

## **Approved**

### **MINUTE**

# Meeting of the Audit and Risk Committee held on 29 April 2021 at 2.00pm held via Zoom

Attendance: Fiona Boath (Chair)

Lorna Cameron
Mark Griffiths
Susan Macmillan
Margaret Vass

Staff in Donna Birrell (CEO) attendance: Norrie MacPhail (IADM)

Susan Mackay (CSO) Hilary Tennant (GCO)

Also in Allison Devine, (AD) Alexander Sloan, External Auditors (Agenda Item

attendance: 3 only

Stephen Pringle, (SP) Wylie & Bisset, Internal Auditors (Agenda Item

4.1 and 4.2 only)

Item		Action
1.	Introduction and Apologies	
	The Chair welcomed everyone to the meeting, and introduced Allison Devine from Alexander Sloan (External Auditor – Agenda item 3) and Stephen Pringle from Wylie & Bisset (Internal Auditor - Agenda Item 4.1 and 4.2)	
	Apologies had been received from Kirsty Brown (DCEO/DFCS) and Jackie Leeds (HSM)	
2.	Declarations of Interest	
	The CEO declared an interest in Agenda Item 9.2 given comments/feedback on Decision Time.	
3.	External Audit: Allison Devine, Alexander Sloan.	
	AD presented the External Audit Plan for the year ended 31 March 2021 (Appendix 2). Details of the six areas to be considered by the audit, the reporting timescale of the audit plan, and the information requirements were included in the report. It was anticipated that the audit would be undertaken remotely due to COVID-19 restrictions.	

MG noted that the audit presentation scheduled for 29 July would be to the Audit and Risk Committee, with the final report then going to the Board in August. SM noted that the date on Page 12 was 2021 and not 2020.

The Chair thanked AD for attending the meeting and presenting this report.

#### Subject to the above amendments the Committee decided:

- that the proposed Audit Plan and timetable for actions in advance of the presentation of the audited accounts to the AGM be approved, and
- that the proposed fee of £7,930 (excl. VAT) be approved.

The Chair noted that the proposed fee had increased from that budgeted and that we needed to be mindful of budget variances regardless of how small.

AD left the meeting following consideration of this item.

#### 4. Internal Audit: Stephen Pringle, Wylie & Bisset

#### 4.1 Internal Audit Plan 2020/2021 Update in Reviews

SP presented the Cyber Security Audit report (Appendix 1). The audit had provided 4 recommendations, 2 medium and 2 low, and noted 11 areas of good practice.

The Committee noted that the outcome of this audit provided Substantial Assurance.

CEO noted repetition in relation to Remote Working Policy P3 & P9. DP will update the report and reissue.

The Follow-Up Review of recommendations made in the 2019/2020 audit, (Appendix 2) reported that of the 3 medium recommendations made, 2 had been partially implemented and 1 recommendation had not yet been implemented.

The Committee noted that the outcome of this audit provided Substantial Assurance.

The Internal Audit Report for 2020/2021, (Appendix 3) provided an audit opinion to confirm that RSHA had adequate and effective risk management, control, and governance processes in place.

Four audits had been completed, with 3 having substantial assurance and 1 having strong assurance, with 5 medium recommendations and 5 low recommendations.

KPI management response times to draft audit reports had been missed in 2020/21 and this would be addressed by the SMT.

SP confirmed that there were no outstanding actions of a high-risk nature.

Wylie and Bisset provided an opinion of *Reasonable Assurance* that there are no major weaknesses in the Association's risk management control and governance process.

SP

#### The Committee decided:

• that the Cyber Security Audit, Follow Up Review and Annual Internal Audit Report for 2020/2021 be approved.

#### 4.2 Annual A&R Work Plan 2021/2022

SP presented the draft Annual Internal Audit Work Plan 2021/2022 to the Committee (attached as Appendix 2).

The Work Plan set out the three areas for audit in 2021/2022, along with a Follow Up, as follows:

- Strategic Control and Corporate Governance
- Planned Maintenance
- Risk Management

The Work Plan stated that a total of 10 days would be allocated to complete the agreed audits, with two office visits planned for August 2021 and January 2022. A report would be provided to the Audit and Risk Committee following each visit.

DB asked SP whether the strategic control and corporate governance audit would satisfy the requirement to undertake an independent assessment against the standards of Governance and Financial Management every 3 years as required by the SHR. SP confirmed that this audit would consider compliance and therefore a separate audit would not be required.

The Chair thanked SP for attending the meeting.

SP left the meeting following consideration of this item.

#### The Committee decided:

• that the draft Annual Internal Audit Plan for 2021/2022 be approved.

#### 4.3 Landlord Health and Safety Audit: ACS Report

NM presented the outcome of the Landlord Health and Safety Manual audit completed by ACS in February 2021.

NM reported that 49 different elements had been investigated by the audit, with 43 being fully compliant and 6 which partly conform. The recommendations to achieve full compliance were detailed in Appendix 1. All recommendations had been completed except for the Fire Safety recommendation, and a tender to undertake this work had been issued.

#### The Committee decided:

that the Action Plan for 2021/2022 be approved.

#### 5 Minutes of Previous Meetings

#### 5.1 Minute of Audit and Risk Committee Meeting – 5 November 2020

The Minute was **approved** on a motion by Margaret Vass and seconded by Mark Griffiths

# 5.2 Confidential Minute of Audit and Risk Committee Meeting – 5 November 2020

The Minute was **approved** on a motion by Mark Griffiths and seconded by Margaret Vass.

#### 6 Matters Arising Schedule

The CEO presented the Matters Arising Schedule.

#### The Committee decided:

that the contents of the report be approved

#### 7 Health and Safety

7.1 Incidents: One staff member absent with COVID 19.

#### 7.2 Health and Safety Moment

MG reflected that given recent staff absence it was paramount to maintain COVID safety protocols at this time when the country moves out of level 4 and restrictions are eased.

#### 7.3 Health and Safety Update

The CEO presented the Health and Safety Update to the Committee.

The report provided details of the hygiene measures and changes to office procedures which were in place within the office to aid social distancing. The office had been deep cleaned in April 2021 following a positive case of COVID-19.

Although the office remained closed to the public, a staff rota had been established for staff who were working from the office to cover key tasks. Weekly office safety, fire and electrical testing had resumed.

Feedback from staff on issues encountered during lockdown would be taken forward by the SMT.

A tenant survey had been conducted which highlighted the need to improve our digital and on-line self-service opportunities. A further survey was planned for later in the year.

Progress on actions in the Health and Safety Management System had been curtailed due to COVID-19 restrictions, however the actions would be a priority once staff return to working from the office.

The following Health and Safety Action Plans were reviewed by the Committee:

- I. Health and Safety Action Plan (Appendix 1)
- II. EVH Landlord Safety Manual Action Plan for Policies (Appendix 2)
- III. EVH Landlord Safety Manual Action Plan for Actions Arising from Audit (Appendix 3)

RSHA had joined with four other local HA's to jointly appoint Housing Health and Safety Compliance Ltd to undertake an audit of our Landlord Health and Safety Controls.

The report detailed the six categories identified for the initial audit. Self-assessments had been completed for two areas, with a target to complete the remaining four by the end of May 2021.

Shared learning from this audit will be reported to the Committee at a future meeting.

#### The Committee decided:

- that the health and safety concerns related to the current COVID-19 crisis be noted,
- that the continued work to re-open the office, anticipated to be August 2021, be noted,
- that one health and safety incident had been reported since November 2020,
- that the draft Electrical Safety Policy would be considered later in the meeting, and
- that the completed staff Health and Safety training be noted.

#### 7.4 Health and Safety Competency Framework and Training Matrix

The CEO reported that the Competency Framework programme, which must be approved by the Audit and Risk Committee on an annual basis, required to be developed.

The report noted the need for a Training Needs Analysis (TNA) to be conducted, and a H&S Competency Framework to be developed and presented to the next Audit and Risk Committee for approval.

In the interim, an EVH/ACS template Health and Safety Training Matrix, attached as Appendix 1, provided details of an initial TNA.

#### The Committee decided:

- that the contents of the report be noted,
- that a Training Needs Analysis be completed for all roles within the organisation, to allow the development of a Competency Framework Programme, be approved,
- that the interim RSG Competency Framework Matrix, as shown in Appendix 1, be approved,

CEO

	that, subject to the outcome of the TNA, amendments to training needs may be required be noted.	
8.	RSG Key Risks Confidential	
	This matter was confidential	
9.	Staffing Update Confidential	
	9.1 Confidential Staff Update This matter was confidential	
	9.2 Confidential HR Report Exit Survey This matter was confidential.	
	Staff Members Susan Mackay and Hilary Tennant left the meeting for this item.	
	9.3 Investors in People – No Report	
	9.4 Confidential Stress Survey 2019 - Action Plan This matter was confidential.	
10	Governance	
	The CEO presented the Mid-year Review of the Annual Assurance Statement 2020.	
	The Scottish Housing Regulator had advised the Association in March 2021 that its Regulatory Status was <i>Compliant</i> .	
	A mid-year review of the action plans developed following the self-assessment exercise indicated slower progress in two areas: Equality, Diversity & Human Rights Strategy and Value for Money Strategy. Full details were provided in Appendix 1. These areas would be prioritised in 2021/2022.	
	The next Annual Assurance Statement will be required by October 2021. Work will continue to collate evidence, and a first draft of the Assurance Statement will be presented to the Committee at its meeting on 29 July 2021. A call for tenant involvement had been issued in the Spring Rural Matters.	
	MG asked whether moving from SHN toolkit for Self-Assurance to SFHA would require additional work. DB noted that a decision would be taken following the outcome of the audit.	
	MG asked whether there had been a large response to the request for feedback on the customer engagement strategy. DB noted that some feedback had been received but it was not a substantial number.	
	The Committee decided:	
	that the contents of the report be noted.	

11.	Finance – No report	
12.	Draft Policies for Review and Recommendation to Board (CEO) The following draft policies were presented to the Committee:	
	i) Complaints Policy ii) Electrical Safety Policy iii) Estate Management Policy	
	The report noted that the Board had adopted the SPSO Revised Complaints Handling Procedure in February 2021, and the Complaints Policy had been drafted to compliment this procedure.	
	The draft Estate Management Policy had been updated to include a statement on the use of CCTV. Once approved by the Committee the policy would be put out to tenant consultation before being presented to the Board for final approval.	
	The Committee discussed the possibility of highlighting tenants' responsibilities regarding visitors. Parking issues re untaxed/un-insured cars of visitors to tenants' properties should also be added to the policy.	
	Outstanding questions on Decision Time would be added to the Action Tracker.	HSM
	The Committee decided:	
	<ul> <li>that the draft policies be recommended to the Board for approved, subject to any changes to the Estate Management Policy being completed.</li> </ul>	
13.	Action Tracker	
	Flood risk in Aberfoyle. NM reported that he had received a report from Stirling Council today and would consider and respond to the report in due course. The Action Tracker will be updated to reflect this.	IADM
	The Committee decided:	
	that the contents of the report be approved.	
14.	Any Other Competent Business	
	There was no further business.	
15.	Date of next meeting	
	Audit and Risk Committee: Thursday, 29 July 2021, time tbc. Prior to the Committee meeting there will be a pre-meeting to review the Annual Assurance Validation.	
	Due to school holidays the Chair expressed a preference for an evening meeting. The meeting closed at 3:45pm.	