absence**. There were no apologies.	
19.1.2	**Declaration of interest & to identify if any items deemed to be confidential.** No declarations of interest.	
19.1.3	**Minute of meeting held on 16th Nov 2018.** The minutes were approved as an accurate record of the meeting and will be signed by the Chair.	
19.1.4	**Matters arising.** Interim nursery manager in place and Council has agreed to extend her secondment to the end of August 2019. Care Commission visit was on Tuesday (26th Feb) and initial feedback is that the report has grading of 'good' in all areas. This is a significant improvement from the previous Care Commission report. Thanks expressed to EM for the work she has put in to the Nursery.	
19.1.5	**Summary of Recruitment and HR** in last quarter The report was noted.	
19.1.6	**Policies to approve:** Nursery Infection Control policy – Approved Nursery Medication policy – Approved	
19.1.7	**AOCB** There was no other business.	
19.1.8	**Date of next meeting** – The next meeting will be held on Friday 24th May 2019 at 2pm	
	Signed by	

………………………………………………………………………. **Date** ……………………………………………..
Chair of Human Resources & Remuneration Committee

Infection Control Policy

Little learners Nursery Infection Control Policy Statement

Policy Number	
Revision Number:	
Date of Issue:	
Status:	
Date of Approval:	
Responsibility for Policy:	Nursery Manager
Responsibility for Implementation:	Nursery Manager
Responsibility for Review:	Nursery Manager
Date of Last Review:	
Date of Last Revision:	
Date of Next Review:	
Date of Equality Impact Assessment:	

This policy was adopted at a meeting of:

Little Learners' Nursery

On *(date)* …5/12/18……………..

Signed …………………………..……….. Designation …………….……………………

Statement of Purpose

As an Early Learning and Childcare (ELC) setting we recognise our 'duty of care' and requirement in law to provide a safe environment for the children in our care.

The National Care standards: early education and children up to the age of 16 (Scottish Government , 2009) reflect this duty.

Standard 2, A Safe Environment:

- Children and young people are cared for in a safe, hygienic, smoke free, pleasant and stimulating environment (2.1).
- You can be confident that:
  - ◦ staff keep all play equipment clean and well maintained
  - ◦ staff take measures to control the spread of infection (2.4).

We will ensure that all staff are fully trained to enable the setting to meet these requirements and follow the national guidance *Infection Prevention and Control in Childcare Settings* (Health Protection Scotland, May 2018), recommended as best practice by the Care Inspectorate. For ease of reference we will use the term **the guidance** when referring to this document throughout the policy.

Appendix 1 of the guidance will be completed and displayed for staff and all service users affirming the use of the guidance as our local policy.

Throughout this policy the term **parents** is used to include all main caregivers.

Prevention of Spread of Infection

In order to minimise the spread of infection the ELC setting will follow standard infection control precautions (SCIPs) as recommended by the NHS (see section below).

We will carry out regular risk assessments appropriate to our setting and current circumstances and maintain up-to-date records.   In carrying out these risk assessments we will take account of the environment, daily routines, regular activities and occasional activities such as outings (see appendix 2 of the guidance). We will also take into consideration the risk to all service users especially those who are more vulnerable to infection e.g. pregnant women, children with conditions or on medication that makes them more susceptible to infection etc. In order to facilitate this parents will be requested on their child's admission to the setting to inform us of any relevant pre-existing conditions and also to inform us of illnesses as they occur.

We will ensure that all parents have access to information regarding immunisation. The child's current immunisation status will be checked on admission and parents reminded of the benefits of the programme.   Appendix 4 of the guidance provides a sample letter to parents regarding illness and immunisation and it will be adapted and used post admission to reinforce these important infection control messages.

Information gathered from risk assessments will be shared with all staff and with children and parents as appropriate in order to improve infection prevention and control practice.

Staff and children with symptoms of infectious disease should not attend the ELC setting. Recommended exclusions periods can be found in appendix 3 of the guidance.   This information will be copied and displayed within the setting for all parents and staff.

Standard Infection Control Precautions (SICPs)

All staff will be fully trained in these procedures and training refreshed at least annually. This training will include information on how infection spreads (page 4 of the guidance). The chart on page 4 detailing the 'chain of infection' will be copied and displayed as appropriate for staff and parental information.

SICPs are described in full within the guidance (pages 5 to 8) and encompass the following areas:

- **Hand hygiene** – appendix 7 provides a useful chart illustrating the correct method of hand washing.   This will be displayed appropriately within the setting and

children will be trained in this procedure.
- **Respiratory and Cough Hygiene** – children will be trained in this.
- **Personal Protective Equipment (PPE)** – this will be worn as directed in the guidance.
- **Cleaning of the Environment** – is the routine cleaning of the environment on a daily basis (see appendix 9 of the guidance).   This also includes toilets, hand basins and potties (see appendix 8 of the guidance).
- **Equipment cleanliness** – all toys and equipment will be well maintained and safe for use.   Appendix 10 will be followed in the scheduled cleaning of toys and equipment.
- **Dealing with spillages of blood and body fluids** – staff should follow the procedures within the guidance (page 7).
- **Management of waste** – this includes nappy waste and the disposal of sharps.
- **Linen/Laundry**
- **Exposure injuries and bites** – are injuries where the skin is broken by a needle or bite. This section includes exposure to blood and bodily fluids into broken skin or into eyes, nose or mouth.   Appendix 11 outlines the correct procedures in these circumstances.

Food and kitchen hygiene
We recognise that the responsibility for food safety lies with the individual setting and SICPs will be followed at all times in the preparation of food.
In line with good practice outlined in *Setting the Table: Nutritional guidance and food standards for early years childcare providers in Scotland* (NHS Health, Scotland, 2015) we will have at least one member of staff who has a basic food hygiene certificate that is up to date.
When preparing and storing formula or breast milk for babies the procedures on page 10 of the guidance will be followed.   These procedures will be displayed prominently for staff in the milk preparation area.

Early warning signs of infection - Staff will inform the ELC manager if a child has any of the following symptoms: appears unwell (feels hot or looks flushed); complains of feeling ill for example cough, sore throat, runny nose, muscle aches and headaches; diarrhoea and/or vomiting; blood in their faeces; unexplained rash.
The child should be kept apart from other children and their parent will be asked to collect them as soon as possible. On collection the parent should be encouraged to consult their GP if the child's symptoms persist.   If more than one child within the setting displays these symptoms then advice will be sought from the local NHS Health Protection Team (HPT). (See appendix 6 for contact information.)

Outbreaks of infection in childcare settings
We will ensure that standard infection control procedures are in force at all times. Should there be an outbreak of infection staff will be reminded of these precautions and appendix 5 of the guidance will be followed to ensure that all necessary procedures are being implemented.
Pages 11and 12 of the guidance offers further support and direction in the case of an outbreak and all staff should make themselves familiar with this information.
The local Health Protection Team will be informed when there is an outbreak of infection and further guidance and support sought from them.   As required by law we will also inform the Care Inspectorate of the outbreak.
The procedures to be followed in the case of an outbreak will be rehearsed and tested annually to ensure all staff know what to do.

Little Learners' Nursery Procedures

Handwashing
Good hand hygiene will help prevent the spread of common infections such as colds, flu and stomach bugs.

liquid soap is used and the dispensers are changed regularly.

Paper towels are to be used when drying, when dispenser becomes empty please refill.

Pedal bins should be used to dispose of paper towels.

Nail brushes should not normally be used as they can be a reservoir for bacterial multiplication.

NHS handwashing guidance should be referred too, to ensure excellent handwashing procedures are followed within the nursery and modelled for the children in our care.

Handwashing posters are displayed at all handwashing sinks within the nursery.

Staff should wash their hands-
- Before they serve food
- After changing a child's wet clothing
- After they have been to the toilet
- After outdoor activities
- Before giving medication to a child or staff
- After blowing your nose, coughing or sneezing
- After touching animals or animal waste
- After contact with contaminated surfaces (e.g. food-contaminated surfaces, rubbish bins)
- After smoking before entering the premises although smoking is not permitted on the premises

Children to wash their hands-
- Before they eat
- After use of the toilet
- After coming in contact with a sick child
- After playing outside
- After blowing your nose, coughing or sneezing
- After touching animals or animal waste
- If they have fresh abrasions, cuts etc and should then be covered with a waterproof dressing

Good hygiene Practice
- Use warm running water
- Do not share water in a communal bowl when washing hands
- Use liquid soap (no need to use soaps advertised as antibacterial or antiseptic)
- Dry hands thoroughly using paper towels
- When going on outdoor trips continue to promote good hand hygiene

Personal Protective Equipment (PPE) where possible
- Staff are required to wear disposable gloves and aprons when dealing with blood and bodily waste. Spillages should be cleaned up as quickly as possible.

- Soiled and bloody linen or clothing must be dealt with by firstly wearing disposable gloves and placed in the washing machine on a rinse cycle only. They should then be washed on a hot wash. This is only relevant for items that belong to the nursery.
- If soiled clothing belongs to a child then it should be double bagged and sent home with the child. These should be stored in appropriate box (0-3 room), hung on peg unit (3-5 toilet) until child is collected.
- When finished disposable gloves/aprons should be folded inwards and disposed of in the bin
- See toileting procedures – these are displayed within the relevant areas of the nursery.

Using the Toilets
Toilets need to be checked regularly by staff
- Children to be reminded to wash their hands in the sinks provided in the toilet areas
- Children should be supervised to ensure they wash their hands after toileting and are following the proper handwashing procedures
- Toilets will be cleaned by the cleaner after all children have left.
- Adults should not use the same toilets as the children
- Toilet doors to be closed at all times

Children in Nappies (see nappy changing procedures)
- Staff to wear disposable gloves/aprons for every nappy change and these must be changed for each child
- Hands to be washed and dried properly after changing
- Staff undertaking nappy changing where possible should not be involved in the preparation of food directly afterwards.
- Nappy changing mat should be wiped with antibacterial spray or equivalent after every change.
- Nappies should be put in the correct nappy bin ensuring there is a liner in place
- Nappy bins are emptied and changed by an outside agency

Toothbrushes
- Hands to be washed before use
- Cuts/sores on hands should be covered
- Toothbrushes should be kept in their own cupboard in the correct buses
- All children have their own toothbrushes
- Children are to be encouraged only touch their own brush at the neck of the brush not the bristles
- Toothbrushes should be rinsed after use
- Toothbrush buses should be cleaned once a week and this should be recorded

Cleaning
- Cleaning of toilets and main room floor is done by the cleaner after all children have left, but if using equipment please rinse and store properly. If using mops please store upside down once you have rinsed them in the sink inside the cleaning cupboard.

- Most daily cleaning should take place by using water and detergent solution and the cleaning schedules followed and signed once done.
- Do not use disinfectants for general cleaning
- Tables to be cleaned before and after snack
- Cleaning checklist to be completed each day
- When an outbreak of 3 or more cases of gastroenteritis occurs within the setting playdough should be disposed of, sand/water play should be suspended until the outbreak is over
- Toys are to be cleaned with hot water and detergent and a cloth on a regular basis, once cleaned this should be recorded. If there is an outbreak then all resources being used should be cleaned.
- Paddling pools to be wiped with detergent and hot water and then left to dry
- Sand to be changed at least once a term unless there has been an outbreak of gastroenteritis and/or it has become dirty.
- Sand that has spilled on the floor should be disposed of
- The water tray should be cleaned on a daily basis and water changed between sessions. Ensure the water is at the correct temperature.
- The fridge should be cleaned regularly and temperature recorded on a daily basis

Kitchen – snack preparation and serving
- Staff member must ensure they wear an apron at all times when preparing & serving food
- Ensure hands are washed before handling food – follow good handwashing procedures
- Children who are helping at snack time must wash their hands first and with the support of staff, follow good handwashing procedures
- Children to be supervised at all times when helping with snack, baking or cooking
- Kitchen door to be kept closed and children are not allowed to enter the kitchen
- Staff member on snack should not be changing soiled children or carrying out toilet checks
- Daily cleaning checklist to be completed
- Daily fridge temperature to be recorded.

Cuts, bites and needle stick injuries
Cuts
- Treat as advised on first aid training. For severe cuts refer to manager and first aider

Bites that do not break the skin
- Clean with soap and water(be aware of allergies – if allergic to soap just use water)

Bites that break the skin
- Clean immediately with soap and water again be aware of skin allergies
- Record in minor accidents book
- Refer to senior management and first aider for further action

Animal bites

- To be treated the same and seek medical advice

Needle Stick injury

All areas should be checked to make sure children do not face this danger. Staff should be issued with appropriate gloves and advised how to pick up the items, correctly placing into metal drink can or bottle and contact local authority for advice and disposal. If this becomes frequent occurrence, arrange for sharp needle box for disposal of these items. If a needle stick injury occurs

- Encourage the wound to bleed
- Wash the wound with soap and running water
- Cover with waterproof dressing
- Record in accident book
- Medical advice to be sought

General

- Children/staff are encouraged to bring a separate pair of shoes for use within the nursery
- Dishwasher should reach 80 degrees
- Fridge temperature should be recorded daily
- COSHH sheets are available for cleaning products used with in the nursey to ensure the correct dilution is adhered to.

Monitoring of this Policy
It will be the responsibility of Nursery Manager or Senior in the absence of Manager, to ensure that new or temporary staff are familiar with this policy and to monitor that it is being implemented by all staff, parents and children.   This will be achieved through both formal and informal observation of staff practice, regular communications with parents and reminders to children of good hygiene habits.   Additionally all relevant infection control records and cleaning checklists will be monitored on a regular basis.

See also:
Health and Safety Policy
Nappy Changing Policy
Healthy Eating Policy
Administration of Medication Policy
Responsive Care Policy
Outings Policy

Links to national policy
National Care Standards 2, 3, 10, 12, 13

http://www.documents.hps.scot.nhs.uk/hai/infection-control/guidelines/infection-prevention-control-childcare-2015-v2.pdf
Infection Prevention and Control in Childcare Settings (Health Protection Scotland, September 2015)

http://www.publichealth.hscni.net/sites/default/files/A2%20Schools%20poster_1.pdf
(*Guidance on infection control in schools and other childcare settings* – poster, October 2013)

http://www.sssc.uk.com/about-the-sssc/codes-of-practice/what-are-the-codes-of-practice

Find out more:
http://www.child-smile.org.uk/documents/5040.aspx
Childsmile National standards for nursery and school tooth brushing programme, updated 2015.

http://www.washyourhandsofthem.com/the-campaign/childrens-pack.aspx
(Health Protection Scotland 's National Hand Hygiene Campaign - "Handy")

Administration of Medication Policy

Little learners Nursery Administration of Medication Policy Statement

Policy Number	
Revision Number:	
Date of Issue:	
Status:	
Date of Approval:	
Responsibility for Policy:	Nursery Manager
Responsibility for Implementation:	Nursery Manager
Responsibility for Review:	Nursery Manager
Date of Last Review:	
Date of Last Revision:	
Date of Next Review:	
Date of Equality Impact Assessment:	

This policy was adopted at a meeting of:

Little Learners' Nursery

On *(date)* ………12/12/18………..…..

Signed …………………………....……. Designation ……….……….…………

Statement of Purpose

Children attend early Learning and Childcare (ELC) settings with a wide range of medicinal requirements related to their individual needs. These needs can be short term (finishing a course of medication) and/or long term (medication to keep them well). Staff will ensure procedures are followed in order to meet these needs. Medication will only be administered in order to maintain the child's health and wellbeing and/or when recovering from an illness. Most children with medical needs can participate in everyday day experiences within the setting. Throughout this guidance the term parents is used to include all main caregivers

Insurance

Early Years Scotland's (EYS) insurance provider, Royal Sun Alliance. RSA provides cover under the Public Liability section of the Group Insurance Policy where an ELC setting is found to be legally liable. The Public Liability section of the insurance cover has been extended to include administration of medication, provided that the ELC setting service has a clear policy and guidelines on the use, storage and administration of medication and staff are suitably trained to carry these out. The service must ensure that written consent is given by parents and carers for the use or administration of medication provided by them. A clear policy on how to deal with emergencies and staff are well trained in emergency procedures. Little Learners' Nursery (ELC) is fully compliant with the Health and Social Care Standards, 1.15, 1.23, 3.14, 4.15, and the following procedures are adhered to.

RSA treat inhalers for asthma and nebuliser as oral medication. The settings own consent form should be completed and signed by the parent and should be retained in the child's file, (appendix 6). Little Learners' Nursery (ELC) will ensure that staff training by a health professional such as the child's GP/District Nurse/Child Nurse Specialist /Community Paediatric Nurse or approved first aid training agency is undertaken in the use of inhalers, prior to the child being left at the setting without their parent/guardian.

Children taking prescribed medication must be well enough to attend the Little Learners' Nursery (ELC) session.

Procedures for Administration of Medication

Little Learners' Nursery (ELC) setting will only administer prescribed medication when it is essential to do so. Parents will provide the setting with written consent for their child to be given medication for a minor ailment or allergy. If children attend the setting on a part time basis parents should be encouraged to administer the medication at home. If parents are present during the session they will also administer the medication for their own child. Parents will administer the first dose of a course of medication and any adverse reactions to the medication will be noted. Little Learners' Nursery(ELC) staff will only administer medication that has been prescribed by a doctor or pharmacist. The medication will be in the original container or box along with the information leaflet and will be clearly labelled with the child's name and dosage instructions.

- Children's medicines will be stored in their original containers in a locked cupboard or the office on the top shelf out of children's reach; they will be clearly labelled and inaccessible to the children.
- Medicine spoons and oral syringes must be supplied by the parent if required.
- Medications may only be used for the child whose name appears on the medicine. This includes emergency adrenaline injections (Epipen)
- Parents must give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information:

  o   full name of child and date of birth
  o   name of medication and strength
  o   If child has had medication prior to nursery Y/N. If yes, what time and dosage amount
  o   dosage to be given in the nursery
  o   signature, printed name of parent and date.
  o   verification by parent at the end of the session.

No medication may be given without these details being provided. Medication forms for each child are found in the medication/accident/incident folder. If long term medication a copy of the child's form will also be found in their PLP

Management of medication in day care of children and childminding services: http://hub.careinspectorate.com/media/189567/childrens-service-medication-guidance.pdf

If a child is given too much medication, or medication is given to the wrong child, staff will inform the parent immediately. Further advice / instructions should be sought with the Doctor. If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name and name of the medication. Inside the box is a copy of the consent form signed by the parent. This procedure complies with the safeguarding of information sharing, including General Data Protection Regulations (GDPR) procedures.

If the child spits out or vomits the medicine, no further dose should be given, and the parent should be informed.

Reducing risk
Systems in place which are checked at every point to reduce risk in administering medication:

- The consent forms are checked and complete with the parent and colleague at the initial stage.
- When the prescribed medication is being administered, it is rechecked with a colleague, this includes the dispensed and expiry dates.
- Reviews ensure that the medication is for a current condition (something prescribed for a condition six months ago might not be appropriate now).

- If a medicine, not dispensed recently, is still appropriate for use (for example liquid antibiotics usually only have a seven to ten day shelf life and eye drops should be discarded 28 days after opening and returned to the parent).
- Long-term medication will be reviewed on a 6 monthly basis or before, if needed, between Manager, Key worker and Parent.
- Any special instruction in relation to storage or administration of medication will be complete and adhered to.

Monthly reviewing/monitoring of medication taken by children and medication kept in the setting will be done by the Nursery Manager and recorded in the Monitoring folder.

Paracetamol and daycare of children
The information in the Care Inspectorate's "Management of medication in daycare of children and childminding services" is in line with existing government advice and best practice guidance. It offers a framework for the routine management of medication in such services.

It allows parents to pro-actively choose if they would like to leave a small amount of medication in the service for an agreed time and for use by their child under agreed conditions. Some will choose to exercise this option, others will not depending on individual circumstances.

There may be a few occasions where a service considers a child to be unwell, and contacts NHS 24 for advice. The care inspectorate has been advised that on rare occasion NHS 24 have advised individual services to administer an over the counter (OTC) medicine such as paracetamol immediately.
The care inspectorate has clarified the temporal aspect of this advice with NHS 24, who advised administration as soon as is reasonably possible is the correct interpretation.

Services will not (and should not) be contacting NHS 24 on a routine basis for advice on every presentation of an ailment. Where a service has contacted NHS 24 and advice to administer a medicine is given; the care inspectorate will and should view this as a non routine duty of care situation. As such a care service's response in this situation should not be viewed against the framework for the routine management of medication in such services (as found in the best practice guidance). The response of each care service to the non-routine situations will be dependent on the context.

Storage of medicines
All medication is stored safely in a locked cupboard below 25° or in a fridge between 2°-8° in an area where children cannot access alone. These temperatures will be recorded daily. Medication for individual children will be stored in separate containers with a lid and labelled clearly with the child's name and date of birth.
Staff are responsible for ensuring medicine is handed back at the end of the day to the parent. Medication will also be returned to the parent once the course of medication has been completed.
For some conditions, medication may be kept in the nursery. Staff must check that any medication held to administer on an as and when required basis or on a regular

basis, is in date. Any out-of-date medication must be returned to the parent. Children who have long term medical conditions and who may require ongoing medication must have a complete medical care plan. A record will be kept of any medication used by the children that is retained within the setting (Appendix 3)

Lifesaving medication needs to be accessible to those trained to administer it.

Care plan
A care plan for the child is drawn up with the parent outlining the key person's role, and what information must be shared with other staff who care for the child. The child's care plan should include the measures to be taken in an emergency. The child's care plan is reviewed every six months or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc. Parents receive a copy of the child's care plan and each contributor, including the parent, signs the consent for compliance with Data Protection, including GDPR and confidentiality of information.

When a parent is present they will be responsible for the storage of their child's medication. Otherwise the key staff member for that child will take responsibility.

Managing medicines on trips and outings
Medication for a child is taken in a sealed plastic box clearly labelled with the child's name and name of the medication. Inside the box, with the medication, is a copy of the consent form/medication form with the details as given above, which the parent signs on return to the setting. On no account may medicine be decanted into other containers or packets or envelopes. The original pharmacy labelled medication should be within the box.

Roles and Responsibilities
Parental Role It is the responsibility of the parents to ensure that the child is well enough to attend the setting and the parent will inform Little Learners' Nursery (ELC) staff of any medication that is currently being administered. Parents will also inform the setting if the child has received the medication at home, when it was administered and how much was given to ensure the correct dosage instructions are being followed. Parents will be required to complete a Parental Medication Permission Form (Appendix 1) giving permission for staff to administer the medication. This form will be updated regularly and a new form will be completed for each new medication required by the child. Parents will be asked to sign and acknowledge the medication given to their child each day. Parents will inform the setting if the child stops taking medication.

Staff Role Before administering medication staff will need to have the relevant information pertaining to the child. Staff will ensure that they have written permission from the parent for the setting to administer the medication (Appendix 1). Each time a staff member administers medication to a child the Administration of Medication form (Appendix 2) will be completed and signed. A second member of staff will witness the administering of the medication and then countersign the form once the medication has been given. Staff will need to complete the Administration of Medication Form each time medication is given noting the date, time and dosage etc. of medication given (Appendix 2). Risk-assess the number of trained personnel who must be

present to deal with medicinal needs. Ensure all spoons, syringes, spacers for inhalers etc. are labelled, stored with the child's medication, and cleaned appropriately after use. Infection control issues in terms of applying creams, eye drops etc. will need to be considered. Staff will ensure children's individual care and support is consistent and stable by working together with families in a way that is well coordinated for consistency and continuity of their child's care needs.

The Nursery Manager will ensure that all Little Learners' Nursery (ELC) staff and volunteers know who is responsible for the medication of children with particular needs.

Staff will ensure the parent signs the form daily to acknowledge the medication given to the child. Parental consent to administer medication should be time limited depending on the condition.

Long Term Medication
Children requiring medication for long term medical conditions such as epilepsy, diabetes, asthma need to have all relevant information recorded in their care support plan. This will be done by the key worker in consultation with the parent. A long term medication form will be completed and the medication record will be filled out when used, (appendix 4 & 6). Staff will check with parents of children on long term medication if any has been administered before attending nursery and this will be noted on the medication daily check form, (appendix 5) which is stored in the Administration of medication folder under the child's personal section.

Staff Training
Staff will be required to have training from a qualified health professional if a condition requires specialist knowledge in order to administer the medication. Staff should also be trained to recognise the symptoms if medication has to be given on a 'when required basis'. This information will be recorded in the Long-term medication form and attached to the care support plan as appropriate. Training should be reviewed and refreshed on a three yearly cycle to ensure staff have the most up to date knowledge.

Outings
Relevant medical details for all children participating in an outing will be taken by accompanying staff. Original copies will be left within the setting.
Medication will be administered to the child before leaving home or the setting where possible. For children who may require medication during the trip this should be administered by appropriate staff.

Treatment of Minor Ailments/Fevers
If a child becomes ill during a session when the parent is not present the Nursery Manager or key worker will call the parent or the emergency contact. If no contact can be made the key worker may call NHS 24 if deemed necessary and follow advice given.

Monitoring of this Policy

It will be the responsibility of the manager to ensure that new or temporary staff are familiar with this policy and to monitor that it is being implemented by all staff and parents. This will be achieved through observation of staff practice and regular communication with parents. All relevant medication forms will be checked and updated on a regular basis. Parents will be made aware of this policy through the enrolment procedures and the parents' handbook. This policy will be reviewed annually to ensure that it is relevant and up to date.

Disseminating and Implementing this Policy
Little Learners' Nursery (ELC) staff will be required to read this policy on their induction and to comply with the contents therein. The policy will be kept in the policy folder and will be available for staff to refer to at all times.
The implementation of the policy will be monitored on a day to day basis.
Any adverse incidents will be recorded and reviewed to ensure the policy is fit for purpose.

Appendices:
Appendix 1 – Parental Permission Form
Appendix 2 – Administration of Medication: Daily Dosage of an Individual Child
Appendix 3 – Monthly Review of Administration of Medicines
Appendix 4 – Long-term medication record
Appendix 5 – Long term medication daily check
Appendix 6 – Long term medication form
Appendix 7 – Sun Awareness and Protection

See also:
Health and Safety Policy
Infection Control Policy
GDPR – Privacy Policy

Links to national policy:
Health and Social care standards: My Support, My Life
https://beta.gov.scot/publications/health-social-care-standards-support-life/
Health and Social Care Standards, 1.15, 1.19, 1.23, 1.24, 2.23, 3.4, 3.14, 3.15, 3.16, 3.17, 3.18, 3.19, 4.11, 4.15

Management of medication in daycare of children and childminding services
http://hub.careinspectorate.com/media/189567/childrens-service-medication-guidance.pdf

Find out more:
Community pharmacists and NHS 24
www.nhs24.com

Fever Management
http://www.nhsinform.co.uk/health-library/articles/f/feverchildren/introduction

Parental Permission Form   **Appendix 1**

Administration of Medicines

Dear Parent/Carer

In order to enable staff to carry out safe practices in relation to the administration of medication please ensure the setting has the following information. All information should be recorded on this form.

- Medication required to be taken by your child whilst in the setting.
- Completed parental permission form.
- For ongoing medication a separate supply of medicine, appropriately labelled should be obtained from the pharmacist.
- Medicine should be clearly labelled with child's name, date of birth, name of medicine, dosage, time and frequency and expiry date.
- If your child suffers from asthma it is essential that the setting has been informed of any restrictions which need to be applied to his/her activities.
- If your child suffers from epileptic attacks, diabetes or anaphylactic shock it is imperative the setting is aware of the appropriate emergency treatment that should be given.
- If the child spits out the medicine, no further dosage will be given and you will be informed of this.

Thank you for your co-operation with this matter.

Yours sincerely

Nursery Manager

Personal Details

Setting	
Name of Child	
Date of Birth	

General Medical Practitioner Information

Name of Doctor	
Address	
Phone Number	

A parental permission form must be completed for each type of medication being taken by the child

Parental Permission

I confirm that my child …………………….……requires the following medicine(s)

……………………………….…and that I give permission that it /they can be administered by a non-medically qualified staff member of Little Learners' Nursery (ELC).

I will also inform the setting immediately of any changes in medication and will provide an appropriately labelled supply.

Signature ……………………………………. Date ……………….…….…….

Print Name ……………………………………………………………………………

Home Address ……………………………………………………………….......

…………………………………………… Telephone No. …………………...

Emergency Contact Person (if different from above) ……………………..………

Relationship ………………………………………………………………………..

Telephone No. ………………………………………………………………………

Child's Name ………………………………………………………………….……

Details of Medication

TYPE OF ILLNESS	
NAME OF MEDICATION (AS STATED ON LABEL)	
TYPE OF MEDICATION EG TABLETS, SYRUP	
DOSAGE INSTRUCTIONS EG HOW OFTEN, WHEN AND ANY OTHER RELEVANT INFORMATION	

Parent's signature confirming medication and dosage

Signed: ………………………………………………………….………………

Print Name: ……………………………….Date: …………………………………

Administration of Medication: Daily Dosage of an Individual Child

Appendix 2

(First dose must always be given by Parent)

Child`s Name …………………………………………..

Date	Time to be given to child	Type and dosage of medicine	Time last given by parent/carer	Time given in nursery	Dosage accepted? Any further action	Signature of member of staff administering drug Please also print name	Signature of witnessing member of staff Please also print name	Parent`s signature Please also print name

Monthly Review & Monitoring of Administration of Medicines   **Appendix 3**

Child`s Name	Date medication began	Time of last dose	Reason for medicine being administered	Review of medication Sign and Date: Please also print name	Medication returned to parent or n/a Date

Little Learners' Nursery Medication Record – as and when required medication.   **Appendix 4**

Childs name_____ D.O.B_____

Date	Time medicine administered	Person administering medication (signed)	Witness to administering medication (signed)	Reason for administration	Parent informed and signed

Long term Medication daily check   **Appendix 5**

Little Learners' Nursery Policy is to inform parents by phone if long-term medication has been administered while their child is attending nursery.

Staff will check with parents at drop off whether a child has received their medication before attending nursery and if so will record this below:

Date & Time Staff initialled	Reason for administering medication. Parent signature.	Date & Time Staff initialled	Reason for administering medication. Parent signature.

Little Learners' Nursery   Appendix 6
Long-term medication form

If your child requires medication on a regular, ongoing basis whilst attending Nursery then please complete the following:

Child's name_____D.O.B_____

Name of Medication:_____Expiry date_____

Medication strength_____

Dosage instructions_____

Administration instructions_____

Parent signature_____Date_____

Instructions as given by GP – specific dosage/wait times between dosage/emergency procedures:
_____
_____
_____
_____
_____
_____
_____
_____

Signs/symptoms that indicate medication to be given:
_____
_____
_____
_____
_____
_____

The nursery will inform parent/carer by phone call if the medication needs to be administered, and this will be recorded on the long term medication form kept in the administration of medication folder.

G.P Details:

Have you informed your GP that your child attends Nursery and how often? Yes/No (delete as appropriate)

Does your child attend any specific clinic? Yes/no (delete as appropriate)

If so please indicate any further guidelines given by the clinic:

……
……
……
……
……
……

A copy of this form must be held on file, along with the child's personal care plan in their PLP. A copy must also be attached to the long term medication record sheet and kept in the administration of medications folder.

This procedure will be reviewed on a 6 monthly basis or as required, if a child's circumstances change before the 6 months review date.
This will be done by the Nursery Manager/Senior Worker and Key worker, along with parents/carer.

Sun Awareness and Protection   **Appendix 7**

Statement of Purpose
Early Learning and Childcare settings need to be aware of the importance of protecting children from the sun. Both children and staff should apply sunscreen, be encouraged to wear protective clothing, drink water and stay in the shade as far as possible. Staff should be good role models for the children in relation to sun safety.

Sun Screen
Sun Screen should be applied at least 30mins before the children go outside. For children who attend the setting on a part time basis parents are encouraged to apply the cream at home and let the nursery know. Parents will sign a permission slip to allow the nursery to apply sunscreen. The nursery will provide a specific sunscreen and if a parent wishes there child to have their own sunscreen they will provide this themselves. Staff will record when the cream was applied to ensure correct procedures in relation to the application of the sun screen are being followed.

The most important information on sun screen is the SPF (which shows how strong the protection against UVB is), and star rating (which ranks the level of UVA protection). Look for **at least SPF 15** but higher factors are preferable and **4 or more stars**.

You won't get the level of the protection on the bottle **unless you put enough sunscreen on**. An adult needs about two teaspoonfuls to cover their face and upper arms. It's also important to reapply sunscreen regularly – it rubs, sweats and washes off easily, plus you may well have missed bits.

Appropriate Clothing
Children should be encouraged to wear clothing that provides good protection from the sun, for example, sun hats, long sleeved tops or sun glasses. Information in relation to sun awareness and protection will be made available to parents through newsletters and/or the noticeboard.

Outdoor Activities
Outdoor activities will be held in the shade and in screened areas as far as possible. Children will be encouraged to drink water regularly. Children who do not wish to go outside will be allowed to stay indoors. Children wishing to return indoors to the playroom from outside will be able to do so.

ANTI-BRIBERY POLICY

Policy Number	
Revision Number:	1
Date of Issue:	22/02/2019
Status:	For approval
Date of Approval:	01/03/2019
Responsibility for Policy:	Financial Director
Responsibility for Implementation:	Financial Director
Responsibility for Review:	Financial Director
Date of Last Review:	
Date of Last Revision:	
Date of Next Review:	
Date of Equality Impact Assessment:	

Anti-Bribery Policy

1. **Introduction**

The Bribery Act 2010 reformed the criminal law to provide a new, modern and comprehensive scheme of bribery offences that enables courts and prosecutors to respond more effectively to bribery at home or abroad. It was designed to bring the UK in line with international norms on anti-corruption legislation. Under the powers granted by the law prosecutors are able to prosecute both domestic and foreign companies, providing they have some presence in the UK. Bribes committed in the UK and abroad could be prosecuted under the Act.

There are 4 corporate offences:

a. A general offence covering the offering, promising or giving of a bribe.
b. A general offence covering the requesting, agreeing to receive, or acceptance of bribe
c. A discrete offence of bribery of a foreign public official.
d. A corporate offence of failure by a commercial organisation to prevent bribery by persons associated with it.

2. **Purpose**

2.1   The Policy sets out the College's position in respect of ensuring that all staff and those working on behalf of the organisation are aware of the law, their obligations and procedures in place to prevent bribery.

2.2   The Policy outlines the 6 principles of compliance recommended by the Ministry of Justice:

a   Proportionate Procedures: The College will ensure it has procedures in place to prevent bribery by persons associated with it which are proportionate to the bribery risks it faces and to the nature, scale and complexity of the College's activities. It will ensure that these are clear, practical, accessible, effectively implemented and enforced.

b   Top Level Commitment: The Senior Management Team (SMT) is committed to preventing bribery by persons associated with the College. The SMT will foster a culture within the College in which bribery is never acceptable.

c   Risk Assessment: The College will assess the nature and extent of its exposure to potential external and internal risks of bribery on its behalf by persons associated with it. The assessment will be periodic, informed and documented.

In assessing the risks, the College will pay particular attention to its dealings with territories which are perceived to have a high level of corruption; to dealings in high risk industry sectors eg defence, energy and construction; and to any close ties with prominent government officials or extensive government contracts.

d   Due Diligence: The College will apply due diligence procedures, taking a proportionate and risk-based approach, in respect of persons who perform or will perform services for or on behalf of the College in order to mitigate identified bribery risks. It will

take the appropriate action in response to any information uncovered as a result of the due diligence which gives rise to concern.

e   Communication (including training): The College will seek to ensure that its bribery prevention policies and procedures are embedded and understood throughout the organisation through internal and external communication, including training, that is proportionate to the risks it faces. The College will ensure that appropriate reference is made to the College's Anti-Bribery Policy and related policies, eg procurement, whistle-blowing, fraud prevention.

f   Monitoring and Review: The College will monitor and review procedures designed to prevent bribery by persons associated with it and make improvements where appropriate. The College will ensure that it takes appropriate action in response to any reported incidents of bribery.

3. Scope

3.1 The policy applies to all individuals working at all levels and grades, including all academic staff, senior managers, officers, members of the Board of Management, employees (whether permanent, fixed-term or temporary), consultants, contractors, trainees, seconded staff, casual associated staff and agency staff, volunteers, interns, agents, or any other person acting on behalf of the College (agents or third-party representatives which sometimes include students).

4. Definitions

4.1 Bribery is the offer, promise, giving, demanding or acceptance of an advantage as an inducement for an action which is illegal, unethical, a breach of trust or the improper performance of a contract.

4.2 Corruption is the misuse of public office or power for private gain, or misuse of private power in relation to business outside the realm of government.

4.3 Acts of bribery or corruption are designed to influence the individual in the performance of their duty and incline them to act dishonestly. The person being bribed is generally someone who will be able to obtain, retain or direct business. This may involve initiatives such as buying or selling, or it may involve the handling of administrative tasks such as licences, customs, visas or taxes. It does not matter whether the act of bribery is committed before or after the activity has been undertaken.

4.4 Kickbacks are typically payments made in return for a commercial favour or advantage. These are typically small, unofficial payments made to secure or expedite a routine government action by a government official. They are not commonly paid in the UK, but are common in some other jurisdictions in which the College operates.

4.5 Illustrative case studies are available at Appendix 1 of the Bribery Act 2010 Guidelines.

5. Key Principles

5.1 The College values its reputation for ethical behaviour and for financial probity and reliability and has a zero tolerance policy towards bribery.

5.2 The College prohibits the offering, the giving, the solicitation or the acceptance of any bribe, whether cash or other inducement, to or from any person or company, public or private, by any governors, staff, contractors, consultants, agents, overseas agents, external examiners and any nonemployee service providers engaged on College business for whatever reason, in order to gain any commercial, contractual or regulatory advantage for the College in a way which is unethical or in order to gain any personal advantage, pecuniary or otherwise, for the individual or anyone connected with the individual.

5.3 The College recognises that market practice varies across the territories in which it does business and what is normal and acceptable in one place may not be in another.

5.3.1 This policy prohibits any inducement which results in a personal gain or advantage to the recipient or any person or body associated with them, and which is intended to influence them to take action which may not be solely in the interests of the Group or of the person or body employing them or whom they represent.

5.3.2 This policy is not meant to prohibit the following practices providing they are customary in a particular market, are proportionate and are properly recorded:

a   Appropriate and reasonable hospitality;
b the giving of a ceremonial gift on a festival or at another special time;
c the use of any recognised fast-track process which is available to all on payment of a fee;
d the offer of resources to assist the person or body to make the decision more efficiently, provided that they are supplied for that purpose only.

5.4 The College prohibits payments including "facilitating" or "expediting" payments to others in order to secure prompt or proper performance of routine duties.

6. Responsibilities

6.1 The Senior Management Team and Board of Management have overall responsibility for the Policy and for fostering a culture within the organisation in which bribery is never acceptable.

6.2 The Financial Director has responsibility for implementing the Policy, monitoring compliance and ensuring the Policy is regularly reviewed and updated as appropriate.

6.3 The responsibility to control the risks of unethical business practices occurring resides at all levels of the organisation. The prevention, detection and reporting of bribery is therefore the responsibility of all staff. To this end staff should be aware of the Public Interest Disclosure process outlined in the College's Whistle-blowing Procedure.

6.4 Quality approval check of the policy is the responsibility of the Quality Manager who will arrange for the policy to be posted on the web.

7. Linked Policies/Related Documents

7.1 Fraud Prevention Policy and Response Plan
7.2 Whistle-blowing Policy
7.3 Staff Disciplinary Procedure
7.4 Student Disciplinary Procedure
7.5 Procurement Policy
7.6 The Bribery Act 2010 – Guidance
7.7 Financial Regulations

8. Relevant Legislation

The Bribery Act 2010