HARTPURY

AUDIT AND RISK MANAGEMENT COMMITTEES
HARTPURY UNIVERSITY AND HARTPURY COLLEGE

Minutes
10am Tuesday 10th March 2026
Gordon Canning Room & Teams

Members	University Audit Committee	College Audit Committee
Lucie Hammond	Present (Chair)	Co-opted Member - Present
Ian Robinson (Professor)	Present	Present - Co-opted Member)
Robert Brooks	Apologies	Apologies - Co-opted Member)
Patrick Brooke	Co-opted Member - Present	Present (Chair)
Barbara Buck	Co-opted Member - Apologies	Apologies
Alastair Grizzell	Co-opted Member - Present	Present
Clive Stainton (until 12.30)	Co-opted Member - Present	Co-opted Member - Present
In Attendance		
Mick Axtell	Present (Chief Operating Officer)	Present (Chief Operating Officer)
Gillian Steels	Present (Clerk to the Board)	Present (Clerk to the Board)
Jason Smerdon	Present (Director of Finance)	Present
Andy Collop (Professor)	Present (Vice-Chancellor)	Present (Executive Principal)
Chris Rising	Present (MHA)	Present (MHA)

		ACTION & DATE
	Key Decisions and Items Discussed	
	Annual Health & Safety Report Approved– steady state. No prosecutions or enforcement actions. Work ongoing to develop whole site compliance monitoring processes and whole site water management plan. Business Recovery Incident Report – wider lessons learnt to resolve incidents more quickly. Annual Value for Money Report Approved – wider remit to be considered for 2025/26 reporting. Risk Management Report – Risks impacted on achievement of Strategy added to Strategic Risks Register. Public Interest Disclosure Policy – Approved. Annual IT & Cyber Report Approved – ongoing assurance – recognising always need for further action.	

ARM01/03/26	**Welcome, Apologies & Confirmation of Quoracy** Attendees were welcomed to the meeting. Apologies noted as above. It was confirmed that the University Audit and Risk Management Committee and the College Audit and Risk Management Committee meetings were quorate.	
ARM02/03/26	**Declaration of Interest.** The Clerk advised that members' interests would be taken as those disclosed in the Register of Members Interests.	
ARM03/03/26	**Minutes of the Meetings – 11th November 2025** The minutes of the University Audit and Risk Management Committee and the College Audit and Risk Management Committee 11th November 2025 meetings were **APPROVED** as true records.	
ARM04/03/26	**Matters Arising** The updated Action Log was noted. **Debt Write Off** – it was confirmed a paper on this had been taken to SFR and a write off agreed for debt over 6 years old. It was confirmed that newer debt was being chased and that top 10 debtors were now being included in the Financial Pack to increase transparency and oversight. **Business Continuity Plan** – it was agreed incorporating this in the Health and Safety Report to provide ongoing heightened oversight would be helpful. **Risk Register** – input from MHA -Agreed this was ongoing and should be treated as business as usual and removed from the Matters Arising log	H&S Manager Clerk
ARM05/03/26	**Health & Safety Annual Report (including Business Continuity Update**	
	The Head of Health & Safety & Environment outlined the key points in the annual report which provided Governors with a comprehensive overview of Health and Safety Management and activities over the academic year 2024/2025, as well as an understanding of the health and safety priorities and activities undertaken in the first half of 2025/26. It was noted the report had previously been presented to: • SMT/Exec on Thursday 19th February 2026 • Health and Safety Forum on Thursday 19th February 2026 **Key Assurances were highlighted:** **Governance** • The governing body through the Audit and Risk Committee receives an annual report and interrogates it effectively • There is a H&S link governor, who meets with the Head of H&S periodically • The governing body has attended H&S leadership/governance training (08.02.2024) and keeps itself informed on matters of governance. **Leadership & commitment** • There is an annually reviewed H&S policy signed by the Vice-Chancellor/Executive Principal	

- H&S is a standing item on Executive meeting agendas
- The Executive / SMT receive H&S regular updates/reports from the H&S Forum
- The Executive / SMT receive other ad hoc reports and updates on specific matters arsing as necessary
- The Executive / SMT has attended H&S leadership training (10.11.2023) and maintains its respective professional competencies and understanding
- Leaders model appropriate H&S behaviours to maintain a positive H&S culture

Culture setting

- Health and safety is a strategic risk on Hartpury's risk register which is maintained through regular meetings of the Risk Management Group
- Hartpury departmental risk registers include matters of health, safety and environment where appropriate
- There is a H&S Forum that meets every semester, chaired by the C.O.O.
- Functional Heads & 'Risk Area Managers' lead on H&S promulgation in their areas of responsibility
- Accidents are reliably reported in a timely fashion to facilitate any learning
- Other events such as BCP incidents are investigated and reviewed to learn lessons and take appropriate action to prevent or reduce the likelihood of recurrence
- Staff regularly raise H&S concerns and participate in their resolution
- New construction and other significant projects *always* includes H&S consultation
- Significant events and new activities *always* include H&S consultation
- Near Miss reporting has shown an appreciable improvement over the previous year.

The Head of Health & Safety & Environment updated on **Prosecutions and enforcement action.** He advised there had been **none**. This included enforcement by Health & Safety Executive (HSE), District Council Environmental Health, Fire Service and Environment Agency.

Commercially Sensitive – Confidential 3 years

He advised that in November 2025 Gloucestershire Fire & Rescue Service had issued a '**Letter of Fire Safety Matters**' for two of our buildings, but relating to the wider management regime. The required actions to respond to this were in progress. It was confirmed that at this stage the letter was non-statutory and had no insurance implications, but that if the actions were not put in place, then an improvement notice would follow which would be statutory. It was confirmed that the Fire Service were comfortable with Hartpury's planned actions.

Security across campus was an area which was being reviewed in April/May. The challenges of balancing a porous campus which provided security to staff and students, while not being oppressive was recognised. He confirmed the review would involve speaking to stakeholders.

Governors queried how the risk score was identified. The Head of Health & Safety & Environment advised that this followed consideration of the audit outcomes across the organisation, for example in relation to risk assessments.

Governors questioned the quantity and risks around asbestos. The Head of Health & Safety & Environment updated that there was relatively little asbestos across the

	campus, against the overall size of the campus, and that most was not in areas generally accessible to staff and students, and that it was stable. Compliance Monitoring -a new management plan was to be introduced following the lapsing of an external system. A new member of the Estates management team was taking this forward, with the development of an asbestos plan as the priority, but wider compliance monitoring planning also to be established. It was agreed that a systematic approach was very important. Governors queried whether the office currently out of use due to radon would be treated to irradicate the radon. The Head of Health & Safety & Environment advised that this would be actioned in the longer term, but that the office was not in use and staff had been relocated. It was confirmed that a nearby staff residence had also been reviewed and that the outcome of the testing was awaited. Governors challenged on whether there were funds budgeted for the fire safety actions. They were advised that this was within proposals which would be taken to Board the following week, although the specific costs were still being identified. Governors considered the actions highlighted in relation to physical safety and it was confirmed these would also be part of the Board capital discussions in March. It was noted there had been 5 RIDDOR reportable accidents - 4 for students and 1 for a member of the public (criteria – taken off site to A&E – except for sport injury). The number of insurance claims advised was to be checked to confirm whether it had risen or not. Environmental Management – it was noted Hartpury had exceeded its water extraction licence in the summer and was looking at future water management to protect the farm and other facilities going forward. The importance of this to protect the curriculum delivery was stressed. It as noted Hartpury had to report to the Environment Agency on an annual basis on water extraction, it was noted that other organisations faced the same challenges given the impact of the changing climate. The Chief Operating Officer advised that discussions were ongoing with the Environment Agency on water management. It was noted that reporting on Business Continuity Planning and incidents were included in the Report and it was agreed this was a helpful addition. Governors questioned whether maintenance had been reactive rather than proactive. It was agreed that this had been the case, but work was ongoing to improve documentation to provide more transparency and to move to more proactive management. Additional staff were being recruited to support this. Governors were reassured by this changing culture. End of confidential section	HH&SE
	The Annual Health & Safety Report was APPROVED. Commercially Sensitive – Confidential 5 years	
ARM06/03/26	**Business Continuity Plan (BCP) – Incident Report**	
	The Head of Health & Safety & Environment outlined key aspects of the report which updated on the major BCP incident involving the failure of the campus's main effluent pumping plant on 9th December 2025 and the recommendations arising from the internal investigation report.	

	It was noted that the incident had followed the failure of both pumps and significant rain fall, and that the pumping station infrastructure was poorly configured, that pipe plans were not sufficient and that this combination had caused the incident and impacted on the timeliness of initial response. Repairs had been affected in 8 hours and the site kept running. Costs had been incurred which would be covered by insurance. Longer term actions were ongoing. A lessons review had also been undertaken of the use of the BCP. This had identified that whilst the Risk had been on the Risk Register a response plan had not been in place, this had now been taken forward more widely within the Risk Management Group.	
	Governors queried if there were alarms. It was confirmed there were but that they went to a limited number of people and did not distinguish between 1 or 2 pumps failing. Actions had been taken to address both of these issues. Governors questioned if there had been complaints from neighbours and were advised it had not had an external impact and no one had complained.	
	It was confirmed that the water management plan being developed would also include the use of the pumping station for both sewage and rainwater.	
	The Committees NOTED the BCP Incident Report and the actions taken and ongoing.	
	10.45 The Head of Health & Safety & Environment left the meeting	
ARM07/03/26	**Risk Management Update**	
7.1	Thes report provided ARMC with a summary of the changes to the Risk Register since the last meeting as well as an update on progress in developing the Hartpury Risk Management Policy. It provided ARMC the opportunity to review both the outcome of the Risk Management Process and the robustness and breadth of coverage of Risk Management. The Risk Register had been reviewed and updated following the latest Risk Management Group meeting (RMG) and continual reviews by each operational area of their local risk registers. The latest version (available on the Governors website) had been discussed at SMT. Commercially Sensitive – Confidential 3 years **High residual risks** A learning outcome of the review of the pumping station failure BCP event was to ensure the organisation had appropriate immediate plans for any items on the register that had a high residual risk score. The pumping station was listed on the risk register with a high residual risk score, but actions listed would only take impact in the future. As reflected in the minutes, the RMG reviewed those risks in the risk register that remained high after mitigations. Whilst the discussions highlighted that there were plans in place for many of the risks with high residual scores to avoid high impact events, some of the risks are hard to predict and evolving (e.g. cyber security and climate change). Mobile connectivity across campus remained a concern due to poor mobile coverage that may restrict a response to an incident. Whilst Wi-Fi calling had now been enabled across the campus, we will revisit the potential to install signal boosters around campus.	

	Risk register The changes to strategic risks were highlighted in a comparison summary and changes to the main Risk Register were highlighted in red. Governors considered the Risks relating to partnerships, Ofsted, Transnational education and Research Degree Awarding Powers (RDAP). It was noted that where there were risks relating to the achievement of the overall strategy that these had been added to the Risk Register. Governors queried if the wording in the risk register relating to OfS Conditions of Registration was correct or if there had been a typo. The Chief Operating Officer confirmed he would check this. Governors queried the multiple AI risks which were being progressed. It was confirmed that work was ongoing to respond to AI through developing governance at the AI Working Group. Copilot was being trialled. The range of risks relating to AI, including the risk of an AI generated attack were recognised. The Committees stressed the importance of ongoing vigilance. Governors discussed the risk relating to waterlogged fields, access to outdoor space and horse welfare. The importance of developing a whole site water management plan was again noted. End of confidential section	COO March 26
7.2	**Minutes from Risk Management Group** It was confirmed that the Risk Management Group was actively and effectively supporting risk management at Hartpury. **The Minutes were NOTED.**	
ARM08/03/26	**Public Interest Disclosure Policy – Review & Update**	
	The policy had been updated to reflect new guidance and following reflection on uses during 2025. The Committees were advised that during 2024/25 there had been no uses of the policy. In 2025/26 there had been 2 cases, by the same individual. These had been taken to the appeal stage but had not been considered founded.	
	The College and University A&RM Committees APPROVED the updated Public Interest Disclosure Policy and noted the update on use during 2024/5 and 2025/6 to date.	
ARM09/03/26	**Internal Audit Update, including Audit Recommendations Follow Up**	
	MHA presented their first Internal Audit progress report, which updated on the progress in the delivery of the 2025/26 Internal Audit Plan, progress against recommendations and highlighted some of the key issues facing the education sector. It was noted that the Strategic Planning audit had been postponed until June/July, that the Management of Outsourced Contracts Audit had been completed and that the rest of the plan was at the planning stage, targeted for submission to the June meeting.	
	It was confirmed that Recommendations relating to previous audits were either complete or on track, with no issues to highlight. Governors queried the Recommendation relating to the Capital Strategy. It was noted that this related to	

	the fact that the masterplan had not previously been lodged with the District Council. This was planned post discussions at the March awaydays. It was confirmed this would be considered within the Strategic Planning audit in July. It was confirmed that there was an agreed Estates Strategy underpinning the 2030 Strategy.	
	The Internal Audit Progress Report was NOTED.	
	11.35am The Contracts & Procurement Manager joined the meeting	
ARM10/03/26	**Internal Audit – Management of Outsourced Contracts – Adequate Assurance - 4 Recommendations – 2 Medium 2 low**	
	The audit covered the arrangements in place for the management of out-sourced contracts, with a particular focus on the Catering contract, provided by Aramark, and the transport contract, provided by Zeelo.	
	It concluded that Hartpury had a well-established framework in place to support the governance and management of outsourced contracts. Commercially Sensitive – Confidential 5 years Testing of the Aramark catering contract had confirmed that the tendering and procurement process was conducted in line with policy. For both the Aramark and Zeelo contracts, Mobilisation Action Plans were in place outlining key actions, responsibilities, and completion dates, with additional external mobilisation support evidenced for Aramark. Ongoing contract oversight was supported through key performance indicator (KPI) monitoring and regular review meetings. Both contracts were subject to annual reviews covering performance, KPIs, budget considerations, and forward planning. Internal Audit identified a number of areas where the control framework could be strengthened. Overall, the Zeelo transport contract appears to be managed with less rigour and consistency than the Aramark catering contract, indicating a disconnect in approach across key outsourced arrangements. Management had agreed responses to the recommendations and were progressing actions. Governors considered the audit outcome level and challenged as to whether “adequate – amber” was the correct level. MHA advised it reflected that the framework was in place but that there were some inconsistencies in application. It was recognised that the contracts had been let at different times with different staff and posts in place. The Chief Operating Officer advised he was pleased with the recommendations which would help improve practice. Governors queried what actions would need to be in place for the rating to move to green. MHA advised that progressing the actions detailed and greater consistency would support this. Governors commented that both contracts were financially significant, and it was important they were appropriately monitored and held to account. It was noted that arrangements with Zeelo had 18 months of contract to go and that a review was ongoing to strategically plan for the future, which might be a different form of operation. The need to avoid disconnect between student and parent and education and transport was highlighted and would be used to help future planning. It was noted that the minibuses were currently run by Hartpury and the coaches and communication by Zeelo which could be a challenging divide to co-ordinate.	

	The Vice-Chancellor and Executive Principal reminded governors that prior to transport being outsourced there had been significant internal issues operating the transport system, particular issues around its resilience. It was confirmed that the outsourced contracts were subject to internal review and challenge: Zeelo – Contract & Procurement Manager, Chief Operating Officer, Head of Estates. Aramark – Chief Operating Officer, Director of Finance and Chief People Officer. and that the audit recommendations would further enhance this. Governors questioned whether the Contract Management Framework covered the full procurement cycle and this was confirmed.	
	The Internal Audit – Management of Outsourced Contracts was NOTED with Recommendations to be actioned.	
ARM11/03/26	**Procurement Compliance** The Contracts & Procurement Manager presented the Procurement Compliance Report and provided assurance where there had been any variation on the standard compliance requirements, for example where work was bespoke, time critical or there was a need to align to current services, or there was only a single supplier. One variation was highlighted relating to the farm where a 3-quote process had been used as it was expected the cost would be below £50k, but it had actually been slightly higher. It was confirmed that the purchase would have been undertaken with oversight from the College Principal and that it related to an urgent need. The Committee noted the position. **The College and University A&RM Committees NOTED the Procurement Compliance Report.** The Contracts & Procurement Manager left the meeting	
ARM12/03/26	**FRS 102 Changes Update**	
	The Director of Finance had provided an overview of forthcoming changes to FRS 102, effective for accounting periods beginning on or after 1 January 2026, with adoption by Hartpury for the July 2027 financial year end. The revisions bring UK accounting standards closer to IFRS (International Financial Reporting Standards), enhancing transparency, consistency, and comparability across the HE and FE sector. It was noted that the most significant changes related to lease accounting and revenue recognition. All leases will be recognised on the balance sheet through the introduction of 'right-of-use' assets and corresponding lease liabilities, replacing the current distinction between operating and finance leases. While this will increase reported assets and liabilities and may affect the profile of reported costs, there is no impact on cash flows or underlying financial commitments.	

	Revenue recognition would move to a five-step performance-based model. Most income streams are expected to see minimal change; however, research contracts and commercial income would require review to ensure compliance. Discounts, scholarships and bursaries offered prior to acceptance will be netted against gross income rather than treated as expenditure. Overall, the impact was expected to be largely presentational. Certain KPIs may appear affected due to changes in accounting treatment rather than operational performance. It was confirmed there was no impact on existing HSBC banking covenants. Supporting reconciliations and clear communication would be provided to ensure transparency for governors, regulators, auditors and other stakeholders.	
	The Committees NOTED the current assessment of the impact that the changes to FRS (Financial Reporting Standard) 102 will have on Hartpury as an Institution, and NOTED that a paper will be presented at the June meeting to quantify the impact of the presentational changes.	
ARM13/03/26	**DfE Bursary Fund Audit**	
	The College Audit & Risk Management Committee considered the Funding Assurance Review 2024/25 Provider feedback (final). It noted the outcomes: • Use of Funds opinion – satisfactory • Nil Funds at risk, • Sample error rate 0%. • Any areas of non-compliance confirmed to be actioned It was noted that going forward Hartpury would amend the details included in the bursary letter to either show only the amount awarded for accommodation or the split between Accommodation and Meals. Governors were pleased there were no issues of concern.	
	The outcome of the Funding Assurance Review 2024/25 Provider feedback was NOTED.	
ARM14/03/26	**Value For Money Annual Report**	
	The report reviewed progress on the delivery of Value for Money (VfM) in 2024/25, included the VfM statement in the published 2025 Annual Report and Financial Statements of the University and sets out proposed actions in delivering the next VfM report for 2025/26. The structure of the report had stayed relatively constant over recent years. It was planned to overhaul the report's structure for next year, taking into account best practice across the sector by broadening out the areas covered and making it clearer as to where value is delivered, be it for students, the UK taxpayer or the local region. Governors were supportive of this proposal, but recognised the need to ensure the work was proportionate.	
	VfM actions for 2024/25 were reviewed and no issues raised. The objectives for 2025/6: • To promote a culture of continuous improvement • To integrate VFM principles within existing management, processes. • To ensure that all staff recognise their continuing obligation to seek VFM for the institution as part of their routine activities • To respond to opportunities to enhance the economy, efficiency and	

	effectiveness of activities and adopt recognised good practice where this makes sense. • To demonstrate actively to both internal and external stakeholders that the achievement of VFM is sought in all activities undertaken throughout the University. • To procure goods and services in the most sustainable economic way possible. and related actions were endorsed.	
	The Value for Money Annual Report 2024/25 was APPROVED. 11.50am The Director of IT and CI and Head of IT joined the meeting	
	Commercially Sensitive – Confidential 5 years	
ARM15/03/26	**IT & Cyber Annual Report**	
	The Committees considered the report which detailed information relating to Hartpury's cyber security status, including outcomes and recommendations from recent cyber security audits and testing. It also included progress made in this area over the past 12 months, current risks and a plan of activity for 26/27. Key Points Highlighted:	
	Managing Cyber Risk - incorporated into the institutional risk management process to ensure that when risks are identified, they are recorded and scored for probability and impact. This process covers all users of Hartpury systems, whether being accessed on campus or through remote working. **Governance and Policy -** ensures effective scrutiny and reporting, cyber-related risks are raised, recorded, assessed and discussed at various meetings and reports submitted to relevant groups and committees. A suite of policies was in place to support our approach to cyber security which are based on best practice and compliance requirements and cover the areas of Data Protection, Payment Card Industry Data Security Standard (PCI DSS) and Cyber Essentials. Cyber and IT related policies were tracked and reviewed. PCI/DSS and Cyber Essentials were both complementary compliance regimes which provided external validation of our approach to managing specific cyber security risks. PCI/DSS is a compliance requirement to ensure that we have suitable management controls and processes in place to handle credit/debit card data appropriately. Compliance to PCI/DSS transfers the liability of fraudulent transactions from Hartpury to the card provider. We were compliant with V4. Requirements of the updated version of the standard were currently being reviewed. **Cyber Essentials** - an effective, Government-backed scheme that helps to protect organisations against a range of the most common cyber-attacks. It was noted it was now mandatory to obtain Cyber Essentials certification to secure DfE funding from September 2026. It was noted that the ongoing issues in Iran had heightened cyber risk and geographical blocks had been put in place. It was confirmed that if an individual member of staff needed to access a country which had been blocked that this could be put in place. Governors queried if VPN could be used to evade blocks, and were advised that VPN traffic was also flagged.	

	It was confirmed that a Disaster Recovery Test had been undertaken this year and recovery had been good. This had included removing key people to ensure resilience was in place. This had involved a broad team – IT, finance & marketing. A governor queried if the processes had been tested to the end and this was confirmed. It was confirmed that in the event a ransom ware attack Hartpury could recover 3 years back of data and could be restored to a different server or the cloud. Governors queried the response time of external support, and it was confirmed this would be checked and provided. The importance of speedy recovery was stressed. It was confirmed that cyber insurance and warranties were in place.	**MR Mar 26**
	The importance of education to ensure staff and students safeguarded the integrity of Hartpury systems was stressed. Governors queried the impact of training. It was noted that phishing tests still identified the need for more vigilance. This had been highlighted by the Vice-Chancellor and Executive Principal in his recent all staff communications. Training was to be reinforced. Governors queried the use of incentives or disciplinary action. It was agreed that these options would be further considered.	**Dir IT &CI Ongoing**
	Penetration tests were done every year and were currently ongoing, patch management had improved.	
	Third party devices were recognised to be a particular risk and controls for these were a priority.	
	It was confirmed that eduroam was separate from corporate data to support defences. It was planned to further expand separation of critical systems going forward.	
	It was confirmed that the additional budget which had been put in place to support investment in this key area was being carefully monitored and managed.	
	It was agreed it would be helpful to RAG rate risks in future reports.	**Dir IT &CI ongoing**
	The Committees APPROVED the Annual CYBER and IT Report.	
ARM16/03/26	**Direct Loan Audit Report**	
	ForvisMazars had performed the procedures required to confirm Hartpury University's compliance with the requirements described in Chapter 4 of the 2020 edition of the U. S. Department of Education's *Guide for Financial Statement Audits and Compliance Attestation Engagements of Foreign Schools* relative to the Hartpury University's participation in the William D. Ford Federal Direct Loan Program, for the year ended 31 July 2025. There are no reportable findings for the period 1 August 2024 to 31 July 2025. It was noted the Audit related to 8 students.	
	The University A&RM Committee NOTED the Direct Loan Audit Report compliance assurance.	
ARM17/03/26	**Any Risks to Highlight**	
	Cyber and specifically the SLA for cyber recovery timescale was highlighted.	

ARM18/03/26	**Items to Highlight to Board**	
	Annual Health & Safety Report Approved– steady state. No prosecutions or enforcement actions. Work ongoing to develop whole site compliance monitoring processes and whole site water management plan. Business Recovery Incident Report – wider lessons learnt to resolve incidents more quickly. Annual Value for Money Report Approved – wider remit to be considered for 2025/26 reporting. Risk Management Report – Risks impacted on achievement of Strategy added to Strategic Risks Register. Public Interest Disclosure Policy – Approved. Annual IT & Cyber Report Approved – ongoing assurance – recognising always need for further action.	
ARM19/03/26	**Committee with Auditors Only** See separate minute.	
ARM20/03/26	**Any Other Business**	
	None	

The meeting closed at 12.35pm

Management left the meeting and a confidential session with Auditors followed.

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AUDIT AND RISK MANAGEMENT COMMITTEES
HARTPURY UNIVERSITY AND HARTPURY COLLEGE

Confidential Minutes – without Management
12pm Tuesday 11th November 2025
Gordon Canning Room

Members	University Audit Committee	College Audit Committee
Lucie Hammond	Present (Chair)	Co-opted Member - Present
Ian Robinson (Professor)	Present	Present - Co-opted Member
Patrick Brooke	Co-opted Member Present	Present
Barbara Buck	Co-opted Member - Apologies	Apologies
Alastair Grizzell	Co-opted Member	Present
Robert Brooks	Apologies	Apologies – Co-opted
Clive Stainton	Co-opted Member Apologies	Co-opted Member Apologies
In Attendance		
Gillian Steels	Present (Clerk to the Board)	Present (Clerk to the Board)
Chris Rising	Present (MHA)	Present (MHA)

		ACTION & DATE
	Confidential Session without Managers	
	MHA updated that processes were going well and that management were very responsive. Confirmation of the challenge to Management in relation to Management Responses to Recommendations was confirmed and it was confirmed they had responded positively to recommendations. Governors confirmed they found the report format helpful. It was agreed the update on Cyber had been helpful.	

The meeting closed at 12.35