UHI | INVERNESS

Meeting	Board of Management
Date and time	Tuesday 13 December 2022 at 4.30 p.m.
Location	Online Meeting via Microsoft Teams

Board Secretary
06 December 2022

AGENDA

The timings on this agenda are indicative only and may extend beyond times highlighted.

Welcome and Apologies

Declaration of Interests and/or any Statement of Connections or Transparency Statements.

16:35 - 17:00 **PRESENTATION – SECTOR DEVELOPMENT PLANS**

Vice Principal – Academic and Research and Tertiary Education Leaders

ITEMS FOR DECISION

17:00 -17:05 **1) MINUTES**
a.) Meeting of the Board of Management held on 25 October 2022
b.) Note of Closed Session (CSN102022) of the Board of Management held on 25 October 2022.
c.) Note of Confidential Session (CN-01-102022) of the Board of Management held on 25 October 2022.

17:05 – 17:10 **2) OUTSTANDING ACTIONS**
Actions List

17:10 – 17:20 **3) POLICIES FOR APPROVAL:**
a.) Professional Development Policy
b.) UHI Safeguarding Policy

c.) Public Interest Disclosure Policy
d.) National Menopause Policy

ITEMS FOR DISCUSSION

17.20 – 17.30 **4) STUDENT ACTIVITY – 2022/23**
Report by Information Systems Manager

17.30 – 17.40 **5) HEALTH AND SAFETY ANNUAL REPORT**
Report by Interim Health and Safety Manager

17:40 – 18:00 **6) CONFIDENTIAL SESSION – UHI 24 – REVITALISATION PROGRAMME**

18:00 – 18:20 **7) PRINCIPAL'S REPORT**
Verbal Update from Principal

18:20 – 18:35 **8) FINANCIAL POSITION UPDATE**
Report by Vice Principal – Finance and Audit

18:35 – 18:45 **9) UPDATE ON SHORT LIFE WORKING GROUP**
Verbal Update from Chair of SLWG
Note of Meeting held on 23 November 2022

18:45 – 18:50 **10) REVIEW OF EXTERNAL EFFECTIVENESS ACTION PLAN**
Report by Governance Officer

18:50 – 18:55 **11) DRAFT MINUTES OF MEETINGS OF BOARD COMMITTEES (CONFIDENTIAL)**
a.) Chairs Committee held on 03 November 2022.
b.) Finance and General Purposes Committee held on 18 November 2022
c.) HR Committee held on 24 November 2022
d.) LT&R Committee held on 06 December 2022.

FOR NOTING

12) UHI UPDATES
a.) Minutes of University Court held on 15 June 2022.
b.) Minutes of University Court held on 21 September 2022.

13) AOCB

14) DATE AND TIME OF NEXT MEETING
07 February 2023 at 4.30 p.m.

If any member wishes to add an item of business to the Agenda, please inform the Chair and the Governance Officer as soon as possible. Additional items of business

will only be considered for inclusion in the agenda in advance of the start of the meeting.

UHI | INVERNESS

Board of Management

MINUTES of the HYBRID MEETING of the BOARD OF MANAGEMENT held via Microsoft Teams and Room 205 UHI Inverness Campus, on Tuesday 25 October 2022

PRESENT: Innis Montgomery, Chris O'Neil, William Campbell, Donald MacKenzie, Mark Sheridan, Russell Edwards, Kelly MacKenzie, Gillian Galloway, James Millar, Michael Beveridge, Dee Bird, Rojan Kumar Subramani, Arvinder Kainth, Amy Goodbrand & Matthew Millward

CHAIR: Mark Sheridan

APOLOGIES: Tina Stones, Sally Blyth, Stephen Sheridan

IN ATTENDANCE:
Vice Principal – Finance and Audit
Vice Principal – Student Experience and Quality
Vice Principal – Academic and Research
Vice Principal – Operations and External Relations
Lecturer – Early Years and Education
Access and Transition Co-ordinator
Access and Progression Manager
Estates and Campus Services Manager
Governance Officer

The Chair welcomed everyone to the meeting and provided apologies for the delay in the papers being circulated.

Declarations of Interests

No declarations of interest, statements of connections or transparency statements were noted.

Confidential Closed Session – Board Creative Space

A confidential closed session took place. This session provided the Board with creative space to discuss the LEEP Ahead Programme (Note of Session: CSN-102022).

Lecturer – Early Years and Education left the meeting

Access and Transition Co-ordinator left the meeting.

Access and Progression Manager left the meeting.

1. MINUTES FOR APPROVAL

a.) Meeting of the Board of Management held on 28 June 2022

Decision: The minutes of the Board of Management Meeting held on 28 June 2022 were **AGREED** as a correct record and were **APPROVED.**

b.) Confidential Note of Closed Session (CSN062022) held on 28 June 2022

It was highlighted that the date at the top of the Confidential Note of the Closed Session (CSN062022) was incorrect.

Decision: Pending the amendment of the date as noted above, the Confidential Note of the Closed Session (CSN062022) of the Board of Management Meeting held on 28 June 2022 was **AGREED** as a correct record and was **APPROVED.**

c.) Confidential Note of Discussion (CN-01-06022) held on 28 June 2022

Decision: The Confidential Note of Discussion (CN-01-062022) of the Board of Management Meeting held on 28 June 2022 was **AGREED** as a correct record and was **APPROVED**.

d.) Confidential Note of Discussion (CN-02-062022) held on 28 June 2022.

Decision: The Confidential Note of Discussion (CN-02-062022) of the Board of Management Meeting held on 28 June 2022 was **AGREED** as a correct record and was **APPROVED**.

e.) Confidential Note of Discussion (CN-03-062022) held on 28 June 2022.

Decision: The Confidential Note of Discussion (CN-03-062022) of the Board of Management Meeting held on 28 June 2022 was **AGREED** as a correct record and was **APPROVED**.

f.) Confidential Note of the Extraordinary Board of Management Meeting held on 13 September 2022

Decision: The Confidential Note of Extraordinary Board of Management Meeting held on 13 September 2022 was **AGREED** as a correct record and was **APPROVED**.

2. OUTSTANDING ACTIONS

The Estates and Campus Services Manager joined the meeting.

- **Partnership Agreement** – The Board noted that updates to the Partnership Agreement have ceased whilst the work streams from UHI 24 are conducted.

- **Business Solutions Team Presentation** – The Board was advised that the Business Solutions Team will present to the Board of Management in December 2022.

- **Procurement Strategy –** The Board was advised that it is anticipated that this strategy will be finalised by December. However, it was noted that APUC and the Procurement Team would be prioritising work in respect of UHI 24 which may have an impact on our anticipated timescale.

- **Finance Training –** The Governance Officer advised that finance training for Board members would form part of the Board Development and Training Plan which will be drawn up following the Review of the Code of Good Governance and our annual evaluation exercises.

- **Collaboration and Partnership – Role of Board Members** – The Board noted that developments in relation to this are included within the Board Action Plan.
  Decision: It was **AGREED** that this item can be removed from the list.

- **Code of Conduct** – The Governance Officer advised that members who have yet to return their signed acceptance of the Code of Conduct will be sent an email reminder.

- **Capital Budgets** – The Vice Principal – Finance and Audit provided the Board with confirmation of the BIS funding.
  Decision: It was **AGREED** that this item can be removed from the list.

- **Partnership Working –** The Principal advised that he was continuing to engage with potential partners over proposed partnership working.

3. POLICIES FOR APPROVAL

a.) Placement and Externally Supported Learning Policy
b.) UHI Student Carers Policy
c.) UHI Student Conduct Policy

The Board was advised that the above policies had been considered by the Learning, Teaching and Research Committee who recommended them for approval by the Board.

Decision: The Placement and Externally Supported Learning Policy, UHI Student Carers Policy and UHI Student Conduct Policy were **APPROVED.**

d.) Health and Safety Policy
e.) Food Safety and Allergen Management Policy
f.) Use of College Equipment and Network Access out with UK Policy
g.) FE Fee Waiver Policy

The Board was advised that due to quorum difficulties the above policies were not discussed at Committee. The Board noted that they have however been subject to the College's internal due diligence processes.

The Governance Officer advised the Board that the Vice Chair had highlighted some amendments to the Health and Safety Policy which the Board were taken through.

Decision: Pending the updates identified by the Vice Chair; the Health and Safety Policy was **APPROVED.**

Decision: The Food Safety and Allergen Management Policy, Use of College Equipment and Network Access out with UK Policy and FE Fee Waiver Policy were **APPROVED.**

4. SUB STRATEGIES FOR APPROVAL

The Principal provided the Board with a background to the development of the Sub Strategies and their link to both our overarching strategy and our KPI Matrix.

The Board welcomed these sub strategies; however, they highlighted the metrics which were not measurable such as optimism within the Campus.

Russell Edwards joined the meeting.

The Board discussed the role of CREATE and entrepreneurship and how this would fit into the Research and Innovation Strategy

a.) Talent Management Strategy
b.) Quality Assurance Enhancement Strategy
c.) Student Partnership and Engagement Strategy
d.) Access and Inclusion Strategy
e.) Digital Transformation Strategy
f.) Research and Innovation Strategy
g.) Tertiary Education Strategy

The Board noted that the above sub-strategies had been subject to Committee consideration.

Decision: The Talent Management Strategy, Quality Assurance Enhancement Strategy, Student Partnership and Engagement Strategy, Access and Inclusion Strategy, Digital Transformation Strategy, Research and Innovation Strategy and Tertiary Education Strategy were **APPROVED.**

h.) Marketing Strategy

The Board discussed the marketing strategy – noting that this strategy may be subject to change given the work being undertaken as part of UHI 24.

i.) Estates and Campus Operations Strategy
j.) Sustainability Strategy

The Estates and Campus Services Manager took the Board through the Estates and Campus Operations Strategy and the Sustainability Strategy highlighting:

- The key objectives of each sub-strategy.
- The development of our planning program.
- Methods which have been embedded within the team.
- Current Campus condition.
- 2040 Net Zero.
- The addition of consideration in respect of sustainability within the APUC framework.
- The support which the Estates and Campus Team are currently providing in respect of Health and Safety.

The Board welcomed these strategies and highlighted the student experience and the flexibility that was required to ensure that we can create additional space for students.

Decision: The Marketing Strategy, Estates and Campus Operations Strategy and Sustainability Strategy were **APPROVED.**

The Estates and Campus Services Manager left the meeting.

5. CONFIDENTIAL DISCUSSION – UHI 24 - REVITALISATION

A confidential discussion took place. This discussion provided the Board with space to discuss the UHI 24 Revitalisation Program (Note of Session: CN-01-102022).

6. PRINCIPAL'S REPORT

The Principal took the Board through his report highlighting:

- Current levels of morale within Campus.
- The outcome of the Early Student Satisfaction Survey which reported student satisfaction at 95%.
- The impact of the Cost-of-Living Crisis with students being offered free food for breakfast and lunch with the Board noting the anticipated costs involved in providing this.
- Student Numbers. The Board was advised of our concerns that we may not meet our targets in respect of HE. The Board noted that we are currently 15% below target. The Board was advised of the mitigating actions which are being taken in respect of student applications and numbers.
- The impact of any potential clawbacks.
- The potential for partnership working within the Sector.
- UHI curriculum review in respect of UHI 24.

The Board thanked the Principal for his update. The Board welcomed the feedback that morale within the College was high and highlighted that staff felt empowered in their roles due to the Distributed Leadership model which has been adopted.

The Board noted that whilst students were happy within Campus, we are aware that some continue to experience travel problems because of the bus service.

7. PRINCIPAL'S TARGETS

The Board discussed the KPI Matrix which had been circulated by the Operations and Commercial Manager ahead of this meeting and noted that they will continue to monitor the performance throughout the year.

The Board discussed the expectations for the sector in respect of economic transformation and sector reviews.

The Board welcomed the flexible approach being taken.

8. FINANCIAL POSITION UPDATE

The Vice Principal – Finance and Audit provided the Board with an update in respect of the Financial Forecast Return to the SFC. The Vice Principal – Finance and Audit advised that this return has been completed following the agreed SFC parameters and with conservative inflation drivers applied. The Board noted that we have provided the SFC with an update following our submission, which delivered an updated view in respect of our liquidity and expected student numbers and targets.

The Board was advised that the Finance and General Purposes Committee scheduled for 20 October 2022 had been postponed and that a Finance Update had been provided to the Chair of the Committee, the Chair of the Board of Management, and the Principal. The Board noted that whilst we can sustain low HE numbers for this year, there will be an issue if this trend continues.

The Board again discussed the expected savings from the UHI 24 workstreams and noted that we are continuing to look at where we can reduce our own costs. The Board highlighted the importance of international students.

Decision: The Financial Forecast Return to the SFC was given **RETROSPECTIVE APPROVAL.**

9. OUTCOMES AND SATISFACTION RATES

The Vice Principal – Student Experience and Quality spoke to her report highlighting:

- The impact of retention rates on our finances.
- Student success rates.
- Student satisfaction rates in respect of both the Early Student Satisfaction Survey and the National Student Satisfaction Survey.

The Board noted that whilst there is no official benchmarking for the sector, there is anecdotal evidence to show that we have performed better than others within the sector.

The Board welcomed the initiatives that have been put in place to support students.

10. REPORT ON SHORT LIFE WORKING GROUP

The Board was advised that the next meeting of the Short Life Working Group is scheduled for 23 November 2022. The Board noted that it is anticipated that the group will have completed their work by the end of January 2023.

The Principal provided the Board with an update in respect of the death of a student within the Halls advising that the Procurator Fiscal had informed us that there would not be a fatal death enquiry. The Board noted that the review which had been conducted by our legal team had been shared with the Procurator Fiscal.

11. OUTCOME OF THE REVIEW OF THE CODE OF GOOD GOVERNANCE

The Governance Officer spoke to her report. The Board noted that in addition to our annual review of the Code of Good Governance; the Governance Officer had undertaken a deep dive review to ensure our adherence to the Code.

The Board was advised that in respect of the annual review we had seen an increased response with eleven members completing the questionnaire.

The Board noted that an action plan had been drawn up following these reviews.

Decision: The Board **APPROVED** the Action Plan which will be uploaded onto our website and will be reviewed in six months' time.

12. COMMITTEE AND CHAIR EVALUATION FEEDBACK

The Governance Officer spoke to her report highlighting that the Committee and Chair Evaluation Feedback is undertaken annually as part of our compliance with the Code of Good Governance.

The Board noted that Chair feedback is discussed as part of the Board Member Evaluation process. The Governance Officer highlighted that we had received feedback in respect of Committee Membership and welcomed any expressions of interest from any members who currently sit on just one Committee to join the HR Committee.

The Board was advised that Jane Rhodes had stepped down from her role as Co-opted member to the HR Committee and Samantha Cribb had stepped down from her role as Non-Executive Member. Thanks were provided to both for the work they had undertaken during their terms.

As a result of the above and from the feedback within the Committee Evaluations, the Board noted that we will be looking to recruit a new Non-Executive Member to the Board along with additional co-opted members for the Audit Committee, F&GP Committee, and the HR Committee.

13. DRAFT MINUTES OF MEETINGS OF BOARD COMMITTEES (CONFIDENTIAL)

a.) Minutes from the Audit Committee held on 18 October 2022

The Board was advised that the Audit Committee held on 18 October 2022 had not been quorate. As a result, the Board noted that there were a number of Internal Audit items which required approval from the Board directly.

Decision: The Board **APPROVED** the following Internal Audit Items on behalf of the Audit Committee:

- BDO Follow Up Report
- BDO Annual Report
- BDO Internal Audit Plan for 2022-23
- Terms of Reference for 2022-23
- FES Audit
- EMA Audit
- SSF Audit
- Student Representation Audit

The Board also noted the contents of the following minutes of meetings:

b.) Minutes from Chairs Committee held on 01 September 2022
c.) Minutes from Estates Legacy Project Board held on 25 August 2022
d.) Confidential Note of Finance Update held on 20 October 2022
e.) Minutes from the HR Committee held on 22 September 2022
f.) Minutes from the Learning, Teaching and Research Committee held on 27 September 2022.
g.) Minutes from the Performance, Review and Remuneration Committee held on 01 September 2022.

14. UHI UPDATES

The Board noted the contents of the following:

a) Minutes of the University Court held on 16 March 2022
b) Minutes of the Regional Strategic Committee held on 03 May 2022.

15. DATE AND TIME OF NEXT MEETING

Tuesday 13 December 2022 at 4.30 p.m.

ITEM 02

UHI | INVERNESS

Board of Management – List of Outstanding Actions

29 June 2021				
Partnership Agreement	A progress update on the timeline will be taken and discussed at each Board meeting to ensure that the partnership is delivering on the agreed timescales. Part 1 has been agreed in principle. Part 2 requires additional work and a further draft is now being considered. This has been halted whilst further clarification and direction from the UHI Partnership Conference is followed through.	Principal	Ongoing	
05 October 2021				
Closed Session	Business Solutions Team to attend a Board Meeting to present to the board the pro-active ways in which they are working. The Board Secretary will ensure that all closed session presentations to the Board are scheduled within the Board Development and Training Plan for the year ahead.	Board Sec	Dec 22	
14 December 2021				
Procurement	The updated procurement strategy will be taken to the F&GP Committee for review and then to the Board of Management for final approval.	VP – F&A	Ongoing – December 22	
10 February 2022				
Finance Update	The Board Secretary will source appropriate financial training for Board Members – this will be included within a development training plan for Board Members.	Board Sec	October 22	

31 March 2022				
Code of Conduct	All Board Members to complete a revised registration of interest form. All Board Members to sign a fresh acceptance of the code form.	Board Members	Ongoing	
28 June 2022				
Confidential Annex – Partnership Working	The Principal will engage with potential partners and carry out due diligence in respect of proposals.	Principal	Ongoing.	

ITEM 03a

UHI | INVERNESS

Board of Management

Subject/Title:	Professional Development Policy
Author: [Name and Job title]	Fiona Gunn Professional Development Manager
Meeting:	Board of Management
Meeting Date:	13/12/2022
Date Paper prepared:	17/11/2022
Brief Summary of the paper:	The Board of Management is asked to approve the new Professional Development Policy. The Policy was approved at the Policy & Procedure Review Panel on 14/10/2022, at EMT Committee on 21/11/2022 and recommended to the Board of Management by the HR Committee on 24 November 2022.
Action requested: [Approval, recommendation, discussion, noting]	Approval
Link to Strategy: Please highlight how the paper links to, or assists with:: • compliance • partnership services • risk management • strategic plan • new opportunity/change	Links to strategic objectives: • To ensure professional practice of all staff are aligned to sector standards, industry best practice and our values. • To ensure that our staff have opportunities to develop and maintain their knowledge and skills to the highest industry and professional standards and are equipped for an increasingly digital world.
Resource implications:	Yes **If yes, please specify**: • Provision of protected time for professional learning. • Professional Development budget.
Risk implications:	Yes **If yes, please specify:** • Operational: Requirement for staff to be qualified and trained to relevant standards. • Organisational: Ability to maintain and develop our quality culture, including attracting talented employees committed to achieving our shared goals.
Equality and Diversity implications:	Yes **If yes, please specify:** • Equality of opportunity for all staff to engage with professional learning.
Consultation: [staff, students, UHI & Partners, External] and provide detail	Staff consultation: 15 days (feedback noted in appendix) JCC: 24/11/2022

ITEM 03a

Status – [Confidential/Non confidential]	Non-confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (S33)		Its disclosure would constitute a breach of confidence actionable in court (S36)	
Its disclosure would constitute a breach of the Data Protection Act (S38)		Other (please give further details)	
For how long must the paper be withheld? (express either as the time which needs to pass or a condition which needs to be met.)			

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

UHI | INVERNESS

PROFESSIONAL DEVELOPMENT POLICY

REFERENCE:

Lead Officer	Vice Principal – Student Experience & Quality
Review Officer	Professional Development Manager
Date first approved by BoM	
First Review Date	
Date review approved by BoM	
Next Review Date	
Equality impact assessment	October 2022
Further information (where relevant)	

Reviewer	Date	Review Action/Impact

DRAFT

Contents

1. Policy Statement and definitions 3
2. Legislative framework/related policies 4
3. Scope 4
4. Compliance 5
5. Monitoring 5
6. Review 5

DRAFT

1. Policy Statement

Professional Development
UHI Inverness is committed to fostering a culture which actively promotes and values the professional development of all staff to ensure that our staff have opportunities to develop and maintain their knowledge and skills to the highest industry and professional standards and are equipped for an increasingly digital world.

All staff
UHI Inverness expects all staff to engage in individual professional development relevant to their role. This development is equally valued across all job roles and fairness of opportunity and transparency are embedded into the decision-making processes around funding for development. Development requests are considered within the context of strategic and operational aims and objectives, and within the context of current resources.

Resources
UHI Inverness requires that resources be deployed efficiently and effectively. Decisions made regarding competing priorities for professional development funding are informed by legislative and contractual obligations and development specifically required to enable staff to comply with their job description.

Definitions

- **University partnership:** The University of the Highlands and Islands and the thirteen academic partners.
- **Lecturing staff:** Any member of staff employed under lecturing terms and conditions as set by the National Joint Negotiating Committee and National Recognition and Procedure Agreement.
- **General Teaching Council for Scotland (GTCS):** The professional body given statutory responsibility to promote, support and develop the professional learning of teaching and lecturing staff. All lecturing staff employed by UHI Inverness are required to maintain registration with GTCS.
- **Mandatory qualifications and training:** Any qualification or training that a member of staff must hold or work towards to carry out their job role.
- **Development opportunities:** A broad range of activities that contribute to professional development thereby increasing thinking, knowledge and skills. This covers a wide range of formal and informal learning opportunities.

DRAFT

2. Legislative framework / related policies

2.1. Professional Review & Development Policy
2.2. Equality, Diversity & Inclusivity Policy
2.3. Performance Improvement Policy
2.4. Staff Code of Conduct
2.5. Staff Recruitment and Selection
2.6. Staff Mediation Policy
2.7. Supporting Probation policy
2.8. General Data Protection Regulations (GDPR) 2018
2.9. Link to GTCS registration information https://www.gtcs.org.uk/college-lecturers/college.aspx
2.10. Link to National Agreements https://njncscotlandscolleges.ac.uk/
2.11. Link to UHI Learning and Teaching Enhancement Strategy
2.12. Talent Management Strategy (to be published)
2.13. Digital Transformation Strategy (to be published)

3. Scope

This policy applies to all UHI Inverness employees regardless of their role, department, mode of working or length of service. It does not apply to agency workers or self-employed contractors.

4. Compliance

4.1 All Staff

All staff are expected to take responsibility for their own professional learning. They should work with their line mangers, particularly as part of the Professional Review & Development process, to identify relevant development opportunities. All staff are responsible for recording their own professional development.

4.2 Lecturing Staff

Lecturing staff are required to obtain and maintain registration with GTCS. This includes a commitment to undertaking and recording ongoing relevant professional development.

4.3 Managers

Managers are responsible for supporting their staff to engage in relevant professional development, specifically through the Professional Review & Development process.

4.4 Compliance

The policy will be monitored through regular audits, with outcome reports being reported to the appropriate committee.
This policy should be read in conjunction with the polices listed above.
Changes to this policy or the accompanying procedures should follow the usual UHI Inverness procedures.

5. Monitoring

This policy will be monitored and its implementation evaluated by the Professional Development team. Professional Review & Development meetings will be included in the annual planning cycle and the number conducted will be reported on a bi-annual basis to the Professional Development committee, Executive Management Team committee, and the Board of Management HR committee.

6. Review

This policy and related procedures will normally be reviewed every three years to ensure they continue to meet UHI Inverness requirements within the legislative framework.

UHI | INVERNESS

Board of Management

Subject/Title:	UHI Safeguarding Policy and Procedure
Author: [Name and Job title]	Heather Keyes/Lindsay Snodgrass
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	08 November 2022
Brief Summary of the paper:	UHI Revised Common Policy and Procedure.
Action requested: [Approval, recommendation, discussion, noting]	For Board Approval – PPRP Approved the Publication of the Policy and Procedure as there were time constraints so retrospective approval is needed. The Policy was recommended for approval by the Learning, Teaching and Research Committee on 06 December 2022.
Link to Strategy: Please highlight how the paper links to, or assists with:: • compliance • partnership services • risk management • strategic plan • new opportunity/change	
Resource implications:	Yes / No **If yes, please specify**:
Risk implications:	Yes / No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	Yes/No **If yes, please specify:**
Consultation: [staff, students, UHI & Partners, External] and provide detail	

Item 03a

Status – [Confidential/Non confidential]	Non-Confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (S33)		Its disclosure would constitute a breach of confidence actionable in court (S36)	
Its disclosure would constitute a breach of the Data Protection Act (S38)		Other (please give further details)	
For how long must the paper be withheld? (express either as the time which needs to pass or a condition which needs to be met.)			

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Safeguarding Policy

POL

Lead Officer (Post):	Vice Principal Student Experience and Quality
Responsible Office/ Department:	Quality
Responsible Committee:	Learning, Teaching and Research
Review Officer (Post):	Safeguarding Lead
Date policy approved:	Click or tap to enter a date.
Date policy last reviewed and updated:	Click or tap to enter a date.
Date policy due for review:	10/10/2025
Date of Equality Impact Assessment:	22/06/2022
Date of Privacy Impact Assessment:	N/A

Accessible versions of this policy are available upon request. Please contact the University Governance team.

Policy Summary

Overview	Why is the policy required? This policy is required to fulfil the safeguarding obligations of UHI and all partners.
Purpose	What will the policy achieve? The policy will provide a unified approach to safeguarding across the university partnership and ensure parity of student experience.
Scope	Who does the policy apply to? The policy applies to UHI and all partners.
Consultation	Who has been consulted on the policy, and who will be notified? The policy has been developed by a group of practitioners from the university partnership to ensure that best practice is reflected in the policy and accompanying procedures.
Implementation and Monitoring	Who will be responsible for implementing and monitoring the policy, and what resources/ costs will be incurred? Partners are responsible for ensuring that the policy and procedures are followed in their own organisation.
Risk Implications	What are the risk implications of this policy? This policy will reduce risk for the university partnership by ensuring that best practice from across the partnership is being shared and followed.
Link with Strategy	How is this policy linked to University strategy? This policy supports the UHI's commitment to provide a safe and supportive learning environment for all. It also aims to ensure that all partners meet legislative requirements on safeguarding and discharge their duty of care.
Impact Assessment	Equality Impact Assessment: Completed June 2022. No action required.
	Privacy Impact Assessment: n/a

1. Policy Statement

1.1 The policy outlines our commitment to provide a safe and supportive learning environment for all. In addition, the policy sets out strategies to manage known risk (and any potential risk) to ensure we do all we can to protect individuals from harm, abuse, neglect or exploitation.

1.2 UHI Inverness recognise and comply with our legal and statutory obligations that arise from legislation including the Protection of Children (Scotland) Act 2003, the Adult Support and Protection (Scotland) Act 2007, the Counter-Terrorism and Security Act 2015, the Children and Young People (Scotland) Act 2014, National Guidance for Child Protection in Scotland 2021, Prevent and CONTEST, and other relevant guidance and regulations.

2. Definitions

2.1 **UHI and partners:** UHI is an integrated university, made up of a distinctive partnership of independent colleges and research institutions. The partners are: UHI Argyll, UHI Inverness, UHI Moray, UHI North Highland, UHI Outer Hebrides, UHI Shetland, UHI West Highland, Highland Theological College UHI, Orkney College UHI, Perth College UHI, Sabhal Mòr Ostaig, and Scottish Association for Marine Science (SAMS).

2.2 **Safeguarding:** Safeguarding is the action we take to promote the welfare of children and vulnerable adults to protect them from harm. This includes making sure we meet our legislative requirements and ensuring the appropriate policies and procedures are put in place. Safeguarding includes child protection but goes further and extends to all vulnerable groups.

2.3 **Duty of Care:** Our responsibility to use professional expertise and judgement to protect and promote the best interests of students and staff, and to ensure that we exercise an appropriate level of care towards them, as is reasonable within the parameters of our relationship.

2.4 **Vulnerable Adults:** Vulnerable adults or adults at risk are adults who meet all 3 of the below criteria as detailed in the Adult Support and Protection (Scotland) Act 2007:

- That they are unable to safeguard their own well-being, property, rights or other interests;
- That they are at risk of harm; and
- That because they are affected by disability, mental disorder, illness or physical or mental infirmity they are more vulnerable to being harmed than adults who are not so affected.

2.5 **Child / Children:** The term 'child' or 'children' refers to persons who have not yet attained the age of 18 years as stated in section 97(1) of the Children and Young People (Scotland) Act 2014.

2.6 **Corporate parenting**: UHI Inverness has responsibilities as a corporate parent under the Children and Young People (Scotland) Act 2014.

Please read and consider Appendix 1 for further important information and definitions that help partners fulfil their safeguarding duties.

3. Purpose

3.1. Safeguarding, and the emerging agendas connected to safeguarding and duty of care are posing ever increasing challenges and demands in tertiary education. It is a key part of our

remit and responsibilities to manage any real (or potential) risk we face, including in online environments, as a learning community and in our student halls of residencies.

3.2. Our duty is to provide a safe and supportive learning environment for all users within a framework set out by Scottish and UK government legislation. The increasing demands and complexity of these responsibilities make it imperative that UHI and all partners utilise and develop shared expertise, models, systems and processes to meet these challenges.

3.3. The following underpinning principles are shared by UHI and all partners:

3.3.1. We will utilise a system of named staff (Safeguarding Leads) in UHI and each partner with key responsibilities and duties linked to this role. Some partners also have Safeguarding Deputies to support Safeguarding Leads.

3.3.2. Safeguarding Leads and Deputies are invited to join the UHI Safeguarding Group.

3.3.3. Some partners have local safeguarding groups or practitioner networks.

3.3.4. We are committed to continuing professional development and ongoing training for safeguarders.

3.4. Criminal Convictions

3.4.1 UHI and all partners have a Student Criminal Offence Data Policy which should be referred to alongside this policy.

3.4.2 UHI and UHI Inverness recognise the transformative power of education and do not consider criminal convictions and offences or related security measures to be insurmountable barriers to learning. Where possible, we are committed to supporting those with spent and unspent criminal convictions in our communities as part of their rehabilitation.

3.4.3 We encourage all applicants and students to disclose information about any criminal convictions or police proceedings which may affect their ability to complete key aspects of their programme or placement. This includes personal restrictions or other conditions arising from court orders or parole conditions e.g. travel, contact with others and use of equipment.

3.4.4 We will offer support and guidance to applicants/students disclosing with criminal convictions about course selection and career planning and advise on the scope for any potential course or placement adjustments.

3.4.5 We undertake to ensure that, by this policy and related procedures, we operate in consideration of all relevant statutory legislation and professional body requirements.

4 Scope

4.1 This policy applies to UHI and all partners.

4.2 This policy applies throughout UHI and partner premises and campuses, including:

- Student accommodation managed by UHI and partners directly
- Sports facilities operated by UHI or UHI Inverness
- Nurseries operated by UHI or UHI Inverness
- Any other areas or facilities where UHI or partner activities are carried out

4.3 This policy applies to activities undertaken by all students as part of their studies, including but not limited to:

- Work placements and work experience
- Summer schools, field trips and outreach activities

4.4 This policy applies in all environments, including physical and virtual (e.g. social media and online learning platforms).

4.5 HISA has their own Safeguarding Policy and associated procedures however, all 3rd party organisations, including HISA, must follow this policy in relation to safeguarding concerns at any campus operated by UHI Inverness or at any event run under the auspices of UHI Inverness or involving any student or staff member of UHI Inverness. Any concerns must be referred to the UHI Inverness Safeguarding Lead in line with UHI Inverness Safeguarding Procedure.

5 Exceptions

5.1 This policy does not apply to accommodation advertised by or signposted to by UHI and partners (e.g. privately managed student accommodation or listings of private tenancies).

5.2 Students attending activities organised and hosted by another academic institute or body e.g. conferences, symposiums, sports tournaments and society gatherings.

5.3 Safeguarding considerations related to work placements should refer to the relevant policy (see Section 9).

6 Notification

6.1 All staff are responsible for safeguarding students through their student journey and will be made aware of any changes to the policy.

6.2 Safeguarding Leads and Deputies will be briefed and trained on the policy and procedures.

6.3 The policy will be publicly available on our website.

6.4 We will make information available about our Safeguarding Lead and Deputies and how to contact them. This information will be available both on UHI Inverness website and the UHI website.

6.5 The regional Student Support Group (SSG) will include any updates to the policy or procedure as an agenda item to ensure that staff group have a forum to discuss changes and best practice.

7 Roles and Responsibilities

7.1 UHI Inverness Boards of Management/Learning Teaching and Research Committee are responsible for approving the policy, ensuring the legal compliance of the policy and ensuring that it is followed. UHI Inverness Boards of Management/Learning Teaching and Research Committee are also responsible for ensuring the strategic effectiveness of the policy.

7.2 Principals and Senior Management Teams are responsible for operational compliance with the policy set by the UHI Inverness Boards of Management/Learning Teaching and Research Committee and making recommendations to the Board about updates to the policy. Principals and Senior Management Teams are also responsible for ensuring the operational effectiveness of the policy and making provision for training for all staff.

7.3 Safeguarding Leads are accountable for responsibilities as detailed in the Safeguarding Procedures.

7.4 Line managers are responsible for ensuring staff participate in training and follow the policy in their day-to-day role.

7.5 All staff are responsible for familiarising themselves with the policy and procedures.

8 Legislative Framework

- Adults with Incapacity (Scotland) Act 2005
- Adult Support and Protection (Scotland) Act 2007
- Children and Young People (Scotland) Act 2014
- Counter-Terrorism and Security Act 2015
- Council of Europe Convention on Action against Trafficking in Human Beings
- Data Protection Act 2018
- Education (Additional Support for Learning) (Scotland) Act 2004
- Equalities Act 2010
- EU Directive of 5th April 2011 on Preventing and Combating Trafficking in Human Beings and Protecting its Victims
- Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011
- General Data Protection Regulation (GDPR) 2018
- Getting it right for every child (GIFREC)
- Human Trafficking & Exploitation (Scotland) Act 2015
- Mental Health (Care and Treatment) (Scotland) Act (2003)
- National Guidance for Child Protection in Scotland 2021
- Police Act 1997
- Police and Fire Reform (Scotland) Act 2012
- Protection of Children (Scotland) Act 2003
- Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005
- Protection of Vulnerable Groups (Scotland) Act 2007
- Rehabilitation of Offenders Act 1974
- Sexual Offences Act 2003
- Sexual Offences (Scotland) Act 2009
- United Nations Convention on the Rights of the Child 1992

9 Related Policies, Procedures, Guidelines and Other Resources

- Complaints Handling Procedures
- Fitness to Practise Guidelines (course-specific)
- IT Acceptable Use Policy
- Placement and Externally Supported Learning Policy
- Student Code of Conduct
- Student Conduct Policy
- Student Criminal Offence Data Disclosure Policy
- Support to Study Procedure

10 Version Control and Change History

Version	Date	Approved by	Amendment(s)	Author

0	March 2019	AP Board of Management	New single policy	UHI Safeguarding Group
1	May 2022	AP Board of Management	Minor spelling, grammar, formatting changes, in addition to changes related to the UHI rebranding. 1.1: Changed second sentence to include 'we do all we can to protect individuals'; 1.2: added ' National Guidance for Child Protection in Scotland 2021' and 'Prevent and CONTEST'; 2.1: New definition to reflect rebranding; 2.2, 2.4 and 2.5: revised definitions; 3.2 and 3.3: revised and combined into single 3.2; 3.3: new 3.3.2 and 3.3.3, previous 3.3.2 has become 3.3.4; 3.5: Section on criminal convictions revised and has become 3.4 due to removal of previous 3.3, new information related to Student Criminal Offence Data Disclosure Policy; 4.2: 'UHI or partner name' added to sports facilities and nurseries; 4.5: new section regarding HISA; 5.2: 'It is expected the third party will have their own Safeguarding Policy but UHI and partners cannot be held responsible for the content of any external policies' added to the end; 8: added National guidance for child protection in Scotland 2021; 9: updated policy list to reflect current policy names and framework.	UHI Safeguarding Group
1b	December 2022	AP Board of Management	Changes in response to Education Scotland advice: changing 4.5 from '*HISA has their own Safeguarding Policy and associated procedures, but there is an expectation on behalf of both organisations to work collaboratively to safeguard our community*' to the above; deleting historic 5.2 '*Third parties using UHI or partner facilities (e.g. Highlands and Islands Student Association (HISA), other academic institutes, external sports clubs and societies). It is expected the third party will have their own Safeguarding Policy but UHI and partners cannot be held responsible for the content of any external policies*'.	UHI Safeguarding Group
3				
4				

Item 03c.

UHI | INVERNESS

Subject/Title:	Public Interest Disclosure Policy
Author: [Name and Job title]	Lisa Ross Governance Officer
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	07 December 2022
Brief Summary of the paper:	This policy was approved by PPRP on 14 November 2022 and has been taken to the EMT for their consideration.
Action requested: [Approval, recommendation, discussion, noting]	Approval

Item 03c.

Link to Strategy: Please highlight how the paper links to, or assists with:: □ compliance □ partnership services □ risk management □ strategic plan □ new opportunity/change	
Resource implications:	Yes / No **If yes, please specify**:
Risk implications:	Yes / No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	Yes/No **If yes, please specify:**
Student Experience Impact:	Yes/No If yes, please specify:
Consultation: [staff, students, UHI & Partners, External] and provide detail	Policy was subject to staff consultation
Status – [Confidential/Non confidential]	Non-confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (s33)		Its disclosure would constitute a breach of confident actionable in court (s36)	
Its disclosure would constitute a breach of the Data Protection Act (s38)		Other (Please give further details)	

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

UHI | INVERNESS

PUBLIC INTEREST DISCLOSURE (WHISTLE BLOWING) POLICY

REFERENCE: PL/GO/2017/002

Lead Officer	The Governance Officer
Review Officer	The Governance Officer in conjunction with the Information Development Manager
Date first approved by BoM	09 June 2008
First Review Date	26 March 2012
Date review approved by BoM	
Next Review Date	March 2025
Equality impact assessment	
Further information (where relevant)	

Reviewer	Date	Review Action/Impact
College Secretary	26.03.12	Review approved by BoM
College Secretary	25.11.14	Review approved by BoM

DRAFT

Contents

1. Policy Statement
2. Legislative framework/related policies
3. Definition
4. Scope
5. Compliance & Monitoring
6. Public Standards Panel
7. Review

DRAFT

Policy Statement:

Staff are often the first to be aware of misconduct that may turn out to be fraud, corruption, bribery, professional malpractice, or some other form of dishonesty.

UHI Inverness is committed to providing the means by which staff (including contractors) may raise concerns about malpractice, professional misconduct or corruption in the workplace. Staff have a right to have matters of concern investigated (provided that they are raised lawfully, in good faith, without malice and in the public interest) without fear of reprisal and victimisation.

UHI Inverness will treat all concerns/disclosures in a confidential and sensitive manner and protect the identity of any individual who raises a matter formally. Identity will be kept confidential so long as it does not impede an investigation.

Staff are encouraged to put their name to any concerns/disclosures they make. Concerns expressed anonymously are much less powerful and will only be considered at the discretion of the Public Standards Panel or similar Panel constituted by the college. In exercising this discretion, the following factors will be considered:

The seriousness of the matter
The credibility of the concern.
The likelihood of corroboration from other sources.

Concerns which are expressed/raised in good faith, and subsequently not confirmed by an investigation, will incur no penalty against anyone. Abuse of this policy by staff making malicious or vexatious allegations will be regarded as a serious matter and as such, may be subject to disciplinary action. This policy does not in any way prevent staff seeking redress through legal proceedings against anyone making false allegations against them.

UHI Inverness will comply with the requirements of the Public Interest Disclosure Act 1998 and other legislative requirements.

DRAFT

2. Legislative framework/related policies

The Public Interest Disclosure Act 1998.
Bribery Act 2010.
UHI Inverness Staff Code of Conduct.
Model Code of Conduct for Members of Devolved Public Bodies.
UHI Inverness Staff Grievance Policy and Procedure.
UHI Inverness Staff Disciplinary Policy and Procedure.
UHI Inverness Financial Regulations
Financial Memorandum between UHI (Regional Strategic Body) and UHI Inverness (Assigned College).
APUC Terms and Conditions for Purchase of Goods and Services

3. Definition

Whistleblowing is the term used to describe a disclosure alleging corruption, malpractice, or wrongdoing on the part of another person within the organisation. A 'whistle-blower' is a person who exposes this.

The difference between whistleblowing and complaints can sometimes appear confusing. A complaint is generally made by an individual who feels that they have been personally wronged in some way. A person making a complaint will likely have a vested interest in the outcome. Whereas whistleblowing relates to matters where there is a serious concern the College has breached generally accepted standards of legal, ethical, financial, or other expected behaviour and it is in the public interest for this to be disclosed. This means the situation or action must affect others, or it may damage the reputation of the college.

4. Scope

4.1 This policy covers all College staff. Staff are defined as all workers, contractors, agency employees and consultants who are paid by the college.

4.2 Staff are responsible for:

Familiarising themselves with this policy and related procedures.

Contacting the Governance Officer when assistance is required.

4.3 Managers are responsible for ensuring their staff are made aware of the existence and content of this policy.

4.4 This policy is not intended to be another mechanism for staff to express general dissatisfaction with their employment. Such matters should be dealt with under the Staff Grievance Policy and Procedure. This policy assists staff only in respect of

DRAFT

conduct which amounts to matters identified in section 4.6 below. It is not designed to allow staff to question financial or business decisions taken by managers, save where the individual reasonably believes they may be illegal or tainted by illegality or where professional ethics may be questionable and could impact on the college's reputation.

4.5 This policy is also not intended to deal with concerns which should be raised or addressed, or which have already been raised or addressed, under the College's disciplinary, complaints, grievance or other policies, such as the alleged misconduct of another member of staff.

4.6 Qualifying concerns for disclosure to be raised under this policy should relate to activities which have occurred or are likely to occur and which would amount to:

Fraud
Financial irregularities
Corruption
Bribery
Criminal offences.
Failure or likely failure to comply with a legal obligation
Breach of confidentiality
Financial misconduct/irregularities
Professional misconduct/impropriety
Unethical behaviour which could damage the college's reputation
The occurrence or likely occurrence of a miscarriage of justice
Damage or likely damage to the environment
Endangering the health and safety of any individual
Information intended to show any of the above is being or likely to be deliberately concealed

Where the investigation relates to potential malpractice, the investigating Manager must ensure compliance with the appropriate awarding body regulations to ensure that we meet their reporting requirements.

4.7 Malpractice does not include mismanagement, which may arise from weak management, rather than an illegal or unethical action for personal benefit whilst in a position of trust.

4.8 This policy is designed to offer protection to staff, or others associated with UHI Inverness, who disclose such concerns, provided disclosure is made:

4.8.1 Following this policy and associated procedure

4.8.2 In good faith, and not for personal gain or out of personal motives, and in the reasonable belief that the allegation is substantially true.

DRAFT

4.9 Members of staff who raise concerns in accordance with this policy will be protected under the Act provided:

4.9.1 The disclosure is to the employer or other responsible person within UHI Inverness.

4.9.2 The disclosure is made to a legal adviser.

4.9.3 The disclosure is made to a Minister of the Crown or Member of the Scottish Government.

4.9.4 The disclosure is made to a person prescribed by the Secretary of State.

4.9.5 Disclosure in other cases where none of the above options are available and where the discloser believes that they will be subject to detriment if the disclosure is made to one of the above.

5. Compliance and Monitoring

This policy must be read in conjunction with the associated procedure and all matters of disclosure must comply with both documents.

The Governance Officer will report annually to the Audit Committee regarding compliance with the policy and procedure for cases brought forward. This may be a separate report or may be part of a wider annual report.

6. Public Standards Panel

Where concerns/disclosures warrant an internal investigation, a Public Standards Panel will be convened by the Governance Officer.

The panel will comprise of the following:
- 1 Board Member
- 2 members of the Executive Management Team (EMT)

If the concern/disclosure relates to one or more members of the EMT then the panel will comprise of:

- The Chair of the Board of Management
- 2 Board Members
- 1 independent member.

The independent member could be from within the UHI Partnership, the College Network, or an external legal advisor (depending on the circumstances). Audit Committee members are excluded from participating as Panel members. This is to

DRAFT

ensure the Audit Committee remain independent of the process. Their remit will be to review and monitor the outcome of the investigation. If it is determined that a concern should be investigated internally the Public Standards Panel will nominate a member of the EMT or the Board of Management to carry out this investigation – the investigator cannot be a member of the Public Standards Panel.

The Public Standards Panel shall decide how a matter raised under this policy will be investigated, the process to be followed and the actions that must be taken. The Public Standards Panel will report on the outcome of each investigation to the Audit Committee.

In exceptional circumstances, it may be appropriate for staff to report their concerns to an external body e.g., where a concern or disclosure relates to members of the EMT and the Board of Management. Where this is the case, the College encourages staff to seek advice before reporting a concern to anyone external. Staff can contact Protect, the free confidential whistleblowing advice service on 020 3117 2520 or visit their website Protect - Speak up stop harm (protect-advice.org.uk). Further support and information can be found at https://www.gov.uk/whistleblowing and www.acas.org.uk.

Where disclosure concerns the misuse of public funds this can be reported to:

- The Scottish Funding Council (http://www.sfc.ac.uk)
- Office of the Scottish Charity Regulator (OSCR) (OSCR | Home)
- The College's Internal Auditors. Contact details for the current internal auditors may be obtained from either the Finance Department or the Procurement Officer.
- In the case of a potentially serious fraud, it may be appropriate to involve the Police.

If a staff member believes they have no choice but to raise a matter externally the avenues open to them include contacting the Chair or Vice Chair of University Court.

In circumstances where disclosure has been made to bodies external to the College, the College may still conduct a full investigation and take appropriate action.

7. Review

The Public Interest Disclosure (Whistle Blowing) policy shall be reviewed as a minimum every 3 years or annually when a disclosure is made.

DRAFT

Item 03d.

UHI | INVERNESS

Subject/Title:	National Menopause Policy
Author: [Name and Job title]	Nicola Quinn, HR Manager
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	06 December 2022
Brief Summary of the paper:	This national policy was approved by PPRP on 14 November 2022 and by the EMT on 01 December 2022. Due to this policy being agreed nationally, the scope for change is low. The Quality Team are looking for retrospective approval by the Board of Management.
Action requested: [Approval, recommendation, discussion, noting]	Approval

Link to Strategy: Please highlight how the paper links to, or assists with:: □ compliance □ partnership services □ risk management □ strategic plan □ new opportunity/change	
Resource implications:	Yes / No **If yes, please specify**:
Risk implications:	Yes / No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	Yes/No **If yes, please specify:** Policy highlights equality and diversity impacts.
Student Experience Impact:	Yes/No If yes, please specify:
Consultation: [staff, students, UHI & Partners, External] and provide detail	
Status – [Confidential/Non confidential]	Non-confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (s33)		Its disclosure would constitute a breach of confident actionable in court (s36)	
Its disclosure would constitute a breach of the Data Protection Act (s38)		Other (Please give further details)	

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Item 03d.

National Menopause Policy

September 2022

Item 03d.

Contents

1. **Introduction** 1
2. **Aims** 1
3. **Scope** 2
4. **Definitions** 2
5. **Symptoms of Menopause** 2
6. **Roles and Responsibilities** 3
7. **Links to Other Policies/Documents** 4
8. **Further Sources of Information** 4
9. **Further Reading** 4

Managers Guidance 1

1. Introduction

UHI Inverness is committed to ensuring that everyone is treated with dignity and respect in a fair manner in their working environment.

UHI Inverness is also committed to improving the well-being of its employees and recognises that women affected by the menopause may need additional consideration, support and adjustments during the time of hormonal change before, during and after the menopause.

UHI Inverness will aim to provide appropriate support to those who are experiencing menopausal symptoms. It is important the college understands the difficulties and anxieties of employees currently going through this hormonal change and that we manage this issue by raising awareness, challenging discrimination, promoting a culture of openness and providing training and development for all line management and colleagues.

UHI Inverness notes that people from the non-binary, transgender and intersex communities may also experience menopausal symptoms. Due to a variety of factors, the experience of the menopause may be different for those among these communities.

Experiences and perceptions of the menopause may also differ in relation to disability, age, race, religion, sexual orientation or marital/civil partnership status. It is important to recognise that for many reasons, women's experiences of the menopause may differ greatly

(Although the policy refers to women, please consider that this policy refers to anyone suffering the symptoms of menopause)

2. Aims

The aim of the policy is to:

a) Pro-actively promote the **Managers Guidance** (**Appendix 1**) which provides direction and clarity on dealing with menopausal symptoms for those affected both directly and indirectly, e.g., partners, managers, and colleagues.

b) Ensure that managers are aware of menopause related symptoms and how they can assist their employees. Managers take cognisance of the **Managers Guide** (**Appendix 1**) which provides clarity for those affected by the menopause.

c) Create an environment where those affected feel comfortable enough discuss the issues around their symptoms.

d) Ensure those experiencing menopausal symptoms suffer no detriment.

e) Create a workplace that respects and values all employees and their differences, that promotes dignity and combats prejudice, discrimination and harassment.

f) Benefit the welfare of women members of staff, retain valued employees; improve morale and performance and promote the college as an employer of choice.

3. Scope

This policy applies to all employees of the college.

4. Definitions

a. The menopause is a natural transition stage. It is marked by changes in the hormones and when periods stop.

b. The menopause may result in a wide range of physical and psychological symptoms and those with symptoms may encounter difficulties at work as a result.

c. Each woman will be affected in different ways and to different degrees over different periods of time. Menopausal symptoms can often indirectly affect their partners, families, and colleagues as well.

d. Some women experience early menopause due to surgery, illness, cancer treatment (radiotherapy, chemotherapy etc) or other reasons. As a result of these hormonal changes, many women will experience both physical and emotional symptoms.

e. Perimenopause – a period of time before the menopause, in the years leading up to the menopause where there can be significant changes for women, including irregular and heavy menstrual bleeding and many of the classic symptoms associated with menopause.

f. Post-menopause – a term used when a woman's periods have stopped for 12 consecutive months. However, other menopausal symptoms may not have ended so soon. Problematic symptoms may continue for years.

5. Symptoms of Menopause

a. Those affected will experience only some or all of these symptoms (and others not on the list). Some people experience no noticeable symptoms, however 75% of women experience symptoms with 25% of those classed as severe. Symptoms tend to be experienced for around four years after the last period, however, this can last up to twelve years in some cases. Symptoms may include:

i. Hot flushes – a very common symptom that can start in the face, neck or chest, before spreading upwards and downward, may include sweating, the skin becoming red and patchy, and a quicker or stronger heart rate.

ii. Heavy and painful periods and clots, leaving those affected exhausted, as well as practically needing to change sanitary wear more frequently. Some affected may become anaemic.

iii. Night sweats, restless leg syndrome and sleep disturbance.

iv. Low mood, irritability, increased anxiety, panic attacks, fatigue, poor concentration, loss of confidence and memory problems.

v. Urinary problems – more frequent urinary incontinence and urinary tract infections such as cystitis. It is common to have an urgent need to pass urine or a need to pass it more often than normal.

vi. Irritated skin – including dry and itchy skin or formication, and dry eyes. Also, vaginal symptoms of dryness, itching and discomfort.

vii. Joint and muscle aches and stiffness.

viii. Weight gain.

ix. Headaches and migraines.
x. Menopausal hair loss.

xi. Osteoporosis – the strength and density of bones are affected by the loss of oestrogen, increasing the risk of the bone-thinning disease osteoporosis.

xii. Side effects from hormone replacement therapy (HRT), a form of treatment for menopausal symptoms for some people (although not suitable or appropriate for all).

xiii. Menopausal symptoms may also exacerbate existing impairments and conditions that those affected may already be struggling to cope with.

6. Roles and Responsibilities

a. Line Managers – all managers should:

i. Familiarise themselves with the **National Menopause Policy**, **Managers Guide (Appendix 1)** and available resources

ii. Be open to having discussions around the menopause whilst being sensitive to the personal nature of the discussion and maintaining confidentiality and professionalism.

iii. Make use of the available guidance, agreeing arrangements with the affected woman with support plans and reasonable adjustments. Record the agreements to be implemented and ensure these are adhered to.

iv. Line managers with appropriate support will undertake a gender sensitive risk assessment to consider the specific needs of employees experiencing the menopause and to ensure that the working environment will not make their symptoms worse. The risk assessment will assist with the identification of any potential adjustments that may be required.

v. Liaise with HR and Occupational Health providers where appropriate.

vi. Set review dates and engage in ongoing conversations.

b. Employees – all employees are:

i. Responsible for their health and wellbeing.

ii. Encouraged to inform their manager (or the alternative contact, should they not feel comfortable speaking to their manager) if they are struggling with menopausal symptoms and need any support.

iii. Responsible in contributing to a respectful and productive working environment, being willing to help and support their colleagues, and understand any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.

iv. Responsible for making contact with either HR, a wellbeing officer where available or a trade union representative, regarding any instances of harassment, victimisation or discrimination experienced because of issues related to the menopause.

If an employee feels unable to speak to their line manager they can contact HR, a wellbeing officer where available or a trade union representative.

7. Links to Other Policies/Documents

a. Dignity in the Workplace Policy and Procedure
b. Promoting Attendance Policy and Procedure
c. Reasonable Adjustment Guidance Document for Staff

8. Further Sources of Information

a. All employees can access counselling if needed via Occupational Health and our Employee Assistance Programme (EAP).

Our EAP is available for free 24/7 both online and by phone. AXA has a wide range of online resources available to staff. Their helplines are also available for staff who would like to speak to someone for impartial, confidential advice. If you would like to access this support you can do so by visiting www.axabesupported.co.uk (Username: employee; Password: supported) or calling 0800 072 7072.

b. Further information can be found here:

i. https://www.nhs.uk/conditions/menopause
ii. http://menopausematters.co.uk
iii. https://www.womens-health-concern.org/help-and-advice/factsheets/menopause
iv. https://thebms.org.uk
v. https://www.daisynetwork.org
vi. https://menopausesupport.co.uk
vii. https://www.menopausedoctor.co.uk/
viii. www.menopause-exchange.co.uk
ix. www.menopausehealthmatters.com

9. Further Reading

i. https://menopausehealthmatters.com/symptoms-of-menopause/
ii. https://menopausehealthmatters.com/menopause-and-weight-gain/
iii. https://menopausehealthmatters.com/menopause-insomnia/
iv. https://menopausehealthmatters.com/menopause-diet/
v. https://menopausehealthmatters.com/menopause-diet/exercise-for-women/
vi. https://menopausehealthmatters.com/hormone-replacement-therapy/
vii. https://menopausehealthmatters.com/menopause-and-weight-gain/osteoporosisand-menopause/
viii. https://menopausehealthmatters.com/heart-disease-in-women/
ix. www.menopauseacademy.co.uk

x. www.thebms.org.uk
xi. www.nhs.uk/conditions/menopause
xii. www.nhs.uk/conditions/early-menopause
xiii. www.nice.org.uk/guidance/ng23/ifp/chapter/About-this-information

Appendix 1

Managers Guidance

Everyone who is affected is different and, as such, it is difficult to set out specific guidelines. When conversations occur with those who are affected either directly or indirectly, ensure that you:

- allow time and space for the conversation – find an appropriate place where confidentiality can be maintained
- be open to the discussion and encourage the staff member to honestly share their issues
- suggest reasonable adjustments (see below)
- agree any actions and record in a suitable confidential manner
- discuss whether other team members should be informed and who should undertake this
- arrange a follow up meeting at a suitable time and place.

Reasonable Adjustments

The following list of reasonable adjustments have been suggested by the CIPD in their '*A guide to managing menopause at work: guidance for line managers*' (2021):

Sleep disruption and/or night sweats

- Recognise someone may take more short-term absence if they've had a difficult night.
- Consider a change to shift patterns or the ability to swap shifts on a temporary basis.
- Carrying out risk assessments and making appropriate adjustments.
- Offer a flexible working arrangement, for example a later start and finish time.
- Where a role permits and the manager can support it the member of staff could work from home for a short period if symptoms have been significant, for example disrupted sleep pattern.

Hot flushes and/or daytime sweats

- Look at ways to cool the working environment, for example provide a fan, move a desk close to a window or adjust the air conditioning.
- Provide easy access to cold drinking water and washrooms.
- Adapt uniforms to improve comfort.
- Limit the time wearing personal protective equipment (PPE) such as face masks (subject to any COVID-secure measures required).
- In customer-focused or public-facing roles, it may help to have access to a quiet room for a short break so as to manage a severe hot flush.

Heavy or irregular periods

- Provide easy access to washroom and toilet facilities.
- Allow for more frequent breaks to go to the toilet.
- Be understanding about someone working from home if they have very heavy bleeding.
- Make sanitary products available in washrooms.
- Make it easy to request extra uniforms if needed.

Headaches and fatigue

- Consider a temporary adjustment to someone's work duties.
- Provide a quiet area to work.
- Provide access to a rest room.
- Offer easy access to drinking water.
- Allow regular breaks and opportunities to take medication.

Muscular aches, and bone and joint pain

- Make any necessary temporary adjustments through review of risk assessments and work schedules.
- Allow someone to move around or stay mobile, if that helps.

Psychological issues (for example loss of confidence, poor concentration, anxiety, and so on)

- Encourage employees to discuss concerns at one-to-one meetings with you and/or occupational health.
- Discuss possible adjustments to tasks and duties that are proving a challenge.
- Address work-related stress by carrying out a stress risk assessment recommended by the HSE.
- Signpost to an Employee Assistance Programme or counselling services if available.
- Identify a supportive colleague to talk to away from the office or work area, such as a wellbeing champion.
- Allow time when needed, to have some quiet time or undertake relaxation or mindfulness activities.
- Provide access to a quiet space to work or the opportunity to work from home.
- Have agreed protected time to catch up with work.
- Discuss whether it would be helpful for the employee to visit their GP, if they haven't already.

Other examples of adjustments include:

- Provide private areas for those affected to rest, recover or make a telephone call to access personal or professional support.
- Ensure working time arrangements are flexible enough to meet the needs of menopausal women. For example, they may also need more breaks during the day, or may need to leave work suddenly if their symptoms become severe.

ITEM 04

UHI | INVERNESS

Board of Management

Subject/Title:	Student Activity 2022/23
Author: [Name and Job title]	Jane Maclennan, Information Systems Manager
Meeting:	BOM
Meeting Date:	13 December 2022
Date Paper prepared:	02 December 2022
Brief Summary of the paper:	To provide the committee with an update on student activity for 2022/23.
Action requested: [Approval, recommendation, discussion, noting]	Discussion
Link to Strategy: Please highlight how the paper links to, or assists with:: a) compliance • partnership services • risk management • strategic plan • new opportunity/change	This paper links to the strategic plan, particularly in relation to the student experience and the curriculum.
Resource implications:	Yes
Risk implications:	Yes – quality of the student experience
Equality and Diversity implications:	Yes – equity of the student experience
Consultation: [staff, students, UHI & Partners, External] and provide detail	n/a

ITEM 04

Status – [Confidential/Non confidential]	**Non-confidential**
Freedom of Information Can this paper be included in "open" business* [Yes/No]	**Yes**

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (S33)		Its disclosure would constitute a breach of confidence actionable in court (S36)	
Its disclosure would constitute a breach of the Data Protection Act (S38)		Other (please give further details)	
For how long must the paper be withheld? (express either as the time which needs to pass or a condition which needs to be met.)			

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Student Activity 2022/23

Executive summary

The report provides an update on student activity for 2022/23.

- Student Enrolments:

The core FE credit target for 2022/23 is 29,882, as at 2nd December 2022 the total enrolments at FE level is 2,822 heads generating 26,091 credits, which is 87.3% of our target.

The PPF target for 2022/23 for Inverness College undergraduate students (excluding PGDE) with a fee status of Scottish or European is 1,441. As at 2nd December 2022 the estimated FTE is 1,186 which is 82.3% of our target.

- Withdrawals:

At the time of writing Early Withdrawals for FE Full time students is at 5.4% which is below end of year totals for the past 5 years. A verbal update on the current early withdrawal rates will be provided at the meeting.

- Recruitment for January 2023:

Recruitment for January 2023 is ongoing, a new landing page on the UHI Inverness website has been created by the Marketing team. Join us in January (uhi.ac.uk). There has been a significant increase in the number of applications received for both FE and HE courses from 2021/22.

Main body of information

Student enrolments against targets 2022/23.

The core FE credit target for 2022/23 is 29,882 this includes both core learning of 29,511 and 371 credits to be generated from Foundation Apprentices. It is anticipated that we will achieve our credit target, based on Modern Apprentice enrolments yet to commence and the January intake.

Credit Target		Actual Credits		% of Target
2020/21	29,439	26/11/2020	20,071	68.2%
2021/22	30,677	29/11/2021	22,471	73.2%
2022/23	29,882	02/12/2022	26,091	87.3%

The PPF target for 2022/23 for Inverness College undergraduate students (excluding PGDE) with a fee status of Scottish or European is 1,441.

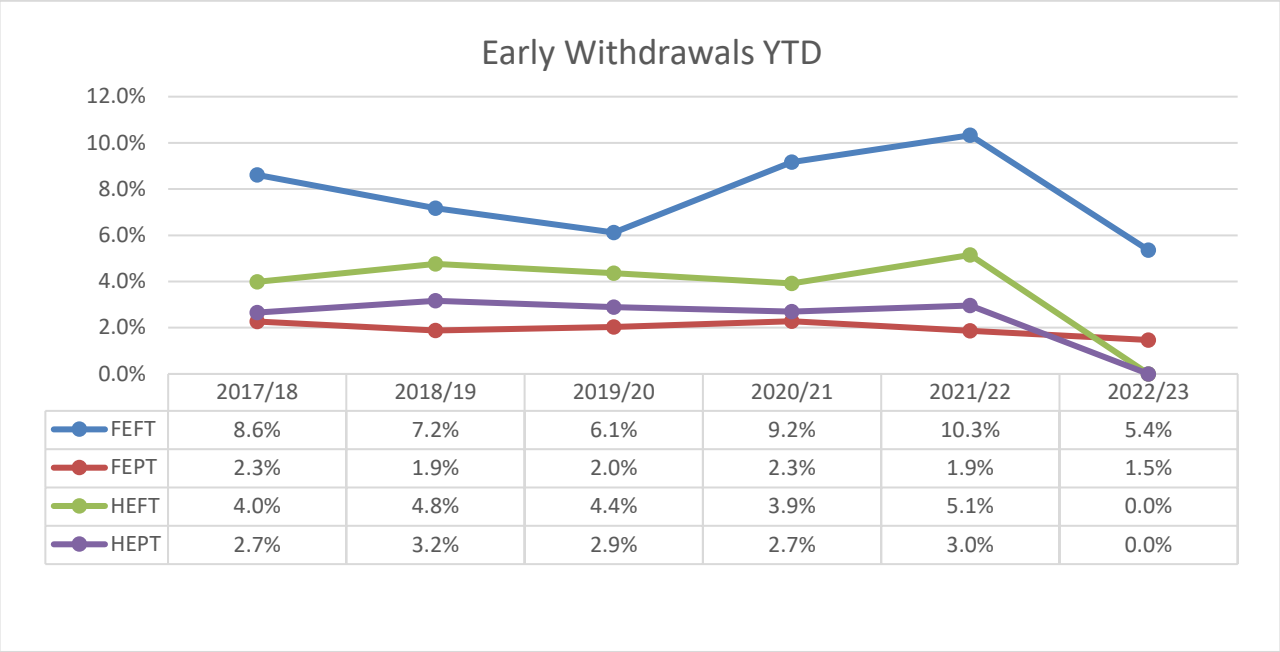
PPF FTE target		Estimated FTE		% of Target
2020/21	1,491	26/11/2020	1,525	102.3%

2021/22	1,530	29/11/2021	1,356	88.6%
2022/23	1,441	02/12/2022	1,186	82.3%

The Early Statistical Return has been completed following a review of all students with a lower than expected FTE based on their mode of attendance. This along with the addition of recruitment in January is expected to total an additional 121 fundable FTE. This would bring our FTE to 1,307 which is 90.7% of target.

Withdrawal's summary

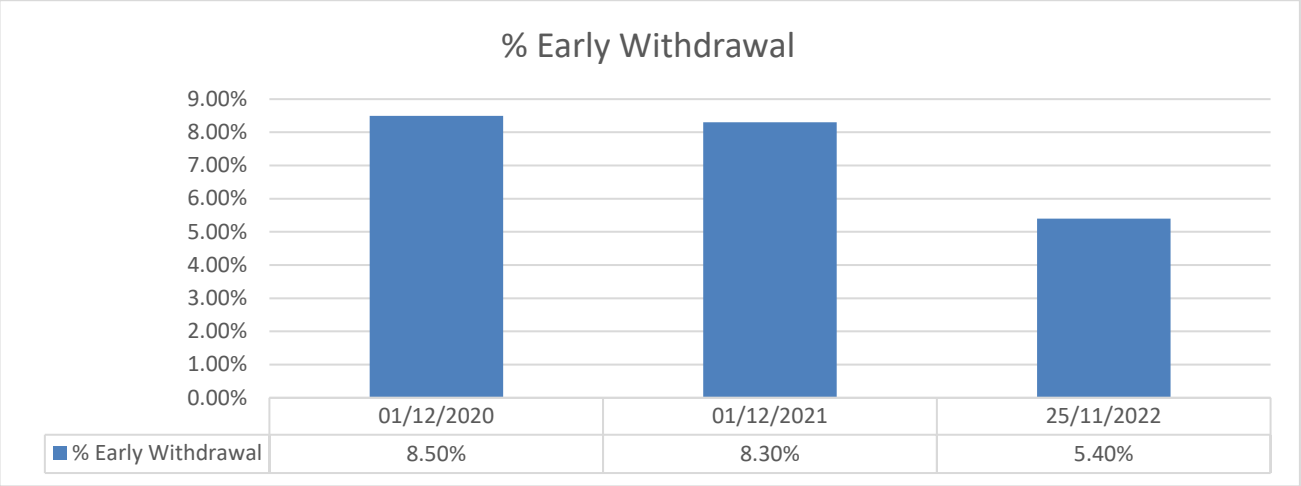
Following a decline, early withdrawals increased for FE full time students for the three years from 2019/20 to 2021/22. The chart below shows the end of year figures for previous years and the year to date for 2022/23.



	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23
FEFT	8.6%	7.2%	6.1%	9.2%	10.3%	5.4%
FEPT	2.3%	1.9%	2.0%	2.3%	1.9%	1.5%
HEFT	4.0%	4.8%	4.4%	3.9%	5.1%	0.0%
HEPT	2.7%	3.2%	2.9%	2.7%	3.0%	0.0%

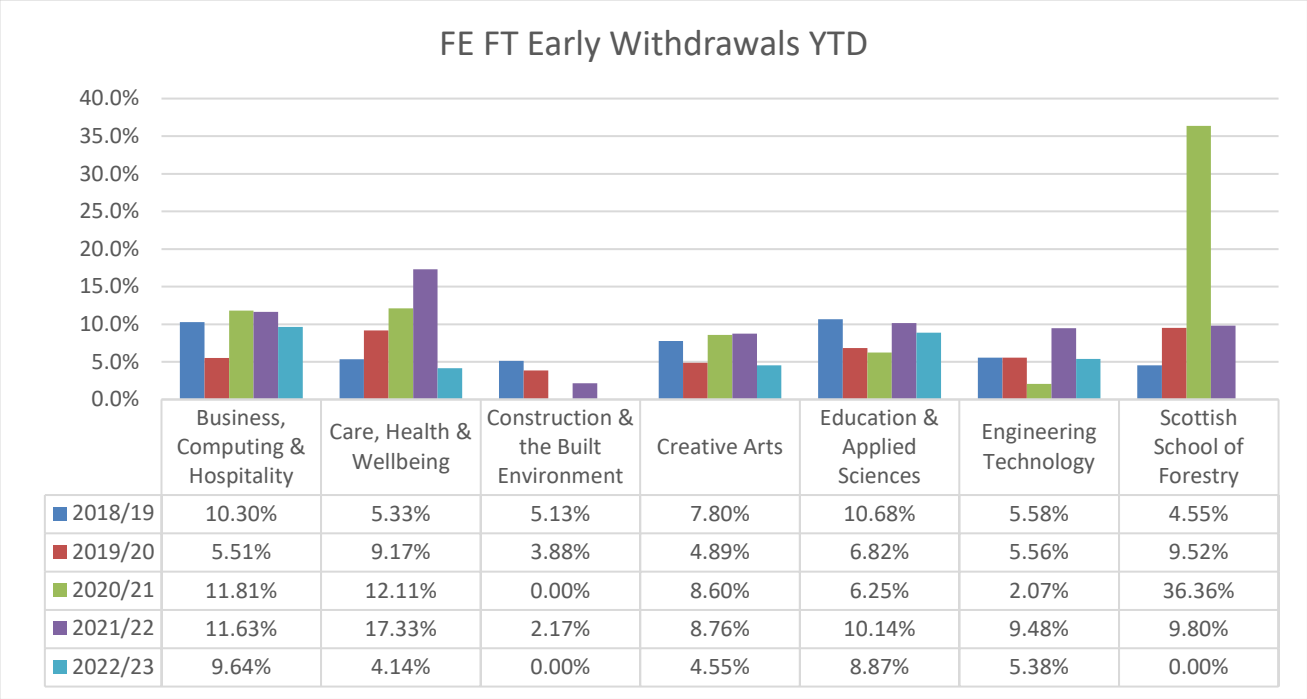
At the time of writing the FE full time early withdrawals are below end of year totals of the past 5 years. It is expected that this will continue to rise as students' non-attendance is followed up and withdrawals processed. However, it is anticipated that it will remain lower than the peaks of 2020/21 and 2021/22.

The chart below shows the early withdrawal rate for full time FE students at the end of November/beginning of December over the past 3 years. It can be seen from this chart that early withdrawals continued to rise by 1-2% till the end of year.



	01/12/2020	01/12/2021	25/11/2022
% Early Withdrawal	8.50%	8.30%	5.40%

The chart below shows the early withdrawal percentages by Curriculum area over the past 5 years (2022/23 is as at 2nd December 2022).

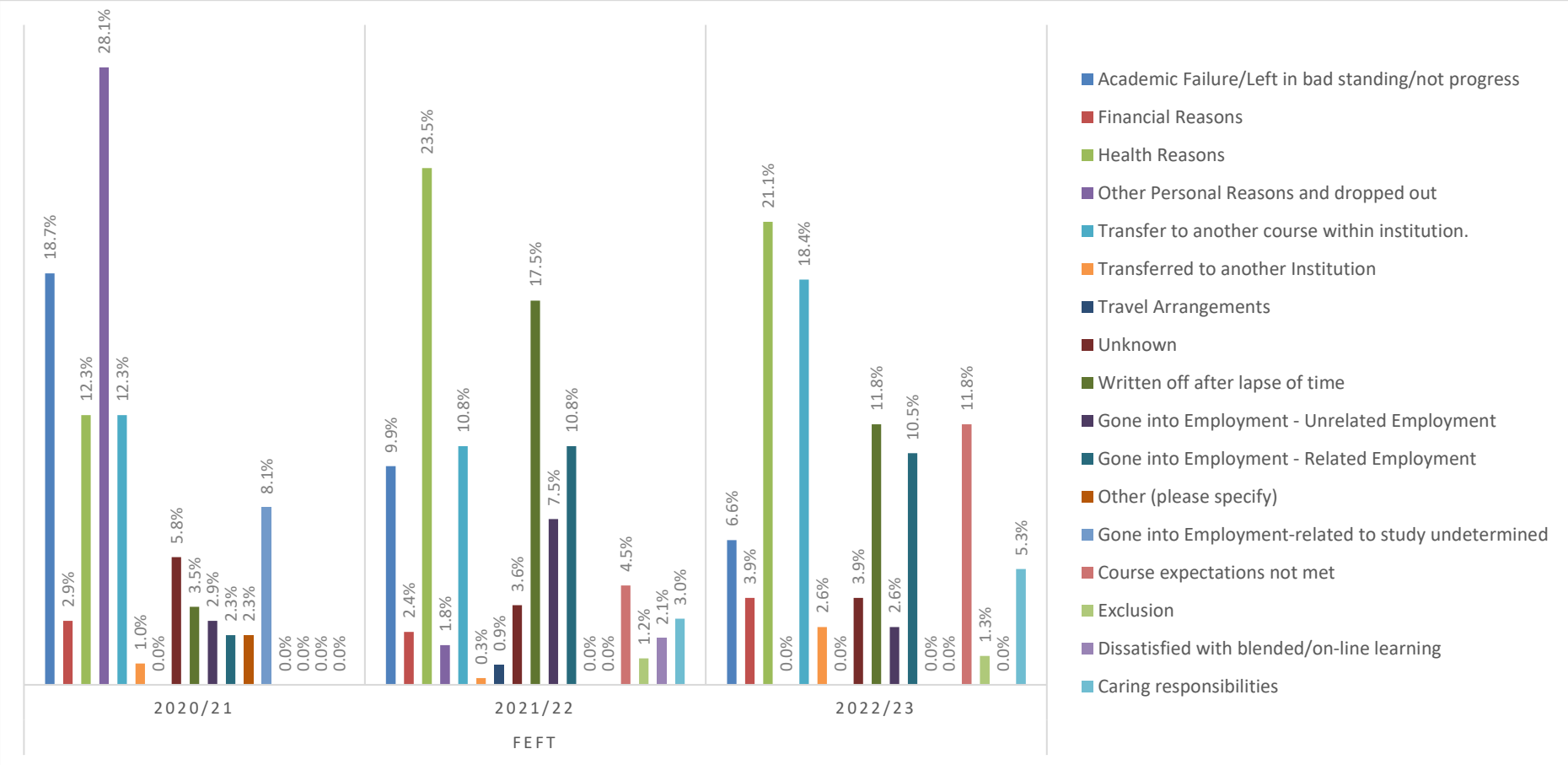


	Business, Computing & Hospitality	Care, Health & Wellbeing	Construction & the Built Environment	Creative Arts	Education & Applied Sciences	Engineering Technology	Scottish School of Forestry
2018/19	10.30%	5.33%	5.13%	7.80%	10.68%	5.58%	4.55%
2019/20	5.51%	9.17%	3.88%	4.89%	6.82%	5.56%	9.52%
2020/21	11.81%	12.11%	0.00%	8.60%	6.25%	2.07%	36.36%
2021/22	11.63%	17.33%	2.17%	8.76%	10.14%	9.48%	9.80%
2022/23	9.64%	4.14%	0.00%	4.55%	8.87%	5.38%	0.00%

FE Full time: Reasons for early withdrawal

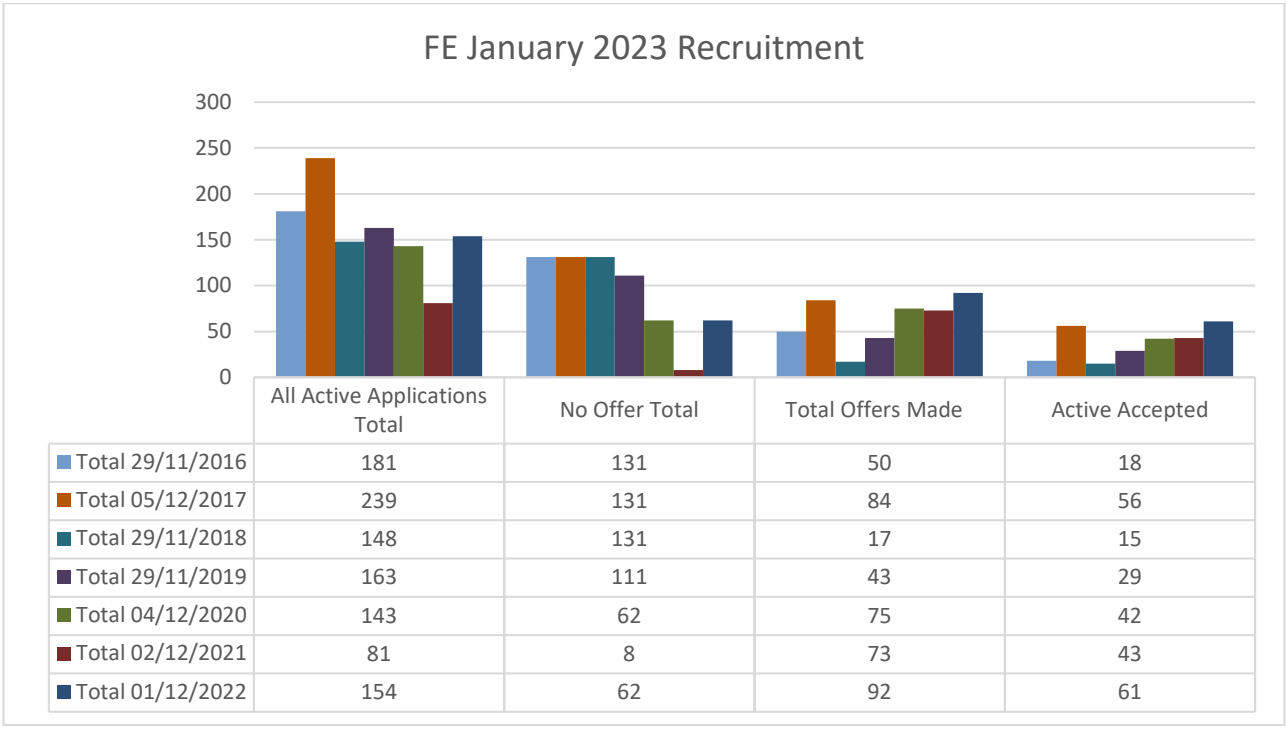
Whilst Financial reasons dropped from 2020/21 to 2021/22, it has risen again in 2022/23. Health reason continues to rise, as has Gone in to related employment and Caring responsibilities.

Course Expectations not met and Dissatisfied with blended/on-line learning were introduced as reasons for withdrawal in 2021/22 in line with SFC guidance. No students have indicated this year that they are dissatisfied with blended/on-line learning, however, there has been an increase in Course expectations not met.



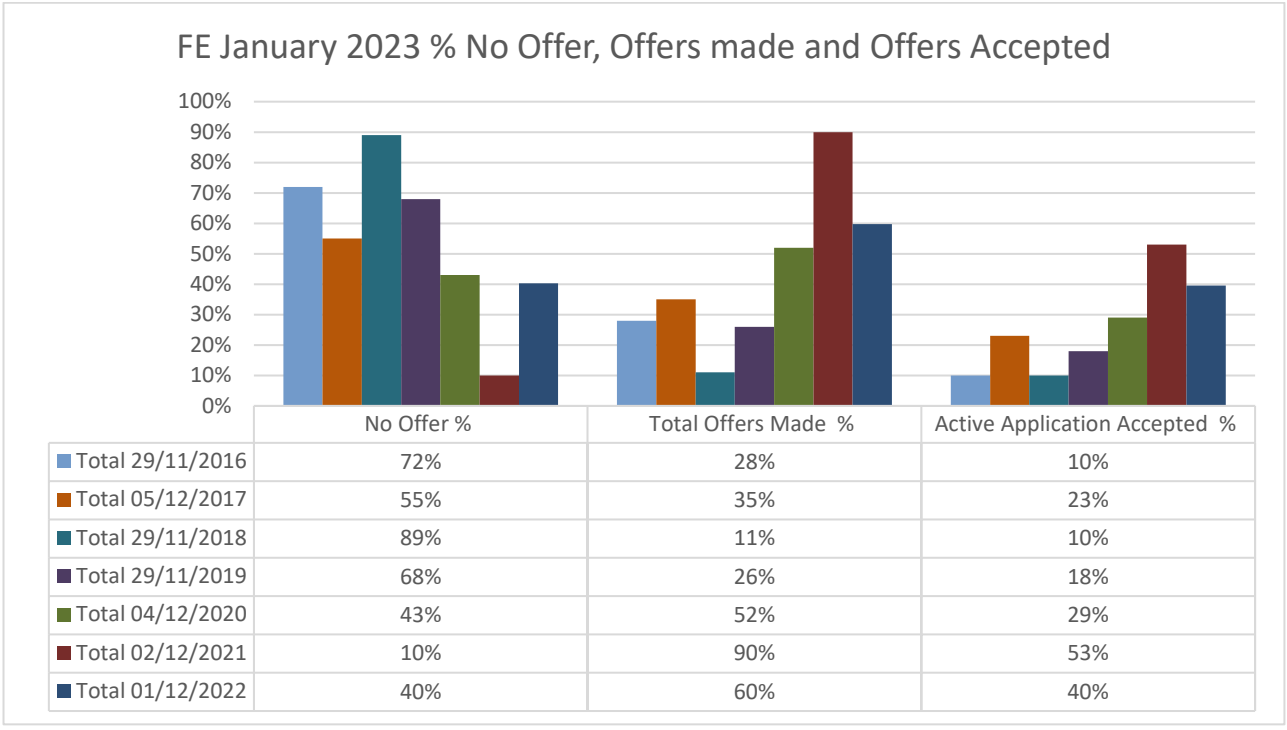
Recruitment for January 2023

Recruitment for January 2023 is ongoing, a new landing page on the UHI Inverness website has been created by the Marketing team. [Join us in January (uhi.ac.uk)]

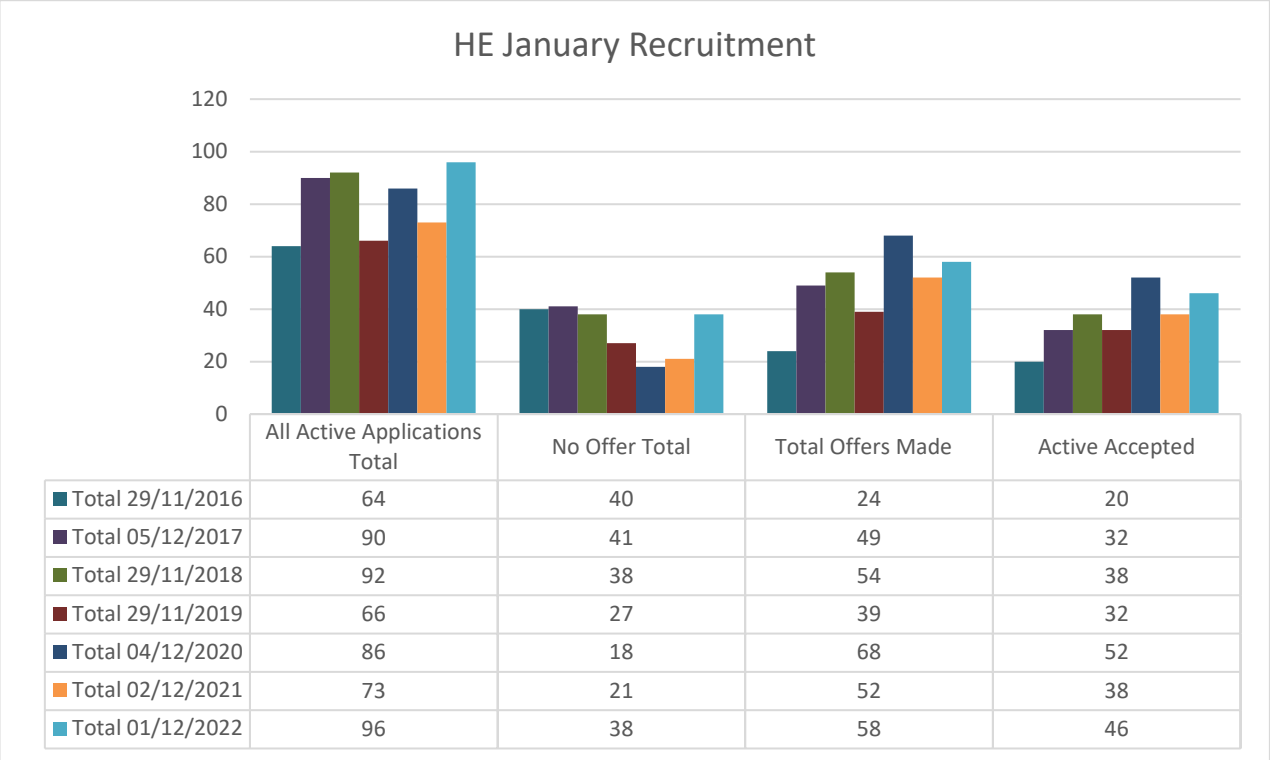


	All Active Applications Total	No Offer Total	Total Offers Made	Active Accepted
Total 29/11/2016	181	131	50	18
Total 05/12/2017	239	131	84	56
Total 29/11/2018	148	131	17	15
Total 29/11/2019	163	111	43	29
Total 04/12/2020	143	62	75	42
Total 02/12/2021	81	8	73	43
Total 01/12/2022	154	62	92	61

There has been a significant increase from 2021/22 in the number of applications received for FE January start courses.

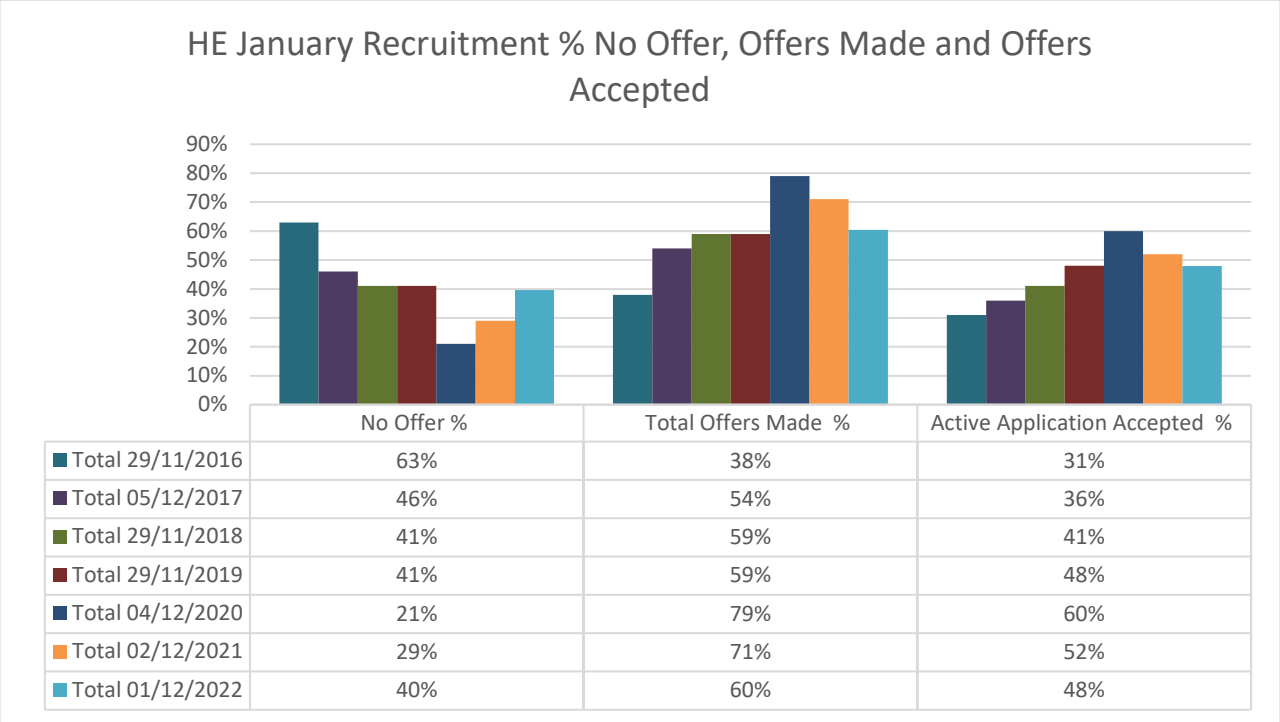


	No Offer %	Total Offers Made %	Active Application Accepted %
Total 29/11/2016	72%	28%	10%
Total 05/12/2017	55%	35%	23%
Total 29/11/2018	89%	11%	10%
Total 29/11/2019	68%	26%	18%
Total 04/12/2020	43%	52%	29%
Total 02/12/2021	10%	90%	53%
Total 01/12/2022	40%	60%	40%



	All Active Applications Total	No Offer Total	Total Offers Made	Active Accepted
Total 29/11/2016	64	40	24	20
Total 05/12/2017	90	41	49	32
Total 29/11/2018	92	38	54	38
Total 29/11/2019	66	27	39	32
Total 04/12/2020	86	18	68	52
Total 02/12/2021	73	21	52	38
Total 01/12/2022	96	38	58	46

As with FE there has been a significant increase in the number of applications received for HE January start courses.



	No Offer %	Total Offers Made %	Active Application Accepted %
Total 29/11/2016	63%	38%	31%
Total 05/12/2017	46%	54%	36%
Total 29/11/2018	41%	59%	41%
Total 29/11/2019	41%	59%	48%
Total 04/12/2020	21%	79%	60%
Total 02/12/2021	29%	71%	52%
Total 01/12/2022	40%	60%	48%

UHI | INVERNESS

Board of Management

Subject/Title:	Health & Safety Annual Report 2021-22
Author:	Martin Kerr, Interim Health & Safety Manager
Meeting:	**Board of Management**
Meeting Date:	13 December 2022
Date Paper prepared:	01 December 2022
Brief Summary of the paper:	There have been no RIDDOR incidents in the 12-month period from December 2021 to December 2022. Data pertaining to incident/near miss reporting and staff participation in mandatory H&S training modules is provided.
Action requested:	Discussion
Link to Strategy: Please highlight how the paper links to, or assists with:**:** • compliance • partnership services • risk management • strategic plan • new opportunity/change	
Resource implications:	No **If yes, please specify**:
Risk implications:	No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	No **If yes, please specify:**
Consultation: [staff, students, UHI & Partners, External] and provide detail	Health and Safety Committee, comprising a cross section of the college including management, staff and trade union reps.

Status – [Confidential/Non confidential]	Non-Confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs	
Its disclosure would substantially prejudice the commercial interests of any person or organisation		Its disclosure would constitute a breach of confidence actionable in court (S36)	
Its disclosure would constitute a breach of the Data Protection Act (S38)		Other (please give further details)	
For how long must the paper be withheld? (express either as the time which needs to pass or a condition which needs to be met.)			

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Executive Summary

There have been no RIDDOR reportable incidents for academic year 2021-2022.

The new Health & Safety Management System Software, 'AssessNet' has been implemented. The new system has been well received by staff for ease of reporting and offering features such as site audits. Familiarisation of system still ongoing. Additional COSHH module has been purchased and will be introduced Q1 of 2023.

Health & Safety Management

The previous Health & Safety Manager left the organisation in September 2022, to further his career. Since then, our Estates & Campus Manager Martin Kerr, has taken up the role on an interim basis, reporting to the Vice Principal, Operations & External Relations. Both Martin and Georgie have the requisite level of H&S qualifications to act as the competent person required in law for an organisation of our size and nature. The Health & Safety Manager remit has been extended to include sustainability leadership and the role is going out to advertisement over Christmas and in the New Year.

Incidents

There have been no RIDDOR reportable incidents for academic year 2021-2022. However, we observed an increased trend in incidents following the return of staff and students following the reductions in occupancy during the COVID-19 restrictions, as one would expect. Incidents have been relatively minor in nature with robust measures being introduced to reduce repeat. Primary concern going forward is that near-miss recording is low compared to incidents.

The data in table 1 below shows incidents/injuries and near misses over the 12 month period to December 2022.

Table 1:

H&S Management System

We committed to adopt the USHA, HASMAP management standard, a key component of which is devolved ownership and responsibility for Health and Safety at all organisational and functional levels. In practice, this involves direct ownership and accountability for Health & Safety at school and departmental level. The means of measuring the status of compliance with the USHA guidance is via the USHA 'HASMAP' auditing system, which provides a series of benchmarks to establish the status of Health & Safety management and overall Health & Safety culture. Audits are now being developed and undertaken within the AssessNet system. Training of staff is essential to support devolved ownership.

Health & Safety Training

The data in table 2 below shows the completion rates for the mandatory online Health & Safety staff training modules:

Table 2:

Module	Completed	Failed	In Progress	Not Started
Stress Awareness	87.07%	0	1.46%	11.46%
Risk Assessment	89.51%	0.24%	0.98%	9.27%
DSE Equipment	88.54%	0.24%	2.44%	8.54%
Fire Awareness	94.88%	0	1.22%	3.90%

Compared to previous iterations, these completion rates are high. It should also be noted that staff who are long-term sick or on maternity leave will be included in those reported as not having started. We have asked all staff to complete all mandatory modules on 6th January, if they have not already done so.

In addition to the above, technicians, curriculum managers and assessors have had the opportunity to attend a range of taught courses including IOSH courses at a level relevant to their job role.

Item 07.

UHI | INVERNESS

Subject/Title:	Principal's Report
Author: [Name and Job title]	Professor Chris O'Neil Principal
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	09 December 2022
Brief Summary of the paper:	This report provides the Board of Management with an overview of the items that will form part of the Principal's verbal update.
Action requested: [Approval, recommendation, discussion, noting]	For Discussion

Item 07.

Link to Strategy: Please highlight how the paper links to, or assists with:: □ compliance □ partnership services □ risk management □ strategic plan □ new opportunity/change	Partnership Services, Risk Management, Strategic Plan, New Opportunity & Change.
Resource implications:	Yes / No **If yes, please specify**:
Risk implications:	Yes / No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	Yes/No **If yes, please specify:**
Student Experience Impact:	Yes/No If yes, please specify:
Consultation: [staff, students, UHI & Partners, External] and provide detail	
Status – [Confidential/Non confidential]	Confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	No

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (s33)	Y	Its disclosure would constitute a breach of confident actionable in court (s36)	
Its disclosure would constitute a breach of the Data Protection Act (s38)		Other (Please give further details)	

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

UHI | INVERNESS

Subject/Title:	Revenue Budget Monitoring 30 November 2022
Author:	Roderick M Ferrier, Assistant Principal, Finance and Audit
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	06 December 2022
Brief Summary of the paper:	Present Revenue Budget Monitoring and Projected Outturn
Action requested: [Approval, recommendation, discussion, noting]	Noting
Link to Strategy: Please highlight how the paper links to, or assists with:: ☐ compliance ☐ partnership services ☐ risk management ☐ strategic plan ☐ new opportunity/change	Complying with Funding parameters Finance undergirds Strategic Plan
Resource implications:	Yes – monitoring of Financial Resources **If yes, please specify**:
Risk implications:	Yes **If yes, please specify:** Financial Operational

Equality and Diversity implications:	N/A
Student Experience Impact:	None
Consultation: [staff, students, UHI & Partners, External] and provide detail	None
Status – [Confidential/Non confidential]	Confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	No

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (s33)	Y	Its disclosure would constitute a breach of confident actionable in court (s36)	
Its disclosure would constitute a breach of the Data Protection Act (s38)		Other (Please give further details)	

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Recommendation(s):
That members note the Revenue Budget monitoring for the four months ended 30 November 2022. This should also be considered in the light of 2022-23 Revenue Budget.

Purpose of report
Advise the Board of the Revenue Budget Monitoring position for the four months ended 30 November 2022.

Item 10

UHI | INVERNESS

Subject/Title:	Review of External Effectiveness Review Action Plan
Author: [Name and Job title]	Lisa Ross Governance Officer
Meeting:	Board of Management
Meeting Date:	13 December 2022
Date Paper prepared:	07 December 2022
Brief Summary of the paper:	Review and update of the Board Development Plan which comprises the 2020 External Effectiveness Review recommendations and the recommendations from the 19/20 and 20/21 review of the Code of Good Governance by Board Members.
Action requested: [Approval, recommendation, discussion, noting]	Discussion and Approval

Item 10

Link to Strategy: Please highlight how the paper links to, or assists with: □ compliance □ partnership services □ risk management □ strategic plan □ new opportunity/change	Governance Compliance
Resource implications:	Yes / No **If yes, please specify**:
Risk implications:	Yes / No **If yes, please specify:** Operational: Organisational:
Equality and Diversity implications:	Yes/No **If yes, please specify:**
Student Experience Impact:	Yes/No If yes, please specify:
Consultation: [staff, students, UHI & Partners, External] and provide detail	
Status – [Confidential/Non confidential]	Non-Confidential
Freedom of Information Can this paper be included in "open" business* [Yes/No]	Yes

*If a paper should **not** be included within "open" business, please highlight below the reason.

Its disclosure would substantially prejudice a programme of research (S27)		Its disclosure would substantially prejudice the effective conduct of public affairs (S30)	
Its disclosure would substantially prejudice the commercial interests of any person or organisation (s33)		Its disclosure would constitute a breach of confident actionable in court (s36)	
Its disclosure would constitute a breach of the Data Protection Act (s38)		Other (Please give further details)	

Further guidance on application of the exclusions from Freedom of Information legislation is available via

http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp and

http://www.itspublicknowledge.info/web/FILES/Public_Interest_Test.pdf

Item 10

Background

The Board of Management approved the Development Plan at a meeting held on 01 April 2021. This plan was drawn up to address the recommendations within the External Effectiveness Review and the reviews of the Code of Good Governance. A six-month review of the plan was undertaken and following Board approval the plan was updated in January 2022 (copy attached as Appendix 1).

Review and Recommendations

A further review of the outstanding actions has been carried out and the following is recommended:

Action 1 – The Terms of Reference for all Committees have been reviewed. Board approval to the changes made to the Terms of Reference was provided on 31 March 2022.

Recommendation: This action should be marked as completed.

Action 2 – The review of Committee membership was carried out on 03 March 2022. OnBoard Training has been identified and the Governance Officer will liaise with them in respect of the delivery of a bespoke Effective Audit Committee training session.

Recommendation: This action is to remain as partially completed.

Action 5 – An annual programme for members will form part of the Board Development and Training Plan. This plan will incorporate all aspects of support which is offered to Board Members and will include:

- Induction
- Development of Mechanisms for Support
- Training Requirements

Recommendation: This action is to remain as partially completed. The draft Board Development and Training Plan for the Academic Year 2023-24 will be discussed at the meeting on 28 March 2023 with the final plan being available for Board approval at the meeting scheduled for 27 June 2023.

Action 6 – The Assigned Colleges Officer for UHI has begun the development of an induction process for Governance Officers/Board Secretaries. This process will be shared with all partners. When this process is ready it will be shared with the Board and the process can be adapted where necessary.

Mentoring is provided through the Good Governance Steering Group and through the UHI Partnership Governance Network. A teams site has been set up as part of the UHI Partnership Governance Network and advice and ideas are shared here. A formal program will be developed for future Governance Officers in conjunction with the above induction process.

In respect of the Chair, the Chair is subject to the same induction process as all other members. Support is also available from the Chair of Court, UHI, Chairs from within the partnership and from the Principal.

Recommendation: This action is to remain as partially completed.

Action 8 – The Principal and Chair are continuing to work with Executive Office and partners in respect of UHI 2024.
Recommendation: This action is to remain as partially completed.

Action 10 – The Performance Review and Remuneration (PR&R) Committee commissioned the HR Manager to carry out a remuneration exercise in respect of the Principal, EMT, Directors of Research, Research Staff and the Tertiary Education Leaders. This remuneration exercise included backdating of salaries and pension implications. The PR&R Committee approved salary increases for the Principal, EMT and Research Staff on 18 July 2022 and for the Directors of Research and Tertiary Education Leaders on 01 September 2022. The PR&R Committee have put in place diarised meetings to ensure that these salaries are monitored on an annual basis and to ensure that we continue to align with other comparable institutions.
Recommendation: This action should be marked as completed.

Next Steps

The Development Plan will be updated to reflect the review and our discussions, and an updated version of the plan will be made available on our website. Priority will be given to the outstanding actions. A further review of the plan will be carried out and discussed at the Board of Management meeting on 27 June 2023.

Lisa Ross

Governance Officer

UHI | INVERNESS

UHI INVERNESS – BOARD OF MANAGEMENT DEVELOPMENT PLAN 2020-21

Updated January 2022 following 6-month review

	RECOMMENDATION	ACTION	RESPONSIBLE PERSON	TIMESCALE	UPDATES
PRIORITY ACTIONS					
1	To develop, in conjunction with our strategy, a comprehensive business report for each Committee. This would allow for improved accountability for College performance and would include: • Variances from agreed targets. • Management interventions where necessary. • Anticipated impact. *(EER Recommendation 1)* *(Review of Code of Good Governance Recommendation AY 20/21)*	Finalisation and approval of our 5-year strategic plan (including the addition of KPI's). Development of a new schedule of submissions for each Committee and a review of the Terms of Reference for each Committee this will include review of appropriate KPI's at each Committee Meeting.	Principal Board Secretary and Committee Chairs.	30 June 2021 30 June 2021 **Partially Completed - Extended to March 2022 - to all for the Final Review of Terms of Reference to be approved on 31 March 22.**	The Principal has held consultative meetings with local MSP's, MPs, and the Chamber of Commerce. Our strategy is being updated to take account of the feedback received from these meetings. High level KPI measures and strategy objectives have been drafted. December 2021 Review: • The Strategy and KPI Matrix are to be given final Board approval on 14 December 2021. • A yearly schedule of submissions is now available for all Committees. • All Committee Terms of References have been reviewed and are to be given final Board approval on 31 March 2022.

2	The development of a more influential, learner-focused Audit Committee through review of learner-facing systems and controls. Consideration of a wider membership for the Audit Committee to include additional Co-opted Members to achieve an independent and informed opinion. *(EER Recommendations 2 & 3)*	The Audit Committee will be reviewed during the annual Committee evaluation process. As part of this the Committee will discuss whether further additions to the Committee membership is required.	Board Secretary & Audit Chair	June 2021 **Partially Completed - Extended to March 2022 to allow for review of Committee Memberships.**	In February 2021 we appointed a new Chair of the Audit Committee as well as a co-opted member to the Committee. The structure of the Committee was strengthened further by the addition of new board members to the Committee. As part of the new EMT structure the Director of Finance now has the Job Title Assistant Principal Finance & Audit. This ensures a more influential role within the Committee. December 2021 Review: Following a further recruitment drive we are looking to appoint 4 additional Non-Executive Members to our Board of Management as well as co-opted members. A Chairs Committee will be scheduled for January 2022 to look at the skills and experience of all members of the Board of Management and we will ensure that we have the appropriate skills allocated to the Audit Committee as well as the addition of a co-opted member to the Committee.
3	A review of the committee structure and committee performance to ensure each of the standing committees assists the governing board in the achievement of its responsibilities *(EER Recommendation 4)*	A review of each Committee will be carried out to ensure alignment with the new EMT Structure as part of this review we will develop a new schedule of submissions, review the Terms of Reference, and review how our agendas are structured to ensure that the relevant KPI's are considered.	Board Secretary and Committee Chairs	June 2021	Following the EMT restructure we will now have two members of the EMT as leads for each Committee. December 2021 Review: All Committee reviews have been carried out. Yearly schedule of submissions are available for all Committees and each agenda setting meeting will now be able to consider all relevant KPI's following the approval of the KPI Matrix on 14 December 2021. **Action Marked as Completed**

4	Development of college senior staff to achieve the production of succinct, analytical, accountable reports with clear recommendations to the governing board. Inclusion of 'learner and learning implications' and 'financial health' implications into our reporting format. *(EER Recommendations 8 & 9)* *(Review of Code of Good Governance AY 20/21 Recommendation)*	Following the completion of the restructure formal training will be arranged for all Managers on report writing. EMT members will be consulted on the development of schedule of submissions for each committee. Review of our report template and consideration of a standard template for each report along with consideration to expected length of each report. Development of Reading Rooms within AdminControl to allow for additional background information to be available to Board Members.	Principal Board Secretary & Committee Chairs Board Secretary & Committee Chairs. Board Secretary	June 2021	EMT restructure has now been completed. December 2021 Review: • Formal training on report writing is to be considered and discussed at the Board of Management meeting on 14 December 2021. • Our yearly schedule of submissions is now in place. • Our report template has been reviewed and updated. • A reading room has been developed and is now available within the Board of Management page on Microsoft Teams. Following discussion at the Board of Management meeting on 14 December 2021 it was agreed that training on report writing is no longer required. **<u>Action Marked as Completed</u>**
OTHER ACTIONS					
5	Development of more and regular board creative time to support formal governing board decision making through the use of sessions to explore ways to address relevant educational and community development questions. *(EER Recommendation 5)*	Review of how agendas for each Committee are structured to allow for creative time to be built. Agendas to have sufficient time and space for EMT to share their thoughts with Board Members. Development of an annual programme to assist members to have meaningful time and dialogue with students.	Board Secretary & Committee Chairs Board Secretary	June 2021 August 2021 **Partially Complete – development of annual programme has been Extended to August 2022**	Board Members will be asked whether they would wish to participate and volunteer for the Community Garden. December 2021 Review: Creative time has now been built into all Committee agendas. An annual programme for members to have meaningful time and dialogue with the students is still to be drawn up. However, members of the LT&R Committee have been able to visit the ABC Gardens and the School of Forestry as well as some Board of Management members being able to tour the campus.

6	To support the newly appointed Board Secretary and Chair of the Board of Management, to develop a programme (which may include a mentor) to assist the first year in office for them and for future role holders. *(EER Recommendations 6 & 7)*	Mentoring programme to be developed. A programme of induction for both the Chair and the Board Secretary roles to be developed.	Board Secretary Board Secretary & Chair of BOM.	30 April 2021 **Action Ongoing – Development of mentoring and induction programme has been extended to August 2022**	The Board Secretary has a mentor in place and will develop an appropriate programme to follow. December 2021 Review: A mentoring programme is still to be developed for the Board Secretary. A programme of induction for both the Chair and the Board Secretary roles is to be developed. The programme of induction for the role of Chair will be prioritised in the New Year as we will be advertising for the role of Chair.
7	To develop strategic action plans for the following annual reports – Health & Safety, Equality and Diversity, Safeguarding *(EER Recommendation 12)*	A review of how our strategic action plans are reported to be carried out as part of the development of our schedule of submissions	Board Secretary, Committee Chairs & EMT	June 2021	December 2021 Review: A yearly schedule of submissions is now available for all committees. Within this submission we have included where strategic action plans are required to be reviewed and brought to Committees for consideration. **<u>Action Marked as Completed</u>**
8	Review the working relationship between the college governing board and UHI to ensure clarity, engagement, and contribution for the Inverness College governing board. *(EER Recommendations 11 & 13)*	Links will continue to be built with the Chair of Court and the Vice Chancellor, UHI. We will remain mindful of the clear boundaries between IC governing and UHI.	Principal & Chair of Board of Management	Ongoing	The Principal and the Chair of the Board of Management have met with the Vice Chancellor and the Principal will have a follow up meeting with him. December 2021 Review: The Principal and the Interim Chair of the Board of Management continue to meet and work with the Vice Chancellor and Principal of UHI and the Chair of Court. **Action remains ongoing**

9	Implementation of the plan to address aspects of the Code of Good Governance. It is suggested that a review of progress is undertaken every three months to check on progress and any issues arising from implementation. *(EER Recommendation 14)*	The annual review of the Code of Good Governance will be included within the schedule of submissions when developed.	Board Secretary		Development actions from the review of the Code of Good Governance will be addressed within this plan. December 2021 Review: The Review of the Code of Good Governance is included within the yearly calendar of submissions for the Board of Management. All recommendations from the review will be incorporated into the Board of Management Development Plan. **<u>Action Marked as Completed</u>**
10	All Board Members should be aware of the formal process for setting the Principal's remuneration. *(Review of Code of Good Governance AY 19/21 Recommendation)* *(Review of Code of Good Governance AY 20/21 Recommendation)*	An updated guide to the process will be developed and circulated to all Board Members.	Board Secretary	30 April 2021 **Action Ongoing – timescale has been extended to June 2022**	The remuneration process in respect of the Principal's salary should be carried by the PR&R Committee as some time has elapsed since it was last reviewed. December 2021 Review: The Principal's PRD took place on 29 October 2021. A further PRD meeting is to be scheduled in January 22. Following this the PR&R Committee will meet and review an appraisal report and begin the process for the review of the salaries for both the Principal and the EMT.

11	Development of the induction process to include online inductions. *(Review of Code of Good Governance AY 19/21 Recommendation)* *(Review of Code of Good Governance AY 20/21 Recommendation)*	Review of the induction process to take place. This will include the inclusion of Board Members responsibilities as Charity Trustee's	Board Secretary	30 April 2021	The Board Secretary is currently carrying out a review of the induction process and papers. This has been delayed due to the cyber-incident December 2021 Review: The Board Member induction process has been reviewed and all paperwork has been updated. All induction paperwork is now available to Board Members via SharePoint. **Action Marked as Completed**
12	Enhancing diversity on the Board of Management	Review of where we advertise and publicise roles on the Board of Management to ensure that we reach the widest and most diverse range of possible candidates during a recruitment process. Establishment of diversity targets.	Board Secretary	October 2021	The Board Secretary will ensure that the upcoming recruitment campaign is widely advertised and publicised. December 2021 Review: We have had a wide variety of applicants for both the Autumn 2020 and Autumn 2021 recruitment campaigns. **Action Marked as Completed**

Action Plan Updated: 13/01/22 following decisions made at the Board of Management meeting on 14/12/21