

Minutes of an electronic Corporation meeting held at 1800 on 08 March 2021.

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| **Present** | Jo Birch | Christine Chisholm | Jan Edrich  (Int Principal) |
|  | Jean Fawcett | Phillip Fulton | Sue Grant  (Chair) |
|  | Jesmin Haq | Kerry Hood | Steph Lawrence |
|  | Neil Myerson | John O’Sullivan | Rob Payne |
|  | Peter Thompson |  |  |
| **In Attendance** | Nicola Caiger  (Dir I&P) | Ana Guimaraes  (Dir Curr) | Paul McCormack  (FD) |
|  | David Alder  (Dir Mar&Ad) | Harpreet Nagra  (DP) | Sian Williams  (Dir Curr) |

**PART ONE**

**60/20 ELIGIBILITY, QUORUM AND OPENING REMARKS**

1. No notice had been received of any Member becoming ineligible to hold office, the meeting was quorate and there had been no interests declared.
2. Chairs Opening Remarks. The Chair:
3. welcomed all to the meeting and thanked all involved, staff and students, for their professionalism and commitment throughout the lockdown and in welcoming the students back into College today with the associated complication of administering the Covid testing process;
4. also welcomed David Alder, the new Director of Marketing and Admissions who had recently taken up post, to his first Corporation meeting; and
5. explained that the Panel appointed by the Corporation to oversee the recruitment for, and to recommend appointment of, the new Principal had completed the process and had unanimously decided on a high quality recommendation. Necessary references had been requested and would be received in the near future, until they were received, evaluated and agreed the Candidate name would remain confidential; Members would be advised electronically in the next day or so. **(Action 1)** It was proposedthat the recommendation be approved in principle and that the Corporation Chair is delegated to confirm the appointment after consideration of the final process; that was unanimously approved. **(Action 2)** Post appointment process such as press releases would then be completed.

**The information was noted and received.**

**Actions had been identified (Register 69/20)**

**61/20 STANDING ITEMS**

1. The minutes from the Corporation meeting (Part 1) held on 02 February 2021 were confirmed for electronic signature. **(Action 3)**
2. Matters arising. There were no matters arising.
3. Actions. Actions from the last meeting were discussed and confirmed as listed.

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| See referenced minute for full detail | | **Resp** | **Date** |
| **Action 1** | 45/20b. Appreciation for stakeholders’ response to Covid. | **Chair** | **wie** |
| **Action 2** | 45/20c. Items taken out of Agenda order. |
| **Action 3** | 48/20. Last Minutes (14.12.21) confirmed for signature. | **Clerk** |
| **Action 4** | 49/20a. Retention data to next meeting, | **DP** | **08.03.21** |
| **Action 5** | 49/20d. Assessment detail tbc asap after receipt | **asap** |
| **Action 6** | 50/20e. Remote delivery effectiveness to the next meeting. | **08.03.21** |
| **Action 7** | 50/20f. Student destination detail to next meeting. |
| **Action 8** | 50/20f. Student member to discuss social media opportunities. | **JB/DP** | **wie** |
| **Action 9** | 51/20a. Gatsby progress detail to next meeting. | **Dir IP** | **08.03.21** |
| **Action 10** | 52/20a. PID Policy approved. | **Dir HR** | **wie** |
| **Action 11** | 52/20b. SPH Disciplinary Policy provisionally approved. |
| **Action 12** | 53/20f. Provisional deficit parameter set at <–(£500k) | **FD** |

1. Urgent Business. There was no urgent business requested.

**The information was noted and received.**

**Actions had been identified (Register 69/20)**

**62/20** **QUALITY**

The Report would update Members on Key Performance Indicators (KPI) and Teaching, Learning and Assessment (TLA).

1. Curriculum Reviews. Curriculum reviews continued and had prioritised underperforming in the previous year as identified in the Self-Assessment Report (SAR) and previous curriculum audits. The robust process included Ofsted style “deep dives” examining a range of areas discussed in the paper. Poorly performing parts in each area had been specifically identified to focus rectification and avoid lower assessment of the whole. Five reviews had now been completed and the results had been tabulated and RAG rated for ease of reference with comparisons for the last 2 years; each was considered individually and the findings explained. Plumbing was the sole “red rated” area, mainly through staff shortages and sickness levels. Progress of staff members completing additional work to improve was being closely followed up. Four further reviews were planned for completion in the near future.
2. TLA. A total of 46 classroom visits/online observations had been completed
3. 34 (73%) were assessed “low risk”;
4. 10 (22%) including 3 new tutors currently receiving Quality Improvement Facilitators (QIF) support were “medium risk”; and
5. 2 (5%) required re-observation and 2 will receive capability hearings.
6. Classroom 15 minute observations for the 23 (17 curriculum & 6 LIFE) “below expectations” teachers from the previous year had been suspended until re-opening; prior to the suspension 16 had been completed; assessments were: 10 “low risk”; 2 “medium risk” and 4 for re-observation. The remaining 7 observations would be rescheduled in the near future:
7. Student Survey. Covid related challenges had necessitated a focused “open box” survey, which had been distributed to students; the results would be administered by the Heads of Departments (HoD); outcomes would be fed back to the Corporation. **(Action 4)**
8. Information & Learning Technology (ILT) Strategy. Development work with Harlow College and Edutech (combined use of computer hardware, software, and educational theory and practice to facilitate learning) continued and a summary of progress was included in the Report. The 13 ILT champions mentioned in the Report had been recruited internally and were rewarded for the additional work through Continuous Professional Development (CPD) with Harlow and the JointInformation Systems Committee (JISC) and Edutech organisation. The progress was welcomed.

**The information was received and noted.**

**Action had been identified (Register 69/20)**

**63/20 CURRICULUM**

1. Key Performance Indicators (KPI). The KPI had been considered and discussed at the last meeting of the Quality Advisory Group (QAG). Attendance outcomes stood overall at 85% and 19+ at 81% (2020 86% & 82% respectively); punctuality for both was 98% in line with the KPI and 16-18 retention at 95% and 19+ at 96% (2020 98% & 86%). Students not meeting KPI were subject to closer monitoring of engagement and it was noted that attendance and engagement were only one percent apart. Curriculum area performances were then considered individually and remedial actions were discussed. During general considerations the self-evident relationship between learning, engagement and attendance was discussed, it was confirmed as having improved although insufficiently to break out of the “concern” parameters. This was then discussed, attendance fluctuated across the cohort without influencing the total outcome and generally the overall performance during lockdown had been acceptable and had been above forecasts. Retention had also been reduced by 3%; this had been largely due to lockdown which had demotivated relatively high numbers of those formerly intending to progress to a second year of their courses.
2. English and Maths (EAM). EAM attendance was considered in particular, this was monitored each week informing consequent rapid behaviour meetings, which were working well, the numbers were:
3. Functional Skills (FS) English 64%;
4. FS Maths 77%;
5. GCSE English 44%; and
6. GCSE Maths 48%.

The importance of both FS and GCSE EAM was explained and stressed to students regularly and establishment of a working group to enhance planning for the next academic year was planned. Members have been keeping a close eye on this provision particularly during COVID and requested regular updates in regard to this provision, particularly the level of engagement and the different T&L pedagogies that need to be used to provide support to a wide variety of students.

1. Student Review Board (SRB), the full schedule of 5 SRB was at Annex 1; the first 1 had identified 608 “at risk” and the second SRB had identified 543, outcomes and progress were fully detailed in the accompanying paper and were discussed. Annex 2 summarised the consequent interventions; Annex 3 summarised and compared percentages of those “at risk” in each curriculum area; Annex 4 summarised “Barriers to Progress” and Annex 5 tabulated the predicted achievement. The QAG meeting had identified common elements in SRBs 1&2 for example in ILT and Sport areas and this was explained as a positive and the issues were being addressed. It was suggested that English for Speakers of Other Languages (ESOL) students could benefit from a dedicated Information Technology (IT) helpline; there was in existence already a specific cross-college email address ([servicedesk@oaklands.ac.uk](mailto:servicedesk@oaklands.ac.uk)) and that would be more widely publicised. **(Action 5)** Also ESOL Student had been provided with pre-lockdown “front loaded” skills. Members noted that the SRB processes were becoming embedded and were proving successful and were pleased with the level of engagement from staff. Thanks were recorded to all involved in the process.

1. Student Destinations. Work continued on student destination data and was currently under review at area and group level and would be presented in 2 elements: one for leavers and one for leavers/returners; 93% and 98% respectively (of the total completion rate) had been completed.

**The information was received and noted.**

**Action had been identified (Register 69/20)**

**64/20 HEALTH AND SAFETY (HAS) REPORT**

* 1. Report. The HAS Committee, in accordance with all relevant regulations met each half term and advised the Principal directly on associated matters. The SMT received a full report each month; the content, listed in the paper was noted as comprehensive. The full and clear annual report was then considered and discussed. The tabulated numbers of accidents, incidents and “near misses” during the year was compared with the two previous years and as expected was lower since the college had been closed for a proportion of the time. Care was taken with analysis of near misses since this could be an indicator of susceptibility to a more serious breach of safety. Some minor presentational amendments would be made to Accident categories (2.3) **(Action 6)** and the confirmation that there had been no reportable incidents under the “Reporting of Injuries, Diseases and Dangerous Occurrences Regulations” (RIDDOR) reassured Members. The relationship between the College HAS Officer and the building contractor was considered; pre handover liaison with the Homestead had worked well but it was suggested that more regular meetings with “Fusion” to co-ordinate the change of responsibility on future completions would be beneficial and it was agreed to examine the feasibility. **(Action 7)** Assurance was sought and given that fire doors at the Welwyn Garden City (WGC) campus were safe and secure, they were all being upgraded but there was no hazard. Assurance was also provided that all necessary Covid related processes had been completed. The report was welcomed.

b. Members were cognisant that the reopening of the site could bring with it renewed H&S issues. In particular, the Capital Projects group had discussed the fact that a large part of the current building works had taken place whilst the site was closed. It was reported that significant work and liaison had taken place with the contractors to ensure that the site was safe and tidy for the return of staf and students. This would be closely monitored.

c. Policy. The HAS Policy had been thoroughly scrutinised, a couple of minor isses were raised along with the change of title for the Campus Facilities Manager. The Policy was approved subject to incorporating these changes. **(Action 8)**

**The information was received and noted.**

**Action had been identified (Register 69/20)**

**65/20 FINANCE AND RISK**

1. Management Accounts. The current situation was unfavourable with an overall deficit of c(£963k) against budget; income was forecast lower than budget and that was clearly explained, payroll expenditure was adverse by c£67k prompted by the early staff bonus payment and would recover as the year progressed; non-payroll costs had been profiled against last year’s actuals. Income and expenditure variances had been tabulated for ease of reference and it was noted that the data did not include provision for additional effect of lockdown 3, which remained unquantifiable. A table at Para 4.1 compared the income and cost lines and indicated that the present outturn estimated was -(£963k) and it was clearly explained that insurance and soil-fill payments had reduced that from a higher number. However, that could reduce still further as the year progressed and, for example, further information was received about clawback parameters, as recruitment was severely impacted by Covid nationwide. The balance sheet remained positive with a strong cash balance split between College and the St Albans capital development. The CFF indicated that ample cash would be available for both projects at year end. Identified Risks and Opportunities would be updated at future Corporation meetings. Recently there had been relatively frequent invitations to bid for specific governmental and local authority grants and assurance was sought and received that close attention was given to the availability of such opportunities. The accounts were **noted**. Members were very concerned with regards to the level of deficit and requested that work should be focussed to reduce this figure. Regular reporting and scrutiny would be carried out between the executive and members
2. FE Commissioner (FEC). The FEC was informed of College financial probity and health by reference to 6 published benchmarks, these had now been updated and were included in the FEC letter at Annex 3. For the current year the detail was in scope to justify a “Good” Financial Health grade but that may not be assured in 2021.22.
3. Key Performance Indicators (KPI). The Finance KPI (Annex 2) schedule had been updated to account for the FEC update; key differences were listed in the document and individually explained. The Education and Skills Funding Agency (ESFA) Financial Heath score remained at “Good”. The KPIs were **noted.**
4. Purchases over £100k. The requirements of the Financial Regulations in relation to purchases over £100k were fully explained in the paper and were discussed; this detail referred only to Purchase Orders that formed part of an approved budget, for example the Capital Budget. There were 2 PO over £100k detailed in Annex 4, DLA Architecture had submitted two; dated 11 February 2021 namely:
5. £216k (Gateway Building – Phase 2 Works RIBA stages 3-6); and
6. £108k (RIBA Stage 2 – Concept design)

They were **noted**.

1. Budget 2021.22. Work on the 2021.22 draft budget to the limits outlined at the last meeting continued and the initial proposal should be ready for consideration at the next meeting. That was **noted. Again the executive was asked to work closely with members to consider the assumptions and opportunities.**
2. Risk Management (RM). The Risk Register, at Annex 4, had been reviewed by the SMT on 23 February 2021 and the scoring methodology leading to the residual grades summary on the “Heat Map” was explained in the document. The “Heat Map” was then scrutinised; there had been no changes since the last meeting. There were currently 32 Risks associated with the Strategic Themes, 2 Red (High), 23 Amber (Medium) and 7 Green (Low) and the RM detail was **noted.**

**The information was noted and received.**

**66/20 PRINCIPALS REPORT**

The Principal’s Report updated on points not included on the agenda or considered elsewhere, the report had been circulated well in advance of the meeting and was received, but of note were:

1. Key Performance Indicators (KPI). The KPI (Annex 1) were noted; information contained in other agenda items was signposted.
2. Coronavirus Update. The requirement to develop capacity for lateral flow testing from today had been met and had worked well;the full associated Risk Assessment was attached at Annex 1 and was noted.
3. Applications. The Dir(M&A) updated on the present situation. There were currently 2099 first choice applications, an increase of 28% over the previous year and this had translated into 1799 offers. Personal visits to the campus had clearly not been possible but a number of “keep warm” and informative opportunities had been arranged. The conversion rate from application to enrolment was currently 65%, which compared well with the anecdotal NA of 60%, but efforts to improve the number were a high priority. The opportunity, often offered by universities to prospective students, for face to face discussion with those currently involved in the prospective discipline, was discussed and unfortunately would be impractical. Members welcomed the sharing of this data and also looked forward to receiving a new recruitment strategy in the future from the recently appointed Director of Marketing and Admissions.

**The information was received and noted.**

**67/20 URGENT BUSINESS**

There had been no urgent business requested.

**68/20 DATE OF NEXT MEETING**

The next meeting would be at 1800 on 10 May 2021.

**69/20 ACTION REGISTER**

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| See referenced minute for full detail | | **Resp** | **Date** |
| **Action 1** | 60/20b(ii). New Principal identity to be circulated. | **Chair** | **asap** |
| **Action 2** | 60/20b(ii). New Principal appointment approved in principle; and  Chair delegated to confirm appointment |
| **Action 3** | 61/20. Last minutes (01.02.21) confirmed for signature. | **Clerk** | **wie** |
| **Action 4** | 62/20d. Student survey results tbc to Members. | **DP** | **asap** |
| **Action 5** | 63/20. IT helpline information to be publicised. | **Dir Curr** | **wie** |
| **Action 6** | 64/20a. Amendments to tabulated detail to be completed. | **Dir IP** |
| **Action 7** | 64/20a. HAS Officer liaison with Fusion to be enhanced. |
| **Action 8** | 64/20b. HAS Policy approved. |