

Glasgow Kelvin College

Annual Report to the Board of Management and Principal on the Provision of Internal Audit Services for 2023/24

Internal Audit report No: 2024/11

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Annual Report and Opinion

Introduction

- 1.1 We were re-appointed in June 2019 as internal auditors of Glasgow Kelvin College ('the College') for the period 1 August 2019 to 31 July 2022 with the option to extend for a further 24 months thereafter at the discretion of the College, which has been invoked. This report summarises the internal audit work performed during 2023/24.
- 1.2 The contract extension took us beyond the Audit Needs Assessment (ANA) and Strategic Plan 2019 to 2022 (Report 2020/01, finalised 25 September 2019). However, it was agreed that a full ANA would not be undertaken at that time. The internal audit Annual Plan for 2023/24 (Report no. 2024/01) was based on discussions with the Vice Principal Operations and Director of Estates and Corporate Services and consideration by other members of the College Senior Management Team; consideration of areas of higher risk and need from a review of the College's Strategic Risk Register; and a review of previous internal audit coverage.
- 1.3 The internal audit work undertaken in the year followed the agreed outputs set out in the approved Annual Plan for 2023/24.
- 1.4 The reports produced are listed in Section 2 of this report and a summary of results and conclusions from each assignment is given at Section 3.
- 1.5 An analysis of time spent against budget is at Section 4.

Public Sector Internal Audit Standards (PSIAS) Reporting Requirements

- 1.6 The College has responsibility for maintaining effective internal audit activity. You have engaged us to provide an independent risk-based assurance and consultancy internal audit service. To help you assess that you are maintaining an effective internal audit activity we:
 - Confirm our independence;
 - Provide information about the year's activity and the work planned for next year in this report; and
 - Provide quality assurance through self-assessment and independent external review of our methodology and operating practices.
- 1.7 Self-assessment is undertaken through:
 - Our continuous improvement approach to our service. We will discuss any new developments with management throughout the year;
 - Ensuring compliance with best professional practice, in particular the PSIAS;
 - Annual confirmation from all staff that they comply with required ethical standards and remain independent of clients;
 - Internal review of each assignment to confirm application of our methodology which is summarised in our internal audit manual; and
 - Annual completion of a checklist to confirm PSIAS compliance.

Public Sector Internal Audit Standards (PSIAS) Reporting Requirements (Continued)

- 1.8 External assessment is built into our firm-wide quality assurance procedures. Henderson Loggie LLP is a member of Prime Global, a global association of independent accountancy firms. Continued membership of Prime Global is dependent on maintaining a high level of quality and adhering to accounting and auditing standards in the provision of our services. An independent review was undertaken during May / June 2024 of the firm's policies and procedures relating to internal audit services and their application to the firm's internal audit clients. The independent review confirmed that Henderson Loggie was, in all material respects, compliant with the requirements of PSIAS.

Significant Issues

- 1.9 All work conducted in 2023/24 assessed systems as 'Good' or 'Satisfactory', or provided an unqualified audit opinion on College returns, and there were therefore no significant issues identifying major internal control weaknesses arising from our internal audit work. In general, procedures were operating well in the areas selected, but a few areas for further strengthening were identified and action plans have been agreed to address these issues.

Opinion

- 1.10 In our opinion, the College has adequate and effective arrangements for risk management, control, and governance. Proper arrangements are in place to promote and secure Value for Money. This opinion has been arrived at taking into consideration the work we have undertaken during 2023/24 and in previous years since our initial appointment.



Reports submitted

Number	Title	Overall Grade	Recommendations	Priority 1	Priority 2	Priority 3
2024/01	Internal Audit Annual Plan 2023/24	N/A	N/A	-	-	-
2024/02	Risk Management	Good	4	-	-	4
2024/03	Curriculum Planning	Good	-	-	-	-
2024/04	Corporate Planning	Good	1	-	-	1
2024/05	Staff Development	Good	2	-	-	2
2024/06	Systems Development / Implementation	Satisfactory	1	-	1	-
2024/07	Student Fees & Contracts / Registry	Good	-	-	-	-
2024/08	Follow-Up Reviews 2023/24	3 of 11 recommendations required further action	3	-	-	3
2024/09	2023/24 Student Activity Data	Audit opinion unqualified	2	-	-	2
2024/10	2023/24 Student Support Funds	FE – unqualified HE – unqualified but observations made EMA –unqualified	-	-	-	-

Overall gradings are defined as follows:

Good	System meets control objectives.
Satisfactory	System meets control objectives with some weaknesses present.
Requires improvement	System has weaknesses that could prevent it achieving control objectives.
Unacceptable	System cannot meet control objectives.



Reports submitted (Continued)

Recommendation grades are defined as follows:

Priority 1	Issue subjecting the organisation to material risk and which requires to be brought to the attention of management and the Audit and Risk Committee.
Priority 2	Issue subjecting the organisation to significant risk and which should be addressed by management.
Priority 3	Matters subjecting the organisation to minor risk or which, if addressed, will enhance efficiency and effectiveness.



Summary of Results and Conclusions

2024/01 – Annual report 2023/24

Final Issued – August 2023

The purpose of this document was to present for consideration by the Audit and Risk Committee, the annual operating plan for the year ended 31 July 2024. The plan was based on discussions with the Vice Principal Operations and Director of Operational Services and consideration by other members of the College Senior Management Team, consideration of areas of higher risk and need identified from a review of the College's Strategic Risk Register, and a review of previous internal audit coverage.



2024/02 – Risk Management

The scope of the audit was to consider whether there are corporate procedures in place to adequately assess risk and minimise the possibility of unexpected and unplanned situations developing, which are in line with good practice.

The table opposite notes each separate objective for this review and records the results.

Strengths

- There has been significant work undertaken by management to establish an operational Risk Management Framework, which is embedded across the College and its management levels;
- Risk management arrangements are formally led by the Board of Management and are operationally led by Vice Principal Operations and Director of Estates and Corporate Services;
- The Risk Management Framework (December 2021) is documented and is made available to staff on the College's Intranet and published on the College's public facing website;
- The Audit and Risk Committee (ARC) has delegated authority, on behalf of the Board of Management, to review all College strategic risks via the College Risk Register at each of its quarterly meetings;
- The Board of Management reviews the College Risk Register twice per year. This analysis is supported by narrative reports on the risk management arrangements and with commentary on the assurances provided. The College Risks are also reviewed by the Board of Management as part of its review and approval of the annual financial statements;
- The College has an Assurance Map (September 2023), which is frequently updated, and the format aligns to good practice by identifying assurances against College issues across the three lines of defence;
- The Board of Management has set its risk appetite for eight risk categories within the Risk Management Framework (December 2021);
- Risk registers are deployed at the strategic and operational levels across the College Directorates and Teams. They are also utilised in projects which have a value which exceeds £250,000, in line with good practice;

Final Issued – February 2024

The objective of this audit was to ensure that:	
1. There is a process in place to provide reasonable assurance to the Board of Management and to the Principal in relation to the declaration on risk required for the financial statements.	Good
2. The process in place applies good practice in risk management.	Good
3. Key risks have been identified and are being appropriately controlled, mitigated, reported, and discussed at appropriate levels of management and the Board.	Good
Overall Level of Assurance	Good



2024/02 – Risk Management (Continued)

Strengths (Continued)

- Operationally, there is autonomy to develop subject specific risk registers. For example, ICT has plans to establish a dedicated Cyber Security Risk Register, which would enhance transparency and support governance and reporting on ICT specific assurance arrangements;
- Risks are scored on a 5x5 matrix based on the likelihood and impact of the risk to the College before (inherent) and after (residual) mitigations are applied;
- There is a dedicated and actively attended Risk Management Committee (RMC) with a formal Terms of Reference (last updated in December 2021). The RMC provides a reporting link from operational levels to the Senior Management Team (SMT) via its Chair, who is the Director of Estates and Corporate Services;
- Risk also features on all formal reports to the Board of Management, Committees, and management meetings through the highlighting of associated risks within the covering papers; and
- Positive feedback was provided on risk and assurance reporting arrangements to the Board of Management by both the Chair of the Board of Management and the Chair of the ARC.

Opportunities for Enhancement

- Risk management training should be formally factored into the induction process for new members of the Board of Management. The last formal training completed was delivered to Board members in 2021;
- The Board of Management should formally assess its risk appetite annually in order to sense check that the risk appetite for each risk category remains appropriate, and to allow annual evaluation of the impact of changes in the internal and external environment. The risk appetite was last formally reviewed in December 2021 within the documented Risk Management Framework. The need for a refresh of the risk appetite had already been identified by management;

2024/02 – Risk Management (Continued)

Opportunities for Enhancement (Continued)

- There are currently some inconsistencies in the descriptions used for risk scoring categories between those defined in the Risk Management Framework (December 2021) and the risk register Excel workbooks currently used by management. In addition, it was noted that management have identified the need to complete further work to connect the risk appetite sorting by the Board and to individual risk scores set by managers; and
- The College Risk Register could be enhanced by adding a column that allows management to readily identify the specific strategic objective that is impacted by each of the risks.

2024/03 – Curriculum Planning

This audit considered the key risks in relation to the College's curriculum.

The table opposite notes each separate objective for this review and records the results.

Strengths

- The College's strategic ambitions and the associated priorities within them are incorporated into the curriculum planning process through the individual Directors' objectives, which they are assigned by the SMT;
- The national priorities for Colleges across Scotland are incorporated into the process through the focussed agendas (on areas such as working towards carbon net zero);
- The College aligns its curriculum with the regional needs through engagement with the other colleges in the Glasgow region and with GCRB, as Regional Strategic Body (RSB);
- Power BI reporting is in place to allow monitoring on the performance of each of the programmes, which is undertaken by the SCMs, CMs and Directors;
- A planning tool is in place at the College, which allows the Directors to allocate staff resources to the individual classes and allows for any resource gaps to be explored and resolved;
- Evaluation of programmes are undertaken every year by the SCMs to appraise the performance of each course and to identify improvement actions;
- Quality Enhancement Policies are in place to ensure a high quality of course delivery, with the Quality Enhancement team assisting curriculum staff in achieving this;
- Demand for all programmes across the College is analysed on an ongoing basis to ensure the provision of existing course choices remains viable;
- Request to Develop forms are in place for the proposal of new programmes or units within a course to ensure a consistent process is taken, with sufficient level of review;
- The College has a Digital Transformation Strategy in place, which sets out the objectives regarding the integration of new technologies into the curriculum from 2020 to 2025;
- Changes in technology are implemented for practical courses to help drive applications and improve student retention rates;
- Feedback from students is obtained at different stages throughout the academic year, with themes reviewed and actions implemented to improve the quality of the programme provision;

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The objective of this audit was to ensure that:	
1. The core College curriculum is aligned with national priorities and the needs of regional industry, employers and individual learners	Good
2. There is a process in place to review and refresh existing programmes on a regular basis	Good
3. Adequate controls are in place over the development of new programmes including the preparation of a business case, costing and pricing	Good
4. The College has exploited the potential of new technology in order to widen access to the curriculum and enhance the learner experience	Good
5. The curriculum planning process takes sufficient cognisance of the College's share of the Region's credits target	Good
6. There are strong links between the curriculum planning process and workforce planning and budgeting.	Good
Overall Level of Assurance	Good



2024/03 – Curriculum Planning (Continued)

Strengths (Continued)

- The College adjusts its curriculum arrangements with the aim to sufficiently fulfil its Credits target for the year, as allocated by GCRB;
- Each course is allocated a target number of student enrolments based on the Credits required, with student retention monitored to ensure that these Credits can be claimed by the College, in line with the SFC Credits guidance; and
- Reporting is in place from the Head of Student Information Services to the Vice Principal Curriculum and Quality, and the wider SMT, for the purposes of monitoring the College's achievement of its Credits targets.

Weaknesses

- No significant weaknesses were identified during the review.

2024/04 – Corporate Planning

The scope of this audit was to consider whether the College's planning process is working effectively, particularly in relation to the development of the Strategic Plan and the linkage between the Strategic Plan, the Regional Outcome Agreement, any underpinning strategies (such as the ICT Digital Transformation Strategy 2020 – 2025) and the detailed operational plans.

The overall objective of the audit was to obtain reasonable assurance that the College's planning process accords with good practice.

The table opposite notes each separate objective for this review and records the results.

Strengths

- In recent years, the College has sought to improve the Corporate Planning process by making the Strategic Plan more succinct and accessible; introducing the supporting 'College Operating Plan'; streamlining the supporting strategies; and standardising operational planning across the College, to ensure that any actions included have a strategic focus;
- During development of the most recent College Strategic Plan (2022-2027), the Senior Management Team (SMT) led a comprehensive consultation exercise involving the Management Team (MT), staff, students, and wider stakeholders to ensure their feedback was reflected in the final version of the Strategic Plan. A similar consultation exercise is carried out during each annual review of the Strategic Plan;
- The Strategic Plan 2022-2027 takes cognisance of the Regional Outcome Agreement and there are clear and defined linkages between the College's strategic priorities, supporting strategic objectives, and the actions contained within operational plans across the College;
- A defined approach is in place for teams to develop operational plans, with guidance and support available for their completion. These plans are subject to review and approval by the SMT to ensure that they support the delivery of the overall College Strategic Plan for the relevant academic year;
- Effective monitoring of the strategies is in place to assess their delivery, with the use of a Balanced Score Card to report progress against the Key Performance Indicators (KPIs) on a quarterly basis to SMT and to the Board of Management (BoM);

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The specific objectives of this audit were to obtain reasonable assurance that:	
1. The corporate planning process is adequately planned and challenged for robustness	Good
2. Linkages between the Strategic Plan, the Regional Outcome Agreement, supporting strategies (such as the ICT Digital Transformation Strategy 2020 – 2025) and operational plans are clearly defined and communicated	Good
3. Operational plans are robust and include detailed prioritised action plans	Good
4. Delivery of the Strategic Plan, Regional Outcome Agreement, supporting strategies, and operational plans are being appropriately monitored and controlled, including through the use of key performance indicators and target setting	Good
5. There is effective linkage between planning and budgeting at all levels	Good
Overall Level of Assurance	Good

2024/04 – Corporate Planning (Continued)

Strengths (Continued)

- Progress against operational plans is updated at least monthly and annual presentations are delivered by Directors and Heads of Department to the MT and SMT to provide a shared understanding on the progress made in delivering operational priorities;
- The College Operating Plan sets out how the College will continue to progress its strategic ambitions, despite the challenging financial environment currently faced by Scottish colleges;
- The annual budget process supports the delivery of the operational plans; and
- There are weekly meetings between SMT members, and monthly meetings between Finance and the wider MT, which allows consideration and discussion on the impact of financial constraints on the ability to deliver strategic and operational priorities within the desired timescales.

Opportunities for Improvement

- A written timetable, which sets out each stage of the College's Corporate Planning process and the timeline for completion, is not currently formally documented. Production of such a timetable would provide enhanced clarity around the key milestones for any new members of SMT or the College MT, as well as any other stakeholders (including members of College staff).



2024/05 – Staff Development

This audit considered whether the College is making best use of its staff and incorporated a review of workforce planning; training; the personal development plan system; and succession planning.

The table opposite notes each separate objective for this review and records the results.

Strengths

- The College has a People Strategy in place, which sets out the staff related objectives for the College from 2021 to 2026;
- The College has a Professional Learning and Development Policy in place, which covers the period 2021 to 2024;
- Induction training is in place for all College staff, which is monitored for completion by both the HR / OD teams and the staff member's line manager;
- Training is offered to all staff, both for support with formal qualifications, as well as upskilling training;
- A PDR process is undertaken by all staff across the College on an annual basis, which is used to identify any areas for development;
- Staff Development Days are in place to allow for any College wide training to be delivered, as well as the provision of training to large groups of staff on new IT systems, regulations, and changes to ways of working / adoption of best practices;
- Line managers communicate formally with their staff on a weekly basis, and monitor the completion of any actions to allow for timely feedback;
- Actions to support the delivery of the strategic objectives, which are set out in the College's operational plans, are incorporated into the development objectives for relevant staff across the College;
- For teaching staff, succession planning is considered for all new roles, with existing staff encouraged to apply for the roles by managers who are independent of the recruitment process;
- The College has a Training Growth and Improvement Forum in place, which meets monthly and includes staff from all levels of seniority. This forum provides an opportunity for staff to share best practice and to identify variations in working practices across the College; and

Final Issued – February 2024

The objective of this audit was to obtain reasonable assurance that:	
1. The College has a systematic approach for ensuring that its staff resources match need in order to deliver planned commitments. Where gaps are identified, timely action is taken to close these.	Good
2. The College's approach to training, including induction training, is clearly informed by an assessment of where there are skills / knowledge / performance gaps	Satisfactory
3. The College has a systematic approach to the evaluation of its training to ensure that it is achieving the desired impact.	Good
4. There is a systematic approach for translating business objectives into actions / tasks for members of staff and a systematic approach is used for communicating objectives and performance expectations to staff.	Good
5. A systematic process is used for providing feedback to staff on performance and agreeing action to improve performance.	Good
6. Appropriate succession planning strategies, action plans and monitoring arrangements are in place within the College.	Satisfactory
Overall Level of Assurance	Good



2024/05 – Staff Development (Continued)

Strengths (Continued)

- At the time of our review, the College had created a Professional Development Forum for staff across the College, including Senior Management and Trade Union representatives, to determine areas of focus for learning and development.

Opportunities for Improvement

- The training records for training arranged by HR and OD for all employees is held on a standalone training records spreadsheet, with a separate spreadsheet in place for mandatory and compliance training. Additional training is held on the employees' Professional Learning Logs and CPD Logs which are maintained by the staff members and their line managers. From inspection of a sample of training documentation, some mandatory training was also identified as having been recorded on the Professional Learning Logs, in addition to being recorded on the mandatory training spreadsheet held by HR and OD, resulting in duplication of effort; and
- The induction training process at the College is monitored for completion of compliance training, however responsibility for this is shared between HR and the line managers, with formal timelines for completion of key tasks not established.



2024/06 – Systems Development / Implementation

The scope of this audit was to carry out a review of the IT project management controls in place within the College.

The table opposite notes each separate objective for this review and records the results.

Strengths

- Senior members of the IT team have received project management training and are experienced in leading on IT development projects;
- For each IT project a Project Team is created, with involvement of relevant College staff and any external contractors brought in where necessary;
- Where applicable, a functional specification is prepared, which sets out users' requirements and a technical specification is prepared based on this;
- Testing plans are incorporated into the project development and implementation phases; and
- Relevant staff are appropriately trained, at the right time, in the new system and operational guides, user manuals and support are supplied to system users

Opportunities for Improvement

- For a sample of six completed IT development projects reviewed we noted some evidence that project management documentation had been maintained, which demonstrated that project management principles had been applied. However, the College had not developed a formal suite of systems development project documents, which are aligned with a recognised project management methodology, such as Agile or PRINCE2. Whilst it is not realistic or practical to expect that a full project management methodology is applied for smaller or less complex projects there should be guidance that sets out the minimum requirement for projects of different sizes and complexity, as well as the basic information required for all projects e.g. approach, Business Case and PID (project initiation document). To ensure that staff are aware of the College's requirements for initiating and managing projects there should be guidance available to staff that provides a high-level summary of the minimum documentation that must be prepared for different projects, details the methodology that should be applied and the circumstances in which it should be applied. This will enhance consistency in the approach to project management across the organisation and across individual projects

Final Issued – April 2024

The objective of this audit was to ensure that:	
1. The College has established formal documented project management standards and policies, which reflect best practice.	Requires Improvement
2. Project teams and managers receive adequate project management training.	Good
3. All requests for new projects are supported by a detailed business case and, where approved, a feasibility study, project initiation document and detailed project plan are established.	Satisfactory
4. A functional specification is prepared which sets out users' requirements and a technical specification prepared based on this.	Satisfactory
5. An outline testing plan with acceptance criteria is written at the functional specification stage and complied with during the implementation phase.	Satisfactory
6. Relevant staff are appropriately trained at the right time in the new system and operational guides, user manuals and support are supplied to system users.	Good
7. Post-implementation reviews are carried out by project teams to compare the actual costs and benefits etc. with those originally expected.	Satisfactory
Overall Level of Assurance	Satisfactory



2024/07 – Student Fees & Contracts / Registry

The main purpose of this review was to ensure that the policies, procedures and processes in place within MIS and Finance for the recording, processing, invoicing and receipt of student fees are operating effectively.

The table opposite notes each separate objective for this review and records the results.

Strengths

- Detailed guidance documents relating to student funding are available on the website for students to access in advance of application and during enrolment;
- Enrolment is completed online and imported in the Student Record system, Unit-E;
- The MIS Team review student fees at enrolment stage, with a further detailed review undertaken by the Sales Team by faculty once enrolment is complete. This is monitored on an ongoing basis to ensure the correct fee source is applied to each student and invoiced appropriately. This was evidenced during sample checking;
- Where a student is not self-funded, supporting evidence is required to ensure that the correct finance source is applied to the student;
- Data is transferred between the student records system and finance system on a daily basis with several checks and approvals required ensuring accuracy;
- From sample testing we were able to determine that where invoices had been raised, these were correctly raised in line with the fee recorded on the student record and finance systems. These fees were also confirmed to be in line with the College's tuition fee table for 2023/24. In two instances, invoices had not been raised due to employers not providing the required information, however there was evidence of action being taken to resolve this;
- There are detailed and up to date Debt Management policies and procedures in place. From walkthrough testing we determined that these are followed in practice; and
- Write-off of debt is reported to and authorised by the Finance and Resources Committee

Weaknesses

- No significant weaknesses were noted from the work performed

Final Issued – May 2024

The objective of this audit was to ensure that:	
1. Enrolment procedures across the College are sufficient to ensure accuracy of student records information, including adequate checking of student data by MIS	Good
2. There is accurate and timely transfer of data between the student records system and the finance system, and regular reconciliation between the systems	Good
3. All fees are fully and correctly invoiced and processed for self-financing students and sponsored students. Fee-waiver students are appropriately identified	Good
4. Adequate debt management and recovery procedures are in place, and are consistently followed in practice	Good
Overall Level of Assurance	Good



Annual Internal Audit Report 2023/24

Report No 2024/08 – Follow-Up Reviews 2023/24

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As part of the Internal Audit programme at the College for 2023/24 we carried out a follow-up review of the recommendations made in Internal Audit reports issued during 2022/23 and reports from earlier years where previous follow-up identified recommendations outstanding. These were:

- Internal Audit Report 2023/02 – Environmental Sustainability;
- Internal Audit Report 2023/03 – Cyber Security;
- Internal Audit Report 2023/07 – Follow-Up Reviews 2022/23; and
- Internal Audit Report 2023/08 – 2022/23 Student Activity Data

The six Internal Audit Reports listed below did not contain an action plan and therefore no follow-up activity was required for these specific reports as part of this review:

- 2023/01 – Annual Plan;
- 2023/04 – Payroll;
- 2023/05 – Budgetary Control / Financial Planning;
- 2023/06 – Health and Safety;
- 2023/09 – 2022/23 Student Support Funds; and
- 2023/10 – Annual Report.

The objective of our follow-up review was to assess whether recommendations made in previous reports have been appropriately implemented and to ensure that, where little or no progress has been made towards implementation, that plans are in place to progress them.

The College has made good progress in implementing the recommendations followed-up as part of this review, with overall 8 (73%) of the 11 recommendations followed-up being assessed as 'fully implemented'. 2 (18%) recommendations were assessed as 'partially implemented' and 1 (9%) as showing 'little or no progress made'.

The one recommendation assessed as showing 'little or no progress made' relates to Internal Audit Report 2023/03 – Cyber Security. We recommended that the College should establish mandatory requirements within procurement procedures for relevant suppliers to provide evidence of current cyber security certifications, and also ensure that relevant suppliers provide copies of recertifications when these are due. From discussion with the Director of Digital and Information Services, a revised date of 1 January 2025 has been set for this.



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Report No 2024/08 – Follow-Up Reviews 2023/24 (Continued)

From Original Reports			From Follow-Up Work Performed				
Area	Rec. Priority	Number Agreed	Fully Implemented	Partially Implemented	Little or No Progress Made	Not Past Agreed Completion Date	Considered But Not Implemented
2023/02 – Environmental Sustainability	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	4	2	2	-	-	-
Total		4	2	2	-	-	-
2023/03 – Cyber Security	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	4	3	-	1	-	-
Total		4	3	-	1	-	-
2023/07 – Follow-Up Reviews 2022/23	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	1	1	-	-	-	-
Total		1	1	-	-	-	-
2023/08 – 2022/23 Student Activity Data	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	2	2	-	-	-	-
Total		2	2	-	-	-	-
Grand Totals		11	8	2	1		



2024/09 – 2023/24 Student Activity Data

Final Issued – November 2024

In accordance with the Credits Audit Guidance, we reviewed and recorded the systems and procedures used by the College in compiling the returns and assessed and tested their adequacy. We carried out further detailed testing, as necessary, to enable us to conclude that the systems and procedures were working satisfactorily as described to us.

Detailed analytical review was carried out, including a comparison with last year's data, obtaining explanations for significant variations by Price Group.

Our testing was designed to cover the key risk areas identified at Annex C to Credits Audit Guidance.

Our report was submitted to the SFC on 18 October 2024. We reported that, in our opinion:

- the student data returns have been compiled in accordance with all relevant guidance;
- adequate procedures are in place to ensure the accurate collection and recording of the data; and
- we can provide reasonable assurance that the FES return is free from material misstatements.

We identified two Priority 3 recommendations from the audit testing for 2023/24. The first recommendation related to ensuring that, for all College devised units, adequate supporting evidence is available for planned learning hours to verify the Credits claim. The second recommendation related to ensuring that Credits claimed for students are based upon the value of the units listed on the student course record, which reflect the activity delivered in the year, and not based upon a default tariff.



2024/10 – 2023/24 Student Support Funds

Final Issued – November 2024

For the 2023/24 academic year three specific fund statements were required for audit:

- Further Education Discretionary Fund, Further and Higher Education Childcare Fund and Bursary Return;
- Higher Education Discretionary and Childcare Fund; and
- Education Maintenance Allowance Return.

We were able to certify all fund statements for the year and submit these to the appropriate bodies, without reservation.

In our covering letter to SAAS enclosing the audited Higher Education Discretionary and Childcare Fund Return we noted the following observations:

- From review of all students in receipt of HE Discretionary Fund funding, we noted three students in receipt of more than the £3,000 cap stated in the SAAS guidance for 2023/24. The students received payments of £3,999.89, £3,937.00 and £3,782.00 respectively for childcare, giving a total of £2,718.89 paid above the cap. During discussion with College staff, we were advised that funding applications are reviewed at the start of the academic year and under the assumption that the funding cap per student will be the same as in the previous year (£4,000). The College committed funding to these students, based on amounts agreed with the childcare providers, that was subsequently found to exceed the cap when the new SAAS guidance was later released in October 2023. The College determined that it would be detrimental to rescind the funding already committed to these students as it may cause them financial hardship, or they may have been unable to attend the College if they could not source alternative childcare provision. As only a small number of students were impacted and for a relatively small amount, it was not envisaged that there would be an overall overspend on the fund because of these additional payments. Approval was not however sought from SAAS, which the College noted was due to the awards having already been processed and the exceptional circumstances. Once the new guidance was received no further student awards exceeded the cap; and
- The College does not operate a separate interest-bearing bank account for the HE Discretionary Fund and all transactions are through the College's main bank account. The College uses the Government banking service for all of its financial transactions, on instruction from the Scottish Funding Council, and this account does not pay interest.

Time Spent - Actual v Budget 2023/24

	Report number	Planned days	Actual days feed	Days to fee at Nov 2024	Days to spend / WIP	Variance
Student Experience						
Curriculum planning	2024/03	4	4	-	-	-
Staffing Issues						
Staff development	2024/05	4	4	-	-	-
Financial Issues						
Student fees and contracts / registry	2024/07	5	5	-	-	-
Organisational Issues						
Risk Management	2024/02	4	4	-	-	-
Corporate Planning	2024/04	4	4	-	-	-
Information and IT						
Systems development / implementation	2024/06	5	5	-	-	-
Other Audit Activities						
Credits audit	2024/09	6	-	6	-	-
Student Support Funds	2024/10	6	-	6	-	-
Management and Planning	2024/01 & 11	4	3	1	-	-
Follow-up reviews	2024/08	3	-	3	-	-
Total		<u>45</u> =====	<u>29</u> =====	<u>16</u> =====	<u>-</u> =====	<u>-</u> =====



Operational Plan for 2024/25

- 5.1 Following our re-appointment as internal auditors for the period from 1 August 2024 to 31 July 2025, via a Direct Award under Lot 2 of the APUC Audit and Tax Services Framework Agreement PFB1040 AP, we prepared a draft internal audit plan based on discussions with the Vice Principal Operations and following consideration by other members of the College Senior Management Team, consideration of areas of higher risk and need identified through a review of the College's Strategic Risk Register, and a review of previous internal audit coverage.
- 5.2 The annual operating plan for 2024/25 is summarised below.

Proposed Allocation of Audit Days

	Category	Priority	Planned 24/25 Days
Student Experience			
<i>Student recruitment and retention</i>	Fin/Perf	H	5
Staffing Issues			
<i>Staff recruitment, retention, succession planning and sickness absence</i>	Perf	H	6
Estates and Facilities			
<i>Estates strategy / capital projects and planned maintenance</i>	Fin/Perf	M	6
Financial Issues			
<i>Procurement and creditors / purchasing</i>	Fin	M	5
<i>Fraud prevention, detection and response</i>	Fin	M	4
Other Audit Activities			
Credits audit	Required		6
Student Support Funds	Required		6
Management and Planning)			4
External audit / SFC)			
Attendance at Audit & Risk Committee)			
Follow-up reviews	Various		3
Total			<u>45</u>
			=====

Key

Category: Gov – Governance; Perf – Performance; Fin – Financial

Priority: H – High; M – Medium; L – Low

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