



**Meeting of the Audit
and Risk Committee**

**To be held on
Wednesday 03
June 2026 at
1000hrs in G10, City
Campus and via MS
Teams**

AUDIT & RISK COMMITTEE

NOTICE

There will be a meeting of the Audit & Risk Committee on Wednesday 03 June 2026 at 10:00am held in G10, City Campus, with the option to join via Microsoft Teams if required.

AGENDA

Agenda Item		Paper
41-25	Apologies for Absence	
42-25	Declaration of any Potential Conflicts of Interest in relation to any Agenda Items	
43-25	Minute of Previous Meeting (25/02/26)	X
44-25	Matters Arising Report	X
	Matters for Decision	
45-25	Draft External Audit Plan AY2025/26	X
46-25	Internal Audit Plan AY2026/27	X
	Matters for Discussion	
47-25	Internal Audit Reports <ul style="list-style-type: none"> • Governance Report • Follow Up Reviews 25/26 • Internal Audit Progress Report 	Verbal X X
48-25	Code of Good Governance for Scotland's Colleges (Compliance Review)	X
	Reserved Matters for Discussion	
49-25	Strategic Risk Register	X
50-25	ASET Strategic Risk Register (ASET Board Papers due 29/05/26)	Late Paper
51-25	Any Other Business	
52-25	Summation of Actions and Date of Next Meeting	
	Private Matter for Discussion (NESCol Attendees to leave Meeting)	
53-25	Committee members-only discussion with Internal and External Auditors	

AUDIT & RISK COMMITTEE

MINUTE OF MEETING

Draft Minute of Meeting of the Audit & Risk Committee, held on Wednesday 25 February 2026 at 10:00am via Microsoft Teams.

Agenda Item	<p>Present: Jim Gifford Bryan Hutcheson Caroline Laurenson Ellie Zemani Leona McDermid</p> <p>In attendance: David Archibald, Partner, Henderson Loggie Anne MacDonald, Senior Audit Manager, Audit Scotland Stuart Thompson, Vice Principal Finance & Resources Susan Lawrance, Board Secretary Karen Fraser, Minute Secretary</p>
29-25	<p>Apologies for Absence Apologies were received in advance of the meeting from I Watt and G Lawrie.</p>
30-25	<p>Declaration of any Potential Conflicts of Interest in relation to any Agenda Items L McDermid declared a transparency statement by virtue of her position with Aberdeen Foyer.</p>
31-25	<p>Minute of Previous Meeting (26/11/25) The Minute was approved as a true and accurate record.</p>
32-25	<p>Matters Arising Report Members noted the updates applied to the 4 Matters Arising and captured in the shared report.</p>
	<p>Reserved Matter for Decision</p>
33-25	<p>Risk Management Policy</p>

	<p>Matters for Discussion</p>
<p>34-25</p>	<p>Internal Audit Reports Reports were presented by guest attendee D Archibald to facilitate consideration of their overall levels of assurance.</p> <ul style="list-style-type: none"> <p>• IT Network Arrangements The review focused on IT network arrangements and cyber security controls and resulted overall in a good audit.</p> <p>D Archibald recognised the upkeep of cyber security being an ongoing process and presenting a real challenge, and noted the need to undertake what is proportionate and sensible. The updated Global Internal Audit Standards published in 2025 were pointed out, and the input from HEFESTIS realised as having been beneficial.</p> <p>In response to a query raised, it was confirmed that ASET had been included in the audit as the management of IT and cyber-security is undertaken by NESCol on their behalf. An anomaly in the scoring of the risk associated with a cyber-attack in the Strategic Risk Registers of both organisations was highlighted, and it was determined that these should be aligned. S Thompson agreed to provide ASET's General Manager with detail from the audit report so as to allay any concerns.</p> <p>Action: ST to progress.</p> <p>An acknowledgement of the increased volume of cyber instances was shared, brought to light because of improved reporting. The value in participating in repeat awareness training was noted.</p> <p>• Payroll With a focus on the controls in place to mitigate Risk 6.1 of the SRR relating to financial penalties and/or reputational damage if staff do not adhere to key statutory obligations, the overall level of assurance was confirmed as good.</p> <p>D Archibald emphasised it not being common to achieve a positive audit in this area owing to its' increased complexities, and requested that thanks be passed on to Payroll colleagues for their involvement. Recognition of NESCol's very small Payroll team was pinpointed.</p> <p>Action: SL to share feedback with Payroll/People Services.</p> <p>• Internal Audit Progress Report Progress with the annual 2025/26 plan was captured in the shared report.</p> <p>It was confirmed that verbal feedback on the findings from the Effectiveness Review will be shared at the 18/03/26 Regional Board Meeting.</p> <p>Action: SL to add to Agenda.</p>

35-25	Committee Evaluation Feedback Members were invited to consider the feedback shared regarding Committee performance. S Lawrance issued an apology for the lateness of the paper, expressed thanks to Members for the responses received, and directed all to the Regional Board Teams' space for access to other Committee Evaluations.
	Reserved Matters for Discussion
36-25	Strategic Risk Register
37-25	ASET Strategic Risk Register

	Matter for Information
38-25	Annual A&R Committee Activity Report The 2024-25 Activity Report was provided for information. Members noted its' necessity as per the financial memorandum and were content with the captured reflections.
39-25	Any Other Business No other business was raised.
40-25	Summation of Actions and Date of Next Meeting No summation was requested. The next meeting was confirmed as Wednesday 27 May 2026 at 10:00am, to be held in-person at City Campus with an online joining offer extended.
	Meeting ended at 11:24am

Actions from the Audit & Risk Committee Meeting – 25 February 2026			
Agenda Item	Action	Responsibility of	Deadline
34-25	Internal Audit Reports: detail from the IT Network Arrangements audit to be shared with S Scott.	S Thompson	Immed.
34-25	Internal Audit Reports: feedback and thanks to be passed on to Payroll colleagues/People Services.	S Lawrance	Immed.
34-25	Internal Audit Reports: verbal feedback on Effectiveness Review findings to be added to RB Agenda for 18/03/26.	S Lawrance	Immed.
36-25	Strategic Risk Register:		
37-25	ASET Risk Register:		

AUDIT & RISK COMMITTEE

An update on matters arising from the meeting of the Audit and Risk Committee held on 25/02/26.

Agenda Item	Action
34-25	Action: Internal Audit Reports: detail from the IT Network arrangements audit to be shared with S Scott.
	Status: Complete – information shared
34-25	Action: Internal Audit Reports: feedback and thanks to be passed on to Payroll colleagues/People Services.
	Status: Complete – information shared
34-25	Action: Internal Audit Reports: verbal feedback on Effectiveness Review findings to be added to RB Agenda for 18/03/26.
	Status: Complete. Included on Agenda and D Archibald in attendance to provide verbal feedback.
36-25	Action: Strategic Risk Register:
	Status:
37-25	Action: ASET Risk Register:
	Status:



AUDIT & RISK COMMITTEE Meeting of 3 June 2026	
Title: Annual Audit Plan 2025/26: External Audit - Audit Scotland	
Author: Anne MacDonald, Audit Scotland	Contributor(s): Stuart Thompson
Type of Agenda Item: For Decision <input type="checkbox"/> For Discussion <input checked="" type="checkbox"/> For Information <input type="checkbox"/> Reserved Item of Business <input type="checkbox"/>	
Purpose: To enable the Committee to consider the external auditor's Annual Audit Plan for the audit of the College's 2025/26 financial statements.	
Linked to Strategic Theme: 5.Striving to deliver excellence and growth	
Linked to Strategic Risk(s): <i>n/a</i>	
Executive Summary: The Annual Audit Plan 2025/26 has been prepared by Anne MacDonald, Audit Scotland, the College's external auditor. The plan has been agreed with Stuart Thompson, Vice Principal Finance & Resources. This is the fourth year of a five-year audit appointment. The plan sets out the respective roles and responsibilities of the College and the auditor with regard to the financial statements. It also sets out the key risks identified by the auditor and the proposed reporting timescales for the audit. The auditor is scheduled to report to the Committee on the outcome of the 2025/26 audit in November 2026.	
Recommendation: It is recommended that the Committee consider the proposed Audit Plan.	
Previous Committee Recommendation/Approval (if applicable):	
Equality Impact Assessment: Positive Impact <input checked="" type="checkbox"/>	

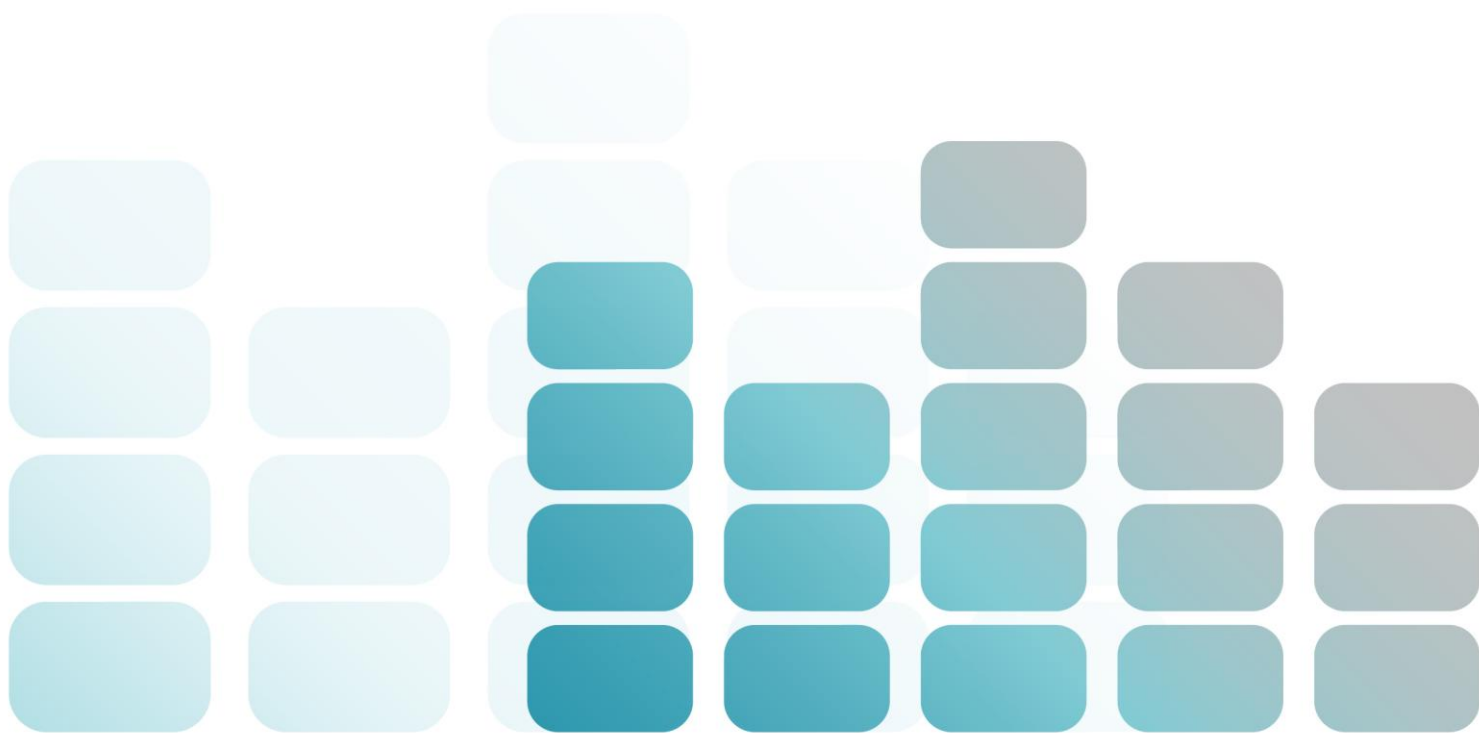
Negative Impact

No Impact

Evidence:

North East Scotland College

Annual Audit Plan 2025/26



Prepared for North East Scotland College
June 2026

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Accessibility

You can find out more and read this report using assistive technology on our website www.audit.scot/accessibility.

Introduction

Purpose of the Annual Audit Plan

1. The purpose of this Annual Audit Plan is to provide an overview of the planned scope and timing of the 2025/26 audit of North East Scotland College's annual report and accounts. It outlines the audit work planned to meet the audit requirements set out in [auditing standards](#) and the [Code of Audit Practice](#), including supplementary guidance.

Appointed auditor and independence

2. We have been appointed by the Auditor General for Scotland as external auditor of North East Scotland College, hereafter referred to as the college, for the period from 2022/23 until 2026/27. The 2025/26 financial year is therefore the fourth of the five-year audit appointment.

3. We are independent of the college in accordance with relevant ethical requirements, including the Financial Reporting Council's Ethical Standard. This standard imposes stringent rules to ensure the independence and objectivity of auditors. Audit Scotland has robust arrangements in place to ensure compliance with ethical standards. The arrangements are overseen by the Executive Director of Innovation and Quality, who serves as Audit Scotland's Ethics Partner.

4. The Ethical Standard requires auditors to communicate any relationships that may affect the independence and objectivity of the audit team. There are no such relationships pertaining to the audit of the college to communicate.

Audit scope and responsibilities

Scope of the audit

5. The audit is performed in accordance with the Code of Audit Practice, including supplementary guidance, International Standards on Auditing (UK), and relevant legislation. These set out the requirements for the scope of the audit which includes:

- An audit of the financial statements and an opinion on whether they give a true and fair view and are free from material misstatement, including the regularity of income and expenditure.
- An opinion on statutory other information published with the financial statements in the annual report and accounts, namely the Performance Report and the Governance Statement and an opinion on the audited part of the Remuneration and Staff Report.
- Reporting on the college's arrangements for securing Best Value.
- An Annual Audit Report setting out significant matters identified from the audit of the annual report and accounts and conclusions on the college's arrangements in relation to the wider scope areas specified in the Code of Audit Practice.

Responsibilities

6. The Code of Audit Practice sets out the respective responsibilities of the college and the auditor. A summary of the key responsibilities is outlined below.

Auditor's responsibilities

7. The responsibilities of auditors in the public sector are established in the Public Finance and Accountability (Scotland) Act 2000. These include providing an independent opinion on the financial statements and other information reported within the annual report and accounts, and concluding on the college's arrangements in place for the wider scope areas.

The college's responsibilities

8. The college has primary responsibility for ensuring proper financial stewardship of public funds, compliance with relevant legislation and establishing effective arrangements for governance, propriety and regularity that enables it to successfully deliver its objectives. The features of proper financial stewardship include:

- Establishing arrangements to ensure the proper conduct of its affairs.
- Preparation of an annual report and accounts, comprising financial statements that give a true and fair view and other information.
- Establishing arrangements for the prevention and detection of fraud, error and irregularities, and bribery and corruption.
- Implementing arrangements to ensure its financial position is soundly based.
- Making arrangements to secure Best Value.
- Establishing an internal audit function.

Audit of the annual report and accounts

Introduction

9. The audit of the annual report and accounts is driven by materiality and the risks of material misstatement in the financial statements, with greater attention being given to the significant risks of material misstatement. This chapter outlines materiality, the significant risks of material misstatement that have been identified, and the impact these have on the planned audit procedures.

Materiality

10. The concept of materiality is applied by auditors in planning and performing an audit, and in evaluating the effect of any uncorrected misstatements on the financial statements or other information reported in the annual report and accounts.

11. Broadly, the concept of materiality is to determine whether matters identified during the audit could reasonably be expected to influence the decisions of users of the financial statements. Auditors set a monetary threshold when determining materiality, although some issues may be considered material by their nature. Therefore, materiality is ultimately a matter of the auditor's professional judgement.

12. The materiality levels determined for the audit of the college and its group are outlined in [Exhibit 1](#). Based on our assessment of the group (refer paragraph 24), we did not consider it necessary to set separate materiality values for the college's group accounts.

Exhibit 1

2025/26 Materiality levels for the college and its group

Materiality	Amount
Materiality – based on an assessment of the needs of users of the financial statements and the nature of the college operations, the benchmark used to determine materiality is gross expenditure based on the audited 2024/25 financial statements. Materiality has been set at 2% of the benchmark.	£1.0 million
Performance materiality – this acts as a trigger point. If the aggregate of misstatements identified during the audit exceeds	£650,000

Materiality	Amount
performance materiality, this could indicate that further audit procedures are required. Using professional judgement, performance materiality has been set at 65% of planning materiality.	
Reporting threshold – all misstatements greater than the reporting threshold will be reported.	£50,000

Source: Audit Scotland

Significant risks of material misstatement to the financial statements

13. The risk assessment process draws on the audit team's cumulative knowledge of the college, including the nature of its operations and its significant transaction streams, the system of internal control, governance arrangements and processes, and developments that could impact on its financial reporting.

14. Based on the risk assessment process, significant risks of material misstatement to the financial statements have been identified and these are summarised in [Exhibit 2](#). These are the risks which have the greatest impact on the planned audit approach, and the planned audit procedures in response to the risks are outlined in Exhibit 2.

15. The risk assessment process is an iterative and dynamic process. The assessment of risks set out in this Annual Audit Plan and Exhibit 2 may change as more information and evidence is obtained over the course of the audit. Where such changes occur, these will be reported to the college and those charged with governance, where relevant.

Exhibit 2

Significant risks of material misstatement to the financial statements

Risk of material misstatement	Planned audit response
<p>Fraud caused by management override of controls</p> <p>Management is in a unique position to perpetrate fraud because of management's ability to override controls that otherwise appear to be operating effectively.</p>	<p>The audit team will:</p> <ul style="list-style-type: none"> • Evaluate the design and implementation of controls over journal entry processing. • Make inquiries of individuals involved in the financial reporting process about inappropriate or unusual activity relating to the processing of journal entries. • Test journal entries, focusing on those that are assessed as higher risk, such as those affecting revenue and expenditure recognition around the year-end.

Risk of material misstatement	Planned audit response
	<ul style="list-style-type: none"> • Evaluate significant transactions outside the normal course of business. • Assess the adequacy of controls in place for identifying and disclosing related party relationships and transactions in the financial statements. • Assess changes to the methods and underlying assumptions used to prepare accounting estimates and assess these for evidence of management bias.
<p>Accounting for the Energy Transition Skills Hub (ETSH)</p> <p>In autumn 2025, the college entered into a lease arrangement for the long-term use of the ETSH facility with a lease payment set below market rates.</p> <p>Given the nature of the arrangement, a right of use asset with a peppercorn rent, there is a risk it will be incorrectly accounted for.</p>	<p>The audit team will:</p> <ul style="list-style-type: none"> • Hold early discussions with finance officers on their proposed approach for valuing the facility. • Review the proposed accounting treatment including the supporting evidence for the valuation and lease liability and assess its compliance with accounting requirements. • Ensure values are properly presented and required disclosures are included in the annual report and accounts.

Source: Audit Scotland

Other areas of audit focus

16. As part of our assessment of audit risks, we have identified other areas where we consider there are also risks of material misstatement to the financial statements. Based on our assessment of the likelihood and magnitude of the risks, we do not consider these to represent significant risks. We will keep these areas under review as our audit progresses and report in our Annual Audit Report as appropriate.

- Estimation in the valuation of land and buildings: Following revaluation in 2024/25, the college held £104 million of property at 31 March 2025. Such valuations are based on specialist management assumptions and changes in these can result in material changes to valuations. With a full revaluation in 2024/25 and the publication of new guidance, changes will be derived through the application of indices for the first time. We will review the selection of indices by the valuer and their use in relation to the college's assets to assess appropriateness and whether they have been correctly applied.
- Estimation in the valuation of pension asset/liability: The present value of the retirement (pension) obligations depends on several factors that are determined on an actuarial basis using a number of

assumptions. Any changes to supporting assumptions caused by errors in the information provided to the actuary, or through late information, could result in a material misstatement to the financial statements.

17. We will assess the scope, independence, capabilities and competence of the experts engaged in providing estimates for both the valuation of land and buildings and pensions, including the appropriateness of the indices used and the actuarial assumptions made. We will establish the college's arrangements for ensuring the reasonableness of these estimates and the accuracy of the information provided to the experts by the college.

Key audit matters

18. The Code of Audit Practice requires public sector auditors to communicate key audit matters. Key audit matters are those matters, that in the auditor's professional judgement, are of most significance to the audit of the financial statements and require most attention when performing the audit.

19. In determining key audit matters, auditors consider:

- Areas of higher or significant risk of material misstatement.
- Areas where significant judgement is required, including accounting estimates that are subject to a high degree of estimation uncertainty.
- Significant events or transactions that occurred during the year.

20. The matters determined to be key audit matters will be communicated in the Annual Audit Report. Exhibit 2 outlines the significant risks of material misstatement to the financial statements that have been identified, including those that have greatest impact on the planned audit procedures and require most attention when performing the audit.

Group audit

21. The college is part of a group and prepares group financial statements. The group is made up of two components, including the college which is the parent of the group. Risk assessment procedures have been performed on the group audit to identify if there are any risks of material misstatement to the group financial statements, or any components where audit procedures are required. The outcome of the risk assessment procedures on the group audit are outlined in [Exhibit 3](#).

Exhibit 3**Outcome of risk assessment procedures on the group audit**

Group component	Accounting treatment	Risk of material misstatement	Audit procedures required	Auditor
North East Scotland College	Consolidated on a line-by-line basis	Yes – Exhibit 2	Yes – full scope audit	Audit Scotland
Aberdeen Skills & Enterprise Training Ltd (ASET) (100% subsidiary)	Consolidated on a line-by-line basis	No, but is material to group financial statements	Yes – analytical procedures for staff costs, review of year-end bank reconciliation and tests of detail in respect of material income stream.	Hall Morrice LLP

Source: Audit Scotland

22. Group audit instructions will be issued to the component auditor as appropriate outlining expectations and requirements around any potential audit procedures which may require their assistance.

23. We are currently planning to obtain assurance on tuition fees and bank balances and undertake analytical procedures in respect of staff costs. We will also consider the assurances the college obtains for its group accounts including year-end reconciliations and the consolidation process. These matters will be kept under review as the audit progresses.

24. Group income, expenditure, assets, and liabilities are not significantly different from those included in the college's single entity accounts and therefore we did not consider it necessary to set separate materiality values for the group accounts. Materiality levels are set out in [Exhibit 1, page 6](#).

Wider scope and Best Value

Introduction

25. The Code of Audit Practice requires that public audit is planned and undertaken from a wider perspective than in the private sector. The wider scope audit set out by the Code of Audit Practice broadens the audit of the annual report and accounts to include consideration of additional aspects or risks in four wider scope areas, which are summarised below:

- **Financial Management** – this means having sound budgetary processes. Factors that can impact on the college being able to secure sound financial management include the strength of the financial management culture, accountability, and arrangements to prevent and detect fraud, error and other irregularities, bribery and corruption.
- **Financial Sustainability** – this means looking forward over the medium and longer term in planning the services to be delivered and how they will be delivered effectively. This is assessed by considering the college's medium to longer-term planning for service delivery.
- **Vision, Leadership and Governance** – this means having a clear vision and strategy, with set priorities within the vision and strategy. This is assessed by considering the clarity of plans in place to deliver the vision and strategy and the effectiveness of the governance arrangements to support delivery.
- **Use of Resources to Improve Outcomes** – this means using resources to meet stated outcomes and improvement objectives through effective planning and working with partners and communities. This is assessed by considering the college's arrangements for ensuring resources are deployed to improve strategic outcomes, meet the needs of service users, and deliver continuous improvement.

26. A conclusion on the effectiveness and appropriateness of arrangements the college has in place for each of the wider scope areas will be reported in the Annual Audit Report.

Duty of Best Value

27. The [Scottish Public Finance Manual](#) (SPFM) explains that Accountable Officers have a specific responsibility to ensure that arrangements have been made to secure Best Value. [Best Value in public services: guidance](#)

[for Accountable Officers](#) is issued by Scottish Ministers and sets out their duty to ensure that arrangements are in place to secure Best Value in public services.

28. Consideration of the arrangements the college has in place to secure Best Value will be carried out alongside the wider scope audit, and a conclusion on the arrangements the college has in place will be reported in the Annual Audit Report.

Significant wider scope risks

29. The risk assessment process has identified significant risks in the wider scope areas as outlined in Exhibit 4, and this includes the planned audit procedures in response to the risks.

Exhibit 4

Significant wider scope risks

Description of risk	Planned audit response
<p>Financial planning and sustainability</p> <p>The college approved a new five-year Strategic Plan in June 2025, covering the period 2025–2030. The next step is to ensure that the college’s financial plans are fully aligned with the Strategic Plan and its supporting sub-strategies, so that the actions required to deliver its strategic priorities and objectives are both realistic and financially sustainable.</p> <p>In addition, the college should establish a robust monitoring and performance reporting framework, along with a SMART action plan, to track progress against its strategic objectives and support effective challenge and scrutiny.</p> <p>Without a clear linkage between strategy and resources, there is a risk the college will fail to achieve its intended impact.</p>	<p>The audit team will:</p> <ul style="list-style-type: none"> • Assess how the college is demonstrating the existence of clear links between its financial plans and its Strategic Plan and sub-strategies. • Assess progress with the development of a SMART action plan and the development of a monitoring and performance reporting framework. • Review updates provided to the Regional Board on achievements made in year 1 of the Strategic Plan.

Source: Audit Scotland

Reporting arrangements, timetable and audit fee

Audit outputs

30. The outputs from the 2025/26 audit include:

- This Annual Audit Plan.
- An Independent Auditor's Report to the college, the Auditor General for Scotland, and the Scottish Parliament setting out opinions on the Choose an item.
- An Annual Audit Report to the college and the Auditor General for Scotland setting out significant matters identified from the audit of the annual report and accounts, conclusions from the wider scope and Best Value audit, any good practice identified and recommendations, where required.

31. The matters to be reported in the outputs will be discussed with the college for factual accuracy before they are issued. All outputs from the audit will be published on [Audit Scotland's website](#), apart from the Independent Auditor's Report, which is included in the audited annual report and accounts.

32. Target dates for the audit outputs are set by the Auditor General for Scotland. In setting the target dates for the audit outputs, consideration is given to the statutory date for laying the annual report and accounts, which is 31 December 2026 for colleges.

Audit timetable

33. Achieving the timetable for production of the annual report and accounts, supported by complete and accurate working papers, is critical to delivery of the audit to agreed target dates. [Exhibit 5](#) includes a timetable for the audit of the annual report and accounts commencing on 5 October 2026, which has been agreed with management. Agreed target dates will be kept under review as the audit progresses, and any changes required, and their potential impact, will be discussed with the college and reported to those charged with governance, where required.

Exhibit 5

2025/26 audit timetable

Audit activity	College target date	Audit team target date	Audit and Risk Committee date
Issue of Annual Audit Plan		31 May 2026	3 June 2026
Annual report and accounts:			
• Submission of unaudited annual report and accounts and all working papers to audit team	28 September 2026	5 October 2026	-
• Latest date for audit clearance meeting		4 November 2026	-
• Issue of draft Annual Audit Report to officers for comment		11 November 2026	-
• Agreement of audited and unsigned annual report and accounts		18 November 2026	-
• Issue of draft Letter of Representation, proposed Independent Auditor's Report, and proposed Annual Audit Report to Audit and Risk Committee		18 November 2026	25 November 2026
• Approval by Regional Board and signing of audited annual report and accounts		2 December 2026	9 December 2026
• Signing of Independent Auditor's Report and issue of Annual Audit Report		By 31 December 2026	-

Source: Audit Scotland

Audit fee

34. The college's audit fee is determined in line with Audit Scotland's fee setting arrangements. The proposed audit fee for the 2025/26 audit is £67,660 (2024/25 £64,870).

35. In setting the audit fee, it is assumed that the college has effective governance arrangements in place and the complete annual report and accounts will be provided for audit in line with the agreed timetable. The audit fee assumes there will be no significant changes to the planned scope of the audit. Where the audit cannot proceed as planned, for example, due to incomplete or inadequate working papers, the audit fee may need to be increased.

Other matters

Internal audit

36. The college is responsible for establishing an internal audit function as part of an effective system of internal control. As part of the audit, the audit team will obtain an understanding of internal audit, including its nature, responsibilities, and activities.

37. While internal audit and external audit have differing roles and responsibilities, external auditors may seek to rely on the work of internal audit where it is considered appropriate.

38. Following a review of internal audit's 2025/26 audit plan, the audit team is planning to use the work of internal audit to provide assurance on payroll. In addition, internal audit's reports are generally considered and their impact on the audit is assessed on an ongoing basis.

Audit quality

39. Audit Scotland is committed to the consistent delivery of high-quality audit. Audit quality requires ongoing attention and improvement to keep pace with external and internal changes. Details of the arrangements in place for the delivery of high-quality audits is available from the [Audit Scotland website](#).

40. The International Standards on Quality Management (ISQM) applicable to Audit Scotland for 2025/26 audits are:

- ISQM (UK) 1, which deals with an audit organisation's responsibilities to design, implement, and operate a system of quality management (SoQM) for audits. Audit Scotland's SoQM consists of a variety of components, such as governance arrangements and culture to support audit quality, compliance with ethical requirements, ensuring Audit Scotland is dedicated to high-quality audit through engagement performance and resourcing arrangements, and ensuring there are robust quality monitoring arrangements in place. Audit Scotland carries out an annual evaluation of its SoQM and has concluded it complies with this standard.
- ISQM (UK) 2, which sets out arrangements for conducting engagement quality reviews, which are performed by senior management not involved in an audit, to review significant

judgements and conclusions reached by the audit team, and the appropriateness of proposed audit opinions on high-risk audits.

41. To monitor quality at an individual audit level, Audit Scotland carries out internal quality reviews on a sample of audits. Additionally, the Institute of Chartered Accountants of England and Wales (ICAEW) carries out independent quality reviews on a sample of audits.

42. Audit Scotland may periodically seek the views of the college on the quality of audit services provided. The audit team would also welcome feedback at any time.

North East Scotland College

Annual Audit Plan 2025/26



Audit Scotland, Woodhill House Annexe, Westburn Road, Aberdeen AB16 5GB

Phone: 0131 625 1500

www.audit.scot

North East Scotland College

Internal Audit Annual Plan 2026/27

Internal Audit report No: 2027/01

Draft issued: 25 May 2026

Final issued:



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Introduction

- 1.1 The purpose of this document is to present for consideration by the Audit and Risk Committee the annual operating plan for the year ending 2026/27. The plan is based on the proposed allocation of audit days for 2026/27 set out in the Audit Needs Assessment and Strategic Plan 2024 to 2028. The preparation of the Strategic Plan involved dialogue with management and the Audit and Risk Committee approved the plan at its meeting on 26 February 2025.
- 1.2 The annual operating plan for 2026/27 is in line with the allocation set out in the Strategic Plan 2024 to 2028. A copy of the Strategic Internal Audit Plan is included at Section 2 of this report.
- 1.3 At Section 3 of this report we have set out the outline scope and objectives for each audit assignment to be undertaken during 2026/27, together with the audit approach. These have been arrived at following consideration by the Vice Principal Finance & Resources. The outline scopes will be refined and finalised after discussion with responsible managers in each audit area.
- 1.4 Separate reports will be issued for each assignment with recommendations graded to reflect the significance of the issues raised. In addition, audit findings will be assessed and graded on an overall basis to denote the level of priority that should be given to each report.
- 1.5 We have produced this document and carry out all our internal audit practice in line with the requirements of the Global Internal Audit Standard (effective from 9 January 2025) and the Global Internal Audit Standards in the UK Public Sector (effective from the 1 April 2025).



Strategic Plan 2024 to 2028

Proposed Allocation of Audit Days

	Category	Priority	Actual 24/25 Days	Actual 25/26 Days	Planned 26/27 Days	Planned 27/28 Days	Previous IA Coverage
Reputation							
Marketing and Communications	Gov	M	5				
Health and Safety	Gov	M					22/23
Compliance with legislation	Gov	M					-
Student Experience							
Curriculum planning	Perf	M					21/22
Quality assurance and Improvement - Scotland's Tertiary Quality Enhancement Framework	Perf	M				5	
Student Learning Experience (Physical and Digital Estate – including focus on Learner Voice)	Perf	M			5		20/21
Student recruitment and retention	Fin/Perf	H				5	23/24
Students Association	Gov	M	5				
Student Support and Wellbeing (including Timetabling and Registers)	Perf	M				5	21/22
Staffing Issues							
Staff recruitment and retention	Perf	H/M				5	20/21
Workforce planning and Learning & Development	Perf	M	5				
Payroll	Fin	M		5			21/22
Staff wellbeing	Fin/Perf	H			5		-
Estates and Facilities							
Building maintenance and Estates & Facilities contract VFM	Fin/Perf	M			5		18/19 & 21/22
Estates strategy / capital projects	Fin/Perf	H/M		5			16/17
Space management	Perf	H					23/24
Energy Transition Skills Hub	Perf	M					-



Internal Audit Annual Plan 2026/27 – DRAFT

	Category	Priority	Actual 24/25 Days	Actual 25/26 Days	Planned 26/27 Days	Planned 27/28 Days	Previous IA Coverage
Financial Issues							
Budgetary control	Fin	M		5			20/21
Financial planning	Fin	M			5		22/23
Student fees and contracts / registry	Fin	M	5				
General ledger	Fin	L					22/23
Procurement and creditors / purchasing	Fin	L					21/22
Debtors/ Income	Fin	L					22/23
Cash & Bank / Treasury management	Fin	L					22/23
Commercial Issues							
Business Development	Fin/Perf	H/M			5		19/20
ASET	Gov/Fin/Perf	H/M				5	23/24
Organisational Issues							
Risk Management and Business Continuity	Perf	M			6		20/21
Corporate Governance – Externally Facilitated Effective Review (including Partnership Working)	Gov	M		8			20/21
Corporate Planning	Perf	M					23/24
Performance reporting / KPIs	Perf	M					20/21
Environmental Sustainability	Gov	M					23/24
Information and IT							
IT network arrangements	Perf	H		5			20/21
Data protection	Gov	M					20/21
Systems development / implementation	Perf	M	6				
Website delivery project VFM	Perf / Gov	M					20/21
Digital strategy (including Artificial Intelligence)	Perf	M				5	22/23
IT operations (including BYOD)	Perf	L/M					19/20
Other Audit Activities							
Credits audit		Required	7	7	7	7	
Student Support Funds		Required	8	8	8	8	
Management and Planning)			5	5	5	5	
External audit / SFC)							
Attendance at ARC)							
Follow-up reviews		Various	2	2	2	2	
Audit Needs Assessment				2			



Internal Audit Annual Plan 2026/27 – DRAFT

	Category	Priority	Actual 24/25 Days	Actual 25/26 Days	Planned 26/27 Days	Planned 27/28 Days	Previous IA Coverage
			_____	_____	_____	_____	
Total			48	52	53	52	
			=====	=====	=====	=====	

Key

Category: Gov – Governance; Perf – Performance; Fin – Financial

Priority: H – High; M – Medium; L – Low



Outline Scope and Objectives

Audit Assignment:	Student Learning Experience (Physical and Digital Estate – including focus on Learner Voice)
Priority:	Medium
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	5

Scope

This audit will review the learning technologies utilised in all College libraries and classrooms and the use of digital learning tools to enhance the learner experience.

Objectives

The objective of our audit will be to obtain reasonable assurance that:

- the College has exploited the potential of new technology in order to widen access to the curriculum and enhance the learner experience;
- investment in new learning technologies aligns with curriculum planning;
- resources are aligned with the needs of both staff and learners as captured through feedback mechanisms; and
- sufficient service desk support is available to maintain access to online learning platforms out of normal College hours.

Our audit approach will be:

We will assess whether the above objectives have been met through discussions with key managers and staff, and through review of relevant documentation including the Strategic Plan 2025-2030, 'Our Student Experience', 'Our Digital Ambition' and 'Our Spaces' sub-strategies.



Audit Assignment:	Staff Wellbeing
Priority:	High
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	5

Scope

The scope of this audit will be to consider the adequacy and effectiveness of policies, procedures and plans for staff wellbeing.

Objectives

The objective of this audit will be to obtain reasonable assurance that:

- specific activity has been undertaken to identify the wellbeing needs of staff and to implement a framework of wellbeing activity to meet the needs of staff at all levels across the College.

Our audit approach will be:

The College’s policies, procedures and plans, including the Strategic Plan 2025-2030, ‘Our Colleagues’ sub-strategy and Wellbeing Plan 2024-2027, will be reviewed, and relevant staff will be interviewed. Walkthrough and detailed compliance testing will be carried out to consider the overall efficiency and effectiveness of the procedures and the extent to which risks are being identified and managed regarding the above objective.

We will also review the outcome of the latest staff surveys and ensure that action has been taken, or is planned, to address any wellbeing issues identified.



Audit Assignment:	Building Maintenance and Estates & Facilities Contract VFM
Priority:	Medium
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	5

Scope

The College has outsourced facilities management services for its main campuses and satellite buildings. The following services are included in the scope of the facilities management contract:

- Management – including provision of a Property & Facilities Manager and on-site support team to provide the services, including the provision of 24-hour emergency call-out services; and the management and monitoring of services provided by external contractors and suppliers;
- Property and Facilities Management Services – including the provision of a manned service desk based within the College; a team of technically trained staff and access to professional services; Revenue Monitoring System; Response Repair and Emergency Repairs; and Planned Maintenance of Plant, Services & Equipment; and
- Cleaning Services -- all daily and periodical cleaning as required.

This audit will review the arrangements in place to monitor the performance of the contractor against the terms of the facilities management contract, with a particular focus on response and emergency repairs and planned maintenance.

Objectives

The objective of the audit will be to determine whether appropriate controls have been put in place to ensure that the contractor is meeting its key responsibilities under the facilities management contract, including in respect of response and emergency repairs and planned maintenance, and providing the College with value for money.

Our audit approach will be:

We will review the terms of the facilities management contract to identify the key contractor responsibilities. Through discussion with the Vice Principal Finance & Resources, Property & Facilities Manager and other relevant managers and staff, and review of documentation, we will then establish what systems and controls have been put in place to ensure that these responsibilities are met. We will report on any areas where expected controls are found to be absent or where controls could be further strengthened.

Compliance testing will be carried out where necessary to ensure that the controls in place are operating effectively.



Audit Assignment:	Financial Planning
Priority:	Medium
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	5

Scope

This audit will review the College’s long-term financial planning arrangements, to consider whether these are in line with good practice. This will include a review of the extent to which planning assumptions are updated to reflect changes in SFC guidance.

Objectives

The objectives of the audit will be to ensure that:

- the College has developed a long-term financial strategy, which includes long-term financial forecasts;
- assumptions utilised in the financial forecasting returns submitted to the SFC are robust, realistic and are applied consistently;
- any departure from the SFC guidance on common sector assumptions is justified to the Regional Board and the SFC; and
- there is adequate reporting to senior management and the Regional Board on the delivery of the College’s financial plan and any deviation from the financial plan (or the assumptions which underpin the financial plan) are clearly articulated to all stake holders in a timely manner (including the impact on the College’s cash flow).

Our audit approach will be:

The Vice Principal Finance & Resources, and a sample of key staff involved in developing and monitoring the longer-term financial plan will be interviewed, and financial plans, forecasts and reports reviewed, to determine current working practices in financial planning and reporting.

The processes used to prepare cash flow reports for senior management, the Regional Board, and the SFC will be determined through discussion with Finance staff and review of supporting working papers.



Audit Assignment:	Business Development
Priority:	High / Medium
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	5

Scope

This audit will consider the key risks in relation to the College’s commercial and external funding activities, excluding ASET Limited, which will be covered separately on the internal audit programme.

Objectives

The primary objective of this audit will be to establish whether procedures in place within the College are sufficient to maximise income generation and margin from commercial (non-SFC) activities.

Secondary objectives will be to ensure that:

- an effective strategic and operational planning process has been established, including identification of key markets and courses;
- there is appropriate support in place to identify and promote commercial and external funding opportunities;
- key risks and opportunities are identified and mitigated / exploited;
- there is effective pricing in the marketplace, with full cost recovery as the target and careful consideration being given to activity which does not meet this target;
- management information, including financial information on each specific activity, is adequate and easily accessible to all relevant staff; and
- there is regular review of activities by the Regional Board and its committees.

Our audit approach will be:

From discussion with the Vice Principal Finance & Resources, Director of Business Development, Director of Marketing & Communications and other relevant staff, and review of relevant documents, we will establish the key controls in place within the above areas and consider their adequacy.

Where relevant, sample testing will be carried out to establish whether key controls in place within the above areas are operating effectively in practice.



Audit Assignment:	Risk Management and Business Continuity
Priority:	Medium
Fieldwork Timing	TBC
Audit and Risk Committee Meeting:	TBC
Days:	6

Scope

Risk Management

The scope of this aspect of the audit will be to consider whether there are corporate procedures in place to adequately assess risk and minimise the possibility of unexpected and unplanned situations developing, which are in line with good practice.

Business Continuity

We will also undertake a high-level review of business continuity planning arrangements to consider whether there are adequate plans in place to minimise disruption to College’s operations following loss of life, buildings or equipment and restore business processes.

Objectives

To objective of our audit will be to obtain reasonable assurance that:

- Risk Management*

 - Key risks have been identified and are being appropriately controlled, mitigated, reported and discussed at appropriate levels of management and the Regional Board;
 - the processes in place reflect good practice in risk management;
- Business Continuity*

 - Business Continuity Plans are in place covering all of the College’s activities and locations;
 - the Business Continuity Plans are workable, properly communicated to members of staff, and have been adequately tested; and
 - the processes and procedures in place follow recommended good practice.

Our audit approach will be:

Risk Management

Obtain and review a copy of the College’s risk management policies, procedures, Strategic Risk Register and operational risk registers and assessments, and discuss the risk management arrangements in place with the Vice Principal Finance & Resources and other key staff.

The College’s risk management arrangements will then be benchmarked against relevant good practice guidance.

We will consider whether all relevant key risks have been identified and included on the Risk Register and ensure that these are monitored and adequately reported on.



Audit Assignment:	Risk Management and Business Continuity (Continued)
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Our audit approach will be (continued):

Business Continuity

Obtain copies of Business Continuity Plans in place and consider whether they cover all of the College’s activities and locations.

Discuss the College’s approach with the Vice Principal Finance & Resources and other key staff, and review evidence of how plans have been communicated to staff and the extent to which plans have been tested.

An assessment of the key processes and internal controls will be performed with reference to relevant good practice guidance.



Audit Assignment:	Credits Audit
Priority:	Required audit
Fieldwork Timing	September 2027
Audit and Risk Committee Meeting:	November 2027
Days:	7

Scope

Credits Audit Guidance, issued by SFC, requests that colleges obtain from their auditors assurances as to the reasonableness of procedures used in the compilation of the Credits related element of the FES return.

Objectives

To obtain reasonable assurance that:

- the student data returns have been compiled in accordance with all relevant guidance;
- adequate procedures are in place to ensure the accurate collection and recording of the data; and
- the FES return is free from material misstatements.

Our audit approach will be:

Through discussion with College staff, and review of relevant documents, we will record the systems and procedures used by the College in compiling the returns and assess and test their adequacy. We will carry out further detailed testing, as necessary, to enable us to conclude that the systems and procedures are working satisfactorily as described to us.

Detailed analytical review will be carried out obtaining explanations for significant variations from previous year’s activity.

Our testing will be designed to cover the key areas of risk identified at Annex C to the Credits Audit Guidance.

We will also review the final error report from the FES on-line checks.



Audit Assignment:	Student Support Funds
Priority:	Required audit
Fieldwork Timing	September 2027
Audit and Risk Committee Meeting:	November 2027
Days:	8

Scope

We will carry out an audit on the College’s student support funds for the year ended 31 July 2027 and provide an audit certificate. Three specific fund statements will require an audit:

- Further Education Discretionary Fund, Further and Higher Education Childcare Fund and Bursary Return;
- Higher Education Discretionary Fund; and
- Education Maintenance Allowance (EMA) Return.

Objectives

The audit objectives will be to obtain reasonable assurance that:

- the College complies with the terms, conditions and guidance notes issued by the SFC, SAAS and the Scottish Government;
- payments to students are genuine claims for hardship, childcare, bursary or EMA, and have been processed and awarded in accordance with College procedures; and
- the information disclosed in each of the returns for the year ended 31 July 2027 is in agreement with underlying records.

Our audit approach will be:

- Reviewing new guidance from the SFC, SAAS and the Scottish Government and identifying internal procedures through discussion with College staff, and review of relevant documents;
- Agreeing income to letters of award;
- Reconciling expenditure through the financial ledger to returns, investigating reconciling items;
- Reviewing for large or unusual items, obtaining explanations where necessary; and
- Carrying out detailed audit testing, on a sample basis, on expenditure from the funds.

Audit guidance issued by SFC will be utilised. This includes ‘Areas of risk and audit considerations’ for bursaries and for the discretionary funds and childcare, and ‘Guidance on the audit requirements for EMA.’



Audit Assignment:	Follow-Up Reviews
Priority:	Various
Fieldwork Timing	April 2027
Audit and Risk Committee Meeting:	May 2027
Days:	2

Scope

This review will cover reports from the 2025/26 internal audit programme and reports from earlier years where previous follow-up identified recommendations outstanding.

Objectives

To establish the status of implementation of recommendations made in previous internal audit reports.

Our audit approach will be:

- for the recommendations made in previous reports ascertain by enquiry or sample testing, as appropriate, whether they have been completed or what stage they have reached in terms of completion and whether the due date needs to be revised; and
- prepare a summary of the current status of the recommendations for the Audit and Risk Committee.



Aberdeen: 1 Marischal Square, Broad Street, AB10 1BL
Dundee: The Vision Building, 20 Greenmarket, DD1 4QB
Edinburgh: Level 5, Stamp Office, 10-14 Waterloo Place, EH1 3EG
Glasgow: Suite 5.3, Kirkstane House, 139 St Vincent Street, G2 5JF

T: 01224 322 100
T: 01382 200 055
T: 0131 226 0200
T: 0141 471 9870

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North East Scotland College

Follow Up Reviews 2025/26

Internal Audit report No: 2026/04

Draft issued: 25 May 2026

Final issued: 26 May 2026



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Management Summary

Introduction and Background

As part of the Internal Audit programme at North East Scotland College ('the College') for 2025/26 we carried out a follow-up review of the recommendations made in Internal Audit reports issued during 2024/25, and reports from earlier years where previous follow-up identified that recommendations were outstanding. These were:

- Internal Audit Report 2025/03 – Student Engagement;
- Internal Audit Report 2025/07 – Systems Development / Implementation; and
- Internal Audit Report 2025/05 – Follow Up reviews 2024/25.

Internal Audit Reports 2025/01 – Annual Plan 2024/25, 2025/02 – Marketing and Communications, 2025/04 – Student Fees, 2025/06 – Workforce Planning and 2025/10 – Annual Report 2024/25 did not contain any recommendations and therefore were not subject to follow-up. Recommendations made in reports 2025/08 – 2024/25 Student Activity Data and 2025/09 – 2024/25 Student Support Funds will be followed up separately as part of the internal audit programme for 2025/26.

Objectives of the Audit

The objective of each of our follow-up reviews is to assess whether recommendations made in previous reports have been appropriately implemented and to ensure that, where little or no progress has been made towards implementation, that plans are in place to progress them.

Audit Approach

For the recommendations made in each of the reports listed above we ascertained by enquiry and review of supporting evidence, as appropriate, whether they had been completed or what stage they had reached in terms of completion and whether the due date needed to be revised.

Action plans from the original reports, updated to include a column for progress made to date, are appended to this report.

Overall Conclusion

The College has made some progress in implementing the recommendations followed up as part of this review with five (56%) of the nine recommendations categorised as 'fully implemented'. Four (44%) recommendations have been assessed as 'partially implemented'. These will be subject to follow up in the next formal Follow Up Review exercise.



Overall Conclusion (Continued)

Our findings from each of the follow-up reviews has been summarised below:

From Original Reports			From Follow-Up Work Performed				
Area	Rec. Priority	Number Agreed	Fully Implemented	Partially Implemented	Little or No Progress Made	Not Past Agreed Completion Date	Considered But Not Implemented
2025/03 – Student Engagement	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	3	2	1	-	-	-
Total		3	2	1	-	-	-
2025/07 – Systems Development / Implementation	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	1	-	1	-	-	-
Total		1	-	1	-	-	-
2025/05 – Follow Up Reviews 2024/25	1 / High	-	-	-	-	-	-
	2 / Medium	4	2	2	-	-	-
	3 / Low	1	1	-	-	-	-
Total		5	3	2	-	-	-
Grand Totals		9	5	4	-	-	-

The grades, as detailed below, denote the level of importance that should have been given to each recommendation within the internal audit reports:

Priority 1	Issue subjecting the organisation to material risk and which requires to be brought to the attention of management and the Audit and Risk Committee.
Priority 2	Issue subjecting the organisation to significant risk and which should be addressed by management.
Priority 3	Matters subjecting the organisation to minor risk or which, if addressed, will enhance efficiency and effectiveness.

For report 2024/07 – Space Management Business Process Review (included in report 2025/05 – Follow Up Reviews 2024/25), improvement points identified from interviews and Focus Groups were categorised as High, Medium or Low.

Acknowledgements

We would like to thank all staff for the co-operation and assistance we received during the course of our reviews.



Appendix I - Updated Action Plan

Internal Audit Report 2025/03 – Student Engagement

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at May 2026
<p>R1 The College should consider taking the following actions to raise awareness of the SA amongst students and staff:</p> <p>1) Issue communications to staff to better familiarise them with the SA - what they do, and what they are responsible for. Encourage curriculum areas to collaborate and engage with the SA throughout the academic year.</p> <p>2) Ensure that the positive impact that the SA has on student experience is appropriately publicised and communicated. Confirm that students are made aware of SA initiatives, such as the Student Pantry, and how to access them.</p> <p>3) Make a targeted effort to boost student engagement at the Altens Campus. Consider the profile of students attending the Campus and understand how they could be best engaged with. Ensure that staff support the SA in establishing a strong awareness of the SA amongst the students.</p>	<p>3</p>	<p>A Student Engagement Management workshop is scheduled for 11 June where the team will reflect on the specific actions required to address the recommendation. This will also be discussed with the new sabbatical officer team who come into post in July.</p>	<p>Head of Student Support and Engagement and Student Engagement and Wellbeing Manager</p>	<p>31 December 2025</p>	<p>1) In August 2025 the new sabbatical officer team presented to all curriculum staff as part of the 'Welcome Back Sector Brief' sessions. Management noted that the presentations were very engaging and received a positive response from staff who all had a personal introduction to the team and what the Students' Association has to offer.</p> <p>2) Details about key Students' Association activities and initiatives have been included in a Class Introduction video made available to all Academic Tutors at the beginning of the year in addition to bookable in class sessions. Free Breakfast, Student Pantry and Free Soup are now being advertised College wide via the digital screens in all campuses.</p> <p>3) Due to staff increase the College has been able to allocate a staff member to be present in Altens campus all day through Monday – Thursday which has allowed it to offer a more consistent presence. During elections the College also developed an In Class Voting Session designed to target some of the least engaged students at Altens which proved to be successful, this resulted in a 33% increase in Construction and Computing (171 voters to 229) and 109.8% increase in Mechanical, Vehicle and Engineering (132 voters to 277 voters).</p> <p style="text-align: right;">Fully Implemented</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at May 2026
<p>R2 The College should review the impact of recruiting the Student Engagement and Wellbeing Support Assistant over their term of employment and evaluate whether it has resulted in marked improvements to the student engagement outcomes in comparison to the relevant costs. If appropriate, the Student Engagement and Wellbeing Manager should prepare a business case for extending the fixed term and/or enhancing the post holder's responsibilities to include developmental activity.</p> <p>Key Performance Indicators for student engagement should be included within the new Strategic Plan and the Student Experience Strategy to enable the College to monitor whether associated strategic objectives are being achieved using the allocated resources.</p> <p>The College should examine its succession planning and organisational knowledge transfer arrangements in relation to student engagement and its relationship with the SA. It should be determined whether these are appropriate to mitigate associated risks, particularly around progressing ongoing projects and culture in the event of loss of key staff.</p>	<p>3</p>	<p>A Student Engagement Management workshop is scheduled for 11 June where the team will reflect on the specific actions, including staffing requirements. The sub-strategy workshop for Our Student Experience took place at the beginning of May and a draft will be shared with Strategic Leadership Team early June.</p>	<p>Assistant Principal Curriculum and Student Experience and Head of Student Support and Engagement</p>	<p>31 December 2025</p>	<ol style="list-style-type: none"> 1) Following a review of the resources and service offering of Student Support and Engagement team, the Executive Team approved additional investment by making the Student Engagement and Wellbeing Support Assistant post permanent. 2) The College's new Strategic Plan, and in particular the 'Our Student Experience' sub-strategy, place an essential focus on student engagement, partnership, experience and outcomes. The sub-strategy revolves around the College's commitment to an innovative, inclusive, welcoming, well-informed, supportive, transformative and sector-leading student experience. KPIs are highlighted in the Our Student Experience sub-strategy and this is monitored through the Our Student Experience Committee. 3) The College has reviewed succession planning arrangements relating to student engagement and partnership working with the Students' Association. Since the original recommendation, the implementation of a permanent staffing structure, clearer management oversight, and strengthened onboarding arrangements for incoming Students' Association Presidents have reduced reliance on individual relationships or knowledge, improving continuity for ongoing projects and partnership activity. <p>Fully Implemented</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at May 2026
<p>R3 The College and the SA should conduct an exercise to evaluate whether there are sufficient resources available to onboard Executive Officers early on in each AY , in order to encourage better buy-in for their role within the SA.</p> <p>The College and the SA should consider whether the current SA structure enables the SA to achieve its objectives and meet growing student demand. This should include consideration of whether the Executive Officer role could be better embedded into the SA’s activities, outwith the specific interest area that each Executive Officer is aligned with.</p> <p>The College should examine whether the Executive Officers could be better supported or more incentivised in their student engagement activities, so that they can contribute more to the SA and the student experience consistently throughout the AY.</p>	<p>3</p>	<p>The College and the SA should conduct an exercise to evaluate whether there are sufficient resources available to onboard Executive Officers early on in each AY , in order to encourage better buy-in for their role within the SA.</p> <p>The College and the SA should consider whether the current SA structure enables the SA to achieve its objectives and meet growing student demand. This should include consideration of whether the Executive Officer role could be better embedded into the SA’s activities, outwith the specific interest area that each Executive Officer is aligned with.</p> <p>The College should examine whether the Executive Officers could be better supported or more incentivised in their student engagement activities, so that they can contribute more to the SA and the student experience consistently throughout the AY.</p>	<p>Assistant Principal Curriculum and Student Experience, Head of Student Support and Engagement and Student Engagement and Wellbeing Manager</p>	<p>31 December 2025</p>	<ol style="list-style-type: none"> 1. The College and Students’ Association have strengthened transition and onboarding arrangements with Executive Officers, with earlier engagement and closer partnership working to improve understanding of the role, expectations and continuity between academic years. Further refinements of these arrangements remain in progress. 2. The sustainability and effectiveness of the current Students’ Association operating model is being considered through ongoing partnership working between the College and the Students’ Association. This has been strengthened through the introduction of the new Student Partnership Forum (formerly the Student Engagement Group), which provides oversight of student engagement priorities. Management noted that this provides strong institutional support whilst maintaining the independence of the student led model. 3. Support for Executive Officers has strengthened through increased operational capacity within the Student Engagement Team, including the permanent establishment of the Student Engagement and Wellbeing Assistant post, alongside measures introduced during 2025/26 to encourage and support Executive Officers participation in student engagement activity. This year there has also been a trial offering a thank you payment to officers who engage in their role. Success has been varied and this process will be fully evaluated in Summer to deem its effectiveness. <p>Partially Implemented</p> <p>Revised Implementation Date:31 December 2026</p>



Appendix II - Updated Action Plan

Internal Audit Report 2025/07 – Systems Development / Implementation

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at May 2026
<p>R1 In order to progress the Technology Strategy and Roadmap, the data architecture should be formally documented and assessed to identify systems and data dependencies, system capabilities and compatibilities.</p> <p>A future state data architecture should then be identified based on the organisation’s business and user requirements and current systems and data limitations, and a Roadmap then developed to achieve a target architecture.</p>	3	<p>The College accepts the recommendation and will look to create a Data Strategy that will ensure a data architecture is fully documented for current and future business requirements.</p> <p>This work will be overseen by the College Data Management Group and led jointly by Linda Taylor (Director of Student Access and Information) and Scott Matthew (Director of ITTS).</p>	Director of Student Access and Information and Director of ITTS	31 December 2023	<p>A draft NESCol Project Management Governance Framework has now been created and has been circulated for feedback before finalising and implementing.</p> <p><i>Partially Implemented</i></p> <p>Revised Implementation Date: 31 July 2026</p>



Appendix III - Updated Action Plan

Internal Audit Report 2025/05 – Follow Up Reviews 2024/25

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at May 2026
Report 2023/07 – IT / Digital Strategy						
<p>R1 In order to progress the Technology Strategy and Roadmap, the data architecture should be formally documented and assessed to identify systems and data dependencies, system capabilities and compatibilities.</p> <p>A future state data architecture should then be identified based on the organisation’s business and user requirements and current systems and data limitations, and a Roadmap then developed to achieve a target architecture.</p>	3	<p>The College accepts the recommendation and will look to create a Data Strategy that will ensure a data architecture is fully documented for current and future business requirements.</p> <p>This work will be overseen by the College Data Management Group and led jointly by Linda Taylor (Director of Student Access and Information) and Scott Matthew (Director of ITTS).</p>	Director of Student Access and Information and Director of ITTS	31 December 2023	<p>May 2024 The map of current systems and their inter-dependencies has been updated. An Information Asset Lifecycle Management Strategy has been drafted but not yet approved. Procedures are to be documented following approval.</p> <p>May 2025 Work is continuing at a slower rate than previously anticipated due to the ongoing Student Information System replacement.</p> <p>This project started in Summer 2025 and has resulted in a huge amount of system, process and dependency change. The system will be live for the beginning of the AY August 2025 and the data strategy completed.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 1 September 2025.</p>	<p>The NESCol Data Architecture is now formally documented as per the recommendation.</p> <p>The document is updated and reviewed on an annual basis to capture any changes.</p> <p>Fully Implemented</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at May 2026
Report 2024/05 – Aberdeen Skills and Enterprise Training (ASET) Limited						
<p>R8 As part of the longer-term strategic planning of ASET by the ASET Board and College, consideration should be made to ensure there is robust succession planning of its Chief Executive so that ASET has the experience and skills to lead it to diversify and grow.</p> <p>The resource needs from the ASET Finance Team should also be considered to ensure that it has the capacity to support the increased assurance and reporting needs from ASET management, the ASET Board, and Regional Board.</p>	2	Agreed	ASET Board	31 March 2025	<p>May 2025 Succession planning for the Chief Executive is being led by the ASET Chair in consultation with the ASET Board and NESCol. During the Chief Executive’s absence due to ill health, the ASET Chair has been working closely with and supporting the ASET Senior Operations Manager.</p> <p>A new Business Development Manager appointment has been made to strengthen the Senior Management Team and deliver ASET’s growth ambitions.</p> <p>The ASET Credit Control Manager is playing a more active role in supporting the activities of the Finance Team.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 31 August 2025</p>	<p>Following the retirement of the Chief Executive effective July 2025, ASET implemented its succession arrangements with the creation of a new General Manager role to provide continuity of leadership.</p> <p>The ASET Board has overseen this process as part of its broader strategic planning, and the organisation is now operating on a “business as usual” basis under the new leadership structure.</p> <p>Fully Implemented</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at May 2026
Report 2024/07 - Space Management Business Process Review						
<p>R3 As part of the implementation of the College's new student record and timetabling system, Tribal, management should consider integrating the timetabling requirements of both the Scottish Maritime Academy and ASET, creating a single source of truth for space utilisation across the college estate.</p> <p>As an interim solution, a manual process could be established where the Scottish Maritime Academy and ASET regularly communicate their timetables to the Central Timetabling Team for input into Celcat. This should be supported by a documented communication protocol to formalise the process. While this approach won't provide real-time room availability, it will enable the College to monitor space utilisation rates retrospectively.</p>	Medium	<p>Agreed</p> <p>We will coordinate with the implementation of the new timetabling system</p>	Vice Principal Finance & Resources	30 June 2025	<p>May 2025 Timetabling requirements for SMA and ASET will be integrated in the new student information system.</p> <p>SMA integration is complete, and work with ASET is in progress to get integrated.</p> <p>Not Past Agreed Completion Date</p>	<p>ASET is now also using the new NESCol ebs system for timetabling.</p> <p>Fully Implemented</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at May 2026
Report 2024/07 - Space Management Business Process Review						
<p>R7 As part of the implementation of Tribal, management should consider consolidating or ensuring seamless integration between timetabling and HR systems that hold staff information, and timetabling and room booking system to enhance data accuracy and operational efficiency.</p> <p>This is not only critical for the main timetabling activity but also for accurate space and staff utilisation analysis and improvement action planning.</p>	Medium	<p>Agreed</p> <p>We will coordinate with the implementation of the new timetabling system</p>	Vice Principal Finance & Resources	31 March 2025	<p>May 2025 Information uploaded from HR system to student information system but challenges around further integration exist. Manual updates and checks in place.</p> <p>Zellis – cannot connect to PowerBi well – Intergration struggling – have to do manual monthly checks looking at starters and leavers.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 30 November 2025.</p>	<p>Further discussion with Zellis has not progressed the lack of integration.</p> <p>NESCol has started the tender process for a new HR / Payroll system to be implemented and live from 1st August 2027.</p> <p>Current manual checks are continuing.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 31 August 2026</p>



Follow Up Reviews 2025/26

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at May 2026
Report 2024/07 - Space Management Business Process Review						
R8 Management should establish a formal governance structure and reporting process that includes the Central Timetabling Team in feedback and follow-up actions. Reports for the designated governance group should also be developed to document exceptions identified in Power BI analysis with sufficient narratives to enable management review and improvement action planning.	Medium	Agreed. We will establish a review group	Vice Principal Finance & Resources	31 March 2025	<p>May 2025 Workstream in place for implementing timetabling module of new student information system.</p> <p>Once the new system is live, the project group will move into review group chaired by AP Student Services.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 31 August 2025</p>	<p>Timetabling was completed on time for 2025/26 at a course level. Following implementation reviews the workstream recommended changing the timetabling for 2026/27 to be based at unit level.</p> <p>The workstream has continued to manage and monitor the change.</p> <p>The review group will be established once the new timetabling is live.</p> <p>Partially Implemented</p> <p>Revised Implementation Date: 31 August 2026</p>



Aberdeen: 1 Marischal Square, Broad Street, AB10 1BL

Dundee: The Vision Building, 20 Greenmarket, DD1 4QB

Edinburgh: Level 5, Stamp Office, 10-14 Waterloo Place, EH1 3EG

Glasgow: Suite 5.3, Kirkstane House, 139 St Vincent Street, G2 5JF

T: 01224 322 100

T: 01382 200 055

T: 0131 226 0200

T: 0141 471 9870

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North East Scotland College

Internal Audit Progress Report

Audit and Risk Committee: 3 June 2026

Issued: 26 May 2026



Internal Audit Progress Report June 2026

Progress with the annual plan for 2025/26 is shown below.

Audit Area	Planned reporting date	Report status	Report Number	Overall Conclusion	Audit & Risk Committee	Comments
Internal Audit Annual Plan 2025/26	February 2025	Draft: 07/02/25 2 nd Draft: 18/02/25 Final: 01/09/25	2026/01	N/A	26 February 2025	
Payroll	February 2026	Draft: 04/02/26 Final: 09/02/26	2026/02	Good	25 February 2026	
Estates Strategy / Capital Projects	September 2026					Agreed start date for fieldwork 04/05/26.
Budgetary Control	May 2026					The audit start date was delayed at the request of College management and the closing meeting has been arranged for 2 June 2026. The report will now be presented at the ARC meeting in September 2026.



Audit Area	Planned reporting date	Report status	Report Number	Overall Conclusion	Audit & Risk Committee	Comments
Corporate Governance	May 2026					The audit fieldwork has been completed with the exception of some minor elements of the desktop review, and the intention is that the draft report will be issued w/c 25 May 2026. A verbal update will be provided at the ARC meeting, with the draft report being presented to the Regional Board on 17 June 2026.
IT Network Arrangements	February 2026	Draft: 18/02/26 Final: 19/02/26	2026/03	Good	25 February 2026	
Credits Audit	November 2026					Agreed start date for fieldwork 10/08/26.
Student Support Funds	November 2026					Agreed start date for fieldwork 01/09/26.
Follow-Up Reviews	May 2026	Draft: 25/05/26 Final: 26/05/26	2026/04	N/A see comments	3 June 2026	5 Fully Implemented 4 Partially Implemented 9 in total

Gradings are defined as follows:

Good	System meets control objectives.
Satisfactory	System meets control objectives with some weaknesses present.
Requires improvement	System has weaknesses that could prevent it achieving control objectives.
Unacceptable	System cannot meet control objectives.

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AUDIT & RISK COMMITTEE	
Meeting of 3 Jun3 2026	
Title: Code of Good Governance for Scotland's Colleges – Compliance Check	
Author: Susan Lawrance	Contributor(s):
Type of Agenda Item:	
For Decision	<input type="checkbox"/>
For Discussion	<input checked="" type="checkbox"/>
For Information	<input type="checkbox"/>
Reserved Item of Business	<input type="checkbox"/>
Purpose: To enable the Committee to consider the Board's performance and compliance with the Code of Good Governance for Scotland's Colleges over the last 12 months.	
Linked to Strategic Goal:	
Linked to Annual Priority:	
<p>Executive Summary:</p> <p>It is a condition of the Financial Memorandum with the SFC that governing bodies comply with the principles of good governance set out in the Code of Good Governance for Scotland's Colleges. Colleges are required to include a statement in their annual Financial Statements confirming compliance, providing an explanation in the event that its practices are not consistent with particular principles.</p> <p>In setting the Programme of Business for the Audit & Risk Committee it was agreed that an annual compliance check of the Board's performance against the Code should again be undertaken.</p> <p>Attached as Appendix 1 is a summary table, prepared by the Secretary to the Board, providing information on Board activities and behaviours demonstrating compliance against each of the Code's individual criteria.</p>	
<p>Recommendation:</p> <p>It is recommended that the Committee consider the information provided.</p>	
<p>Previous Committee Recommendation/Approval (if applicable):</p> <p>A&R Committee – November 2025</p>	
Equality Impact Assessment:	

Positive Impact

Negative Impact

No Impact

Evidence:

Code of Good Governance Criteria	Evidence
LEADERSHIP AND STRATEGY	
<p>1. Board decisions and behaviour reflects the Boards Code of Conduct and Nine Principles of Public Life.</p>	<ul style="list-style-type: none"> • Evidenced in Board and Committee minutes • Internal and external Board induction process highlighted Code and Principles • The Board continue to adopt the latest Standards Commission for Scotland Revised Code of Conduct • The Board Secretary participated in regular meetings with other Governance Professionals from the College sector where regular updates on any proposed changes or updates to the Code of Conduct are discussed. • Board members participated in Development Event in January 2025 and received a presentation from CDN Governance on enacting "good governance" in individual and collective practices. • External Review of Board Governance being undertaken in AY2025/26 – final result to be presented to Regional Board in June 2026.
<p>2. We determine the vision, direction, educational character, values and ethos of the College.</p>	<ul style="list-style-type: none"> • Final approval of the new Strategic Plan provided by Regional Board. • Regular updates on the new plan, its embedment and the new Sub-Strategies • Planned dedicated Sub-Strategy Update (January 2027) • Minimum annual review of Committee and Board Terms of Reference to ensure these continue to be in line with Standing Order and new Strategic Plan. • A Strategy Event to help the Regional Board co-create the College's New Strategic Plan was held in November 2024. Regional Board Members were joined by Executive Team and Leadership Team colleagues. Workshops were led by Vice Principal for Curriculum and Quality and the Head of Planning and Academic Partnerships. The Strategy Event built on the previous one where consideration of new sub-strategies was held. The New Strategy Event included discussions on: <ul style="list-style-type: none"> • Why create a new Strategic Plan: To establishing a shared understanding of the College's purpose, for everyone. • Envisage a Brighter Future: Visualise the thriving future, 10 years from now. • Align Vision to Values: Future planning. • Mission Statement: collaborative input on the development of a new Mission Statement. • Branding: Help co-create a memorable, effective strapline to strengthen NESCol's brand identify. • The New Strategic Plan will continue to be refined.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Workshops, surveys, one/one discussions with staff, students and stakeholders undertaken. • Regular updates on Strategic Plan, including sub-strategies and verbal feedback from workshops to be presented to Committee and Regional Board. • Final approval of Plan to be requested by Regional Board ahead of its planned launch in early AY 2025/26.
<p>3. Our performance management system is adequate, identifying KPIs and we monitor progress.</p>	<ul style="list-style-type: none"> • The Curriculum and Quality Committee undertook a review of their Terms of Reference to ensure these reflect the new Strategic Plan and sub-strategies. • New Standing Item now included to consider Performance against identified Risks on Strategic Risk Register (C&Q Committee & HR Committee) • Regular Showcases are presented to C&Q Committee to highlight different curriculum activities and student engagement • Draft and final KPIs presented to C&Q Committee. • Data DashBoard using Microsoft Power Bi provides 'live' data which can be filtered as required and is accessible by Regional Board through COLIN. • Quality Assurance processes, including new layer of scrutiny and challenge continue, (Curriculum Spotlight Review process (overseen by the Curriculum Quality and Student Support Committee). • Annual (Nov 25) and interim Quality Assurance Reports presented to C&Q Committee. • An overview of Scotland's Tertiary Quality Enhancement Framework (and its principles was presented to Curriculum and Quality Committee in November 2024, including: <ul style="list-style-type: none"> • Outcome Framework and Assurance Model overview • Principles of the TQEF. • How the quality assurance and enhancement will be delivered effectively. • The Quality Cycle and Review. • The evidence base for TQER • A presentation of the RGU Transitions and Degree Link Programme, the performance and trends, and initiatives to enhance and improve articulation and transition, along with the impact of SFC Pathfinder Pilot Project was presented to Curriculum and Quality Committee in November 2024.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Credits position and planning presented to both Curriculum and Quality Committee and Regional Board as a Standing Item. • Monthly updates on credits position and planning discussed by Strategic Leadership Team. • College's annual KPI publication includes sector benchmarking information, with an internal version produced to include sector benchmarking information at team and unit level to feed into quality improvement processes • Regular Applications updates are provided to Executive and Strategic Leadership Teams and Curriculum and Quality Committee • Revised Curriculum Planning Process and review of curriculum provision regularly undertaken and reported to Strategic Leadership Team and Regional Board through Curriculum and Quality Committee and Regional Board Meetings.
<p>4. Relevant stakeholders are engaged in compiling the outcome agreement and outcome framework and assurance model.</p>	<ul style="list-style-type: none"> • Outcomes Framework and Assurance Model – overview paper presented to Regional Board in December 2024, outlining the revised approach to assurance and accountability, including: <ul style="list-style-type: none"> • Key differences from previous approach • Key outcomes • The Assurance Model • Engagement • Monitoring • TQEF • Next Steps • Outcome Agreement presented to Community Planning Partnership Aberdeen. • Ongoing external engagement activities fed into Outcome Agreement process as appropriate, including labour market intelligence from direct engagement with employers, SDS, Local authorities, AGCC, DWP, and industry bodies. • Representation on regional groups such as CPA, PACE, Local employability partnerships, employability training providers forum, NESAs and University links, SWAP
<p>5. We provide leadership on ethics, equalities, diversity and staff welfare.</p>	<ul style="list-style-type: none"> • HR Committee (Oct 25) received presentation on People Services Equality, Diversity and Inclusion Action Plan including <ul style="list-style-type: none"> ◦ National context ◦ NESCol Equality Outcomes 2025/29

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> ○ Plans for 2025/26 – establish baseline equality data; appoint Equality Champions for each outcome; refresh the "RESPECT" Campaign. Introduce EIA Sub-Group ○ Events and Engagement Plans shared with HR Committee • HR Committee Terms of Reference refreshed and enhanced to strengthen governance of the Our Colleagues Sub-Strategy and related workstreams (throughout Ay2025/26) • Review of People Services Risks on Strategic Risk Register added as a standing item to HR Committee. • A new Board Equality and Diversity Champion appointed and joined the Equality and Wellbeing Committee meetings. • Regular Q&A All Staff webinars held. • Wellbeing Matters events held throughout the year, topics included Financial Wellbeing Sessions, Digital Wellbeing Workshops, promotion of Grampian Wellbeing Festival in May 2024. Wellbeing Matters Champions appointed throughout the College. • Annual Wellbeing Day now established within NESCol calendar with a wide range of activities offered for all staff, across all campuses. • Equalities and Wellbeing Committee chaired by G Watt, with input from staff and students plus Board Equality and Diversity Champion meet regularly. Curriculum and Quality and HR Committee receive reports on Equality and Wellbeing for staff and students. • Equalities Action Plan update presented to HR Committee throughout AY2024/25. • Employee Voice Group established in AY2023/24. Findings of survey shared with HR Committee in May 2024. • Employee Voice Engagement Survey published in December 2023. Results fed back to Executive and Leadership Team in March 2024 with update provided to May HR Committee. • Employee Voice Working Group (with several new members based across all campuses) update shared with HR Committee in May 2025. • NESCol Wellbeing Strategy 2021-23 published and available on COLIN which gives details of the wrap-around support services for staff and students.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Old Wellbeing Strategy 2021-23 (available on COLIN and via NESCol website) replaced with NESCol Wellbeing Strategy 2024-2027 with broader consultation from staff and students included. • People Services Enhancement Plan (including strategic areas and the proposed new sub-strategy (Strategic Plan) is a Standing Item for HR Committee. • Board reviews and approves the College's Equality and Diversity Policy, Equality Outcomes, and Mainstreaming Report, and Equal Pay Policy & Statement • The Board continues to adopt the latest Standards Commission for Scotland Revised Code of Conduct into its Governance Manual which is reviewed annually by the Board.
<p>6. We have regard to the social and economic needs of our area.</p>	<ul style="list-style-type: none"> • ETSH welcomed first cohort of students in Ay2025/26 and continues to grow with updates provided to C&Q Committee and Regional Board. • Curriculum design and planned activity shared with C&Q Committee in May 2026 • Courses include learning and teaching in number of identified key areas towards rapid energy transition, including offshore and onshore wind; photovoltaics; hydrogen power; energy saving and low carbon construction technology; electric and hybrid vehicle maintenance. • Key discussions held at Board Strategy Events • Reflected upon as part of Board and Committee business • College works collaboratively and closely with Aberdeen City Community Planning Partnership; and continues to try to advance engagement with Aberdeenshire Community Planning Partnership. • Head of Planning and Academic Partnerships gives regular updates on current credit and planned activity to Curriculum and Quality Committee, Regional Board, Executive and Leadership Teams. • Head of Planning and Academic Partnerships also convenes Curriculum Planning Group. • College is a key member of the Regional Economic Strategy Group. • College is a member of the the Regional Learning and Skills Partnership. • Post pandemic the College continues to be heavily involved in many regional partnership discussions regarding economic recovery.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • The skills, networks and experiences of Board Members, established and new, add additional social and economic contextual information to Board and Committee discussions. • The College is a key partner in the Regional Pathfinder Delivery Board focusing on delivering pilot collaborative activity, on curriculum development, skills delivery, and close links with employers. • The Boards of NESCol, UoA and RGU met for a Joint Skills Seminar with a Seminar on Staff and Student wellbeing in June 2023. • New National Energy Skills Accelerator (NESA) established. Collaborative initiative between RGU, UoA and NESCol – supported by key regional partners, including SDS, ETZ Energy Transition Zone and supported by SFC. • Energy Career pathways, an interactive tool for prospective employers in the energy sector to identify qualifications required for specific roles and where they can be undertaken, launched by NESA in April 2024. • The Board have approved the partnership with ETZ and a local stakeholder, the lease of the new Energy Transition Skills Academy, located adjacent to the College's Altens Campus. • The new Energy Transition Skills Academy is nearing completion. When opened it will provide an enhanced curriculum, offering learning in state-of-the-art facilities including new welding bays. • Regular updates/oversight of ETSA progress, including finances, build advances and high-level curriculum planning provided to the Regional Board and committees. • Outreach vehicle, a hydrogen dual-fuel lorry called "Energy on the Move" which serves as a mobile classroom and science centre to promote energy transition careers and skills formally launched in early 2025. It is a collaborative project between NESCol, ETZ Ltd and Shell UK.
QUALITY OF THE STUDENT EXPERIENCE	
<p>1. The voice of students and the quality of their experience is central to our decisions including monitoring student surveys and any resulting action plans.</p>	<ul style="list-style-type: none"> • Students are being asked to be members on all new Sub-Strategy Committees to ensure the Student Voice and student experience remain central. • Students' Association has a standing item – Activity Report at meetings of the Curriculum & Quality Committee • Students' Association regularly asked to contribute at Strategy Events

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Students' Association President has contributed to College "all staff" webinars. • Curriculum & Quality Committee review the results of the First Impressions and Student Satisfaction & Engagement Surveys • Curriculum & Quality Committee received collated feedback from student-related quality processes – focus groups, peer-led reviews, lesson observations • Priority Projects updates supplied to Curriculum and Quality Committee. • Students' Association have representation on Curriculum, Quality and Student Support Group; Equality and Wellbeing Committee; Health and Safety Group; IT Steering Group and Estranged Students and Student Carers Working Group. • The Students' Association are also involved with Campus Futures Groups and other short-life working groups.
<p>2. We have open ongoing engagement with students, working in partnership and encouraging a strong independent student association having regard to the Student Association Framework.</p>	<ul style="list-style-type: none"> • Board Members interact with students through attendance at College events • Board awareness of Framework • Regular meetings held between Students' Association and Executive Team • Student Partnership Forum established that brings together class reps, programme leaders and staff. Provides collaborative space to discuss programme-level feedback, share ideas, and enhance the overall learning experience. • The Partnership Forum will be reviewed in AY2026/27 to further consider Student Partnership agreement going forward and in which format. • Regular standing item to discuss SA Activity Report, and Agreement (Nov 2025) • SA Equalities and Wellbeing Update (including equalities outcomes) presented to C&Q Committee (Nov 2025) • Student Association Partnership Agreement presented to Curriculum and Quality Committee and approved by Regional Board in December 2024. • Increased Student Engagement evidenced at Curriculum and Quality Committee. • SA President and Vice President contributed to College "all staff" webinars. • SA refreshed constitution was approved by the Regional Board in June 2022. • Student Engagement Internal Audit carried out during AY2024/25 with a satisfactory overall level of assurance recorded. • Student Engagement Internal Audit presented and discussed by Audit and Risk Committee in May 2025.

Code of Good Governance Criteria	Evidence
<p>3. Our Students' Association is adequately resourced, operates fairly and in a democratic manner, fulfilling its duties; it has a written constitution that the Board has reviewed in the last five years.</p>	<ul style="list-style-type: none"> • Student Support Activity Update on the work of the Student Support and Engagement Teams (and the Equalities and Wellbeing Committee) presented to C&Q Committee (Nov 2025) • Refreshed Constitution discussed at Curriculum and Quality Committee in May 2022. • Refreshed Constitution presented, and approved by the Regional Board at their June 2022 meeting. • Curriculum & Quality Committee considers Association's budget proposal prior to its inclusion in the College budget (Nov 2025) • Association Activity Report is a standing item at meeting of the Curriculum & Quality Committee with update on Enhancement Plan also provided to Curriculum and Quality Committee.
<p>4. We are aware of and foster good relationships with partner organisations that help us provide coherent learning, including employability</p>	<ul style="list-style-type: none"> • Showcase of Employer Engagement presented to C&Q Committee (Feb 2026), highlighting <ul style="list-style-type: none"> ◦ Engagement with 1,200 employers ◦ Foundation Apprenticeships; Modern Apprenticeships; Sponsored Initiatives; ◦ 144% growth since 2020 in Modern Apprenticeships • Regular updates and feedback provided on HMIE Inspection of Modern Apprenticeships (carried out Spring 2026) • Good relationships are maintained with the two local universities, two local authorities and regional schools • Events are held with the local authorities and regional schools e.g. Developing the Young Workforce, Apprenticeships Awareness raising, • Enhanced partnership working agreement with RGU. • The College partnership with RGU has been strengthened through the development of a Joint Planning and Delivery Board with pilot projects fully supported by SFC. • New and successful external engagement approaches have been developed The College are leading on two key strands of SFC Pathfinder: <ul style="list-style-type: none"> ◦ Strategic Partnership with RGU to explore joint planning, provision of programmes, development of programmes and some shared services.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> ○ Enhancing the School Senior Phase with Aberdeen City and Aberdeenshire, RGU and UoA. ● A detailed report on SFC Pathfinder Projects was presented to the Curriculum and Quality Committee in February 2024. ● New Technology centre featuring new equipment, multi-media and flexible furniture (sitting alongside Fujitsu Innovation Hub in Fraserburgh) to engage with staff, students and local community (able to accommodate 60 learners) introduced in AY2021/22. ● Opening Event for Futures Zone held in April 2022 and attended by Regional Board Members, staff, stakeholders and students. ● Donation from local benefactor secured (fourth year) for Fraserburgh Campus to enable the College to purchase a range of equipment to benefit current and future NESCol students ● Quarterly Stakeholder bulletins continue (introduced in 2021 (regularly circulated to more than 600 stakeholders) ● Following an initial Joint Skills Seminar the Boards of NESCol, RGU and UoA are met in June 2023 to discuss Student and Staff Wellbeing. Aspiration to meet jointly continue. ● Regional Chair holds regular meetings with Chair of UoA and RGU ● The College in conjunction with ECITB and ETZ launched the Energy Transfer and Wind Turbine Technician Scholarships. ● Curriculum Planning Internal audit findings reported to Committee, who noted overall "good" grading.
<p>5. Mechanisms ensure effective oversight of quality and inclusiveness of learning.</p>	<ul style="list-style-type: none"> ● Regional Board approve the College's Evaluative Report & Enhancement Plan and receive an interim progress update and end of year progress update ● Curriculum Business Planning regularly reported to Regional Board and its Committees ● KPI performance reported to the Regional Board and its Committees, with any associated actions highlighted. ● The Curriculum and Quality Committee receive regular Complaints Summary Reports. ● Annual Quality Report presented to Curriculum and Quality Committee in November 2025

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • An overview of Scotland's Tertiary Quality Enhancement Framework (and its principles) was presented to Curriculum and Quality Committee in November 2024, including: <ul style="list-style-type: none"> • Outcome Framework and Assurance Model overview • Principles of the TQEF. • How the quality assurance and enhancement will be delivered effectively. • The Quality Cycle and Review. • The evidence base for TQER • A presentation of the RGU Transitions and Degree Link Programme, the performance and trends, and initiatives to enhance and improve articulation and transition, along with the impact of SFC Pathfinder Pilot Project was presented to Curriculum and Quality Committee in November 2024. • Equalities Mainstreaming Report (including approval of new Equality Outcomes) presented, and approved, by Regional Board in March 2023. • The Regional Board at their March 2025 meeting received and approved the Equalities Mainstreaming Report for AY2025-29. An update on the AY2021-25 Outcomes was also provided by G Watt (the full report is available on the College Intranet). • Summary of the Quality team activities, including enhancement initiatives, presented to Curriculum and Quality Committee in February 2024, including Education Scotland on-site thematic review which focussed on approaches to meeting the additional needs of all learners (January 2024) Summary of Findings.
ACCOUNTABILITY	
<p>1. We fulfil our primary accountability to our funding body by:</p> <p>a. fulfilling our statutory duty and terms of our grant.</p>	<ul style="list-style-type: none"> • The College achieved its AY2024-25 Credits Target. • The College is on track to achieve its AY2025-26 Credits Target. • Annual returns to SFC completed by required deadlines and reported to Audit & Risk Committee • College's Financial Statements for the year to 31 July 2025 include statement that the College complies with all the principles of the 2016 Code of Good Governance for Scottish Colleges, and it has complied throughout the year ended 31 July 2025. • Annual Certificate of Assurance for AY2024-25 implemented with no areas of concern highlighted

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Audited AY2024-25 Financial Statements presented and approved by Regional Board in December 2025. • External Auditor presented Audit Scotland report to Regional Board in December 2025.
<p>2. We fulfil our accountability to students, public, employers and our community for provision of education that enhances social and economic wellbeing.</p>	<ul style="list-style-type: none"> • Board and Committee meeting agendas, papers and minutes publicly available on College website • Key strategy and evaluation documents – Strategic Plan, Evaluative Report & Enhancement Plan – also available on College website • Partnership working between the Board and key regional stakeholders to address social and economic wellbeing issues
<p>3. We manage conflicts of interest and disclose our register of interests.</p>	<ul style="list-style-type: none"> • Declaration of potential conflicts of interest is a standing item on Board and Committee agendas • Register of Interests maintained and reviewed annually and made available on College website with members updating changes through Board Secretary.
<p>4. Our decision making is transparent, informed, rigorous and timely and associated documentation is adequate.</p>	<ul style="list-style-type: none"> • Board and Standing Committee agendas, minutes and papers published on College website – accessible by public, staff and students (with exception of reserved items) • Programme of Meetings and Programmes of Business reviewed annually to ensure there is alignment with the College's planning and business cycles ensuring that decision making is timely and that "the Board is serving the College rather than the College serving the Board"
<p>5. Our scheme of delegation to staff and committees is clear and fit for purpose with appropriate two way communication with the Board. We ensure:</p> <p>a. we have audit, remuneration, finance and nominations/appointments committees.</p> <p>b. the staff charged with advising each committee are clear.</p>	<ul style="list-style-type: none"> • The Governance Manual contains Schemes of Delegation, and Terms of Reference for the Board and its Committees, and is reviewed annually by the Regional Board. • The Board operates the following Committees: Audit & Risk, Curriculum & Quality, Finance & Resources, Human Resources, Remuneration Committee, Governance and Nominations Committee. • Following review of Terms of Reference the HR Committee will ask for approval from Regional Board in June 2026 to change its name People and Culture Committee, as approved by HR Committee (May 2026)

Code of Good Governance Criteria	Evidence
<p>c. committee minutes go to the next meeting of the Board.</p>	<ul style="list-style-type: none"> • Committee Terms of Reference include details of the senior staff member(s) who provide objective, specialist advice to support the Committee to discharge its remit • Committee Terms of Reference are reviewed annually by Committee. • Committee minutes go to the next meeting of the Board as part of the 'Report by Committee Chairs' • Chairs Committee with agreed Terms of Reference established
<p>6. We set the risk appetite, balancing risk and opportunity and this is known to senior staff.</p>	<ul style="list-style-type: none"> • Strategic Risk Register is a monthly standing agenda item for review by the College's Strategic Leadership Team. • The updated Strategic Risk Register, as approved by A&R and Regional Board in 2023 remains a standing for Audit and Risk Committee. • The College's Risk Management Policy (which includes a Risk Appetite Statement, reviewed, updated and approved by the Audit and Risk Committee in November 2023. • Strategic Risk Register is a Standing Item on Audit and Risk Committee and Regional Board agendas. • Board Committees now review risks as pertaining to their areas within the Strategic Risk Register at each meeting.
<p>7. We ensure sound risk management and supporting review systems.</p>	<ul style="list-style-type: none"> • Internal Audit of Risk Management undertaken in June 2019 with outcome of 'Strong' and 3 low recommendations • Strategic Risk Register reviewed regularly by Strategic Leadership Team – this was previously undertaken by the Senior Executive Team, its reallocation to the Strategic Leadership Team ensures there is wider collective ownership of the document and risk across all areas of the College are recorded • Strategic Risk Register is a standing item for meetings of the Audit & Risk Committee and Regional Board • Meeting held in February 2023 with senior staff and members of Audit and Risk to discuss development of Strategic Risk Register. • Risk Register training provided in Summer 2023 to Leadership Team and Executive team by MHA Henderson Loggie to help support development of new Strategic Risk Register.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • New Strategic Risk Register developed following consultation with Leadership Team, Executive Team and Board. • New Risk Register presented to Audit and Risk Committee in September 2023. • New Risk Register presented and approved by Regional Board in October 2023. • Opportunities Register now regularly report to F&R Committee. • ASET Risk Register now standing agenda item on Audit and Risk Committee and presented to Regional Board. • ASET Risk Register format amended to follow NESCol template and scoring. • Board Committees now review risks as pertaining to their areas within the Strategic Risk Register at each meeting. • Some Board Members attended Risk and Governance Workshop (CDN Masterclass) in May 2026.
<p>8. The Audit Committee:</p> <p>a. Reviews the comprehensiveness, reliability and integrity of all our assurances on the governance, risk and control frameworks, engaging with internal and external auditors and monitoring any actions recommended.</p> <p>b. Members are all non-executive, objective and independent with at least one having recent relevant financial or audit experience.</p> <p>c. Can hold all or some of its meetings in private, meeting internal and external auditors privately at least once a year.</p>	<ul style="list-style-type: none"> • Audit & Risk Committee approves the annual Internal Audit Programme and the scope for each internal audit, and receives the reports from each internal audit to enable recommendations to be considered and approved • Audit & Risk Committee reviews the annual External Audit Plan • Audit & Risk Committee approved the Internal Audit Plan • Audit and Risk Members have significant financial and audit experience through job roles • Audit & Risk Committee Members meet privately with both the internal and external auditors
<p>9. The Remuneration Committee:</p> <p>a. Members understand their role and are trained in it: the chair is not also Board chair.</p>	<ul style="list-style-type: none"> • Chair of Remuneration Committee is not Board Chair, office bearer is Chair of HR Committee • Senior Staff Pay Policy established. • The Remunerations Committee in February 2024 • The Remunerations Committee in September 2024 approved the Senior Pay Policy.

Code of Good Governance Criteria	Evidence
<p>b. Implements a procedure agreed by the Board for setting the principal's salary, including consulting staff and students.</p>	<ul style="list-style-type: none"> • Remuneration Committee membership includes one staff member and one student member
<p>10. We ensure our body's sustainability, including compliance with the Financial Memorandum and the Scottish Public Finance Manual, ensuring adequate reporting and monitoring and economic, efficient and effective use of our funds.</p>	<ul style="list-style-type: none"> • New Sub-strategy, Our Secure Future established from new Strategic Plan 2025/2030 • Objectives to identify UN annual sustainability goals and links to activities and initiatives which positively influence NESCol stakeholder behaviours • 5 Year Long Term Financial Planning Standing Item on F&R Committee Agenda. • Board set a Strategic Goal in relation to 'Building Sustainability' • Revised Strategic Theme 'Leading Sustainability' included in Interim Strategic Plan AY2021-23 and discussed at Board Strategy Event in April 2021. • Revised Finance Strategy presented and approved by Finance & Resource Committee in May 2021. • IT Strategy Annual Report presented to February 2025 Finance and Resource Committee. • Environmental and Sustainability Annual Report presented to February 2025 Finance and Resource Committee. • Reformatted Financial Regulations in line with CIPFA guidance approved by the Finance & Resources Committee in January 2019 • Changes to the College Financial Regulations with regard to procurement process and delegated limits, approved by the joint meeting of the Finance and Resource/Audit and Risk Committee in November 2023 • Revised Statement Accounting Policies approved by Audit & Risk Committee in April 2019 • Board at their March 2021 meeting formally endorsed and adopted the Scottish Colleges' Statement of Commitment on the Climate Emergency. • Having been presented to various Committees and discussed at Board Strategy Event, the Regional Board at their June 2022 meeting approved the new Sustainability Strategy, produced following consultation with staff, students, and external stakeholders. • BSI Assessment report carried out (ISO 14001:2015 standards) in October 2022 – findings presented to Finance and Resource Committee in November 2022. • BSI EMS ISO14001:2015 Accreditation: Full re-certification audit carried out in February 2024 with no noted non-conformities of observation noted.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • The College continues, as reported to Feb Finance and Resource Committee, to submit in time it's mandatory climate change reporting in line with the Climate Change (Scotland) Act 2019. • College's Sustainability Committee continue to meet regularly with regular reporting to Strategic Leadership team. • Update provided at February 2025 Finance and Resource Committee on Scottish Governance Asset Disposals Guidance. • Opportunities Register standing Agenda item for Finance and Resource Committee.
<p>11. We ensure compliance with charities provisions.</p>	<ul style="list-style-type: none"> • OSCR returns submitted by required deadlines • OSCR publications and communications circulated to Board as appropriate
<p>12. As an employer we:</p> <ul style="list-style-type: none"> a. promote positive employee relations. b. ensure effective management: union partnerships. c. comply with the Staff Governance Standard. d. comply with any national collective agreements placed on us. e. ensure fair and effective staff management. 	<ul style="list-style-type: none"> • A new Board Equality and Diversity Champion appointed and joined the Equality and Wellbeing Committee meetings. • Regular Q&A All Staff webinars held. • Staff Wellbeing Framework available on Staff Intranet – supporting document of the College's Wellbeing Strategy. • Wellbeing Matters events held throughout the year, topics included Financial Wellbeing Sessions, Digital Wellbeing Workshops, promotion of Grampian Wellbeing Festival in May 2024. Wellbeing Matters Champions appointed throughout the College. • Annual Wellbeing Day now established within NESCol calendar with a wide range of activities offered for all staff, across all campuses. • Equalities and Wellbeing Committee chaired by G Watt, with input from staff and students plus Board Equality and Diversity Champion meet regularly. Curriculum and Quality and HR Committee receive reports on Equality and Wellbeing for staff and students. • Equalities Action Plan update presented to HR Committee throughout the year. • Employee Voice Group established in AY2023/24. Findings of survey shared with HR Committee in May 2024. • Employee Voice Group to form part of membership for new Our Colleagues Sub-strategy.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Employee Voice Engagement Survey published in December 2023. Results fed back to Executive and Leadership Team in March 2024 with update provided to May HR Committee. • Employee Voice Working Group (with several new members based across all campuses) update shared with HR Committee in May 2025. • NESCol Wellbeing Strategy 2021-23 published and available on COLIN which gives details of the wrap-around support services for staff and students. • Old Wellbeing Strategy 2021-23 (available on COLIN and via NESCol website) replaced with NESCol Wellbeing Strategy 2024-2027 with broader consultation from staff and students included. • People Services Enhancement Plan (including strategic areas and the proposed new sub-strategy (Strategic Plan) is a Standing Item for HR Committee. • Board reviews and approves the College's Equality and Diversity Policy, Equality Outcomes, and Mainstreaming Report, and Equal Pay Policy & Statement • The Board continues to adopt the latest Standards Commission for Scotland Revised Code of Conduct into its Governance Manual which is reviewed annually by the Board.
EFFECTIVENESS	
<p>1. The Board chair provides leadership and ensures Board effectiveness, working well with the principal and Board secretary.</p>	<ul style="list-style-type: none"> • Demonstrated by the Annual Appraisal of the Regional Chair undertaken by Scottish Government. • Regional Chair meets weekly with Principal • Regional Chair meets weekly with Board Secretary • Board Meeting pre meetings are held with Regional Chair, Principal and Board Secretary
<p>2. Our Board and committees have the right balance of skills, experience, independence and knowledge of the college to fulfil their role effectively.</p>	<ul style="list-style-type: none"> • All Board Members, (including new Board Members) are in the process of completing national induction workshop delivered by CDN. • Training and development is discussed at Members' Annual Development Meetings with Regional-Chair and at the recently established Annual Chairs Meeting • Board Member Skills Matrix kept under review by Governance and Nominations Committee and reflected upon ahead of the commencement of Board Member recruitment processes

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Board Skills Matrix ensured that any skills gaps were considered when the most recent round of Board member recruitment was undertaken and will be taken into consideration for next Board Recruitment opportunity. • New Board members given the opportunity to undertaken CDN Board Member training. • Board Recruitment process held in March 2024 with three new members appointed with a start date of June 2024 as approved by Scottish Government. • Existing Board Member Skills Matrix kept under review by Governance and Nominations Committee • Board Development Day held in February 2025 when Members received training on Chairing and Questions Skills (from CDN); Cyber Security (from CISO and NESCol) and Artificial Intelligence (from NESCol Learning and Development staff member). • Board Development Day held in January 2025 when members received presentations from CEO of Colleges Scotland; Gordon Hunt (CDN) on Governance and Effectiveness with Stuart Thompson providing an overview of SFC Funding methodology; NESCol financial overview and the most recent Scottish Government Budget 2025-27 • Some Members attending CDN Masterclass (May/June 2026) on Presenting to Parliamentary Committee and Risk Governance.
<p>3. We abide by collective responsibility, taking decisions in the interests of the body and managing conflicts of interest appropriately.</p>	<ul style="list-style-type: none"> • Evidenced in Board and Committee minutes
<p>4. Staff and student members are treated as full Board members.</p>	<ul style="list-style-type: none"> • Staff and student Members are treated as full Board Members. Staff and student Members are only asked to withdraw from any part of any meeting of the Board at which the appointment, promotion, conduct, suspension, dismissal, retirement or terms and conditions of employment of any employee of the College is to be considered • To strengthen partnership working with its local Trade Union Representatives the Local Joint Negotiating Committee (LJNC) self-selected two members to attend Regional Board Meetings as observers – commenced in AY2020-21. This is ahead of expected legislation to provide a mechanism for the election of TU nominees. • Following change to Trade Union Membership on Regional Board Legislation, a UNISON nominated member of the Board was appointed. An EIS-FELA member will

Code of Good Governance Criteria	Evidence
	<p>change from Observer status to full Board Member once EIS-FELA confirmation of nomination is received.</p> <ul style="list-style-type: none"> Board received updates regarding Trade Union Membership, noting the UNISON member resigned – with a replacement still being sought from UNISON. An EIS-FELA member was appointed in December 2024.
<p>5. We have an open and transparent process for recruiting and setting the performance measures for our principal; staff and students can contribute to it.</p>	<ul style="list-style-type: none"> Comprehensive recruitment process implemented for recruitment of new Principal appointed in December 2019, process involved Board Members, Leadership Team members, students and external stakeholders Progress against performance management objectives for Principal throughout the Academic Year regularly reported to Board Meetings
<p>6. There is a clear understanding of the responsibilities delegated to the principal and the respective roles of the chair, Board members and executive staff.</p>	<ul style="list-style-type: none"> Defined in the Governance Manual which is reviewed annually by the Board Board is aware of its strategic rather than operational role Regional Chair has provided clarification at meetings when required Responsibilities of being a Board Member, and delegated responsibilities outlined during Induction.
<p>7. The Board secretary is: a. appointed by the Board with the appropriate skills and experience and is not a member of the senior management team in any other capacity. b. available to advise all Board members and committees and has adequate time to fulfil the role.</p>	<ul style="list-style-type: none"> Board Secretary is not a member of the Senior Executive Team Board Secretary is a member of the Governance Professionals Group to ensure the Board operates in line with new sector requirements or good practice and is aware of sector developments relating to governance Annual Appraisal of Board Secretary conducted by Regional Chair. Board Secretary contact details available to Board Members.
<p>8. We have a formal and open Board member recruitment process that reflects Ministerial guidance.</p>	<ul style="list-style-type: none"> Board has established a Selection & Appointments Policy in line with Ministerial Guidance which is reviewed annually Vacancies advertised widely, with Members highlighting opportunities to their external networks In October 2017, Board signed the Scottish Government 'Partnership for Change' pledge – 50/50 by 2020

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • Succession Planning discussed by Regional Board and Governance and Nominations Committee. • Board Member recruitment took place in AY23/24, with robust selection and interviews scheduled. • Board Recruitment and Selection Policy reviewed by Committee and DPO/Board Secretary (May 2026). • New Recruitment anticipated summer 2026 • External representation at interviews took place.
<p>9. We have appropriate arrangements for student and staff member recruitment.</p>	<ul style="list-style-type: none"> • Student Members are selected by the Students' Association • Board Secretary worked with Association to promote benefits of serving as a Student Member for most recent appointment • Board Secretary is responsible for the election process for staff Members • Anonymous staff ballot held in Spring 2022 to appoint new Staff Board member • A new teaching staff member of staff appointed in AY2025/26 following the appropriate procedure has been carried out (including, if necessary, a ballot of all teaching staff).
<p>10. All members undertake training tailored to their needs (including committee training), new members receive formal induction tailored to their needs and there are records of training.</p>	<ul style="list-style-type: none"> • Induction Policy for Board Members in place and reviewed annually • Training discussed at Members' Annual Development Meetings with Regional Chair • Training offered and undertaken at Board, Committee and individual levels-internal & external courses, conferences, internal briefing sessions • Opportunities to access extensive catalogue of online training courses through the College highlighted to Members • Mandatory training and opportunities highlighted to new Board Members during inductions • Board Development Day held in March 2025, when Members received training on Chairing an Questioning Skills (CDN); Cyber Security (CISO and NESCol); Artificial Intelligence (from a member of NESCol Learning and Development Team).
<p>11. We review the Board's effectiveness annually using a robust self-evaluation process, externally facilitated at least every three/five years.</p>	<ul style="list-style-type: none"> • External Board Effectiveness Review carried out during AY2025/26 as part of Internal Audit Programme. Results to be shared with Regional Board (June 2026)

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none"> • CDN Research Study (carried out by Stirling University) – Regional Chair and Board Sec met and agreed Development Event (Scheduled for Sept 2026) for Board Members to explore how values are used/interpreted by the Regional Board. • External Board Effectiveness Review carried out by MHA Henderson Loggie evidenced a high level of compliance with all aspects of the Code of Good Governance and highlighted no areas of non-compliance and no recommendations – a first in any review of Boards undertaken by MHA Henderson Loggie. • Annual Evaluation process carried out with Annual Board Member Development Meetings and Committee Evaluations taking place in Summer 2025. • Regional Chair, Board Secretary and Principal took part in CDN Research study for external College Governance Review in March 2023
RELATIONSHIPS AND COLLABORATION	
<p>1. We work in partnership at a local, regional and national level to:</p> <ul style="list-style-type: none"> a. secure coherent education provision in our locality. b. achieve commonly agreed outcomes. c. develop agreed priorities. d. address local needs as well as national priorities and specialisms. 	<ul style="list-style-type: none"> • Local and regional – local universities and schools, local authorities, Community Planning Partnerships, AGCC, ONE, SCDI, third sector organisations • College is lead partner of the Regional Learning and Skills Partnership • College plays a key role in the delivery of the Regional Skills Strategy, the Regional Economic Strategy, and the region's approach to Developing the Young Workforce • Regional Chair sits on the College's Scotland Board, and is a Member of the Employers' Association • Regional Board, in December 2025, received an annual presentation from ASET Chair and General Manager. • Appointment of ASET Chair made by Regional Board. • Regular meetings take place between Regional Chair and ASET Chair. • Regular meetings with ASET/NESCol to develop enhanced and closer collaboration and partnership working • ASET updates now standing agenda item on F&R Committee. • Closer working relationships forged with SFC and its Chief Executive presented Phase 1 Review at Strategy Event in November 2020. • Regular Meetings undertaken with SFC and NESCol Senior Management throughout the academic year. • Close working with SFC and member of the North East Tertiary Provision Pathfinder Delivery Board.

Code of Good Governance Criteria	Evidence
	<ul style="list-style-type: none">• The College are leading on two key strands of SFC Pathfinder:<ul style="list-style-type: none">○ Strategic Partnership with RGU to explore joint planning, provision of programmes, development of programmes and some shared services.○ Enhancing the School Senior Phase with Aberdeen City and Aberdeenshire, RGU and UoA.