THE UNIVERSITY OF MANCHESTER

AUDIT AND RISK COMMITTEE
22 April 2026
confirmed

Present:	Deirdre Evans (Chair) Ann Barnes Sarah Munby Natasha Traynor
Apologies:	Tony Raven Alex Creswell (Advisor to Committee)
In attendance:	Patrick Hackett, Registrar, Secretary and Chief Operating Officer (RSCOO) Carol Prokopyszyn, Chief Financial Officer (CFO) Gemma Lyons, Director of Finance, Faculty of Science and Engineering David Barker, Executive Director of Compliance and Risk Attia Ramzan, Director of Safety Services (items 1-5) Tom Pattinson, Director of Transformation (item 7) Richard Young, Uniac Sue Suchoparek, Uniac Alastair Duke, PKF Littlejohn
Secretary:	Mark Rollinson, Deputy Secretary

1. Declarations of interest

Noted: there were no new declarations of interest.

2. Minutes

Resolved: that the minutes of the meeting held on 28 January 2026 be approved.

3. Matters arising and action tracker

Received: the action tracker setting out progress against matters arising from earlier meetings. This included (as an appendix) a report satisfying the request at the previous meeting for a report illustrating the corporate governance arrangements for all subsidiaries and satellite entities.

Agreed: that the Committee be provided with a further update on the detail of risk escalation processes to ensure that any significant, emerging risks were identified at an early stage. **Action: Director of Finance, Faculty of Science and Engineering**

4. Appointment of co-opted members

Reported: following a selection process which concluded with interviews with (*inter alia*) the Chair of the Board and the Chair of the Committee, the Board had confirmed the appointment of Marion Hannon and Mark Raban as co-opted Committee members, for an initial term ending on 31 August 2029.

5. Strategic Risk Register

Received: a report updating the Committee on the development of the Strategic Risk Register (SRR), providing a structured articulation of the University's principal strategic risks aligned to delivery of the Manchester 2035 Strategy (MCR2035).

Reported:

(1) The University's risk profile was concentrated across financial sustainability, digital capability and operating model domains, with delivery of MCR2035 highly dependent on successful transformation across these areas.

(2) The SRR was supported by Strategic Risk Management Guidance which established a consistent methodology for risk articulation, and detailed risk outputs for each Strategic Risk

(3) The revised SRR represented a significant step forward in the maturity of strategic risk management at the University, providing:

- A consistent cause–event–consequence articulation of strategic risks.
- Clear alignment to MCR2035 through seven Strategic Objective "risk anchors"
- Improved visibility of interdependencies across strategic risks.
- Introduction of Maximum Foreseeable Exposure (MFE) to support Executive prioritisation.

(4) Seven Strategic Risks had now been articulated at an initial level. These reflect the most material threats to delivery of the University's strategic objectives, covering education, research, innovation, digital capability, financial sustainability, people and culture, and institutional reputation, compliance and civic standing.

(5) The maturity of risk articulation varied across risks, reflecting differences in engagement approach (i.e. most risks had been developed through dedicated workshops whilst others were reliant, to date, on desktop reviews: further workshops were planned) and the relative maturity of underlying functions. This was consistent with the phased approach agreed with University Executive. The next phase will focus on strengthening control identification, ownership and effectiveness assessment, alongside refinement of risk ratings and MFE to support enhanced assurance and oversight.

(6) The SRR will operate as a live and evolving framework, with ongoing ownership by Executive Risk Owners, Risk Managers and Control Owners. This will be supported through structured monthly risk challenge sessions (between risk owners and risk managers), ongoing risk analysis, and continued development of emerging risk, idiosyncratic (black swan) and opportunity risk perspectives.

Noted:

(1) The Committee welcomed the revised SRR which represented a step change in the presentation and articulation of risk. The approach had been endorsed by University Executive at its meeting on 20 April 2026.

(2) Embedding the approach and developing risk literacy was important. The Strategic Risk Management Guidance included advice on escalation of operational risks to the SRR.

(3) Evolving risk maturity (including understanding of the MFE concept) would enable more purposeful discussions about prioritisation and necessary consequential actions

(4) The evolving SRR would also facilitate UE and Board understanding of risk appetite and risk tolerance in specific strategic risk areas. Ensuring acceptable levels of residual risk was dependent on the efficacy of control measures.

(5) Further work was planned on risk interdependency.

(6) There was recognition of the need for more evidence to underpin control effectiveness measures in relation to Risk SO1 (Education quality and student experience).

(7) For Risk SO2 (Research excellence and impact), workshops were still to be held so this was in a more immature state than other risks.

(8) In relation Risk SO4 (Digital Capability and Resilience) there were a significant number of controls currently designated as ineffective, and it was important to understand planned measures to improve the control environment.

(9) The Committee emphasised the importance of regular engagement with the evolving SRR, including, once the SRR was in a mature state, exception reporting to each meeting.

(10) The Committee's preferred approach, from the start of the next academic year, was to hold rotating deep dives into each strategic risk area, which would enable comprehensive coverage of the full SRR over a two-year period.

(11) The next iteration of the SRR would be presented to the next meeting of the Committee incorporating input form and reflection on further planned workshops.

Action: Director of Safety Services

6. Health, Safety and Wellbeing Quarterly Report (Q2, November 2025-January 2026)

Received: the latest quarterly report from the Health, Safety and Wellbeing Committee which provided an update on progress against a range of key performance indicators and metrics, including key trends.

Reported: since the report had been drafted there had been a positive radiation safety accreditation visit, which would be referenced in the next quarterly update.

Noted:

(1) The Committee's wish for a more detailed demographic analysis of sickness absence was hindered by data quality issues (this related to both general sickness absence reporting and anxiety, depression and stress related absence both of which were set out in the report).

(2) The data quality issue was in part related to shortcomings in current systems: the implementation of Future Foundations would address this, and the sickness absence element of this was due for launch before the end of the calendar year.

(3) Insufficiently robust data was also in part attributable to cultural and behavioural issues and ensuring a consistent approach to reporting was important. Efforts to improve this would form part of planned messaging to ensure a more overtly safety conscious culture across the University. The Committee welcomed this, noting the importance of improved data quality in an environment of significant institutional change.

(4) In response to a question, the very low numbers made it difficult to establish direct causation between improvement in crisis intervention data and a reduction in deaths by suicide: this was an area where the Committee would welcome any potential for more in-depth analysis.

(5) The Committee would welcome greater focus on key strategic issues in future summary reporting.

(6) There was current focus on optimal deployment of health and safety related resources to ensure a coherent one-University approach with appropriate focus on both first and second lines of defence. **Action: Director of Safety Services**

7. Infrastructure Portfolio Delivery Update

Received: a report providing an update on delivery of Manchester 2035, noting the development of:

- A defined three-year work package
- The Delivery Handbook as the guiding framework for delivery
- Clear accountability structures across initiatives
- Two primary sources of funding aligned to priorities
- Agreed measures of success
- A rolling, institution-wide view of change load

Reported:

(1) Together, the above provided a single, coherent view of delivery, enabling more effective prioritisation, clearer decision making, and active management of risk and capacity across the University. This approach was now shaping how delivery leads, senior stakeholders, and committees engaged with the portfolio.

(2) The three-year work package was now the primary lens for managing delivery, providing a consolidated view of progress, dependencies and risk to support prioritisation and early intervention.

(3) Critical paths were being tested (in terms of both technology delivery and organisational load) with action underway to manage this proactively, including prioritisation, sequencing, and ongoing engagement with University Executive (UE) and delivery leads to ensure focus, alignment, and sustainable delivery across the portfolio.

Noted:

(1) The Committee welcomed the attention on prioritisation and sequencing and emphasised the importance of ensuring that future reports captured the totality of overall change load.

(2) Future reports would be overtly linked to the work package, informed by UE Committees focus on relevant aspects of delivery.

(3) In relation to risk, the importance of a link to the SRR and reference to both appropriate escalation routes and mitigation measures where required.

Action: Director of Transformation

8. Internal Audit and Internal Control

(i) Uniac Progress Report

Received: the latest Uniac internal audit progress report, which included a summary of progress since the previous meeting. The ranking conclusion of each review now included a dial so that members could understand how close the awarded grade was to the boundary of another classification.

(a) Expenses

Reported:

(1) Uniac had carried out an audit of the expense system accessed through the MyView portal which was part of Resource Link - the University's People and payroll system, The system had last been subject to internal audit. five years previously.

(2) Uniac provided a grading of reasonable assurance, with two high and three medium risk findings. High risk findings related to evidence of IT equipment and software being claimed through expenses and a consequent potential financial and reputational risk to the University, and non-compliance with University policy and financial procedures.

(3) The CFO had provided a companion report in response to the Uniac review: this noted that the need for all parties in the process to be reminded of their roles and responsibilities, to strengthen approval controls. This included ensuring understanding of the expenses guidance and empowerment to reject claims.

Noted:

(1) The report clearly indicated concerns about control implementation and behaviour rather than control design.

(2) In response to a question, confirmation that the IT Directorate was aware of the report findings (in relation to IT purchase) and was engaged on assessment and mitigation of any potential risk

(3) The expenses policy was being updated in support of Future Foundations to clarify requirements, with a planned relaunch due by the end of July.

(4) An update on any further action would be provided to the next meeting.

Action: CFO

(b) Transparent Approach to Costing (TRAC)

Reported:

(1) TRAC is a mandatory cost allocation and reporting framework used by UK higher education institutions to calculate the full economic cost of teaching, research, and other institutional activities. The University's last independent review, completed by Uniac in February 2023, concluded with reasonable assurance and the latest audit was scheduled to assess whether the University continues to develop and maintain compliant TRAC methodologies and whether key controls remain effective, appropriately documented, and aligned with sector expectations.

(2) Following the review, Uniac provided a reasonable assurance conclusion, with three medium risk findings, including clarifying and encouraging use of TRAC outputs.

(c) Fire Management: Governance and Oversight

Reported:

(1) The audit reviewed the University's approach to fire management, assessing the following: effectiveness of governance and management arrangements: effectiveness of documented policies, procedures and guidelines: and clarity of respective roles and responsibilities within Estates and Facilities, faculties, schools, divisions, directorates etc.

(2) Uniac provided a grading of reasonable assurance, with five high and two medium risk findings. High risk findings included ensuring that there was clear signposting to relevant policy and procedure, proactive engagement at local level, and a clearer centrally co-ordinated approach to induction and evidencing compliance

Noted: echoing comments in relation to the Expenses review, the importance of clarifying leadership expectations and driving behaviour to ensure compliance.

(d) UUK Accommodation Code of Practice (ACOP) Compliance: 1) University Halls and 2) Private Halls (Manchester Gardens and Square Gardens).

Reported:

(1) There were separate reviews assessing compliance with the UUK ACOP, based on a sample of University owned properties and privately owned halls.

(2) For both University owned and private halls, the reviews provided substantial assurance with a small number of minor non-compliance items.

(ii) Internal Investigatory Work

Noted: there were no current issues to report.

9. Office for Students (OfS) Conditions of Registration Assurance Map

Received: the updated OfS Assurance Map, which was originally developed in 2023.

Reported:

(1) The Assurance Map's key purpose was to detail how the University complies with the OfS Ongoing Conditions of Registration and provide assurance to the Board that the University is compliant with the requirements of the OfS.

(2) An enhancement to the previous version of the Assurance Map was a RAG rating providing an evidence-based management assessment of the level of assurance for the Board on compliance with each of the OfS Registration Conditions.

Noted:

(1) The Committee welcomed the report and noted potential overlap with elements of other risk and assurance mechanisms, including the SRR and annual academic governance assurance reports.

(2) The importance of ensuring that any emerging compliance challenges were raised with the Board in a timely way, including escalation via the SRR where appropriate.

Action: Deputy Secretary

9. Fraud Action Plan Update

Received: an update on the Fraud Action Plan. including targeted activity delivered in collaboration with Uniac and ongoing work to refresh the fraud risk framework and develop a university-wide Fraud Risk Register.

Reported: the focus of the work to date had been holding fraud risk workshops across directorates and faculties to capture all appropriate risks. A full update would be provided to the committee at the June meeting.

Noted:

(1) A University-wide fraud risk register (FRR) was being developed through engagement with each of the central professional services directorates and the faculties.

(2) The development of the FRR included student related fraud matters (for example in relation to AI and academic work and the potential for fraudulent applications for

student barriers) addressed via engagement with the Directorate for the Student Experience.

(3) The developed FRR would cover 8-10 key risks with numerous sub-risks as a second layer.

(4) Fraud risks as detailed in the latest British Universities Finance Directors' Group (BUFDG) annual sector survey were being factored in.

Action: CFO and Uniac

10. External Audit

Noted: a brief verbal update from PKF, advising that satisfactory progress was being made with the external audit for 2025-26. Planning meetings would enable a further report to the June Committee meeting**.** **Action: PKF**

11. Public Interest Disclosures

Received: an update on Public Interest Disclosure/Whistleblowing cases.

12. Committee Forward Agenda 2025-26

Received: the updated Committee forward agenda

13. Dates of remaining meeting in 2025-26

Noted: the remaining meeting in 2025-26 would take place on Wednesday 10 June 2026 (11am-1pm):