



Board of Management Audit & Assurance Committee

Date of Meeting	Tuesday 12 September 2023
Paper No.	AAC1-K
Agenda Item	5.4.5
Subject of Paper	Internal Audit Report – Follow Up Reviews
FOISA Status	Disclosable
Primary Contact	Henderson Loggie
Date of production	4 September 2023
Action	For Discussion and Decision

Recommendations

The Committee is asked to consider and discuss the report.

1. Purpose of report

The purpose of this review is to provide management and the Audit and Assurance Committee with assurance on key controls relating to the curriculum and financial plans in place for City of Glasgow College and their alignment with the regional plan for Glasgow and the college student number targets.

2. Context and Discussion

This internal audit Follow Up Report assesses whether recommendations made in previous reports have been appropriately implemented and ensures that, where little or no progress has been made towards implementation, that plans are in place to progress them.

The College has made some progress in implementing the recommendations followed-up as part of this review with 12 (43%) of the 28 recommendations followed-up being categorised as 'fully implemented'. 14 recommendations (50%) were assessed as 'partially implemented' and two (7%) as showing 'little or no progress made'.

3. Impact and implications

Refer to internal audit report.

City of Glasgow College

Follow-Up Reviews 2022/23

Internal Audit report No: 2023/07

Draft issued: 30 August 2023

Final issued: 4 September 2023



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Management Summary

Introduction and Background

As part of the Internal Audit programme at City of Glasgow College ('the College') for 2022/23, we carried out a follow-up review of the recommendations made in Internal Audit reports issued during 2021/22 and reports from earlier years where previous follow-up identified recommendations outstanding. These were:

- Internal Audit Report 2022/04 – Corporate Planning;
- Internal Audit Report 2022/05 – Health and Safety;
- Internal Audit Report 2022/07 – 2021/22 Student Activity Data;
- Internal Audit Report 2022/08 – Data Protection;
- Internal Audit Report 2022/09 – Internal Communications; and
- Internal Audit Report 2022/11 – Follow-Up Reviews 2021/22.

Internal Audit Reports 2022/01 – Audit Needs Assessment and Strategic Plan 2021 to 2024, 2022/02 – Annual Plan 2021/22, 2022/06 – Business Development / International Activities, 2022/10 – IT / Digital Strategy and 2022/12 – Annual Report 2021/22 did not contain any recommendations and as a result no follow up work was carried out for these reports. Internal Audit Report 2022/03 – Business Continuity is covered under report 2022/11 – Follow-Up Reviews 2021/22.

Objectives of the Audit

The objective of each of our follow-up reviews is 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.

Audit Approach

For the recommendations made in each of the reports listed above we ascertained by enquiry and review of supporting documentation, as appropriate, whether they had been completed or what stage they had reached in terms of completion and whether the due date needed to be revised.

Action plans from the original reports, updated to include a column for progress made to date, are appended to this report.

Overall Conclusion

The College has made some progress in implementing the recommendations followed-up as part of this review with 12 (43%) of the 28 recommendations followed-up being categorised as 'fully implemented'. 14 recommendations (50%) were assessed as 'partially implemented' and two (7%) as showing 'little or no progress made'.



Overall Conclusion (Continued)

The recommendations that were assessed as 'partially implemented' or showing 'little or no progress made' will be subject to follow-up at a later date.

Our findings from each of the follow-up reviews has been summarised below:

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
2022/04 – Corporate Planning	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	3	3	-	-	-	-
Total		3	3	-	-	-	-
2022/05 – Health and Safety	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	6	4	2	-	-	-
Total		6	4	2	-	-	-
2022/07 – 2021/22 Student Activity Data	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	1	-	-	1	-	-
Total		1	-	-	1	-	-
2022/08 – Data Protection	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	2	-	1	1	-	-
Total		2	-	1	1	-	-
2022/09 – Internal Communications	1	-	-	-	-	-	-
	2	-	-	-	-	-	-
	3	2	-	2	-	-	-
Total		2	-	2	-	-	-
2022/11 – Follow Up Reviews 2021/22	1	-	-	-	-	-	-
	2	2	-	2	-	-	-
	3	12	5	7	-	-	-
Total		14	5	9	-	-	-
Total Carried Forward		28	12	14	2	-	-



Overall Conclusion (Continued)

The grades, as detailed below, denote the level of importance that should have been given to each recommendation within the internal audit reports:

Priority 1	Issue subjecting the organisation to material risk and which requires to be brought to the attention of management and the Audit and Assurance 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.

Acknowledgements

We would like to thank all staff for the co-operation and assistance we received during the course of our reviews.



Appendix I - Updated Action Plan

Internal Audit Report 2022/04 – Corporate Planning

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R1 As part of the next iteration of the Strategic Plan, consideration should be given to the involvement of trade unions in a round table forum involving the Board and SMT in order to encourage shared ownership of strategic priorities.</p>	3	<p>The College has an extremely challenging relationship with the trade unions with regular disputes and strike action most years over the past decade.</p> <p>We will consult and discuss the College strategies and targets incorporating union feedback where appropriate.</p>	Depute Principal	31 December 2022	<p>It has been agreed that the Trade Unions will be involved in the next iteration of the Strategic Plan.</p> <p>It however has not been agreed when the next iteration will be developed to evidence this involvement.</p> <p>Fully Implemented</p>
<p>R2 Key performance indicators should be developed for each of the five strategies, with targets set and agreed by ELT and the Board, and these metrics should form the basis of the refreshed Balanced Scorecard for the College.</p>	3	<p>The performance reporting framework is being updated and as part of this process the key performance indicators and targets for each of the five strategies will be set and agreed by ELT and the Board.</p>	Director of Excellence	30 September 2022	<p>The revised Performance Report for AY 2021/22 was submitted at Performance and Nominations Committee on 23 January 2023 and subsequently at the full Board on 4 April 2023.</p> <p>This report shows actual key performance indicator figures against target for each of the strategic priorities.</p> <p>Fully Implemented</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R3 As part of the process to finalise the operational plans for 2022/23, a review of risk tolerances and risk appetite should be conducted to ensure alignment between the financial position set out for the college, the aspirations set out for 2022/23 and the steps required to achieve financial sustainability.</p>	<p>3</p>	<p>Given the current extremely challenging financial context facing the College we agree that the approved operational plans and risks must be prepared and agreed with this context embedded.</p>	<p>Depute Principal</p>	<p>30 September 2022</p>	<p>The Operational Plans have been reviewed with the risk appetite and the current financial context embedded.</p> <p><i>Fully Implemented</i></p>



Appendix II - Updated Action Plan

Internal Audit Report 2022/05 – Health and Safety

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R1 – It is recommended that the ongoing review of the Health & Safety Policy should be concluded as a matter of urgency, and issued to the Health and Safety Committee and Board for consideration and approval. Following approval, the revised Policy should be communicated to all staff members across the College and the updated version uploaded to the intranet for internal access and published on the College’s website for external access.</p>	<p>3</p>	<p>This is scheduled to be presented to the Finance and Physical Resources Committee (FPRC) on 14 September 2022.</p> <p>Thereafter it will be published and discussed further at H & S Committee.</p>	<p>John Gribben, Executive Director Human Resources</p>	<p>30 September 2022</p>	<p>The Health & Safety Policy was approved and published to the College Website on 30 September 2022 and uploaded to the College Policy and Procedures Library on 10 October 2022.</p> <p><i>Fully Implemented</i></p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R2 – It is recommended that the College conduct a review of the current Fire Safety Policy to ensure alignment with current practices, and to ensure accuracy of references such as campuses and job titles. The Policy should then be issued to the Health and Safety Committee and Board for consideration and approval. Following approval, the revised Fire Safety Policy should be communicated to all staff across the College and the updated version uploaded to the intranet for internal access, and published on the College’s website for external access.</p>	<p>3</p>	<p>A separate independent Fire Risk Assessment has been undertaken in August 2022. This will be actioned accordingly, through Board, H & S committee and published.</p> <p>Recruitment for a dedicated Fire Safety Adviser will take place during September 2022.</p>	<p>Jill Loftus, Interim Associate Director, People & Culture</p>	<p>31 October 2022</p>	<p>Due to the College vacancy of Fire Safety Officer, the Fire Safety Policy was reviewed in line with recommendations from an external consultant’s Fire Risk Assessment (FRA) which was completed between 15 – 19 August 2022.</p> <p>Using the recommendations from the FRA, the Fire Safety Policy was reviewed and updated by the Health & Safety Manager and published in the Health & Safety Hub as a draft version on 18 October 2022. The website version cannot be updated until the version is approved by the H&S Committee.</p> <p>A further review has been completed on appointment of the Fire Safety Officer due to fire safety legislation changes and is due to be approved at the H&S Committee on 21 September 2023.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 28 September 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R3 – It is recommended that a review should be undertaken to ensure that the date of completion of each risk assessment is accurately recorded on the Risk Assessment Tracker, and that going forward, an additional check should be performed following the recording of the risk assessment on the Tracker document to ensure that dates agree.</p> <p>Consideration should also be given to implementing a standard referencing system to ensure that all documentation held has a unique identifier.</p>	3	Improvements in Risk Assessment process and recording will take place in line with recommendations. Timescale will be subject to change dependant on staffing levels.	Jill Loftus, Interim Associate Director, People & Culture	30 November 2022	<p>The Risk Assessment Tracker has been updated in line with recommendations.</p> <p>The Health & Safety Intranet page has been updated to include document library with identifiable owners and review dates. Owners are emailed for document review 30 days prior to review date.</p> <p>The risk assessment document section on the Intranet has been enhanced to include information for referencing / labelling to allow identification.</p> <p><i>Fully Implemented</i></p>
<p>R4 – It is recommended that once the walk-round process is implemented, that all actions arising from the walk-rounds are recorded on a central action's tracker, with due dates assigned to each issue recorded. This tracker should then be monitored by designated staff members, with appropriate follow up processes put in place to address any issues which are not remediated in line within the agreed target date.</p>	3	Improvements will be made in line with recommendations.	Jill Loftus, Interim Associate Director, People & Culture	30 November 2022	<p>A new system is currently being tested with auto triggers being sent to faculties based on a traffic light system. This will be reviewed and reported on monthly to SMT / ELT.</p> <p>Examples and the updated process / report are going to the H&S Committee on 21 September 2023.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 28 September 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R5 – It is recommended that a review be undertaken of the hard copy accident and incident forms completed for academic year 2021/22 to ensure completeness, with any incomplete forms identified and updated to incorporate the missing information. Going forward, a secondary check should be conducted to ensure that all forms are fully populated before they are filed.</p>	3	<p>Improvements will be made in line with recommendations.</p> <p>In addition:</p> <p>Responsibility for accuracy on incident forms will be cascaded via H & S committee.</p> <p>This will become more prominent in any new training delivered.</p> <p>The H & S committee will be advised of areas of non-compliance.</p>	Jill Loftus, Interim Associate Director, People & Culture	30 November 2022	<p>Review of the paper forms from the academic year 2021/22 has been completed.</p> <p>A system has been implemented to review forms on a monthly basis.</p> <p>Fully Implemented</p>
<p>R6 – It is recommended that what constitutes a ‘near miss’ be defined by the Health & Safety Team to ensure that a reasonable and efficient approach is undertaken when reporting near misses.</p> <p>Once defined, this should be communicated to all College staff and students, together with a reminder of the benefit of near miss reporting. Additionally, consideration should be given to the implementation of a near miss short form which can be completed and sent to the Health & Safety Team’s email inbox for simplicity of reporting.</p>	3	<p>Improvements will be made in line with recommendations.</p>	Jill Loftus, Interim Associate Director, People & Culture	30 November 2022	<p>A ‘near miss’ automated form has been developed and added to the Health & Safety Intranet page.</p> <p>A campaign ‘Hazard observation or near miss? Make sure you report it’ was launched alongside the ‘near miss’ form in March 2023. A banner was added to the Intranet site and graphics were added on media screens throughout campus.</p> <p>‘Near miss’ reports are now routinely included in the monthly Health & Safety reporting to SMT and ELT.</p> <p>Fully Implemented</p>



Appendix III - Updated Action Plan

Internal Audit Report 2022/07 – 2021/22 Student Activity Data

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
R1 Ensure that Credits claimed for students on work-based learning programmes are based upon the value of the enrolled units which reflect the students discrete course record held by tutors and assessors, and not based upon a default tariff.	3	We have already raised these issues with the delivery department. We will agree a more robust process for recording and monitoring work-based learning training.	Vice Principal Corporate Services	31 March 2023	The Chief Financial Officer (CFO) starts with the College in September. This action will be progressed as part of the CFO role. To be reviewed as part of 2022/23 Credits audit. Little or No Progress Made Revised Completion Date: 29 September 2023



Appendix IV - Updated Action Plan

Internal Audit Report 2022/08 – Data Protection

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R1 – It is recommended that periodic reporting to the Board be implemented to inform the Board of progress on the implementation of the data protection framework within the College, as well as any significant data protection issues and reportable breaches.</p>	<p>3</p>	<p>The College recognises that it would be beneficial to extend data protection reporting to the Board to ensure that awareness of risk and assurance activity is delivered to the highest level of management.</p> <p>We will add the data protection report to the College Board agenda to be delivered quarterly.</p>	<p>Depute Principal with DPO</p>	<p>From Board Meeting of 12 December 2022</p>	<p>Further to the management action response it has been agreed that the quarterly data protection report will be tabled at the Audit & Assurance Committee. The Convener will then report on any matters of significance to the Board. The first quarterly report will be provided at the December Committee meeting following the annual report in September.</p> <p>The annual report going to the Audit & Assurance Committee in September will be considered by the Committee and tabled at the Board for noting.</p> <p><i>Little or No Progress Made</i></p> <p>Revised Completion Date: 5 December 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R2 – It is recommended that the ROPA be finalised and agreed by the DPO.</p> <p>It is also recommended that upon completion of the ROPA, the DPO implement a schedule of periodic spot checks for data retention practices with the relevant data processors.</p>	<p>3</p>	<p>The College acknowledges the gap in our record of processing activity, which is being proactively addressed and progressed by the DPO. Progress is being made in the completion of the ROPA with ongoing monitoring of the finalised record of processing activity a priority.</p> <p>As soon as the ROPAs for all areas of the College have been completed, a schedule of periodic spot checks will be implemented.</p>	<p>Depute Principal with DPO</p>	<p>ROPA complete for whole College and spot checking introduced by the end of February 2023.</p>	<p>RoPAs have been completed with 10 departments and the Faculty RoPAs are scheduled to commence in September 2023, with a six-monthly review thereafter. The completion date for all Faculty RoPAs is 31 March 2024.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 31 March 2024</p>



Appendix V - Updated Action Plan

Internal Audit Report 2022/09 – Internal Communications

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R1 We recommend that operational planning templates for the internal communications activities should be formally signed off in compliance with the corporate timetable and guidelines, to demonstrate full alignment with the College’s corporate strategic objectives and setting out clear deadlines and responsibility for implementation in respect of each key operational objective.</p>	<p>3</p>	<p>We will update the operational plan in tandem with the completion of the Comms Team’s internal Comms “mini roadshows”, and subsequent update of our internal Comms strategy. The updated Operational Plan will include clearer alignment to the College’s Strategic Plan version objectives, ownership and timeframes.</p>	<p>Head of Communications</p>	<p>30 April 2023</p>	<p>Internal comms mini-roadshows continue to be rolled out across Faculties with the aim of improving briefing process and streamlining workflow and enhancing collaboration. The current schedule for completion of the roadshows is 30 September 2023 providing no further disruption.</p> <p>Opportunities identified in the course of roadshows rollout continue to be captured for incorporation in the updated Operational Plan 2023/24.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 31 October 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at August 2023
<p>R2 We suggest that specific surveys focused on internal communication processes within the College should be designed and offered to relevant stakeholders. Consideration should also be given to the inclusion of detailed internal communication question(s) in future all staff surveys undertaken at the College.</p>	<p>3</p>	<p>We will work with the College Performance team and Students' Association to determine the best way to implement this recommendation. We will consider whether to establish a new survey focussing exclusively on student Comms or add a significant element in an established student survey.</p>	<p>Head of Communications</p>	<p>30 June 2023</p>	<p>Discussions have been held with the College Performance Team and Students' Association to explore most effective research approach. To maximise engagement and response the agreement has been made to add questions into the established Student Survey issued in October following inductions and onboarding process. These questions have been added to the My Student Experience Question Set 2023.</p> <p>To meet the recommendation a staff survey focused on internal communication processes within the College will be designed and offered either on its own or incorporated within an established staff survey.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 31 October 2023</p>



Appendix VI - Updated Action Plan

Internal Audit Report 2022/11 – Follow Up Reviews 2021/22

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
2018/06 – Infrastructure Contract Management / Help Desk						
<p>R3 An exercise should be conducted to evaluate the type of trend analysis that would be useful for monitoring Estates and ICT reactive requests. This exercise should include evaluation of current formal reporting and the way that key messages arising from trend analysis are translated into action points to deal with the underlying issues. Results of this evaluation should be reported upwards to senior management for their oversight. Given that the contract with GLQ has only been in place for a relatively short period of time the College should seek to develop trend analysis over time.</p>	3	<p>We accept this recommendation, and we will look to add the trend analysis on the College Performance Dashboard.</p>	<p>Head of Technical Support</p>	<p>30 June 2018</p>	<p>October 2019 The IT Director advised that the IT Operational Plan contains a project to progress this recommendation - either through the upgrade or the replacement of the current IT Service Desk software and this will be complemented by a series of mutually agreed IT Service KPIs.</p> <p>November 2020 This action is now being carried forward within the recently commissioned “Review IT Effectiveness” (conducted by Scott Moncrieff) with an action to have specified, procured and implemented a new Service Desk platform by March 2021</p> <p>August 2021 Management discussions have commenced internally with colleagues in various support departments to elicit business requirements for a Support Service Desk (rather than simply IT).</p> <p>This process is underway with several key business requirements documented. Several potential solutions have also been identified who will be invited to demo their systems.</p> <p>Due to change of the College’s priority to implement a new VLE (Virtual Learning Environment) for the new academic year 2021/22, this is where the Team focus has been.</p>	<p>A company called 4me has been procured to deliver the new service desk. It was planned to go live at the end of August 2023 due to staffing issues prior to the end of the previous term.</p> <p>There have been some further delays with the need for further configuration and user acceptance testing. The Director of IT is currently working with 4me to complete this with a view to this going live by the end of September 2023 providing all testing is successful.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 30 September 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
2018/06 – Infrastructure Contract Management / Help Desk						
R3 (Continued)					<p>August 2021 (Continued) The plan is to be in a position in December 2021 to move to invite tenders from suppliers and implementation for the next academic year 2022/23 when the reporting needs from the Service Desk will be determined.</p> <p>August 2022 The college are currently at the demo stage of the process with the two products/suppliers shortlisted. Demos are scheduled for the week commencing 8 August 2022.</p> <p>Once the evaluation of the demos is complete the next stage is to review and clarify the pricing elements. The aim is to have the award recommendation report completed and approved by the end of August 2022 ready to place an order with the successful provider.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/02 – Data Protection						
<p>R7 Put in place a robust data protection compliance framework that includes clear responsibilities; recording of compliance checks required; and routine reporting of the results of compliance checks (and any associated issues) to senior management and to the Audit Committee.</p>	2	<p>This recommendation is accepted.</p>	DPO	August 2019	<p>October 2019 The DPO has a plan to implement full data governance department by department. However, this is still to be implemented.</p> <p>November 2020 Management were one third of the way through Article 30 project (at 31 October 2019) and expecting to achieve 80% of full data governance by end of March 2020 (providing R8 is supported by the Board). Once completed this would identify all items necessary for document compliance.</p> <p>August 2021 Since the date of the last internal audit follow-up review the College has focused on updating the RoPAs, development of the data protection policies and procedures framework and delivery of training to staff. Whilst the DPO is involved in specific elements of compliance monitoring, such as ensuring that Data Subject Access Requests are appropriately managed, the form and frequency of compliance checks to be conducted by departmental leads on areas such as data retention, completion of DPIAs and recording evidence of consent, has still to be fully developed.</p> <p>August 2022 A Health Check programme has been designed to support the ongoing monitoring of compliance with data protection.</p>	<p>The decision was made to put a hold on the Health Checks and focus on completion of Department Records of Processing Activities 'RoPAs'. As at 30 June 2023, RoPA review exercises were completed with 10 Departments.</p> <p>Although Data Protection Policies are in place and are reviewed annually, the overarching assurance framework needs to be developed incorporating training, robust policy and monitoring.</p> <p>To address the absence of an ongoing monitoring process, data protection health checks will commence on completion of the Faculty RoPAs which are scheduled to commence in September 2023, with a six-monthly review thereafter. The completion date for all Faculty RoPAs is 31 March 2024.</p> <p>Establishment of routine monitoring via a Health Check Process is planned for 30 September 2024.</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/02 – Data Protection						
R7 (continued)					<p>August 2022 (continued) This programme has been piloted with the Student Association and is now being rolled out across the College.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 31 December 2022</p>	<p>An annual DPO report is provided to the Audit & Assurance (A&A) Committee and noted at the Board. The annual report is going to the September 2023 A&A Committee.</p> <p><i>Partially Implemented</i></p> <p>Revised Completion Date: 30 September 2024</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/02 – Data Protection						
R8 Consider solutions to delete personal data or anonymise this information once it goes past the agreed retention date.	2	This recommendation is accepted.	DPO with Operational Effectiveness Manager	August 2019	<p>October 2019 Not Yet Past Completion Date</p> <p>November 2020 One of several technical solutions for archiving historical data needed to be confirmed by SMT, together with robust organisational methods expected to be put in place by mid-February 2020 so each Department's Head of Privacy (person) (HOP) could archive their data prior to final erasure at a later date (to effect compliance).</p> <p>August 2021 The DPO is currently working with the College departmental leads to review the retention policies in place and to understand where technical solutions can be implemented to allow automatic deletion, archiving or anonymisation of data once the agreed retention date has been reached.</p> <p>August 2022 A retention review and validation of retention periods has been incorporated into the Health Check programme to create efficiency.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	<p>The Records Retention Policy is undergoing a review by the DPO, with completion date of 30 September 2023.</p> <p>The RoPA review has assisted with the definition of retention schedules for 10 Departments. However, there are other gaps. The policy review will include agreement with the College on retention dates and processes.</p> <p>This work is being undertaken in conjunction with the College Archiving project.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 30 September 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
<p>R1 Future development of OD systems should include identifying a workable solution which allows OD to capture data on completion of staff departmental integrations. One potential solution could involve incorporating a confirmation question within the final section of the online integration pack.</p>	3	Agreed.	Head of OD and OD Manager	30 June 2020	<p>November 2020 The entire integration process is under review and will be refreshed commencing January 2021. This will ensure that participation in specific elements for lecturers, managers as well as departmental requirements can be automatically evidenced.</p> <p>August 2021 The College is in the process of procuring a new learning experience platform (LXP). This will enhance current digital learning content provision and enable automated tracking, monitoring, and recording of participation. A 'blended model' of integration will be incorporated within the platform and automated recording of completions and facilities for escalating non-completions escalated will be included as standard.</p> <p>A project plan detailing the implementation of the new learning experience platform is to be developed and supplied to Internal Audit by the Director of HR/OD.</p> <p>August 2022 The contract has been accepted and supplier has been confirmed as Cornerstone on demand. The system will be built in 2 phases.</p>	<p>Phase 2 of the project has been completed and went live to all staff on the 31 January 2023 in line with the revised completion date of the project as managed by Project Management Office (PMO).</p> <p>Reports are now available to key stakeholders across all mandatory learning themes including integration.</p> <p>Fully Implemented</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
R1 (continued)					<p>August 2022 (continued) Phase 1 is the build of the platform which will be completed by 29 Sept 2022. Phase 2 will be the build of the performance module with a completion date of the start of December 2022. The system will allow tracking and monitoring and recording of participation as well as reporting tools.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
<p>R2 A process should be adopted to ensure that all staff complete all post-employment mandatory training, inclusive of integration, no later than 12 weeks from the date of commencing employment. Exception reporting arrangements should be put in place to manage and mitigate risks.</p>	3	Agreed.	Head of OD and OD Manager	30 June 2020	<p>November 2020 The COVID-19 situation has resulted in the College updating its approaches on how it integrates new employees and ensures attendance to mandatory learning elements. This will be addressed concurrently with R1.</p> <p>August 2021 As with R1, the automated tracking, monitoring, and reporting features of the LXP will automate the management of enrolments, due dates for completions and generate notifications on any qualification renewals. This will augment the periodic monitoring and exception reporting processes, currently in place.</p> <p>This should be brought into the project plan detailing the implementation of the new learning experience platform is to be supplied to Internal Audit by the Director of HR/OD on its documentation.</p> <p>August 2022 As per R1. Implementation plan attached.</p> <p>“The contract has been accepted and supplier has been confirmed as Cornerstone on demand. The system will be built in 2 phases. Phase 1 is the build of the platform which will be completed by 29 Sept 2022.</p>	<p>Phase 2 of the project has been completed and went live to all staff on the 31 January 2023 in line with the revised completion date of the project as managed by PMO.</p> <p>Reports are now available to key stakeholders across all mandatory learning themes including integration.</p> <p>Fully Implemented</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
R2 (continued)					<p>August 2022 (continued) Phase 2 will be the build of the performance module with a completion date of the start of December 2022. The system will allow tracking and monitoring and recording of participation as well as reporting tools.”</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
<p>R3 Consider issuing a second training evaluation form six months after the training activity has been delivered to assess whether training has had the desired impact on work performance. Feedback should then be reviewed by line managers with further training or action organised accordingly.</p>	3	Agreed	Head of OD and OD Manager	30 June 2020	<p>November 2020 The OD function is currently automating several processes, one of which involves individual and group development requests. Evaluation forms part of this process and will be included in the second phase of this development.</p> <p>August 2021 As with R1 and R2, evaluations will be built into the system and a 6-month trigger point for evaluating learning experiences will be designed.</p> <p>This and evaluation of training feedback should be brought into the project plan detailing the implementation of the new learning experience platform is to be supplied to Internal Audit by the Director of HR/OD on its documentation.</p> <p>August 2022 As per R1. Implementation plan attached.</p> <p>“The contract has been accepted and supplier has been confirmed as Cornerstone on demand. The system will be built in 2 phases. Phase 1 is the build of the platform which will be completed by 29 Sept 2022.</p>	<p>Phase 2 of the project has been completed and went live to all staff on the 31 January 2023 in line with the revised completion date of the project as managed by PMO.</p> <p>The system allows automatic evaluation of learning impact through measurement against correlated themes.</p> <p>Fully Implemented</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2019/09 – Staff / Organisational Development						
R3 (continued)					<p>August 2022 (continued) Phase 2 will be the build of the performance module with a completion date of the start of December 2022. The system will allow tracking and monitoring and recording of participation as well as reporting tools.”</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2020/08 - Recruitment, Retention and Staff Development						
R1 Review the Recruitment and Selection Policy and associated Procedures to ensure that these are up to date and reflect current working practice.	3	Workforce planning is active within the college - tools such as student recruitment and timetabling systems (which shows staff utilisation) are what managers use to plan. What the college want to do is create something more collaborative, and sophisticated to make this more holistic and meaningful, one where there is one system that captures it all. Following feedback from our Deans/Directors - the level of complexity of capturing this on a spreadsheet need reviewed. This is currently being reviewed at ELT to establish if the current direction of travel, utilising existing technology will deliver the intended results	Human Resources Director	31 January 2021	<p>August 2021 The Recruitment and Selection Policy 2014 and associated procedures were subject to internal desktop review by management and are up to date to current practices and will be documented that they have been reviewed by management through version control and republished in due course.</p> <p>However, management noted a full review of the policy is required. For example, there is ambitions to improve the wider recruitment and selection policy to adopt a more holistic, collaborative, and sophisticated approach. Accordingly, the People & Culture strategy and operational plans have been updated with review of Recruitment and Selection being integral to the strategy and plan, i.e. to revise recruitment methods and current systems. Internal audit was able to evidence this review as part of the People & Culture Strategy.</p>	<p>A new contract has been signed with iTrent for a further three years. This provided the opportunity to explore and develop further improvement in recruitment. A full review of the Recruitment and Selection Policy and associated Procedures will be completed to ensure they are in line with the current process. A further full review will be completed should any changes be made to the recruitment and selection process in line with the development of a future leader programme, which will be tracked through the Staff / Organisation Development action from August 2023.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 30 November 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2020/08 - Recruitment, Retention and Staff Development						
R1 (Continued)					<p>August 2021 (continued) Future policy update will incorporate the output of these actions. For example, the policy currently states the candidate will submit an Application Form, however, this may change in future to CV but will depend on the system used - which may involve a tender process and discussion with the College's Trade Union partners.</p> <p>August 2022 The policy remains reflective of the current practices.</p> <p>ITrent system contract expires April 2023, therefore there will be no movement on this until we decide on a supplier, which will also be dependent on financial investment.</p> <p>The current activity is to source a supplier for psychometric testing, this is underway.</p> <p>This remains part of our workforce plan, however no further activity will be progressed until we understand the direction of travel spring 2023.</p> <p>Partially Implemented</p> <p>Revised Date of Completion: 30 April 2023</p>	



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2021/04 – Equality and Diversity						
<p>R3 The EQIA section of the College website should be updated to reflect current EQIAs, and the process for monitoring the updating policy and procedures via the Policy and Procedure Tracker by the Compliance Manager (Performance) should include EQIAs. Older EQIAs should be held within an archived folder for reference purposes.</p> <p>All EQIAs should be dated and signed by a Dean or senior faculty management in line with College guidance.</p> <p>EQIAs for the Dignity at Work Policy, Toil Policy, and Home Working Guide should be developed.</p>	3	<p>Agreed.</p> <p>Actions:</p> <p>(a) Update EQIA section of website to ensure that out of date EQIAs are removed and up to date versions are published</p> <p>(b) Review Policy and Procedure Tracker and update process and EQIA sign-off and retention.</p> <p>(c) Review EQIA archive and advise Compliance Manager of missing EQIAs</p> <p>(d) Develop EQIAs for Dignity at Work Policy, Toil Policy, and Home Working Guide</p>	<p>(a) Director of Communications - Communications Team</p> <p>(b) Head of Performance Improvement/ Compliance Manager</p> <p>(c) ED&I Manager</p> <p>(d) Executive Director HR</p>	31 December 2021	<p>August 2022 The EQIA section of the website has been updated all old EQIA's removed. Only EQIA's that have been approved and signed published on the website.</p> <p>Performance now tracking all EQIA's. A short life working group has been established to oversee the development of an atomisation of the process.</p> <p>This has been completed by Performance an update of all outstanding EQIA's has been circulated on the 31st October 2022.</p> <p>ALL HR policies currently being revised and EQIA will be conducted.</p> <p>Partially Implemented</p> <p>Revised Date of Completion: 31 December 2022</p>	<p>A review of the current Policy and Procedures has identified 10 of the 30 published don't currently have an EQIA.</p> <p>A plan is being formed to have the 10 missing EQIAs completed and published as well as making sure the current 20 EQIAs published are up to date and accurate.</p> <p>The Dignity at Work Policy is contained within the Code of Conduct and an EQIA is present for this.</p> <p>The Toil Policy has undergone a review and the EQIA is at sign off stage.</p> <p>The Home Working Guide requires a EQIA to be completed.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2021/05 – IT Network Arrangements / Security						
<p>R3 Ensure that penetration or security testing is performed on all internally developed systems and applications to ensure that existing vulnerabilities are identified and suitably remediated prior to implementation. Confirmation of similar testing should be obtained from third party developers.</p>	3	<p>IT Team will ensure that all future internally developed systems are penetration tested as part of system testing.</p> <p>Retrospective Testing of the main internally developed Enquirer system will be conducted in 2 phases; internally by the IT Team and then externally by a Technology partner to verify test outcomes.</p> <p>Penetration Testing to be completed by March 2022</p> <p>Remedial work planned & completed by September 2022.</p>	Director of IT	30 September 2022	<p>August 2022 The Penetration testing has been completed and the outcome report has been received.</p> <p>Minor points identified for remedial work and the plan for this work will be completed by January 2023.</p> <p>Penetration testing has been completed with the report provided as evidence.</p> <p>Remedial work is now planned due to there being no “Serious” or “High” risks. The remedial work identified is detail in the Penetration test report.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 January 2023</p>	<p>All remedial work has been completed.</p> <p>One action has since had to be reverted ‘Ensure that SSL is disabled and that only TLS v1.2 or greater is available....’ SSL was disabled and TLS v1.3 was in use however this had to be reverted due to non-compatibility with Ops desk not being able to transfer information to FES Maximo. Recommendation is therefore noted, and work is being completed with FES Facilities Management to seek a resolution although this will not be likely in the short term as a cost will be associated with this work.</p> <p>Fully Implemented</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2021/05 – IT Network Arrangements / Security						
<p>R4 It is recommended that awareness of the risks arising from the use of removable media is re-enforced to staff and students. This should then be followed up with the introduction of a College-wide requirement for all staff and students to use encrypted USBs only, leading to a restriction in the use of USBs enforced by policy (through whitelisting of devices and port restrictions) and ultimately over time, the full removal of the ability to use such devices.</p>	3	<p>The removal of USB drives has been a Strategic Aim of the IT Team which has now been facilitated by the adoption of Office 365 & Teams \OneDrive over the past 18 months (for both staff & students).</p> <p>Phase 1: engage with Digital Transformation Group to explain USB removal plan (December 2021) and seek support to eliminate USBs or allow only encrypted USBs (IT would support full ban on USBs however could impact Student Learning).</p> <p>Phase 2: explore option to only allow encrypted USBs (February 2022)</p> <p>Phase 3: unencrypted USB storage blocked from College devices (September 2022)</p>	Director of IT	30 September 2022	<p>August 2022 Phase 1 – the phase 1 plan is to initially block “Support” Staff USB usage in “higher risk” areas such as Finance, GR & Student Records where access to personal information is available. Technical solutions are now in place, awaiting Management “sign off” before planned roll-out date of January 2023.</p> <p>Phase 2 – the plan for phase 2 will be to block USB’s for Teaching Staff come summer 2023.</p> <p>Phase 3 – This needs to go back to the Digital Transformation Group for further discuss/agreement due to the initial response received within the College.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 30 June 2023</p>	<p>Phase 1 has been completed on time (January 2023) with all support staff College devices.</p> <p>Phase 2 has been pushed back and will be completed at a later date.</p> <p>Phase 3 has had no decision made yet.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2021/05 – IT Network Arrangements / Security						
<p>R6 Full disk encryption should be deployed on all College managed devices to prevent data loss in the event of loss or theft of the devices. Other protections, such as the use of Intune, should be applied to personal devices that are used to access College data and systems.</p>	3	<p>As described, the IT Team have commenced testing & initial pilot of Microsoft InTune to provide enhanced Mobile Device Management (MDM), of which device encryption is a key aspect. MDM is now vital to the College due to hybrid working and blended learning.</p> <p>On completion of the initial pilot, this will be rolled out across all College mobile devices (both staff & students).</p>	Director of IT	30 September 2022	<p>August 2022 Once Microsoft InTune was deployed, it became apparent that a number of pre-requisite projects (particularly OneDrive data sync) had to be completed before Bitlocker could be rolled out. Once Microsoft OneDrive file sync has been completed and no local data loss is ensured, encryption can then be rolled out.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 January 2023</p>	<p>The pilot was completed successfully in the spring of this year.</p> <p>A plan is currently being formed to complete the roll out in situ remotely to all managed devices.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 October 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2021/10 – Partnership Working						
<p>R1 In the interim of rolling out the CRM, management should consider developing a central register of agreements that are currently in place with industry partners to act as a central repository on partnership working in place across the College, their tenure, and who manages the relationship.</p> <p>A process for ensuring it is kept up to date should also be developed. Such as the register could be held on SharePoint with restricted access and in line with GDPR requirements.</p>	3	<p>Will liaise with Director of IT to establish current progress and to finalise a timeline for the implementation of the CRM system across the Corporate Development Function.</p>	Vice Principal Corporate Development & Innovation	28 February 2022	<p>August 2022 A functional specification to be developed by the end of August 2022, following which funding needs to be secured, before working through procurement. Aim to have end user testing underway early 2023 with roll out later part of AY 22/23.</p> <p>Little or No progress</p> <p>Revised Completion Date: 30 June 2023</p>	<p>User testing has been completed however roll out is still in the planning stage.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2023</p>



Follow-Up Reviews 2022/23

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at August 2023
Follow-Up Reviews: Internal Audit Report 2022/03 – Business Continuity						
<p>R1 Investigate, formalise and document potential reciprocal arrangements for specialist space options and other resource recovery strategies that have been identified within the departmental BRPs.</p> <p>More detail on the nature of the arrangement in place and when it was last revised should be included in the BRPs.</p>	3	<p>Each BRP to include details of formalised arrangements, as appropriate, for specialist space and other resource recovery strategies as identified within the BRP.</p> <p>Detail of the nature of the arrangement in place and when it was last revised to be included in the BRP.</p> <p>All departmental plans to be updated by 30 September 2022.</p>	BRP Owners	30 September 2022	<p>August 2022 All owners were asked to submit their revised plans by 30 September. Some missed that deadline, with six have still to be submitted, but these are being actively worked on and should all be completed by the end of the year.</p> <p>Partially Implemented</p> <p>Revised completion date: 31 December 2022</p>	<p>Due to changes in staff structure, voluntary severance and compulsory redundancy, it has been agreed that all BRP's will be fully revised and updated by the end of October 2023 following completion of the re-structure.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 October 2023</p>
<p>R5 The College should consider making use of Microsoft Teams or SharePoint (or similar platform) to record discussions and actions in response to the pandemic or any other longer-term incident.</p> <p>This would include workstreams with key tasks identified for each, with each task given a priority grading and tasks assigned to individuals. Additional notes can be recorded, and the progress status captured.</p>	3	<p>Agreed.</p> <p>The College will agree a standard method by which actions are consistently recorded and allocated to individuals.</p>	Operational Effectiveness Manager	30 September 2022	<p>August 2022 This has not yet been completed, but the Operational Effectiveness & Market Research Manager is working on it and expects it to be completed by the end of the year.</p> <p>Partially Implemented</p> <p>Revised Completion Date: 31 December 2022</p>	<p>A SharePoint has been set up to centralise Incident response for long term incidents such as Covid and the Energy Crisis.</p> <p>Fully Implemented</p>



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