Audit & Risk Committee Meeting
Monday 02 March 2026 at 17:00 – 19:30
via Teams

Director's present	Role	Initials
Tina Havenhand	Nexus MAT Director/Chair	Chair
Ray Palmer	Nexus MAT Director	RPA
Sue Shelley	Nexus MAT Director	SS
Also present		
Warren Carratt	Nexus MAT CEO	CEO
Joel Hardwick	Nexus MAT Executive Director: Corporate Affairs	JH
Karen Smith	Nexus MAT CFO	CFO
Lana Stoyles	Executive Director: Business Transformation	LS
Lyndsay Foster	Governance Clerk	LF
Apologies		
James Kelly	Nexus MAT Director	JK
Gill Askew	Nexus MAT Director	GA
Mark Greenwood	Nexus MAT Director	MG
No Apologies		
None		

1. APOLOGIES FOR ABSENCE	
1.1 Welcome & receive apologies for absence Apologies were received from MG, JK and GA.	
1.2 To accept apologies for absence. Apologies were accepted from MG, JK and GA.	
2. ITEMS OF URGENT BUSINESS	
2.1. Chair to determine any items of urgent business to be considered. None.	
3. DECLARATION OF INTERESTS	
3.1. Individual Directors to declare any personal, business or other governance interests on any item on the agenda. None to discuss.	
4. AUDIT & RISK COMMITTEE MEETING MINUTES	
4.1. To approve the minutes of the following meeting: Audit and Risk Committee held on 10 November 2025. The minutes of the Audit & Risk Committee Meeting held on 10 November 2025 were received and agreed as a true and proper record.	
4.2. REVIEW OF ACTION TRACKER	
The outstanding actions on the tracker were reviewed and updated.	
4.3. MATTERS ARISING FROM THE MINUTES	
The committee reviewed the updated action tracker. • The land registry issue previously raised had been resolved satisfactorily, with auditors confirming completion and the Board receiving confirmation this was removed from the management letter in December. • The operational procurement risk register action had been completed, and further detail was scheduled within the agenda. • The statutory returns checklist had been updated to replace references to the ESFA with DfE, and this correction would be properly reflected when the item moved into the completed log. All other actions were noted as completed or scheduled for discussion under specific agenda items.	

5. ITEMS TO BE CONSIDERED	
5.1 2024-25 Gender Pay Gap Report The CEO presented the 2024–25 Gender Pay Gap report. Although the Trust's median pay gap decreased, its mean pay gap increased, creating a net movement of 10% compared with the prior year. The Trust remains a predominantly female workforce, with 76% of upper middle and 72% of upper quartile staff being women. **SS asked about opportunities for lower paid staff, particularly women, to progress?** The CEO highlighted factors contributing to the pay gap, including the high number of women in part-time or term-time-only support roles, and the career impact associated with family and caring responsibilities. Although the Trust has not received any indicators regarding gender being a factor in blocked career progression, the CEO noted that some survey data indicated perceptions of gender based barriers in certain schools, where leadership teams were predominantly female. The Chair welcomed the report but requested benchmarking data for comparison against the sector and against similar special school trusts. **ACTION: CEO to provide benchmarking data for comparison against the sector and against similar special school trusts.**	**ACTION: CEO 01/07/26**
5.2 School Resource Management Self-Assessment checklist CFO presented the annual return, which outlines compliance against Academies Trust Handbook requirements. Responses were broadly unchanged from previous years, and the committee approved the return for submission. **Chair raised a question about the trust's compliance with the six core digital and technology standards?** JH explained that these standards apply for 2030 compliance, and the trust is making phased progress, including cyber security work and planned infrastructure improvements. JH noted reporting on progress will become a standing item for the audit and risk committee. The committee approved this for submission. 5.3 Trust Risk Register The CEO confirmed no material changes since the last version, with ongoing amber risks due to environmental uncertainties and funding, and noted continued lobbying from improved funding decisions. 5.4 Finance Risk Register	

CFO updated the committee on changes to the Finance Risk Register, including updated assumptions for new specialist provision and delays in securing DfE approval for the Nexus Services Group (NSG) loan, which has been classed as "novel, contentious and repercussive," therefore requiring Treasury approval.

The committee discussed risk attribution between Nexus MAT and NSG, agreeing that Nexus's principal exposure relates to the repayment of any loan, while operational or cash flow risks for NSG should be captured on NSG's own register, not the Trust's.

5.5 Procurement Risk Register

LS presented the operational procurement risk register, explaining that it is a live working document capturing a wide range of risks related to suppliers, the market and internal operational issues. It extends beyond the procurement team, as schools and central teams regularly flag supplier concerns, enabling a more holistic view of the Trust's risk exposure. Particular risks highlighted included the volatile labour driven cost increases affecting cleaning and catering contracts, the absence of a centralised tender portal and pockets of uncertainty around certain legacy supplier arrangements. LS also emphasised that this register sits one tier below the strategic register and was provided at the committee's request for transparency.

SS acknowledged the usefulness of the information but expressed concerns that the report was too operational for board level scrutiny. They noted the difficulty in using the register to form strategic assurance and felt it required contextualisation alongside strategic procurement reporting. The CEO stated that the document is an operational management one, and should not be changed to meet governance needs if its primary function is management.

ACTION: When the Procurement Pipeline returns in the summer, the operational register will accompany it as an appendix. This will allow the committee to view strategic and operational risks together and decide on the most appropriate format for future reporting by LS.

ACTION: LS 01/07/26

5.6 Competent Person Termly Health and Safety Update Report

LS presented the health and safety report, confirming that no immediate high risk issues had been identified across the Trust. She praised the strengthened performance of the SRVP (Site Resource and Vulnerability Programme), noting that many previously overdue actions had now been addressed due to an increase in oversight, support and training.

The Trust had introduced a new Premises Management Policy to standardise compliance requirements across schools. This enables better alignment between individual site level procedures and the Trust wide digital compliance system, "I Am

Compliant." Schools with unique operational quirks (e.g., bespoke fire alarm systems) can now document site-specific details within the system while maintaining a single Trust standard. A total of 109 audit actions were reported during the period, of which 62 were high severity, though high severity ranged from general housekeeping to technical statutory breaches. The Trust continues to prioritise two significant Trust wide issues: • **Fire doors and fire compartmentation**: Surveys revealed substantial remedial work required across several sites, with an initial estimate of £300,000 for urgent work. High-risk doors (such as those in server rooms and plant spaces) are being prioritised, and some early interventions have already been completed at schools like Discovery and Lotus. • **Chemical registers and food hygiene compliance**: Inconsistent approaches across schools have required targeted training of site staff and teaching teams. LS also provided an update on the training programme. Two School Resource Business Partners had already completed IOSH training, with more scheduled. Additional training had been delivered for site supervisors, particularly relating to fire door repairs, water temperature testing, and hygiene control. A new health and safety officer had recently been appointed to strengthen capacity. SS and Chair raised significant concerns about the readability of the health & safety dashboard, noting that the updated colour scheme and condensed layout made it hard to draw conclusions. The loss of the previous red-amber-green clarity and the overcrowded school data made the chart difficult to interpret. **ACTION: LS and CEO agreed to revise the reporting by removing completed actions, grouping schools for clarity, and focusing on exception reporting to make the data more accessible and useful for directors.** The following was agreed by the committee: • Remove all completed actions from the dashboard to reduce visual clutter. • Report by exception only, enabling directors to focus on problem areas. • Reformat the charts by grouping schools into logical clusters to improve readability and benchmarking. • Revised visuals to be presented at the next meeting. **RP asked about recent audit themes and training?** LS confirmed ongoing support for schools with higher needs, detailed training for site supervisors and resource managers and a focus on fire safety, housekeeping and food hygiene. 5.7 P5 January Budget Monitoring Report	**ACTION: LS/CEO 01/07/26**

CFO presented the Period 5 accounts, reporting a year-to-date surplus of £380,000, a reduction of approximately £500,000 compared with the prior month. This movement was attributed mainly to: • A £250,000 IT infrastructure investment approved by the Board. • Revised pay award assumptions (from 2% to 3%). • Updated pension contributions resulting in significant Trust wide savings. • A slight reduction in anticipated Core School Budget Grant income. Top-up funding discussions with local authorities indicated increases of an average 2.5% in Sheffield and 1.5% in Doncaster, although Nottingham, Barnsley, Rotherham and Nottingham City had not yet proposed an increase. **Chair asked about significant increase in trade creditors?** CFO explained it was due to timing of payment runs, a low December balance and a large invoice for a capital project at Hilltop for £400k, confirming the fluctuation was not unusual. **ACTION: CFO to circulate written detail clarifying the January creditor increase.** 5.7.1 P5 Balance Sheet Report Discussed as part of 5.7. 5.7.2 P5 Cashflow Report Discussed as part of 5.7. 5.8 Audit Tracker CFO confirmed that the tracker had been updated to incorporate external audit recommendations. The committee discussed evolving the tracker into thematic categories, with granular, technical information being retained in detailed reports (e.g., data protection, cyber). A new annual Information Governance Overview report will be introduced for the summer meeting. 5.9 Purchasing Compliance Review CFO presented her report on invoice approval compliance, which had been requested by the committee following recurring audit comments in previous years. CFO explained that Nexus performs well compared with other MATs, with curriculum related expenditure achieving over 90% compliance in advance approvals. Lower	**ACTION: CFO 01/07/26**

compliance was mainly found in areas such as emergency premises works and annual contract renewals, where advance purchase orders were not always practicable. CFO also reported that across the sector, many MATs struggle to extract accurate compliance data due to system limitations; some larger trusts cannot report on compliance at all. Several CFOs expressed that auditors often do not scrutinise this area unless it has been historically flagged. Schools do not appear to be authorising spending unknowingly. Headteachers consistently confirm that all approved retrospective invoices relate to known commitments. To support a more proportionate approach, the Finance Manual wording has been updated. While prior approval remains the standard, the manual now acknowledges that this is not always possible in practice, and post approval is permissible with appropriate oversight. **The committee unanimously accepted the recommendations, noting that concerns should continue to be monitored through monthly reviews and escalated through the Schools of Financial Concern process where necessary.** 5.10 GDPR Audit JH presented the second annual Data Protection audit report. The review showed significant improvement since 2023, particularly in centralised governance and handling of personal data. Minor non-compliances were remedied immediately. Remaining development areas included: • Completion of legacy data sharing agreements, particularly for older school specific systems. • Consolidation of Information Asset Registers and Record of Processing Activities into a more streamlined, centralised format. JH outlined plans to complete these actions by the end of the academic year. SS raised the need for ongoing governor training and evidence of compliance. JH confirmed the basic training is provided at the annual away day, with additional resources signposted and agreed to review further training needs. **ACTION: JH to develop and implement an action plan to address outstanding recommendations from the data protection audit, particularly regarding data sharing agreements and information asset registers, and report progress in a new standard information governance overview report to the committee.**	**ACTION: JH 01/07/26**

6. ANY OTHER URGENT BUSINESS	
6.1 To consider any other urgent business agreed by the Chair None raised.	
7. CONFIDENTIALITY & RISK	
7.1 To consider the confidentiality of any items discussed during the meeting No confidential items or additional risks were raised. **7.2 To consider any areas of risk discussed during the meeting** No confidential items or additional risks were raised.	
8. DATES OF NEXT MEETINGS	

Wednesday 01 July 2026	17:00 – 19:30	MS Teams	Audit & Risk

Minutes approved

CHAIR	SIGNATURE	DATE
Tina Havenhand		