Diverse Academies Trust
Minutes of the Audit and Risk Committee Meeting
Wednesday 4 June 2025 at 4.30pm, held via Microsoft Teams.

Quorum required:2
Committee members present:

Trustee name	Initials	A = absence
Mrs M Blore	MB	
Mr M Quigley MBE	MQ	
Mr J Robertson	JMR	
Mr I Storey (Chair)	IS	
Mr R Vizma	RV	

In attendance (staff or other invited persons):

Staff name	Initials	Role	A = Absence
Mr D Cotton	DC	Chief Executive Officer and Accounting Officer	A
Mr G Corban	GC	Chief Operating Officer	
Mrs V Williams	VW	Head of Corporate Affairs	
Mr N Clark	NC	Internal Auditor, WGB	
Mrs J Harrison Hill	JHH	Company Secretary and Governance Professional	

Agenda item number	Item	Action by who/when
1. ARC/61/2425	**Apologies for absence** Apologies for absence were received and agreed from Mr D Cotton.	
2. ARC/62/2425	**Declaration of interest and any changes to be advised** There were no declarations of interest, either direct or indirect, for any items of business on the agenda. The chair asked if anyone had any declarations to update. Trustees confirmed that the declarations given at the beginning of the academic year were correct.	
3. ARC/63/2425	**Minutes of the meeting dated 26 February 2025** The minutes of the meeting, having previously been received were agreed by the chair.	
4. ARC/64/2425	**Matters Arising:** See action log on next page 6 and 7.	
5. ARC/65/2425	**Internal Audit** **Documents:** 3 Year Audit Plan, Cyber security report, Health & Safety report, Review of last year's audit recommendations, Management response to audit recommendations were previously received by the committee. Mr Clarke, Internal auditor, discussed the internal audits reports received by the committee. Explaining how the reports detailed scope	

	of the audit, work undertaken, grading, recommendations and areas of good practice. Summary of reports:	
ARC/66/2425	Cyber Security audit- Overall grading substantial, with 2 medium and 2 low recommendations. **Trustees referred** to the timings of testing the cyber incident response plan, and discussion was held on the testing during term time and impacts on operational actions.	
	Action: Mr Corban to discuss with Head of IT scenario testing for cyber incident response inside of term time for real life scenario planning.	GC
	Trustee asked for clarification regarding the discrepancy between the six areas identified as underperforming and the four recommendations provided. Observing that not all areas with lower scores led to actionable recommendations. Concerns were expressed about the lack of transparency in understanding the ranking contributing to the final recommendations, and how the failures in these areas are to be improved if no information**.**	
	Action: Mr Clarke to provide further clarification on how individual area scores are linked to specific recommendations and what constitutes a failure significant enough to warrant a recommendation.	NC
	Trustees referred to the medium recommendation regarding suppliers' cyber security checks, querying if this was complete due to action date of May 2025. Mr Corban confirmed that the action is complete, cyber security checks of suppliers are in the DPIA process and also part of procurement checks.	
ARC/67/2425	Health and safety audit- the committee were informed that due to the report having recently been completed, there were currently no management responses. The overall grading was strong, with 1 low graded recommendation.	
ARC/68/2425	Follow up review audit-overall grading was strong. The committee were informed that the report reviewed recommendations from 2023/24 audits. It was noted that recommendations from the previous audit year had now been completed with one exception, which was risk management recommendation. This item has been partially implemented, with the development of a training schedule to maintain risk management training records started but not yet completed in full. Following **trustees querying** the part implementation, Mr Corban clarified that while the rollout of training has commenced, it has not yet been completed across all areas. He noted that implementation is being carried out alongside other organisational priorities.	
ARC/69/2425	3-year audit plan was then discussed. Trustees discussed that the Board had been asked to consider any areas to add to the plan and raise them ahead of the committee meeting, no areas had been identified from this request. **Trustees queried** if anything from the Kreston report would suggest an area for internal audit to review. Mr Clarke suggested areas such as equality diversity and inclusion, artificial intelligence, sustainability and carbon management as considerations for future year audits. Mr Corban referred to the Kreston report, which identified areas for focus in the coming year, including health and safety, building maintenance expenditure, assurance that estate funding is being appropriately used, and risks associated with the end of PFI contracts. **Trustees were asked** to consider the desired scope for the health and safety audit and whether the audit scope should be expanded to include these areas.	

	Payroll was also mentioned as an area where the Kreston report could inform the audit scope. **Trustees considered** cyber security monitoring, noting that significant developments can occur within a three-year period. While audits are conducted every two to three years, trustees suggested the possibility of more regular reporting on key areas, potentially through an appendix to the Accounting Officer's report, to supplement the formal audit process. Discussion was held on AI, AI risks, training, connections to data security and what work was being undertaken to ensure safe use. **Action:** Mr Corban and Mr Cotton to provide update at next committee on work undertaken for control and assurance regarding AI. **Trustees raised concern** regarding future threats regarding EHCP requirements with potential for one third of cohorts having a SEND diagnosis and the need to prepare for this. Mr Corban discussed the work being undertaken by the SEND lead concerning the adaptation of curriculum and teaching and learning approaches. The committee discussed the increasing number of Education, Health and Care Plans (EHCPs) and the associated potential risk that EHCPs may be withdrawn in the future, which could have implications for funding. It was suggested that this area may warrant a deeper dive through internal audit to assess the robustness of current practices. It was proposed that this topic should be included in the internal scrutiny report to provide assurance to Trustees. **Action:** Inclusion in Internal scrutiny report on assurance for SEND risks. **Trustees asked** if Standards and Outcomes Committee were also considering the use of AI in education across the Trust. Mr Corban explained that AI was added into the strategic objectives (SO2) during the year, reporting on the use of AI in curriculum and marking assessment feedback should be captured in the SO2 reports at the end of the year.	GC GC/DC
6. ARC/70/2425	**Risk management** Documents: Risk Register (January 2024, June 2025 Master) were previously received by the committee. Mr Storey provided the committee with a recap of the year regarding work undertaken on the risk register through the committees, reviewing the register, risks, mitigations, scoring and developing risk appetite statements. The June 2025 corporate risk register incorporates the changes following the committee reviews, and it is intended that this will be approved at the Board meeting on 9 July 2025. **Action** The committee agreed, once changes have been approved, for the format to change from excel to word to allow track changes. **Trustees discussed** the narrative risk appetite statements and use of low, medium, high not aligning with the risk policy which uses the AMCOE risk appetite model. Following discussion, it was agreed that the AMCOE descriptors add more weight to open conversations, and in the following year committees will move the risk appetites to follow the AMCOE ratings. **Action:** Committees to move risk appetite ratings to AMCEO model over 2025/2026. A Discussion then followed on the link between scoring mitigations, and risk appetite with some tolerance narratives not matching the post risk mitigation scores.	GC Board committees.

	It was considered that at this stage of the process the narrative statements were the most important recognising future work required to match narrative grading to scoring. Discussion to be held at next committee meeting on how further work can be undertaken to align and evolve the risk register. **Trustees agreed** for the current corporate risk register June 2025 version to be shared with board with further work to be undertaken in future.	
ARC/71/2425	Exceptions reporting Documents: Risk management integration report, and Kreston Report were previously received by the Committee. Mr Corban explained that work is being undertaken to enhance reporting through linkage with Local Academy Committees issues logs, external horizon scanning document, Kreston report and reporting into Audit and Risk committee. **Trustees questioned** whether risk appetite is discussed at the Local Academy Committee (LAC) level. It was noted that while risks and opportunities are reviewed with the organisation's overall risk appetite and objectives in mind, this is not currently part of the conversation at the local level. Noting there is a need to build this into LAC discussions. This includes ensuring that risk appetite is clearly communicated both upwards to trustees and downwards to LACs, and that LACs understand how to use it as part of their ongoing assessment of local risks. **Trustees then queried** if training and technical advice are provided to support this process. It was confirmed that training and technical advice are being considered to help LACs engage with the risk appetite framework effectively. **Trustees also questioned** whether LACs should be able to set their own risk appetite. It was acknowledged that many risks are generic and shared across academies, whilst also acknowledging that there are some that are discrete and specific to individual academies. However, it was clarified that there is no intention for LACs to define their own risk appetite. Currently, when LACs discuss risks, these discussions are not aligned with the risk appetite set by trustees. There is a disconnect between local risk discussions and the overarching framework, and the new risk statements need to create a stronger connection between the two. **Trustees commented that** the risk register should be shared with LACs to show strategic risks for awareness and supporting the process of academies. Should LACs consider an issue rises to the level of corporate level of risk, a process to flag for consideration by the committee as a two-way process is required. Mr Corban stated that next year, as continue to improve approach to risk management approach and reporting system, this should become more clear.	
7. ARC/72/2425	**Technology and Information risk register review** The committee agreed to review the technology and information risks in the committee meeting on Monday 15 September 2025.	
8. ARC/73/2425	**Accounting Officer Report** Document: Internal Scrutiny Report June 2025 was previously received by the committee. Mr Corban discussed with the committee the development of the report previously known as Accounting Officer report now referred to as Internal Scrutiny report. The report is specifically connected	

	to assurance around internal scrutiny, reporting on risk, compliance, and reporting on assurance around areas such as stakeholder feedback, quality assurance. Mr Quigley left the meeting at 17.51. The report development is moving from compliance to a broader internal assurance approach. The Committee noted the report and not further questions were raised. Mr Clarke left the meeting at 17.52	
9. ARC/73/2425	**Policy Approval** Documents: Policy approval Summary, Whistleblowing Policy and Risk Management Policy were previously received by the Committee. Mr Corban informed the committee that work had been undertaken to create shorter policy statements. No significant changes had been made to the whistleblowing policy. The **committee approved** the whistleblowing policy. Trustees referred to the risk management policy with discussion held on considering how LACs feed into the risk policy, and references within the policy to AMCOE ratings. The committee discussed the ongoing development of risk, working towards aligning the risk descriptors with the AMCO rating model. This transition will enhance consistency and provide a more nuanced understanding of risk. The committee acknowledged that a single word descriptor can never fully capture the complexity of risk appetite. The narrative statements provide more context to the risk level. In line with this future worked the committee discussed the policy statement and removal of some of the wording which was considered operational and not yet practice. **Action:** 2.3.2 and 2.3.3 to be removed from the policy statement as this is not in line with current risk appetite statements. The Committee **approved** the risk policy subject to removal of section 2.3.2 and 2.3.3.	

10.
ARC/74/2425
	Issues referred to/from the Board
	• There were no issues referred from the Board.
	• The Committee referred the corporate risk register June 2025 to the Board for approval.
	• The committee reviewed the internal audit reports and management responses:
	    o 3 Year Audit Plan, Cyber security report,
	    o Health & Safety report,
	    o Review of last year's audit recommendations,
	    o Management response to audit recommendations
	• The committee reviewed the Internal Scrutiny Report June 2025
	• The Whistleblowing policy and Risk Management policy was approved by the committee.
	• The committee agreed for the corporate risk register June 2025 Master to be shared with the Board for approval.
	• The committee discussed the review of risk appetites for 2025/26 to be aligned to AMCOE ratings
	• The Committee discussed the risk management integration and flow of risk information.	

11. ARC/75/2425	**Determination of confidentiality of business** Trustees considered whether anything discussed during the meeting should be deemed as confidential. It was resolved:	

	That no confidential information had been discussed **Equality Act consideration** There had been no Equality Act implications **Nolan Principles** Attendees were content that all decisions made adhere to the seven Nolan principles.	
12. ARC.76/2425	**Date and time of next meeting:** Monday 15 September 4.30pm, via Microsoft teams	

Agenda item 5: Matters Arising:
ARC/64/2222

Minute reference	Meeting date raised	Action required	Owner	
ARC/34/2425	13/11/2024	**G&P Committee referral of risks 2.2 Action**: Refer risk 2.2 ineffective leadership to board for conversation on where this sits if need an additional category for board on risk register.	J Harrison Hill	This item was resolved under agenda item 6 review of risk register and changes to risks. This item is now complete.
ARC/48/2425	26/02/2025	Internal Audit update: Safeguarding resources audit. Action: : Complete a check on the consistency of provision of information to LAC for safeguarding incorporating My Concern.	G Corban	Mr Corban updated that Principals reporting to LACs through the safeguarding report from Mr Knight and the principal report from MyConcern. This item is now complete
ARC/51/2425	26/02/2025	Risk register: Action: Refer to Standards and Outcomes Committee query on movement between pre and post mitigation for risk 1.3 for Chief Education Officers to comment on impact movement from 5 to 3.	Agenda S*O (JHH)	This item was resolved under agenda item 6 review of risk register and changes to risks. This item is now complete.
ARC/54/2425	26/02/2025	Technology and Information risk Action: Risk appetite statements for 6.2 to be amended from medium to low.	G Corban	This item was resolved under agenda item 6 review of risk register and changes to risks. This item is now complete.
ARC/57/2425	26/02/2025	Policy Approval Action: Strengthen the Risk Management policy wording to ensure board committees take ownership of risks within their remit. There was also a discussion on item 2.3.2 of the policy regarding risk appetite, which refers to three levels: strategic, tactical, and operational. Previous discussions had removed these levels, so the wording	G Corban	This item was discussed under agenda item 9. This item is now complete.

		needs to be aligned with those prior decisions. Action: Amend the wording to remove 'strategic, operational, and tactical' and align it with current processes.		

The meeting closed at: 18:06

Minutes agreed by Chair: