

**Meeting of the Audit and Risk Committee
held on 25 April 2024 at 6.30 P.M.
Meeting was online using Zoom**

In Attendance: Fiona Boath, Mark Griffiths, Lorna Cameron
Margaret Vass, Susan Macmillan

Staff in Attendance: Donna Birrell – Chief Executive Officer (CEO)
Gerry Casey – Deputy CEO / Director of Finance & Corporate
Services (DCEO/DFCS)
Sandra McPhee – Corporate Services Officer (Governance) (CSO(G))
Minutes

Also in Attendance: Phil Morrice, Alexander Sloan – External Audit – Item 3 only
Siobhan Archibald, Wylie & Bissett – internal Audit – Item 4 only
Richard McElfratrick, Board Member - Observer

| Item | | Action |
|------------|---|--------|
| 1. | <p>Introduction and Apologies</p> <p>The meeting commenced at 6.30 p.m.</p> <p>The Chair welcomed everyone to the meeting and confirmed that apologies had been received from Ken Butler. The Chair also welcomed Board member Richard McElfratrick to the meeting as an observer.</p> | |
| 2. | <p>Declarations of Interest</p> <p>There were no Declaration of Interests.</p> | |
| 3. | <p>External Audit Report</p> | |
| 3.1 | <p>Meeting with External Auditor (Prior to audit for 2023/24)</p> <p>The Chair welcomed Phil Morrice from our external auditors Alexander Sloan to the meeting and presented the Audit Plan for 2023-24, which sets out the scope of the engagement, timetable and the main audit Risks.</p> | |

Chair’s signature.....

| | | |
|-----|---|--|
| | <p>PM advised that there will be a number of key risk areas considered during the audit including;</p> <ul style="list-style-type: none"> • Management override of control • Errors in revenue recovery • Development risks in relation to meeting covenants • Focusing on ongoing developments to ensure funding in place and plan for abortive costs • Current working environment including the increase in costs and understanding debts. <p>The Chair of the Audit and Risk Committee offered members the opportunity to meet with the Internal Auditor privately without staff in attendance however the Committee did not feel that this was necessary.</p> <p>The Committee:</p> <ul style="list-style-type: none"> ❖ Approved the audit plan and timetable for actions thereafter leading up to the presentation of the audited accounts at the AGM. ❖ Approved the fee of £10,300 (excluding VAT) for this year’s audit. ❖ Approved the Audit Engagement Letter. <p>The Chair thanked Phil for attending the meeting.</p> <p style="text-align: right;"><i>Phil Morrice left the meeting.</i></p> | |
| 4. | Internal Audit Report | |
| 4.1 | <p>Internal Audit Plan 2023/24 Update</p> <p>The Chair welcomed Siobhan Archibald from our internal auditors Wylie & Bisset.</p> <p>SA presented the follow-up audit report and confirmed that ‘Substantial’ assurance has been given. SA confirmed that seven of the 13 recommendations from previous audits have been fully implemented.</p> <p>SA confirmed that at the time of the audit the Association had adequate and effective risk management, control and governance processes to manage achievement of the Association’s objectives.</p> <p>The Committee:</p> <ul style="list-style-type: none"> ❖ Approved the content of the report and the accompanying appendices. | |

4.2

Internal Audit Plan 2024/25

SA presented the Audit Plan for 2024/25 and advised that there will be five audits carried out during the year including a follow-up. The audits that will take place are

- Human Resources
- Void Management
- Allocations
- GDPR

The Committee raised the following comments / queries

- The Committee felt that the timing of the follow-up audit could be an issue as there are some areas that should be looked at earlier than the planned date for this audit in 2025. Specifically, repairs should be looked at for a progress report to be provided on how this has been improved. SA advised Committee that when they start the first audit, they could look at the repairs as a special task and provide a verbal update at the Committee meeting following the audit.

DCEO/DFCS advised Committee that the in-person inspections have not commenced due to staff resources, however the phone checks with tenants are being carried out.

- Would be good to include the inspection performance as part of the quarterly reports presented to Board. The CEO confirmed that the quarterly KPI report has been updated to include post inspections.
- The DCEO/DFCS also stated that the GDPR audit was taking place in March 2025 which was later than usual due to some anticipated changes to the legislation being introduced later this year. The audit report would therefore most likely be presented to the June 2025 Audit and Risk Committee.

The Chair of the Audit and Risk Committee offered members the opportunity to meet with the Internal Auditor privately without staff in attendance however the Committee did not feel that this was necessary.

The Committee:

- ❖ **Reviewed and approved the draft Internal Audit Plan for 2024/25**

The Chair thanked Siobhan for attending the meeting.

Siobhan Archibald left the meeting

| | | |
|------------|---|--|
| 5. | Minutes of Previous Meeting | |
| 5.1 | Minutes of meeting held on 9 November 2023 The minutes were approved by M Vass and seconded by M Griffiths. | |
| 6. | Matters Arising Schedule The schedule was presented to the Committee. The Committee ❖ Approved the Matters Arising Schedule. | |
| 7. | Health & Safety | |
| 7.1 | Health & Safety Exception Report – SHR RAAC The CEO confirmed that the return was submitted to the SHR confirming that the 4-step process was followed and no RAAC was found. No response has been received from the SHR regarding the information submitted. | |
| 7.2 | Health & Safety Audit Reports and Action Plan Updates The DCEO/DFCS advised Committee that iHasco training has commenced and good feedback on the new training platform has been received from staff. We will be looking to expand the training available for staff. The Audit report from ACS was a good report with only low-level recommendations highlighted. The Committee raised the following comments / queries. <ul style="list-style-type: none"> • Following on from the recent incident in Doune, there is a health and safety issue for residents who feel that Doune is housing a disproportionate number of homeless referrals from Stirling Council and that these tenants are being housed adjacent to vulnerable people. This is a reputational risk for the Association. • With regards to the reputation of the Association, there are also ongoing anti-social behaviour issues in Woodyard Court in Doune with constant police presence. The CEO advised that the issues in Woodyard Court are being dealt with in line with our Anti-Social Behaviour Policy and Procedure by the staff. With regards to other issues, the local authority has a statutory obligation to rehouse people who are homeless and the Association has an obligation to take a certain number of referrals through a Nominations Protocol Agreement. It is difficult to find justifiable reasons to refuse a referral. The CEO confirmed there was no health and safety issue with the property in Doune itself. | |

| | | |
|-----|---|--|
| | <ul style="list-style-type: none"> • There should be support put in place as part of the Housing First approach. We need to make sure that when we are accepting referrals that this support is in place. It was suggested that tenants should complain to local councillors to raise the issue of lack of support for cases that are being housed by the Association. • Housing First was set up to include support and this has generally been successful. The Housing Services manager should raise the issue of support in this case with Stirling Council. <p>The Committee</p> <ul style="list-style-type: none"> ❖ Noted and approved the contents of the report and the supporting documents. ❖ Noted that there have been no health & Safety incidents to report since last meeting. | |
| 7.3 | <p>Health & Safety Competency Framework and Training Needs Analysis (TNA) Annual Review</p> <p>The CEO advised that only minor changes have been made including the addition of iHasco as an approved training provider, additional training, updating course titles and updating of a job title.</p> <p>The Committee raised the following comments / queries</p> <ul style="list-style-type: none"> • It is good to see that mental health awareness course has been added for staff as this is an important area that everyone should know about. <p>The Committee</p> <ul style="list-style-type: none"> ❖ Noted the contents of the report. ❖ Approved the Competency Framework and TNA and made recommendation to the Board that this be adopted. ❖ Noted that the delivery of mandatory and essential training will be prioritised and a best endeavours approach adopted to the delivery of desirable and optional training as resources allow/specific training needs are identified. | |
| 8. | RSG Key Risks - Confidential | |
| 8.1 | <p>Strategic Risk Themes and Appetite, Revised Risk Appetite Statement and Revised Risk Management Framework</p> <p>Confidential Report</p> | |
| 9. | Resources Update Confidential | |
| 9.1 | Confidential Board and Staffing Update including Board Development Plan | |

| | | |
|-----|---|-----|
| | Confidential Report. | |
| 9.2 | RSG Succession Plan Senior Staff Annual Review - Confidential Confidential Report | |
| 9.3 | HR Report SMT 360 Survey – Confidential Confidential Report | |
| 10. | Governance – No reports | |
| 11. | Action Tracker The updated Action Tracker was presented to the Committee with no outstanding actions. The Committee: ❖ Approved the Action Tracker | |
| 12. | Any Other Competent Business The Chair advised that RSHA Board members had attended the SFHA session on retro fit in rural housing with members of staff. The CEO advised that the session did not provide any new or updated information.. | |
| 13. | Date of next meeting Audit and Risk Committee: Thursday, 27 June 2024 at 2.00 p.m., via Zoom LC submitted her apologies for this meeting. It was agreed that members of Audit and Risk Committee would be contacted regarding attendance at the June meeting to ensure a quorum. <i>Meeting ended at 7.47p.m.</i> | CSO |