

Minutes of: CORPORATION

Date: 3rd February 2022

Time: 5:00pm

Place: via Microsoft Teams (COVID 19)

Present: Mr S Brand
Mr P Cook (Principal)
Mr S Crick
Mr M Crook
Dr H Friend
Ms J Lewis-Bell
Mr I Meaton
Mr I Pursglove (Chair)
Mr C Todd (Vice Chair)



In attendance: Ms S Dent (Vice Principal, Finance and Resources)
Ms J Ferguson (Vice Principal, Safeguarding and Pastoral Care)
Mrs R Herbert (Vice Principal, Quality and Curriculum)

Mrs Y Doherty (Clerk to the Corporation)

The Chair welcomed Mr Meaton to his first meeting as Staff Governor (support) and thanked him for volunteering for the role.

21/34 APOLOGIES

Apologies for absence were received from Mr K Sonecha.

21/35 DECLARATIONS OF INTEREST

As previously minuted, Mr Crick's employment was noted.

On the basis of the business to be considered there were no declarations of interest.

21/36 MINUTES FROM THE PREVIOUS MEETING

The minutes of the meeting (circulated, document Feb 22/1) held on 9th December 2021 were considered.

It was **RESOLVED THAT**, the minutes of the meeting held on 9th December 2021 be approved.

21/37 MATTERS ARISING

There were no matters arising.

21/38 STANDING AGENDA ITEMS

38.1 Principal's Report

The Principal presented an update report (circulated, document Feb 22/2).

The report provided detail on:

- Management of COVID cases
- Teaching, learning and progress
- Catering and food
- Residential CQC report – see minute 21/29.2
- Pay and conditions

It was reported that there had been a surge in COVID cases over the Christmas period and January had been the most challenging period due to a lack of agency staff and 44 staff absences. A triage system had been introduced to manage the situation. Staffing issues were now beginning to ease and it was understood that similar circumstances were common throughout the sector. There was now a focus on assessing the impact on teaching and learning and that this was being conducted in conjunction with the Ofsted consultant the College was currently working with. There had been no complaints regarding catering this term, which evidenced that the team had been listening to feedback, however, there remained room for improvement. Following publication of the CQC inspection report a letter had been sent to parents (copy provided) and learners had been briefed.

The collective grievance process concludes on 04 February and again there was information that similar organisations were experiencing the same issues. Issues included that the rate of pay was very close to the minimum wage which was further exacerbated by the cost of living and term time only contracts. This was addressed further in the finance paper to be presented later in the meeting.

Discussion points included:

The use of Ofsted consultant in providing practical support was welcomed. It was confirmed that this had been arranged to provide an objective view as part of inspection preparation and to ensure readiness for new approach e.g. curriculum intent. Having been so focussed on the challenges presented by COVID there was now a need to ensure that the college was inspection ready. Staff development had also been completed

What had been the impact on funding of the need to deliver the provision remotely
It was confirmed that this had only been for a short period and that there had been no comment from the LA.

Had there been any media queries resulting from the CQC inspection report?
It was reported that there had been no media interest.

It was **RESOLVED THAT** the Principal's update report be noted and received.

38.2 Student Numbers

The Vice Principal Quality and Curriculum presented a report on Student Numbers (circulated, document Feb 22/3).

It was highlighted that the data indicated that there was an increased number of applications against the comparable period for the previous two years.

Discussion points included:

It was a clear report that provided evidence of the potential for good levels of recruitment.

Would there be a need for consideration of the position relating to residential learner numbers?
It was confirmed that there had been some in-year pressure on the ability to deliver programmes with requests having to be refused. The detail of the position for September 2022 had yet to be considered.

It was further reported that some specialist provides had already suspended recruitment for the next academic year due to possible staffing issues.

It was suggested that the college was therefore intending to deliver at least the same level of provision, if not more.

It was confirmed that current staffing levels for the residential provision provided the ability to 'flex up' providing some capacity for growth.

It was noted that there were 45 interviews to be completed; a time frame was requested
It was reported that 16 interviews were scheduled for w/c 7th February

Additional information provided after the meeting confirmed that interviews for the remaining applicants would be scheduled for after half term (w/c 28.02.22).

It was queried if there was a target for application numbers and if the local labour market had been considered in relation to staff pay

It was confirmed that student application numbers were exceeding expectations and that targets were aligned with financial forecasting.

The level of confidence in achieving 10-11 residential learners was questioned, linked to financial viability.

It was reported that an increased number of applications had been received. Financial viability was based on a minimum of 10 residential placements. The position was monitored and updates would be provided to the Corporation.

It was **RESOLVED THAT** the Student Numbers update report be noted and received.

38.3 Quality Improvement Plan 2021/22

The Vice Principal Quality and Curriculum presented a report on the Quality Improvement Plan (QuIP) (circulated, document Feb 22/4).

Attention was brought to the following points:

Page 1: Premier Inn placements back on track, with a visit to the College by Premier Inn staff planned for 10th March.

Well Bean Cafe had opened providing opportunities for hospitality learners to provide a service to staff.

Page 3: Introduction of the Xello software with good progress being made.

Page 8: Tracking had been challenging given staff absence, particularly for maths with staff working hard to maintain and record progress.

Page 10: Sensory audit scheduled. Meeting with QAC for sharing of good practice.

Page 13: Employer forum - there had been an enthusiastic response from employers. New Sports and Leisure programme, led by Sky Blues in the Community, had proved popular and delivered a positive impact.

Page 16: Online Skills Network now in place, aim to boost distance learning offer.

Page 21: Channel referrals.

Discussion points included:

An update on the tender process for the feasibility study was requested.

It was reported that this was complete but work was yet to begin.

Skills Network Development – would this require guidance regarding the geographical areas covered given devolved funding?

This was acknowledged as a good point and it was confirmed that the college would be working to ensure this was not an issue.

Employability brochure - was this aimed at existing relationships or new business development?

It was confirmed that it was both.

The possibility of Governor support by sharing the brochure with their networks was suggested.

It was **RESOLVED THAT** the update report against the Quality Improvement Plan 2021/22 be noted and received.

38.4 Data Dashboards

The Data Dashboard was considered (circulated, document Feb 22/5).

Improving Teaching, Learning and Assessment

Vast majority of targets were RAG rated green.

Attendance data was split to separate that related to COVID. Although learner attendance rates was RAG rated red, when combined with absences attributable to COVID it was at target.

IQR work was continuing with a slight delay on the position in the previous year.

The observation cycle had been extended due to operational issues, including absence.

Working In Learner Centred Structures

Retention data for those learners in receipt of clinical intervention was at target.

Safeguarding training statistics had improved.

Making the Most of College Resources

AEB performance was RAG rated amber.

Surplus had increased slightly

HR metrics

- voluntary staff turnover had increased (although remained RAG rated green)
- sickness absence continued to increase
- days lost due to COVID had increased
- appraisal completion rate was RAG rated red.

Discussion points included:

How did COVID absence compare to sector?

It was reported that this was very difficult to determine as data was not widely available and this would also need to allow for the college categorisation as GFE whilst delivering specialist provision.

It was highlighted that previous reports had provided an indication of national rates via an AoC survey. However, this had not been completed again.

It was **RESOLVED THAT** Data Dashboard 2021/22 update report be noted and received.

FOR DECISION

21/39 STRATEGIC PLAN 2021 - 2024

The Principal presented a report providing an update on the development/delivery plan associated with the Strategic Plan 2021 - 2024 (circulated, document Feb 22/6).

It was noted that the Corporation had approved the Strategic Plan 2021 – 2024 in December 2021.

The associated development/delivery plan was now presented for consideration.

The plan contained 21 objectives against which there were 101 performance indicators up to 2023.

These would be revisited annually.

Discussion points included:

It was a good document that illustrated what needed to be done against what had been agreed

It was measurable and realistic

The Chair extended the thanks of the corporation to all those who had been involved.

It was **RESOLVED THAT** the development/delivery plan be approved.

21/40 FINANCE and RESOURCES

HR Report and Grievance Policy & Procedure

The Vice Principal Finance and Resources presented the HR report for the autumn term and the Grievance Policy and Procedure (circulated, document Feb 22/7).

HR Report

The following points were highlighted:

- Vacancy rate was reasonably high over a 12-month period. Reasons for staff turnover included pay and staff facilities There had been a requirement to increase some rates of pay with detail provided.
- There had been an increase in levels of sickness. The data provided on days lost excluded COVID related absence and there had in fact been a significant increase over and above COVID.
- Issues identified as part of the grievance process had included the need for a robust job evaluation process with software packages to support this now under consideration. This would also provide market information, evidence a robust process and inform decision making, including those relating to pay.
- Well-being service. The College currently provided a counselling service for staff. Developments included the investigation of a 'wrap around' offer to improve the service and possibly provide better value for money.

Discussion points included:

The proposed job evaluation process; whilst acknowledging that this was important it was suggested that staff be involved as this would support engagement from the staff.

Staff wellbeing - facilities were important; and in terms of a wellbeing focus for staff, ensuring staff awareness of the services available was as equally important as their use.

Further suggested points included

- Monitoring of the absence data as previously long-term absences had been well managed
- Consider enhanced pay rates where recruitment difficulties were being experienced, look at the local market and consider impact on strategic and operational issues.

Grievance Policy and Procedure

It was confirmed that this had been subject to internal review and external review by the College's solicitors. The minor amendments were highlighted for ease of reference.

Discussion points included:

Where reference was made to being accompanied by a trade union representative, it should stipulate that this should be their TU representative.

It was reported that the policy stated that it needed to be from a union recognised by the College. It was proposed that the wording still needed to be as specific as suggested.

It was **RESOLVED THAT**

- i. the HR Report - Autumn Term 2021/22 be noted and received.
- ii. subject to amended wording as indicated, the Grievance Policy and Procedure be approved.

21/41 SAFEGUARDING and PREVENT

41.1 Positive Touch and Use of Reasonable Force Policy

The Vice Principal Safeguarding and Pastoral Care presented the Positive Touch and Use of Reasonable Force Policy (circulated, document Feb 22/8).

It was confirmed that the policy had been reviewed by a legal team and reflected the changes to the statutory framework/processes.

Discussion points included:

In instances of unplanned intervention being defensible; is this too broad for staff to interpret objectively? e.g. damage to property – on the basis of what scale?

It was suggested that it would be obvious if it was the situation was extreme but it was about the degree of severity and the risk of intervening too soon.

There was a need to ensure the safeguarding of staff and learners.

It was reported that in writing the policy attempts had been made to avoid being too specific.

It was acknowledged that the policy had been subject to legal review.

Application of the 'reasonableness' test and where it was necessary/reasonable in the best interests of the learner, at what point did this override safeguarding. Does it put the best interests of the learner above that of others?

It was suggested that issues could be reviewed on a case by case basis and staff training was queried.

It was reported that the policy dictated the completion of appropriate paperwork and that as a means of good practice any potential use of the procedure was discussed with learners and their families,

There were also post incident procedures and staff were trained in the use of 'Team Teach'.

Mr. Meaton stated that as a member of staff he could confirm that staff were very good at de-escalating situations and that he had never witnessed a learner being restrained.

This assurance was welcomed.

It was **RESOLVED THAT** the Positive Touch and Use of Reasonable Force Policy be approved.

41.2 Fitness to Study Policy

The Vice Principal Safeguarding and Pastoral Care presented the Fitness to Study Policy (circulated, document Feb 22/9).

Discussion points included:

How often was the policy used?

It was reported that there had been increasing use of it in the last few years.

It provided an opportunity toward with learners without the use of disciplinary procedures and linked into instances such as deteriorating mental health.

There was detailed discussion of the appeal procedure and the position of the Principal should they be involved in the earlier processes.

It was reported that the involvement of the clinicians in the process was with the intent to avoid such circumstances. In addition, they also provided an objective approach as they worked to NHS standards.

It was **RESOLVED THAT** the Fitness to Study Policy be approved.

21/42 GOVERNANCE

42.1 Report from the Search & Governance Committee meeting held on 13th January 2022

The Corporation considered a report on business considered at the meeting of the Search and Governance Committee held on 13th January 2022 (circulated, document Feb 21/12).

- Skills Audit 2020/21

see minute 42.2

Training

The Committee noted the requirement that detail of training and development to be reported annually and that the College requested that Governors complete mandatory training (via EduCare). The report provided detail on specific governance training provided by the Education and Training Foundation that was self-directed and could be tailored to individual need by Governors.

The Committee agreed that the College provide access to this training programme. The Clerk will issue details in due course.

- Code of Good Governance – Compliance 2020/21

Governors were requested to review compliance against the requirement of the CoGG for the 2020/21 academic year.

The document issued provided an initial assessment of compliance against the provisions of the code, with Governors requested to review the suggested position and provide feedback e.g. where something was inaccurate or more supporting evidence was available.

The Committee advocated that the report provided confidence and assurance regarding the governance processes, whilst acknowledging the Code did not provide criteria for assessing a 'grade' in the same way as the inspection framework did.

- Governance Codes

The provisions in the Funding Agreement 2021/22 stipulate that the Governing Body must conduct an annual self-assessment and must have an external review at least once every three years based on the governance code adopted by the Corporation. Each college is required to state which code it has adopted in the corporate governance statement contained in its annual audited statements.

In response to this requirement the report provided detail and comparison of Governance codes currently adopted with the FE sector, including the revised AoC Code of Good Governance, the Charity Commission Code and the UK Corporate Governance Code 2018.

It was considered that the AoC Code was sector specific whilst acknowledging that there were aspects of the UK Corporate Governance Code which could also support the delivery of governance.

The Committee resolved to recommend that the Corporation adopt the AoC Code of Good Governance (2021), whilst utilising aspects of the UK Corporate Governance Code as appropriate.

- Finance and General Purposes Committee

The Committee considered a report on the work of the previously constituted Finance and General Purposes Committee and the potential impact of re-establishing this Committee, most specifically the work of the Audit Committee and potential additional reporting areas currently not considered in any detail, e.g. estates and HR.

The Committee resolved that more work be completed to refine specifics. It was suggested that a more detailed report include reference to the overall governance structure and include where (which committee) the requirements of the Code of Good Governance would be met.

It was **RESOLVED THAT**

- i. the Corporation adopt the AoC Code of Good Governance (2021)
- ii. the intention for a further report to the Search and Governance Committee on establishing a Finance and General Purposes Committee be noted.

42.2 Skills Audit 2020/21

The Corporation considered a report on the outcomes of the Skills Audit completed in the Autumn Term (circulated, document Feb 21/12).

It was highlighted that this linked to the previous report.

The continued poor response rate to the Skills Audit survey was highlighted and the need for governors to complete the survey was emphasised.

It was reiterated that the survey was utilised to inform recruitment and training which would ensure appropriate and informed oversight of the SLT and college performance.

It could also potentially impact on the Ofsted inspection of governance.

It was suggested that a lack of engagement was not illustrative of the Corporation providing best value and impacted on the ability to provide effective decision making and support.

It was advocated that it was better to engage actively and quickly to ensure the Corporation was in the best position to support the College.

It was reported that the Clerk had been requested to reissue to the skills audit survey to those Governors yet to complete it. Those governors were requested to respond promptly. The report would then be updated to reflect the additional submissions.

It was **RESOLVED THAT**

- iii. the Clerk would reissue the Skills Audit to those Governors yet to complete it.
- iv. the report would be updated to reflect the responses once received.

FOR INFORMATION

21/43 FINANCE and RESOURCES

43.1 Monthly Management Accounts – Month 5

The Vice Principal Finance and Resources presented the Monthly Management Accounts for Month 5 (circulated, document Feb 22/12).

Detail of key issues included:

- The Financial health assessment
- The cash balance at the end of the period
- Banking covenants are being met
- Updated forecast and surplus
- Updates against previous reporting and current risks
- Current Position
- YTD position with detail on identified key issues including:
 - Income, expenditure, underspends, and inclusion of prior year figures for comparison
- Full Year data with detail on identified key issues including:
 - Revised budget, student numbers, revised forecast, income and overspends
- 3-year plan
- Other issues, including the catering provision.

Previous pay awards

It was reported that during 2021 (July and October) the Board had approved two awards to staff:

- A one off non-consolidated award of £300 to each member of staff (July 2021)
- 1.5% award backdated to September 2021 (October 2021).

Previous discussions had considered wider economic and inflationary issues, including increased to National Insurance contributions and the national living wage, and whether the 1.5% award was sufficient.

There had been acknowledgement of the potential need for a 'phase 2' award. Any further award needed to be considered in the context of this and affordability.

It was suggested that any additional pay award should be actioned before the end of this academic year and possibly before April.

The timing and any potential need for an additional meeting to approve any proposal for an additional award to made April was raised.

Discussion points included:

Had further non-consolidated awards been considered

It was advocated that would not assist with recruitment issues as identified.

It was commented that there was a need for a supporting report that analysed options, their impact and affordability. It was suggested that a paper be presented to the next meeting.

It was confined that more detail on this years financial performance and revised information on next year would be available for the next meeting and that there would be sufficient time to implement any pay award for April. it was advocated that an additional pay award had the potential to assist with recruitment and offset agency costs for next year.

Was ETF offering any assistance related to recruitment/retention issues and the increased use of agency staff?

It was reported that the sector as a whole was experiencing challenges.

Suggested additional points for consideration included:

- Ensure any proposal was affordable and consideration had been given to raising expectations for future years
- Premises overspends in reaction to increased costs of trades/supplies and the need for planned/reactive maintenance.

It was **RESOLVED THAT**

- i. the Monthly Management Accounts, Month 5, be noted and received.
- ii. any proposal for an additional pay award in the 2021/22 academic year be presented with supporting detail as discussed.

43.2 GDPR – Autumn Term Update Report

The Vice Principal Finance and Resources presented a Data Protection update report (circulated, document Feb 22/13).

An update on progress included:

- The work of the Data Protection Group;
- No reported breaches;
- 8 Data Subject Access Requests, with detail;
- Issues dealt with by the DPO;
- Training data;
- Progress against the Action Plan for 2021/22, including the impact of COVID 19.

It was **RESOLVED THAT** the GDPR/Data Protection update report be noted and received.

21/44 SAFEGUARDING AND PREVENT

44.1 Safeguarding and Prevent Update Report

The Vice Principal Safeguarding and Pastoral Care presented the Safeguarding Update Report (circulated, document Feb 22/14).

The report provided detail on a number of aspects:

- Safeguarding Overview
- Operational MDT (Multi-Disciplinary Team)
- Clinical MDT (Multi-Disciplinary Team)
- Internal audit
- Safeguarding supervision
- Newsletter for staff
- Bespoke safeguarding training session
- Safeguarding data
- External Referrals
- Staff and Governor Training.

It was reported that as per the staff training programme, face to face safeguarding training would be scheduled for Governors, delivered by the Safeguarding Manager. This would then be incorporated into the College annual training plan.

Discussion points included:

Refreshing the online safeguarding training, it appeared that the system would not permit this until the previous training had 'expired'.

Automatic reminders were queried.

It was agreed that these points would be investigated.

It was **RESOLVED THAT** the Safeguarding Update Report be noted and received.

44.2 Care Quality Commission

The Vice Principal Safeguarding and Pastoral Care presented an update report on the recently published Care Quality Commission inspection report (circulated, document Feb 22/15).

Overall rating is - **Requires Improvement**

A copy of the published report was provided.

Discussion points included:

The report represented a 'snap shot of a moment in time'.

The reason for the requires improvement assessment were very specific and had largely been addressed so that this would no longer be the case. How long would it be before the service was reviewed again?

This was reported that the involvement of the Pharmacist in the inspection had been unusual and was part of the pilot scheme that was being trialled at the time. There was uncertainty regarding the timeframe of a reinspection and this was dependent on a number of factors. However, without evidence of a significant detrimental impact on the College as a result of the inspection, it was anticipated that it would be at least 12 months.

It was emphasised that the report did include many positives relating to care and safeguarding which provided reassurance.

This was agreed. Any intention to publish a response was questioned.

It was confirmed that there was no intention to publicly respond or draw attention to the report.

The following point were made

- It had been a robust inspection
- Potentially disproportionate given the size of the provision

- Challenge back had been accepted where possible, especially regarding the language of the report
- It was important for the College to now move forward
- A consultant residential manager had been contracted to review the residential provision, to address the report findings and support developments as appropriate
- The capacity of the team
- The action plan would be shared.

It was **RESOLVED THAT** the update on the published Care Quality Commission inspection report be noted and received.

The Chair left the meeting. The Vice Chair assumed the role of Chair for the remainder of the meeting.

21/45 QUALITY and STANDARDS

Complaints Report Autumn Term 2021/22

The Vice Principal Quality and Curriculum reported on the Complaints Report – Autumn Term 2021/22 (circulated, document Feb 22/16).

The report summarised the key headline data from complaints received by the College during the Autumn term 2021/22.

Two complaints had been received, an increase of one in comparison with the Autumn Term 2020/21.

The process was complete for both.

Comparative data was provided.

It was **RESOLVED THAT** the Complaints Report Autumn Term 2021/22 be noted and received.

21/46 ANY OTHER BUSINESS

There was no other business for consideration.

21/47 DATE OF THE NEXT MEETING