

AUDIT AND RISK COMMITTEE

NOTICE

There will be a meeting of the Audit and Risk Committee on 02 December 2025 at 1330 hours in the Boardroom and on Teams.

		AGENDA		
Agenda Item				Lead
01	1 Apologies for Absence		N	VA
02		Declaration of any potential Conflicts of Interest in relation to any Agenda items	N	All
03		Minutes of Previous Meeting – 19 August 2025	Υ	PS
04		Matters Arising from the Previous Meeting	N	PS
05		Matters for Joint Committee Approval		
		Reserved Item: Commercially Sensitive in Draft Form	Υ	EMCK
		Draft Financial Statements for the year to 31 July 2025;		
	05.1	to be considered in conjunction with:	Υ	KT
		Proposed Annual Audit Report to the Board of Management and the Auditor General for Scotland (i.e. report of the external auditors)		
		Matters for Discussion		
	06.1 06.2 06.3 06.4	Internal Audit Internal Audit Review 2024/25 (incl. Internal Audit Annual Plan 2025/26) Audit Follow ups 2023/24 Student activity (Credits) Student support (Funding)	Y Y Y	DA
	06.5 Sustainability Internal Audit 06.6 Building Maintenance Internal Audit		Y Y	
07	07.1 07.2	Rolling Audit Recommendations Commentary Rolling Audit Recommendations Monitor	Y Y	PF
08	08.1 08.2 08.3	Risk Management – Risk Register Commentary on SLC Strategic Risk Register SLC Strategic Risk Register Cyber Risk Register and Cyber Risk Framework (CRF)	Y Y Y	PF PF CS
9	9.1	Bi-Annual Report of Cyber Security	Υ	CS
		Matters for Approval		
10		Reserved in Draft Form: Incomplete document Public Interest Disclosure (Whistleblowing) Policy	Υ	VA

11	Committee Terms of Reference	Υ	VA
	Matters for Information		
12	Reserved Item: Commercially Sensitive Information Pension and Payroll Project Update	Υ	GMcI
13	Governance Rolling Review	Υ	VA
14	Audit Scotland Technical Bulletin	Υ	EMcK
15	Annual Public Sector Cyber Resilience Assessment	Υ	CS
16	SFC's Expectations of Good Governance	Υ	VA
17	External Effectiveness Report	Υ	VA
18	Committee Discussion with Internal and External Audit Service Providers	N	
19	Summation of Actions and Date of Next Meeting (12 Feb 2026)	N	VA
20	Any Other Business	N	

Key:

CS	Chris Sumner	Head of Digital		
DM Douglas Morrison		Board of Management Chair		
EMcK Elaine McKechnie		Vice Principal – Resources and Sustainability		
GH Gordon Hunt Head of Strategic Insights, College Dev		Head of Strategic Insights, College Development Network		
JM Jacqueline Morrison Committee Member		Committee Member		
KP	KP Kirsty Pinnell Committee Member			
PF	PF Paddy Feechan Head of Finance			
PS	Peter Sweeney	Chair – Audit and Risk Committee		
SC	Scott Coutts	Committee member		
SMcM Stella McManus Principal		Principal		
KN Kerry Nelson Senior Audit Manager – Audit Scotland		Senior Audit Manager – Audit Scotland		
DA	David Archibald	Partner – Henderson Loggie LLP		



Unconfirmed ARC Minutes

AUDIT & RISK COMMITTEE

MINUTES				
ARC Committee on 19 August 2025 at 1730 hours via Microsoft Teams and in the Boardroom at South Lanarkshire College				
y				
Christine Clark, Executive & Governance Administrator				

AGENDA	
ITEM	
01	Apologies for Absence
	The Chair welcomed all to the meeting and introductions were made due to recent Committee member changes.
	Declaration of any potential Conflicts of Interest in relation to any Agenda
00	items
02	None.
03	Minutes of Previous Meeting – 06 May 2025
	The minutes were duly approved .
04	Matters Arising from the Previous Meeting (06 May 2025)
	Item 6 Action point: Exec Team - Risk owners to be updated after restructure.
	Item 7 Action point: PS and CS - Dashboard to be established for Key Risks
	(Long Term)
	Item 7 Action point: Exec Board – Board members to bear in mind any
	expertise and/or support that can be offered to support estates review.
	Item 9 Action point: Executive Team to update the Committee on any updates
	regarding Job Evaluation. SMcM paper to HRC on Thursday and will circulate.
	EMcK to provide further update regarding Job Evaluation at next meeting (August 2025).
	(August 2020).

		Item 12 Action point: VA – Terms of Reference expectations around Board
		involvement. VA will cover during induction. Not appropriate to change as
		voluntary.
		Matters for Discussion
05		CDN Presentation: Importance of Governance and Duties as Board Members
		Gordon Hunt provided overview presentation and slides will be circulated for future reference around governance and duties of Board members.
		Reflections were invited by GH. Discussion included training opportunities for Board members, the idea of the Board acting as a 'critical friend' of the College and holding College Management to account whilst providing support, guidance and understanding.
		The Chair thanked GH for the presentation and information. SMcM echoed the Chair's thanks and encouraged the Committee to refer to information on Board responsibilities and training within the CDN website.
06		Internal Audit
	06.1 06.2 06.3 06.4	Audit Report 2025/04 – Student Welfare – Duty of Care Audit Report 2025/03 – Student Invoicing and Debts Audit Report 2025/05 – Corporate Governance Internal Audit Plan 2025/26
		The Committee noted the first two positive reports containing much detail and assurances.
		Paper 6.1 The Chair acknowledged the positive report and improvements within the college.
		Paper 6.2 The Chair acknowledged the positive report with only two opportunities noted to enhance current practice. Version control for policies and procedures and regularity of debt management reviews, which the College is happy to accept.
		Paper 6.3 – not graded. DA noted that the report was positive and suggested College Governance arrangements are operating well.
		Recommendations centred around specific tailored training for Committee member induction, the development of key metrics to measure performance against strategic aims and alignment of strategic risks with specific Board sub committees.
		Paper 6.4 DA presented the draft Internal Audit plan for 2025-26 for committee awareness. It was noted that owing to the recent restructure, the College has opted to audit areas in 2025-26 that have not been subject to monumental change, with a view to re-visiting some of the impacted areas in 2026-27 once new processes are fully embedded.

		The Committee understood and accepted the plan.		
07	07.1 07.2	Rolling Audit Recommendations Commentary Rolling Audit Recommendations Monitor		
		The Committee noted 1 new recommendation was added and closed in the same quarter. 2 additional recommendations have been closed off during the last quarter (3 closed in total).		
		There are now 25 outstanding recommendations on the monitor, covering 1 Cyber Security, 1 Health & Safety, 3 Staff Recruitment & Retention, 4 Budgetary Control, 4 Student Support Funds, 2 Student Activity (Credits), 1 Publications and Communications Audit, 1 Procurement and Purchasing/Creditors, 3 Business Process Review Space Management/Room Utilisation and 5 Payroll & Pension Management.		
		Resources have been constrained over the summer period in terms of annual leave, vacancies following the restructure, a large-scale recruitment effort to fully staff the new structure and ongoing system implementation.		
		The Committee noted the importance around resourcing implications not being an ongoing issue. A further 7 or 8 recommendations are nearing completion and will be closed shortly.		
08		Risk Management – Risk Register		
	08.1 08.2 08.3 08.4	SLC Cyber Risk Register		
		The Committee noted fifteen risks identified, 4 post mitigation scores have increased, as have 4 pre mitigation scores.		
		Discussion included corporate governance, building maintenance, and business interruption training. Thanks were extended to the committee Chair for digital structure input.		
		DM referred to Matters for approval around Al policies and assurances required, taking account of market intelligence and how curriculum is affected. Risk Register to be updated with business and stakeholder engagement.		
09		Update from SLC Quality Enhancement Group:		
	09.1	The Committee noted no concerns from the EMA Spot Check 2 nd Audit 25 April 2025.		
10		ARC Work Plan for 2025-26		
		The Committee noted the proposal for a similar Work Plan for 2025-26 as per 2024-25. However, a Digital Bi-annual report will be collated and provided to the ARC and risk register consideration is now a formal consideration by way of an annual risk strategy day. The Committee raised no concerns over the plan.		

11		Draft Report of the Audit and Risk Committee to the Board of Management for 2024-25
		The Committee was content with the contents of the report for remit to the Board of Management in September 2025. The report noted and acknowledged TF's resignation and thanked him for his time in tenure.
		The report acknowledged that the Committee has received satisfactory assurances from the College in respect of Governance, risk management and operational controls for 2024/25. Matters for Approval
40		matters for Approval
12	12.1 12.2 12.3	Artificial Intelligence (AI) Policy SC AI Guidance for Students SLC AI Guidance for Staff
		The Committee approved the Policy and guidance notes for remit to the Board in September 2025.
		Discussion focussed on how the College protects itself from the risk of Al technologies in an ever changing and fast paced environment. An action was taken by the College to encourage greater collaboration between LTSE and ARC to ensure the College protects itself from inherent risks from advanced technologies, such as Al and a working group should be established to consider these risks at an operational level.
		It was also acknowledged that regular training for staff on digital and AI teaching should be incorporated as part of student and staff guidance.
13		should be incorporated as part of student and staff guidance.
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14		External Audit Accounting Policies for Financial Statements 2024-25 The Committee noted no proposed changes for 2025/26 with the new FEHE SORP coming into play in 2026/27. Accounts Direction 2024-25 The Committee considered four areas of change to the Accounts Direction for 2024/25 from 2023/24. The Committee was assured that where relevant, the changes would be actioned appropriately by college staff and no further questions were raised. Matters for Information Reserved Item: Commercially Sensitive Information De-regionalisation The Committee was provided with an update regarding Corporate Governance.

	The Committee was content with report and supported the request which will proceed to the Board. The details could not be published due to containing sensitive information.
17	Governance Rolling Review
17	Covernance Rolling Review
	The Governance Professional presented the report, with the Committee noting no concerns.
18	Investigation into University of Dundee: Lessons Learned
	The Committee appreciated the College's approach to summarise the BDO Professor Gilles independently commissioned report, through which an analytical review of the financial challenges facing the University of Dundee was discussed and presented.
	The Committee took assurances that the College was operating in line with the recommendations of the report, with emphasis on the importance of the role of the ARC being independent and providing absolute objectivity within the College governance structure.
19	Audit Scotland Technical Bulletin
	The Committee acknowledged the Technical Bulletin noting the inclusion of the Financial Reporting Manual FReM for 2024/25 College Financial Statement production.
20	Summation of Actions and Date of Next Meeting (02 Dec 2025 – joint ARC/FRC)
	Item 6 Action point: Safeguarding to be noted within Matters arising to keep in view.
	Item 8 Action point: – consideration to be given to adding the impact of AI and failure to engage stakeholders to the risk register
	Item 12 Action point: – ARC and LTSE to collaborate on deep dive; thereafter, Approved and Remitted to the Board.
	Item 16 Action point: - SFC approved and remit to the Board.
21	Any Other Business
	Nil raised.
	Meeting closed 19.26

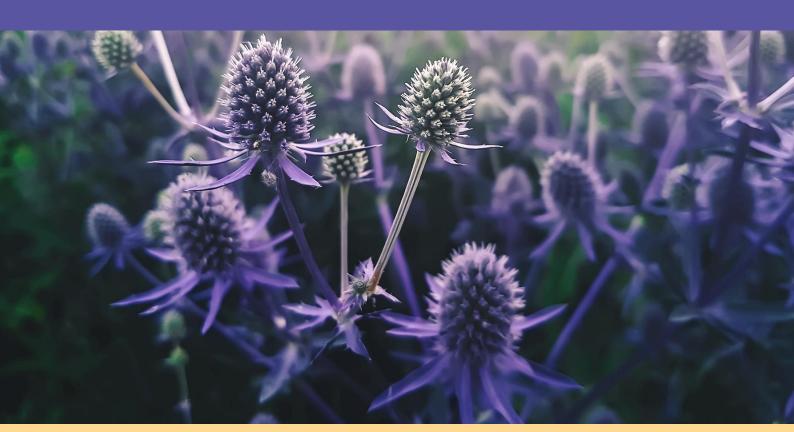
South Lanarkshire College

Annual Report to the Board of Management and the Principal on the Provision of Internal Audit Services for 2024/25

Internal Audit report No: 2025/11

Draft issued: 27 November 2025

Final issued: 27 November 2025





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Annual Report and Opinion

Introduction

- 1.1 We were appointed as internal auditors of South Lanarkshire College, ('the College') for the period 8 November 2021 to 31 July 2025 with the possibility of a further 12-month extension which has now been exercised by the College. This report summarises the internal audit work performed during 2024/25.
- 1.2 The internal audit operating plan for 2024/25 was based on the proposed allocation of audit days for 2024/25 set out in the extended Strategic Plan 2021 to 2026 (Report 2025/01, issued 6 November 2024). The preparation of the extended Strategic Plan involved discussion with the Principal, Vice Principal Learning, Teaching & the Student Experience and Vice Principal Finance, Resources & Sustainability, 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. The plan for 2024/25 also included reviews of Corporate Governance and Payroll which had been deferred from previous years. The Audit & Risk Committee approved the extended Strategic Plan at its meeting on 15 November 2024.
- 1.3 The internal audit work undertaken in the year followed that set out in the Strategic Plan for 2024/25.
- 1.4 The reports submitted during 2024/25 are listed in Section 2 of this report and a summary of results and conclusions from each finalised assignment is given at Section 3.
- 1.5 An analysis of time spent against budget is included at Section 4.

Global Internal Audit Standards in UK Public Sector Reporting Requirements

- 1.6 The College has responsibility for maintaining an 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;
 - Have produced this document and carry out all our internal audit practice in line with the
 requirements of the Global Internal Audit Standard (GIAS) (effective from 9 January
 2025) and the Global Internal Audit Standards in the UK Public Sector (effective from 1
 April 2025). Together, these have replaced the Public Sector Internal Audit Standards
 (PSIAS) previously in place.
 - 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.

111.

Global Internal Audit Standards in UK Public Sector Reporting Requirements (continued)

- 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 Global Internal Audit Standards in the UK Public Sector;
 - 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 our Global Internal Audit Standards in the UK Public Sector compliance.
- 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 We found that the College had made some progress in implementing the recommendations followed-up as part of our 2024/25 Follow-Up Reviews (report no. 2025/10, issued November 2025) with eight of 26 (31%) recommendations that were past their agreed completion date being categorised as 'fully implemented'. However, this meant that 18 (or 69%) had not been fully implemented within the agreed timelines. We have not raised this lack of progress as a caveat on the overall internal opinion in paragraph 1.11, solely because only two of these outstanding recommendations were Priority 2 recommendations and there were no Priority 1. Had the proportion of higher priority recommendations been greater, then the risk for the College of non-implementation would have been magnified, and we would have included this as a caveat on our overall opinion for 2024/25.
- 1.10 There were no issues identifying major internal control weaknesses noted from the internal audit work carried out during the year. In general, procedures were operating well in the areas selected, but a few areas for further strengthening or improvement were identified, and action plans have been agreed to address these issues.

Opinion

- 1.11 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. From the internal audit work conducted during 2024/25 we have not identified any downward trends in relation to risk management, control or governance. However, the College has identified that the following risk on the Strategic Risk Register is currently graded as 'Very High' and subject to regular scrutiny:
 - Risk 1 That the College cannot maintain financial stability.

This opinion has been arrived at taking into consideration the work we have undertaken during 2024/25 and in previous years since our initial appointment.



Reports Submitted

Number	Title	Overall Grade	Recommendations	Priority 1	Priority 2	Priority 3
2025/01	Annual Plan	N/A	-	-	-	-
2025/02	Payroll	Satisfactory	1	-	-	1
2025/03	Student Invoicing and Debt Management / Debtors and Income	Good	-	-	-	-
2025/04	Student Welfare – Duty of Care	Good	-	-	-	-
2025/05	Corporate Governance	N/A	6	Recomm	endations n	ot graded
2025/06	Environmental Sustainability	Satisfactory	4	-	-	4
2025/07	2024/25 Student Activity Data	Audit opinion unqualified	4	-	1	3
2025/08	Building Maintenance	Satisfactory	4	-	1	3
2025/09	2024/25 Student Support Funds	Audit opinion unqualified but observations made	-	-	-	-
2025/10	Follow-Up Reviews	N/A	19 out of 27 recommendations required further action (including 3 not graded from a BPR)	-	2	14



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.

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

2025/01 - Internal Audit Annual Plan 2024/25

Final Issued – November 2024

The purpose of this document was to present for consideration by management and the Audit & Risk Committee the annual operating plan for the year ended 31 July 2025. This would normally be based on a comprehensive Audit Needs Assessment (ANA) and three-year Strategic Plan, which would be prepared following discussion with Board members and managers throughout the College. Given that the current internal audit contract only had one more year to run unless the College invoked the option of a one-year contract extension, it was agreed that a full refresh of the previous ANA and Strategic Plan 2021 to 2024 (Report 2022/01, finalised 29 April 2022) should not be undertaken at this time. The draft plan for 2024/25 was based on discussions with the Principal, Vice Principal Learning, Teaching & the Student Experience and Vice Principal Finance, Resources & Sustainability, 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. The plan also included reviews of Corporate Governance and Payroll which had been deferred from previous years.

The outline scope and objectives for each audit assignment to be undertaken during 2024/25, together with the proposed audit approach, were arrived at following discussion with the Principal, Vice Principal Learning, Teaching & the Student Experience and Vice Principal Finance, Resources & Sustainability. The outline scopes were refined and finalised after discussion with responsible managers in each audit area.



Report 2025/02 - Payroll

This audit considered the key internal controls in place over the College's spend on staff costs. Our audit covered the procedures in place within both the HR and Payroll / Finance teams.

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

Strengths

- The College has Payroll Manuals in place for the Pegasus and iTrent payroll systems. The Payroll Manual for iTrent is being continuously updated as further functionalities are enabled and the system is configured for College use.
- While iTrent is still being developed and configured, the College has established parallel payroll runs, prepared in both Pegasus and iTrent, which are compared and investigated to explore any differences. This enables the College to determine whether iTrent is operating as intended and is meeting the College's needs, and provides further assurance that the payroll is accurate while system changes and fixes are being applied.
- Our sample testing confirmed that all gross pay and deductions for the staff selected were correctly calculated, with salaries, PAYE, national insurance and pension contribution rates, and non-statutory deductions agreed to supporting evidence held by the College.
- There are appropriate approval controls in place for authorising timesheets, covering additional hours worked. Our testing did not identify any issues in relation to the timesheets being submitted or approved and the corresponding payments being made.
- The College utilises comprehensive checklists and forms for starters and leavers, which capture the relevant information required for processing the employees on the HR and payroll systems. Our sample testing confirmed that appropriate documentation was held for all employees selected, and that these staff entered and left the payroll system on the correct dates. We also verified that the staff members' first or final pay was correctly calculated.
- The College carries out pre-employment checks for all new starts, including a confirmation of the right to work in the UK. Our sample testing confirmed that each new employee selected had the appropriate pre-employment checks carried out.
- The Vice Principal Finance, Resources & Sustainability performs variance and exception checks on each monthly payroll as part of the payroll run process.

Final Issued - April 2025

rea	e objective of our audit was to obtain sonable assurance that systems are ficient to ensure:	Grade
1.	Correct calculation of gross pay and deductions.	Good
2.	Correct calculation of employer national insurance and superannuation contributions.	Good
3.	Part-time staff, overtime and travel & subsistence payments are properly authorised.	Satisfactory
4.	Approval and checking of changes to employee standing data.	Satisfactory
5.	Starters and leavers are properly treated and enter and leave the system at the correct dates.	Good
6.	Pre-employment checks are carried out for new starts including confirmation of the right to work in the UK.	Good
7.	Proper authorisation, processing and recording of payments.	Good
Ov	erall Level of Assurance	Satisfactory



Report 2025/02 - Payroll (Continued)

Strengths (continued)

 The arrangements for preparing, checking, approving, and paying payroll runs are appropriate and involve adequate segregation of duties between Payroll, HR, and Finance staff.

Weaknesses

- Many of the College's legacy payroll processes (such as the submission of overtime forms and staff expense claim forms, as well as the use of spreadsheets for payroll adjustments made in Pegasus) require a significant element of manual input from staff members. Additionally, the Pegasus system lacks some key functionalities (for example in relation to reporting functionality and employee self-service) and is not well-integrated with the College's in-house HR system. The College is seeking to resolve these challenges through the full adoption of the iTrent payroll & HR system, which is expected to be completed later in 2025. As such, we have not made recommendations addressing the inefficiencies in the College's payroll management processes because these are known deficiencies which are embedded in the capabilities of the legacy payroll and HR systems. Instead, we have focused on reviewing the College's control environment in relation to payroll, which we found to be adequate, with the exception of the points noted below.
- During our testing, we noted that two of the 10 travel and subsistence claim forms we reviewed did not contain signatures from a member of the Principalship, in line with the approved College procedure. The HR Officer confirmed that this was discussed at an HR team meeting, and it was advised that the team should ensure that forms contain additional signatures before they are processed. Additionally, the College is developing an electronic version of the form within iTrent, which should prevent this scenario occurring in the future, due to built-in system controls. As appropriate actions are already being progressed to remedy the identified control weakness, we have not made a recommendation on this issue.
- It is our view that the College does not currently deploy sufficient controls to confirm
 that any employee requests to amend personal data are genuine and originate from
 a legitimate source. The HR or Payroll Administrators processing the changes do
 not always independently confirm with the employee whether they have requested
 the change to their details.



Report 2025/03 - Student Invoicing and Debt Management / Debtors and Income

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

We also reviewed the systems of internal control in place within the College in relation to significant commercial income generating activities, education contracts and other income.

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

Strengths

- A Staff Guide is in place for the enrolment process. The guide is updated annually and sets out the enrolment process and highlights any changes from the previous academic year.
- During application and enrolment, a number of questions are asked to determine
 what source of finance will be applicable to the student, and to identify if they may
 be eligible for a few waiver.
- Self-funding students are required to pay all course fees up-front at the time of enrolment. Alternatively, for fees over £350, there is scope to arrange a payment plan with the College
- For all students that are not self-funded, evidence is required at the enrolment stage
 to evidence how fees will be paid. Where evidence is not provided, the student
 status will be amended to self-financing until such time that evidence can be
 provided.
- A Tuition Fee Policy (April 2024) is in place, setting out the methodology for setting fees, policy relating to payment of fees and responsibilities.
- Data is transferred between the student records and finance systems via an easy link integration method. Reviews are undertaken by the Finance department on receipt of the report and again prior to processing invoices to ensure accuracy and completeness of the data.
- There are process notes (April 2024) in place relating to the raising of invoices, providing information for both student fee and non-student fee invoices.

Final Issued – August 2025

The objectives of this audit were to ensure that:	Grade
Enrolment procedures across the College are sufficient to ensure accuracy of student records information, including adequate checking of student data by MIS	Good
There is accurate and timely transfer of data between the student records system and the finance system, and regular reconciliation between the systems	Good
 All fees are fully and correctly invoiced and processed for self-financing students and sponsored students. Fee-waiver students are appropriately identified 	Good
Invoices / claims are raised promptly in respect of other income due to the College	Good
 Credit notes are appropriately authorised before issue 	Good
Adequate debt management and recovery procedures are in place and are consistently followed in practice	Satisfactory
Overall Level of Assurance	Good



Report 2025/03 – Student Invoicing and Debt Management / Debtors and Income (Continued)

Strengths (continued)

- During testing of a sample of tuition fees raised in 2024/25, it was established that
 the correct finance source had been identified and the fee correctly raised in a
 timely manner in all cases. Similarly testing of a sample of invoices raised under the
 non-student fee invoicing process established that invoices were correctly raised
 and in a timely manner.
- All invoice requests must be supported by documentation and / or details or calculation
- All credit notes are reviewed by the Assistant Finance Manager prior to being processed to ensure that request is legitimate and the information correct
- Debt Management Processes (April 2025) are in place and define action that should be taken for overdue invoices.

Actions Already in Progress

- During our review we noted that a number of policies and procedures had become
 due for review during 2025. It was determined that an exercise is currently being
 undertaken by the Head of Finance to review all current finance policies and
 procedures, including the Financial Regulations.
- Following issues with debts not being followed up within the timescales set out in the Debt Management policy, it was determined that appropriate resource was not in place to cover periods of absence. An additional member of staff is currently being trained in debt management to ensure that appropriate cover is in place to continue debt management activities in the absence of the primary member of staff responsible for this task.



Report 2025/04 - Student Welfare - Duty of Care

The scope of this audit was to review the action the College is taking to meet its specific statutory duties related to the care of students, as described within the 'Background' section.

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

Strengths

- The College established a comprehensive Safeguarding Policy and Procedures document in April 2023, which was updated in May 2024 and is due for another review in May 2025. This sets out its Safeguarding aims, objectives, staff roles and responsibilities for its delivery.
- The College has in place a Corporate Parenting Plan 2024-28 ("We promise to Care") which supports the vision of Scotland's "The Promise" to ensuring care experienced children and young people realise their maximum potential. The promise is at the core of the Corporate Parenting Plan Action Plan to improve the retention rate of these students, which is currently below the national average. Progress with these actions is subject to review and updating on an annual basis.
- There are a number of other policies in place to deliver the College's Safeguarding and Corporate Parenting approach.
- The College has appointed staff members and groups with specific responsibilities to meet its statutory Safeguarding duties within its Safeguarding Network.
- The Safeguarding Network has a crucial service in triaging and facilitating support to individuals with relevant concerns through the Safeguarding and referral process within Report Now.
- Referrals on potential Safeguarding issues can be made either by the students or staff through the Report Now system which captures all the relevant information so that it can be fully investigated and a decision made on the appropriate course of action to be taken to address the issues raised.
- The College also offers an onsite Student Counselling Service, and individuals may often be referred to it when they highlight Safeguarding or mental health concerns.
 The service provides an evaluation of the effectiveness of its services in an annual report.

Final Issued - June 2025

The objective of this audit was to obtain reasonable assurance that the College has:	Grade
 Duty of Care policies and documented procedures in place which are communicated to all staff. 	Good
 Appointed staff or groups with specific responsibilities to assist the College in meeting its statutory duties related to the care of students. 	Good
A formal risk identification and assessment process.	Good
 A Duty of Care training programme for staff which includes induction training and regular refresher training. 	Good
Engaged with Prevent partners and collaborated with other Corporate Parents.	Good
 Regular reporting of Duty of Care matters to senior management and the Board of Management. 	Good
Overall Level of Assurance	Good



Report 2025/04 - Student Welfare - Duty of Care

Strengths (Continued)

- The College has undertaken extensive work on the prevention and response to Gender Based Violence (GBV) through its collaboration with Fearless Glasgow and EmilyTest. This resulted in it being the first College to obtain the EmilyTest Charter evidencing its standards and excellence in prevention, intervention, and support for students and staff subjected to GBV.
- The College's arrangements for supporting students in relation to Safeguarding are included within the student induction process and is advertised throughout the College and online.
- Mandatory training is provided to all staff members across all levels and areas of the College on Safeguarding, with mandatory refresher training undertaken every two years.
- Specific training on Safeguarding and preventing issues are provided to those within the Safeguarding Network who perform a Safeguarding role.
- The College actively and frequently engages with Prevent partners, third party and other corporate parents to meet its duties, utilising the sharing of insights, good practice, resources, and developmental opportunities.
- The Head of Student Services, who is the College's Head of Safeguarding, regularly reports on Duty of Care matters to the Senior Leadership Team (SLT) and to the Learning, Teaching and Student Experience Committee (LTSE) and Human Resources (HR) Committee. The minutes of these meetings are shared with the Board of Management.

Opportunity for Enhancement

At present there is no formal annual report on Safeguarding, Corporate Parenting
and Prevent matters provided to LTSE or the Board of Management, which
provides explicit confirmation of compliance with the collective duties placed on the
College. We have agreed with management that an annual report to LTSE will be
produced and therefore since action is already planned we have not raised a
separate recommendation on this point.



2025/05 - Corporate Governance

Final Issued - August 2025

The scope of this review was to conduct an independent review of the work completed by the College to progress issues raised in the Externally Facilitated Effectiveness Review described in the Code of Good Governance for Scotland's Colleges (2022) ('the Code), in line with the Guidance Note issued by the College Development Network (CDN). The review covered the five sections of the Code namely:

- Section A Leadership and Strategy
- Section B Quality of the Student Experience
- Section C Accountability
- Section D Effectiveness
- Section E Relationships and Collaboration

The objective of this review was to complement the work already completed by the College, through discussions with Board members, in order to meet the requirements of the CDN Guidance Note, which sets out the specific requirement to provide a 'basic level of assurance relating to core governance requirements plus an agreed list of actions on areas that board members wish to develop their governance further'.

At the planning phase, it was agreed with the Governance Professional that one-to-one meetings would be arranged with the Chair of the Board of Management and the Chairs of each of the Board Subcommittees. It was also agreed that a meeting would be arranged with the Academic Trade Union Member and the Student President. These discussions would be supplemented by a review of Committee papers and other documentation, in relation to the governance arrangements of the College.

Overall, our review concludes that from a Board Member perspective, the College governance arrangements are operating well, with a number of strengths highlighted. Several Board members highlighted the significant improvement in the governance arrangements of the College in recent years, which they largely attributed to the positive impact of the current Chair of the Board and the significant amount of work conducted by the current Governance Professional and her predecessor, Peter Scott. The information gathered from the one-to-one discussions, did highlight some potential improvement areas, which are designed to enhance the existing governance arrangements and build on the solid foundations already developed.

There was a high degree of Non-Executive Board Member engagement in this review, which reflects a high degree of engagement with the College in their role as individual Board Members.

The membership across the various Boards and Board sub committees includes a diverse range of skills, which are available to provide support and challenge to the College Management Team. The general feedback from interviewees presented a positive perception of compliance with the Code.



Report 2025/06 - Environmental Sustainability

This audit included a review of the College's current position with regard to its strategic plans and operational arrangements to ensure compliance with the Climate Change (Scotland) Act 2009.

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

Strengths

- The College's Strategy 2030 sets a clear commitment to achieving net zero, with a baseline of 3,306 tCO₂e in 2009/10.
- Annual Climate Change Emergency Action Plans (CCEAP) are published, with the 2024/25 plan released in September 2024 and the 2025/26 draft in place, outlining year-on-year targets and progress achieved.
- The Environmental Sustainability Policy (February 2025) and public website provide transparent communication on goals and progress.
- The Vice Principal Finance, Resources & Sustainability leads on environmental sustainability strategically, with operational delivery by the Climate Change Operational Leads (CCOLs) including the Head of Facilities.
- The CCAT includes representatives from across the College and meets monthly, with a documented remit and annual self-evaluation to drive improvement.
- Despite organisational changes in 2024/25, the CCAT remained operational and continued to progress actions.
- Sustainability is embedded across governance, curriculum, and operations, with regular review and improvement overseen by the CCAT.
- Staff and students are engaged through events (e.g., "Love Your Planet" week), training (e.g., Carbon Literacy courses in 2025), and digital resources.
- Partnerships with external organisations (e.g., Biffa, Home Energy Scotland, Aramark, Dalkia, CLIC) extend sustainability education and practice beyond the campus.
- The College achieved a "Gold" Environment Association of Universities and Colleges (EAUC) Leader Scorecard in February 2025 and uses the EAUC FE/HE Climate Action Roadmap for self-assessment and planning.
- The 2023/24 Public Bodies Climate Change Duties report shows a consistent downward trend in College emissions.

Final Issued – November 2025

	e review sought to obtain reasonable surance that:	Grade
1.	The College has established the carbon baseline position and has set out and communicated the climate change aspirations for the College.	Good
2.	Roles and responsibilities around climate change action and environmental sustainability, including leadership of climate change projects, have been clearly articulated.	Satisfactory
3.	Initiatives are in place to educate staff and students on environmental sustainability.	Good
4.	There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably.	Satisfactory
5.	There is a procurement focus on sustainability during the tender process and initiation of contracts.	Good
6.	The College works in partnership with stakeholders / contractors re sustainable practice, including links to the Local Authority to drive forward plans to decarbonise the estate.	Good
7.	There are appropriate arrangements in place to update the Board on the progress being made to deliver on actions around climate change and sustainability.	Good
Ov	erall Level of Assurance	Satisfactory



Report 2025/06 – Environmental Sustainability (Continued)

Strengths (continued)

- Decarbonisation plans, including a commissioned report in March 2024, guide investment and operational improvements, with data-driven monitoring and reporting.
- The Procurement Policy (May 2024) and Strategy (2025/26 update scheduled for November 2025) embeds sustainability in all procurement activity.
- Tender evaluation templates and contract clauses ensure environmental criteria are considered, with performance tracked via performance indicators and regular supplier engagement.
- The College applies Community Benefit Clauses in all regulated procurements and aligns with sector sustainability standards through framework agreements.
- Participation in regional and sector-wide initiatives (e.g., EAUC, Zero Waste Scotland, CLIC) supports continuous improvement and knowledge sharing.
- Strong operational controls and regular engagement with staff, contractors, and local businesses reinforce the College's commitment to sustainability.
- The College demonstrates strong governance and oversight of its sustainability and decarbonisation commitments through structured reporting and Board-level engagement.
- Throughout 2024/25 and into 2025/26, the Board received and approved updated CCEAP, with quarterly updates provided via the Finance & Resources Committee (FRC) on key projects, progress, and risks.
- Sustainability and climate change risks are embedded in the Strategic Risk Register, with the Audit & Risk Committee actively reviewing controls and audit outcomes.
- At the operational level, the Strategic Lead and Senior Leadership Team (SLT)
 receive monthly Facilities Reports and CCEAP Progress Reports, ensuring
 sustainability remains a live and monitored priority across all levels of the
 organisation.

Weaknesses

 The remit and membership requirements of the CCAT should be updated to ensure job titles remain up to date and all key stakeholders are represented, and roles and accountabilities of membership are clear.



Report 2025/06 – Environmental Sustainability (Continued)

Weaknesses (continued)

- The CCOLs were the main action owners identified on the CCEAP. Reliance on a small group for delivering sustainability actions risks capacity issues; actions should be more widely delegated, such as across CCAT members. The proposed part-time Sustainability Officer role should also have sufficient capacity to sustain the momentum built up at the College.
- The Environmental Sustainability Policy (February 2025) should be updated to reference the Greenhouse Gas Protocol and guidance that clearly defines Scope 1, 2, and 3 emissions for future continuity and reporting accuracy.
- A comprehensive zero-to-landfill strategy, with measurable targets and clear ownership, should be developed to ensure that all waste streams are addressed and Net Zero goals are met.



2025/07 - 2024/25 Student Activity Data

Final Issued - November 2025

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 3 October 2025. 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.

Four recommendations were made in our internal audit report, including that the College should ensure that:

- courses are assigned correct Source of Finance codes and checks are in place to confirm no Credits are claimed against programmes fully funded from non-SFC sources;
- for courses of 20 weeks or less, the required date should be calculated based on the date 25% of the length of the course has lapsed;
- in-year data integrity checks include a review of Modes of Attendance, and other key data such as Credits claimed, to identify conflicts and that data is amended as required; and
- Credits claimed agree to the course framework or individual modules undertaken by students, based on SQA (or other awarding body) credit rating or planned learning hours/40.



Report 2025/08 - Building Maintenance

This review examined the extent to which College forward planning will support lifecycle maintenance for the College estate given the limitations on available funding.

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

Strengths

- A wider College Strategy is in place which defines the focus of the College's strategic objectives up until 2030, which includes a focus on estates.
- An exploration session was undertaken in June 2025 which involved key staff and management within the College to provide input into a potential new Estates Strategy.
- Consideration of student needs is incorporated into existing estates management works by the Facilities team.
- A Facilities Report is provided to the Finance and Resources Committee quarterly which details the ongoing estates works as well as sustainability matters.
- A quarterly Capital Expenditure report is submitted to the College's Finance and Resources Committee quarterly.
- Value for Money is a key part of the procurement processes to help achieve the best value contract, against which the performance of the contractor is monitored.
- An Asset Assessment Report was prepared by a specialist contractor in 2022 from which the College developed an annual PPM programme.
- An additional condition survey was undertaken in 2022 over the cladding due to the focus on this across the country, noting no major issues.
- The PPM programme and the job frequencies are defined by the compliance requirements, and where the PPMs are not compliance related, are defined by the manufacturer recommendations.
- New technologies have been implemented by the College to achieve carbon goals and improve energy efficiencies.

Final Issued – November 2025

The objective of this audit was to gain reasonable assurance that:	Grade
 The College has an Estates Maintenance Strategy in place which is aligned with the College's strategic planning objectives and other relevant strategies. 	Requires Improvement
 Oversight of the Estates Maintenance Strategy, including review of implementation and funding risks, have been aligned to an appropriate committee reporting to the Board. 	Good
 Progress made on lifecycle maintenance projects, and expenditure against budget, is monitored by management and an appropriate committee(s). The process includes arrangements to ensure value for money is achieved. 	Good
 Regular condition surveys are undertaken, and other good quality information is available, to inform asset management decisions. 	Satisfactory
5. Plans are in place to maintain the College's assets in good condition, as economically as possible, and in line with manufacturer's warranty conditions, in order to meet changing and rising standards as far as they can be foreseen.	Good
 There is a comprehensive cyclical testing and maintenance programme that covers all items requiring regular testing or maintenance under the relevant legal and regulatory framework. 	Satisfactory
Overall Level of Assurance	Satisfactory



Report 2025/08 – Building Maintenance (Continued)

Weaknesses

- The College's previous Estates Strategy is not reflective of the current College Strategy, the current financial landscape in which the College operates, and the staff and student needs in 2025 and thereafter.
- There is no cycle of condition surveys in place to review the physical condition of the College's campus and the individual assets within it.
- The College did not provide evidence that six-monthly PPM had been completed for one item in our sample (Canopy - Kitchen Extract) in line with the PPM schedule.
 Evidence was available of maintenance having been carried out in April 2025 but not October 2025.
- From inspection of the PPM schedule for 2025/26, it was established that the
 schedule defines: the specific PPM, the week in which it is scheduled to be
 undertaken, and its frequency (annually, 6 monthly, and 3 monthly). As such, there
 is no record of the specific date on which the works are required to be undertaken,
 or the costs associated with these works.

Actions In Progress

- At the time of this review being undertaken, the Vice Principal Finance, Resources and Sustainability is in the process of developing a comprehensive budget monitoring schedule which includes all departments and can be filtered for each level of review (budget holder, Curriculum Manager, Departmental Head, Principalship).
- At the time of this review, the College's Finance Manager was in the process of incorporating 15-minute meetings each month to discuss budget performance with each of the budget holders across the College, to help improve oversight of the College's spending.
- At the time of this review being undertaken, the College was in the process of implementing a new annual PPM for its lifts, which was to be added to the annual PPM plan once implemented.



2025/09 - 2024/25 Student Support Funds

Final Issued - November 2025

For the 2024/25 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.

The audit objectives were to ensure that:

- The College complies with the terms, conditions and guidance notes issued by SFC, SAAS and the Scottish Government;
- Payments to students are genuine claims for hardship, bursary or EMA, and have been processed and awarded in accordance with College procedures; and
- The information disclosed in each of the returns for the year ending 31 July 2025, is in agreement with underlying records.

We were able to certify all three fund statements 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 one minor observation arising from our audit work. The College does not operate a separate interest-bearing bank account for the Higher Education 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.

In our covering letter to the SFC enclosing the Auditors' Report for the **Education Maintenance Allowance Return** we noted one minor observation arising from our audit work. The College has made Administration claims totalling £2,385 for 2024/25 on the monthly EMA returns, which agrees to the year-end statement. During the 2023/24 Academic Year the College had failed to claim EMA Administration payments for 17 of the supported students, resulting in an underclaim of £255 as noted in our 2023/24 covering letter. The College made the appropriate adjustment in the February 2025 monthly return. We established however that the College had 159 accepted EMA student applications in 2024/25 and therefore the total Administration claim, including the adjustment for 2023/24, should have been £2,640, giving rise to an underclaim of £255, which is to be adjusted by the College in the next Administration claim for 2025/26.



2025/09 – 2024/25 Student Support Funds (Continued)

The FE Student Support Bursary Policy Guidance for AY 2024-25 notes that colleges spend on Study Expenses Allowance (Study Costs) should be in line with the sector average of between 5-6% of their total Student Support spend. In our covering letter to SFC enclosing the Audited **Discretionary Fund**, **Further and Higher Education Childcare Fund and Bursary Return** we noted that SLC's spend on Study Costs amounts to 6.8% of total Student Support spend. The figure was calculated based on total Student Support spend on Bursary and, subsequent to issue of our letter to SFC, it was clarified that the percentage of spend on study costs should refer to the overall total Student Support spend. This would therefore take the level of the College's study costs to 4.2% and below the threshold and not at a level where we would expect the SFC to be seeking any further explanations.

No new recommendations were raised in this year's report, however four recommendations made following the 2023/24 audit were followed up this year. We noted that each of the four recommendations were partially implemented, however the College will be implementing new processes for 2025/26, including focussing on tracking actual study cost spend per class, and is working to further improve tracking processes during 2025/26. Implementation of the College's updated processes will be considered as part of the 2025/26 student support funds audit.



2025/10 - Follow-up Reviews

Final Issued - November 2025

The Internal Audit Plan at the College for 2024/25 included two days for a follow-up of the recommendations made in Internal Audit reports issued during 2023/24 and reports from earlier years where previous follow-up identified that there were recommendations outstanding. These were:

- Internal Audit Report 2024/02 Publicity and Communications;
- Internal Audit Report 2024/03 Procurement & Creditors / Purchasing;
- Internal Audit Report 2024/05 Space Management / Room Utilisation Business Process Review;
- Internal Audit Report 2024/06 Follow Up Reviews 2023/24;
- Internal Audit Report 2024/07 2023/24 Student Activity Data; and
- Internal Audit Report 2024/08 2023/24 Student Support Funds.

Internal audit reports 2024/01 – Internal Audit Annual Plan 2023/24; 2024/04 – Student Support and 2024/09 – Annual Report did not contain an action plan and therefore no follow-up activity was required for these specific reports as part of this review.

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.

For the recommendations made in each of the reports listed above we ascertained by enquiry and review of supporting evidence, 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.

The College has made some progress in implementing the recommendations followed-up as part of this review with eight of 26 (31%) recommendations that were past their agreed completion date being categorised as 'fully implemented'. 15 (58%) recommendations have been assessed as 'partially implemented' and three (11%) recommendation assessed as showing 'Little or No Progress Made'. One recommendation was not past its agreed completion date. These recommendations will be subject to follow-up review in 2025/26.



2025/10 - Follow-up Reviews (Continued)

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

From Orig	inal Reports	S	From Follow-Up Work Performed				
Area	Rec. Priority	Number Agreed	Fully Implem- ented	Partially Implem- ented	Little or No Progress Made	Not Past Agreed Completion Date	Considered But Not Implemented
2024/02 – Publicity	1	-	-	-	-	-	-
and	2	-	-	-	-	-	-
Communications	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/03 -	1	-	-	-	-	-	-
Procurement & Creditors /	2	-	-	-	-	-	-
Purchasing Internal	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/05 – Space	A1/A	-	-	-	-	-	-
Management / Room Utilisation -	N/A – not	-	-	-	-	-	-
Business Process Review	graded	3	-	2	-	1	-
Total	Total		-	2	-	1	-
2024/07 – 2023/24	1	-	-	-	-	-	-
Student Activity	2	-	-	-	-	-	-
Data	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/08 – 2023/24	1	-	-	-	-	-	-
Student Support	2	-	-	-	-	-	-
Funds	3	4	-	4	-	-	-
Total		4	-	4	-	-	-
2024/06 - Follow-	1	-	-	-	-	-	-
Up Reviews 2022/23	2	3	1	1	1	-	-
2022/23	3	11	4	5	2	-	-
Total		14	5	6	3	-	-
Grand Totals		27	8	15	3	1	-



Time Spent - Actual v Budget 2024/25

	Report number	Planned days	Actual days feed	Days to fee at Nov 2025	Days to spend / WIP	Variance
Student Experience						
Student welfare - Duty of Care	2025/04	5	5	-	-	-
Staffing Issues						
Payroll	2025/02	6	10	-	-	4
Estates and Facilities						
Building maintenance	2025/08	5	-	5	-	-
Financial Issues						
Student invoicing and debt management	2025/03	3*	3	-	-	-
Debtors / Income	2025/03	3*	3	-	-	-
Organisational Issues						
Corporate Governance	2025/05	5	5	-	-	-
Environmental Sustainability	2025/06	5	-	5	-	-
Other Audit Activities						
Credits Audit	2025/07	6	-	6	-	-
Bursary, Childcare and Hardship Funds Audit	2025/09	5	-	5	-	-
EMA Audit	2025/09	2	-	2	-	-
Management and Planning)	2025/01	3	3	-	-	-
External audit / SFC)						
Attendance at A&R Committee)						
Follow-up reviews	2025/10	2	-	2	-	-
Audit Needs Assessment	2025/01	1	1	-	-	-
Total		51	30	25	-	4
		=====	====	====	=====	=====



Operational Plan for 2025/26

- 5.1 Following the extension of our appointment as internal auditors to cover the 12-month period to 7 August 2026, the Internal Audit Strategic Plan 2021 to 2026 was updated following discussion with the Principal, Vice Principal Student Experience & Innovation and Vice Principal Finance, Resources & Sustainability (Internal Audit Report 2026/01, issued July 2025).
- 5.2 An extract from the updated Strategic Plan, in relation to 2025/26, is shown below.

Proposed Allocation of Audit Days

	Category	Priority	Planned 2025/26 Days
Student Experience Curriculum Student Association	Perf Gov	M L	6 5
Financial Issues Financial sustainability	Fin	Н	6
Organisational Issues Business Continuity	Perf	М	5
Other Audit Activities Credits Audit Bursary, Childcare and Hardship Funds Audit EMA Audit Management and Planning External audit / SFC Attendance at A&R Committee) Follow-up reviews	Required Required Required		6 5 2 3
Total			40 ====

Key

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

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





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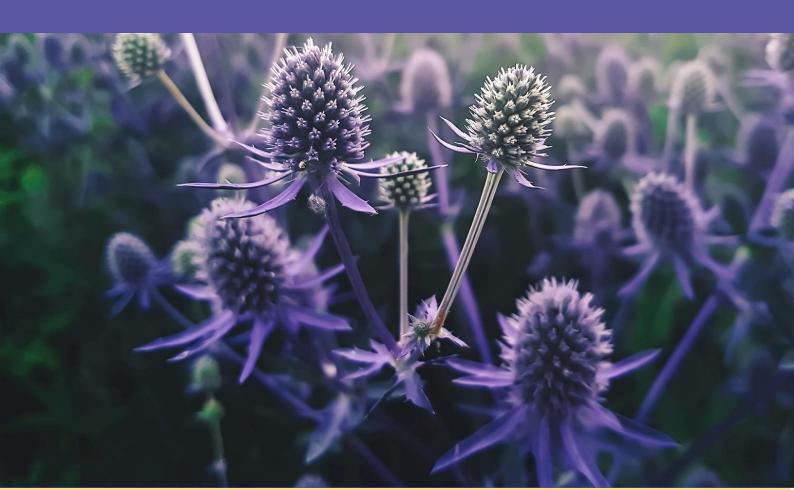
South Lanarkshire College

Follow Up Reviews 2024/25

Internal Audit report No: 2025/10

Draft issued: 24 November 2025

Final issued: 25 November 2025





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Management Summary

Introduction and Background

The Internal Audit Plan at South Lanarkshire College ('the College) for 2024/25 includes two days for a follow-up of the recommendations made in Internal Audit reports issued during 2023/24 and reports from earlier years where previous follow-up identified that there were recommendations outstanding. These were:

- Internal Audit Report 2024/02 Publicity and Communications;
- Internal Audit Report 2024/03 Procurement & Creditors / Purchasing;
- Internal Audit Report 2024/05 Space Management / Room Utilisation Business Process Review;
- Internal Audit Report 2024/06 Follow Up Reviews 2023/24;
- Internal Audit Report 2024/07 2023/24 Student Activity Data; and
- Internal Audit Report 2024/08 2023/24 Student Support Funds.

Internal audit reports 2024/01 – Internal Audit Annual Plan 2023/24; 2024/04 – Student Support and 2024/09 – Annual Report did not contain an action plan and therefore no follow-up activity was required for these specific reports as part of this review.

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 or sample testing, 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 eight of 26 (31%) recommendations that were past their agreed completion date being categorised as 'fully implemented'. 15 (58%) recommendations have been assessed as 'partially implemented' and three (11%) recommendation assessed as showing 'Little or No Progress Made'. One recommendation was not past its agreed completion date. These recommendations will be subject to follow-up review in 2025/26.



Overall Conclusion (Continued)

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

From Orig	inal Report	S		From	Follow-Up W	ork Performed	
Area	Rec. Priority	Number Agreed	Fully Implem- ented	Partially Implem- ented	Little or No Progress Made	Not Past Agreed Completion Date	Considered But Not Implemented
2024/02 – Publicity	1	-	-	-	-	-	-
and	2	-	-	-	-	-	-
Communications	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/03 -	1	-	-	-	-	-	-
Procurement & Creditors /	2	-	-	-	-	-	-
Purchasing Internal	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/05 - Space		-	-	-	-	-	-
Management / Room Utilisation -	N/A – not	-	-	-	-	-	-
Business Process Review	graded	3	-	2	-	1	-
Total		3	-	2	-	1	-
2024/07 – 2023/24	1	-	-	-	-	-	-
Student Activity	2	-	-	-	-	-	-
Data	3	2	1	1	-	-	-
Total		2	1	1	-	-	-
2024/08 – 2023/24	1	-	-	-	-	-	-
Student Support	2	-	-	-	-	-	-
Funds	3	4	-	4	-	-	-
Total		4	-	4	-	-	-
2024/06 - Follow-	1	-	-	-	-	-	-
Up Reviews	2	3	1	1	1	-	-
2022/23	3	11	4	5	2	-	-
Total		14	5	6	3	-	-
Grand Totals		27	8	15	3	1	-



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 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.

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 PlanInternal Audit Report 2024/02 – Publicity and Communications

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
 R1 Comprehensive social media guidelines should be developed in order to: support staff who have direct access to College social media accounts; and to guide staff in their use of personal social media in relation to information which pertains to their role within the College. 	3	SLC agree that Social Media Guidelines are required to frame employees' responsibilities. As noted by HL, this is captured within the Code of Conduct and is on the Marketing Action Plan but will be reprioritised immediately as separate guidelines are needed	Marie King, Marketing Manager	1 June 2024	Social Media Policy and Digital Etiquette Guidelines produced. This policy was approved at the LTSE Committee and Board. This is available to all staff via the Staff Document Portal. Fully Implemented
R2 Crisis communication training should be delivered for the Principalship and the Marketing and Communications Manager	3	SLC agree with the need for Crisis Communication Training.	Angela Pignatelli, Vice Principal Learning Teaching and the Student Experience	31 July 2024	Some key members of the Executive team have received crisis communication training. However, due to absence and new Executive staff members joining the College, there is a need for a further training date to be organised with CDN. Partially Implemented Revised Completion Date: 31 March 2026



Appendix II - Updated Action Plan Internal Audit Report 2024/03 - Procurement & Creditors / Purchasing

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
R1 It is recommended that consideration be given to amending the approvals of low value purchase orders in PECOS to Vice Principals and Associate Principals (rather than requiring sign off by the Principal), to reduce the risk of a bottleneck.	3	The College agrees this recommendation and the Vice Principal – Finance, Resources & Sustainability has included a revised proposal for PO authorisation / delegation within the finance regulation updates for FRC committee on 15th May 2024. Assuming approval is granted, the College will then embed changes in PECOS to support the new structure.	Vice Principal – Finance, Resources & Sustainability	30 June 2024	Since this audit recommendation was presented, there has been significant restructuring within the College. As such, the College has only recently identified who the signatories will be for the year 2025/26. As a direct result of this restructure the College, more specifically the Head of Finance was tasked with updating the Procurement Thresholds, the Financial Regulations and the Expense Policy, among others, and standardising limits and approvals throughout the College. Procurement thresholds to be taken to Board for approval, and implementation will occur thereafter. Partially Implemented Revised Completion Date: 31 March 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
R2 It is recommended that the College formalise its process for recording changes to supplier's standing information (including bank details and addresses) by implementing a standard form to document the independent checks undertaken to verify the changes, with a peer review / management review step implemented to ensure that there has been independent review of the changes made to supplier standing data prior to any payment being made to the relevant supplier following the application of the changes on the system.	3	The College agrees this recommendation and it has been noted by the Finance team.	Vice Principal – Finance, Resources & Sustainability	30 June 2024	A formal procedure for changing BACS details has been implemented. A form has been designed, which has to be approved before any BACS details are amended on Bluqube. Fully Implemented



Appendix III - Updated Action PlanInternal Audit Report 2024/05 - Space Management / Room Utilisation Business Process Review

Original Recommendation	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
R1 A refresh of the College Estate Strategy is necessary to address the evolving needs of all estate users. This should be based on a thorough review of space requirements for curriculum delivery, support staff (including workspaces and meeting rooms), and students (including social and self-study areas). The strategy should also explore how blended learning and hot desking practices could reduce the need for physical space.	The existing Estates Strategy is very outdated, and update has started. However, it is integral to understand the requirements of the College moving forward, thinking well ahead to enable us to tailor the College estate and facilities to meet the future requirements. This knowledge and discussion should result in the Estate Strategy being a genuinely useful document. The review of existing space and modular furniture will also involve the Estates Strategy and is currently part of the Curriculum Operational Planning process that happens year on year. This process is a good opportunity for the users of the room to review the best use of their rooms and suggest cosmetic or structural room changes.	Head of Facilities	30 November 2024	An internal session was held on 24 June 2025 to start a discussion on updating the Estates Strategy. This session explored a variety of questions in relation to how the estate can work more effectively for the College and was based on user experiences across curriculum and support staff areas. The next step is to update and revise the existing Strategy document in cognisance of stakeholder views. This draft will then be made available to both the wider Senior Leadership Team and Board for inputs and approvals, which will underpin the capital investment plans for the next 1- 5 years. Partially Implemented Revised Completion Date: 31 March 2026



Original Recommendation	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
policies and procedures that include optimal room utilisation targets (both in terms of frequency and occupancy) for specialised and general teaching areas. Implement a process to regularly review and audit room utilisation data, integrating information from attendance records, timetabling, and room occupancy sensors. This will help identify areas of over- or underutilisation, enabling better planning for alternative uses.	Management agree that policies and procedures (timetabling protocols and room booking) should be developed for cross college use. This is to be led by the curriculum area to enable support function departments to have systems in place. A process for monitoring space utilisation is to be developed by the Head of Facilities/IT using current data sources. This should be user friendly and not time consuming, maybe even tied to existing curriculum systems (attendance etc). However, it will be the department who ensure non bias room booking through the electronic booking system. This whole process should be overseen by the Associate Principals.	Head of Facilities, Head of IT, Vice Principal Finance, Resources and Sustainability, and Head of Curriculum.	23 December 2025	This recommendation is largely pinned on the implementation of an access control and class timetabling systems which are a work in progress and in varying stages of procurement and / or implementation. Not Past Agreed Completion Date Revised Completion Date: 31 May 2026



Original Recommendation	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
R3 Management should consider implementing a Room Booking System that consolidates timetabling information and other rooms to provide information on real-time room availability, enabling staff to easily review and identify appropriate rooms.	Agree. There needs to be timetabling protocols and a room booking system that is visible and can be used by the whole College. This then allows for room utilisation data to be monitored.	Head of Facilities and Head of IT	30 August 2025	This recommendation is largely pinned on the implementation of an access control and class timetabling systems which are a work in progress and in varying stages of procurement and / or implementation. Partially Implemented Revised Completion Date: 30 September 2026



Appendix IV - Updated Action Plan Internal Audit Report 2024/07 - Student Activity Data

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
Systems and Procedures for Compilation of Returns Allocation of Credits to Courses					
R1 For all College devised units, the College should ensure that adequate supporting evidence is available for planned learning hours to verify the Credits claim.	3	College Units or "Non-SQA" units are a frequent issue. While I agree with the recommendation to get better at reporting the evidence, the College uses far fewer non-SQA units in its courses than previous years. That said, the timetabling and attendance for these modules needs improved using our current timetabling system. We will monitor this more closely with the timetabled hours vs actual hours power reporting as this was invaluable in the audit. At curriculum planning process, the CM's will be challenged for using the non-SQA units, preventing unnecessary use of units in the courses. Record of work evidence is a lot clearer this year and can be used as supportive evidence for these modules.	Head of MIS (Chris Sumner)	30 September 2025	The Head of Digital advised that the College should be able to evidence this as the information on the hours in the system now matches what is required for the audit. No similar issues identified during 2024/25 testing Fully Implemented



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
Required Dates and Attendance					
R2 Ensure that the required dates for programmes and students recorded on the FES1 and FES2, respectively, are calculated in line with the Credits guidance.	3	Required date issues was not an issue at course level but it was at student level if the student finished early. The power bi report we use for checking the required date has been modified so we can see the student required date might be incorrect and reviewed at each FES quarter returns.	Head of MIS (Chris Sumner)	30 September 2025	The Head of Digital advised that this has been reviewed, and the correct controls should now be in place. Issues were however noted with the calculation of required dates during our sample testing for 2024/25. Partially Implemented Revised Completion Date: 30 April 2026



Appendix V - Updated Action Plan Internal Audit Report 2024/08 - Student Support Funds

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
Bursary Return – Study Costs R1 We would repeat last year's recommendation that the College should ensure that distribution lists identifying Bursary students in receipt of study materials are maintained for each purchase invoice charged to the Bursary fund, and based on the current approach, that the planned study costs for each course still reflect the specific items or materials needed for the course and the current price from suppliers.	3	The College will continue to analyse all study costs monthly and reconcile back to Cost of Course forms, adjusting the Teqios system where required, and reconciling this to the general ledger. With regards to distribution lists, we have implemented a document during the monthly reconciliation process that lists all bursary students and their course code / spend available etc however this was deemed insufficient as it did not tie in to actual spend. We now just need to find a way of attaching actual spend to this document. I will work with the CM's on this to see if there perhaps needs to be a better record kept of study cost spend at class level.	Management accountant	28 February 2025	The College initiated the set-up of study kit lists for each dept. in a similar format to those used by the Hairdressing dept. For each student, these show the product description and quantity for each kit item provided. Distribution lists are not maintained for each purchase invoice. The College is focussing on tracking actual spend per class and is working to further improve tracking processes for 2025/26. Audit testing for 2024/25 noted that the difference in budget v actual spend per cost category within each course, and overall budgeted spend v actual spend appear to be much tighter this year, indicating that improvements to tracking costs is having a positive impact. Partially Implemented Revised Completion Date: 30 September 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
that expenditure is correctly categorised on the study costs spreadsheet to allow a more accurate comparison of planned and actual expenditure.	3	The cost of course forms will be updated to show a more realistic split of bursary spend for each department, departments that have 'other' as a category of spend with no history of any actual spend within this category will have this amount spread over the other categories based on likely spend. Invoices that have a number of different categories of bursary spend will be allocated accordingly.	Management Accountant	31 December 2024	This work will tie in with the development of the study kit lists to get a better idea of what each course will likely spend on each category. Cost of course forms will be tailored to match the study kit lists. Audit testing for 2024/25 noted that the difference in budget v actual spend per cost category within each course, and overall budgeted spend v actual spend appear to be much tighter this year, indicating that improvements to tracking costs is having a positive impact. Partially Implemented Revised Completion Date: 28 February 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress at November 2025
R3 The College should review student Award Assessment categorisation on the FES and ensure that any apparent misstatements are fully investigated and resolved.	3	A monthly check of FES categories will be implemented to ensure any mis- categorised student will have their details corrected by the student support team before any over / under payment takes place.	Management Accountant	31 December 2024	The Student Support team was not able to check a monthly FES due to time constraints of other departments. However, no similar issues were noted during testing in 2024/25. Partially Implemented Revised Completion Date: 28 February 2026
Bursary Return – Additional Support Needs (ASN) Costs R4 Ensure that a check is made on the categorisation of ASN costs to ensure that they are correctly disclosed on the FES.	3	The monthly category check above will also include a quick check of ASN costs to ensure they are being disclosed correctly.	Management Accountant	31 December 2024	The Student Support team was not able to check a monthly FES due to time constraints of other departments. However, no similar issues were noted during testing in 2024/25. Partially Implemented Revised Completion Date: 30 September 2026



Appendix VI - Updated Action Plan Internal Audit Report 2024/06 - Follow Up Reviews 2023/24

Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025			
2022/02 - Risk Management	2022/02 – Risk Management								
R4 A session on risk management should be included as part of the programme of Board Member Strategy Days with the leadership team. This will allow greater understanding on how the risks link to the College's strategic aims and objectives and the impact failure to manage these risks will have on future success.	3	The Board planning day arranged for August 2022 will concentrate on strategic risk with input from Henderson Loggie and risk will be built into the Board's planning cycle.	Head of Finance	31 October 2022	August 2024 Assurance mapping of risk and risk appetite is being considered in a discussion paper being presented to the next meeting of ARC. The environment within which the College is operating remains volatile and the proposal is to separate very clearly the governance / operational matters.	The College Board undertook Risk Appetite Training (delivered by Henderson Loggie) on 19 November 2024 and the session enabled the College to create a risk appetite against each risk, bringing the views of the Board into sharper focus in terms of their tolerance of certain risks. This has also helped to contextualise the risks in relation to the			
To support Board assurance, management should conduct an assurance mapping exercise on the internal and external reporting arrangements in place against the current risks on the risk register. This will allow for a central analysis of the arrangements in place and allow any gaps to be identified and appropriate supplementary reporting arrangements determined. (continued on next page)		Assurance mapping will be added to the Risk Register. Additionally, risk has been added to the standing items on all Board, Standing Committee, and internal meeting agendas.	Acting Clerk / Acting Principal	31 August 2022	To allow for the detail to be fully considered a single-issue Strategy Day has been scheduled for 19 November 2024. The Strategy Discussion Paper identifies the roles and responsibilities of all involved in risk and sets out a template for providing the Board with risk assurances from internal processes and independent checks at each level of management. (continued on next page)	College sector and the College itself. The Risk Register is considered by the Senior Leadership Team and forwarded to the Audit & Risk Committee and Board on a quarterly basis for review and further scrutiny / challenge. (continued on next page)			



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R4 (continued) Assurance mapping can be completed by adding additional columns to the existing risk register detailing the following sources of assurance established: Internal - management reporting and quality assurance arrangements; and External - internal audit, external audit, Education Scotland etc.					Partially Implemented Revised Completion Date: 30 November 2024	The 'SLC Summary' tab of the Risk Register now includes two additional columns, as suggested by the recommendation - Assurance Mapping (identifying for each risk if assurance is internal or external) and Assurance Mapping Source (identifying the source of the assurance for each risk). Fully Implemented
Assurance reporting can then be brought into the forward planning for Board and committee agendas.						



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025				
2022/03 - Cyber Security	022/03 – Cyber Security									
R6 Mechanisms should be established for testing the effectiveness and value for money of the security training provided to staff. The areas of the organisation that regularly feature in security reports, or achieve the lowest feedback from information security questionnaires, should be targeted for further tailored training activity.	3	Accepted. This could also be folded into the other recommendations above. (R3/R4). This is considered and monitored as part of the recommendation to run security awareness program. This will be monitored and tested for value. The awareness training would also include the option for a mock phishing campaign.	Chris Sumner, Head of MIS	30 June 2023	August 2024 Security Questionnaire is created and will be issued in the August of 24/25. Partially Implemented Revised Completion Date: 30 September 2024	There is now a mixture of the TES-developed cyber security modules and the Jisc 'Building digital capabilities' tool. In particular, this tool is now being used as part of the career review process and includes cyber security themes such as information management, identity and data literacy which are far more relevant to the College than the standard questionnaires or flyers. This is now led and monitored using this tool and staff all progress to a better level of understanding for these areas and more.				



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
guidance for staff on how to manage their digital footprints safely and reduce the risk of becoming a target for attackers, both in a professional and personal capacity, and particularly through use of social media platforms can be made more widely available to staff and Board members.	3	Accepted. The College will review the guidance provided to staff on the use of IT and social media to highlight the importance of cyber security.	Chris Sumner, Head of MIS and Head of HR	31 December 2022	August 2024 Social media policy is in draft and needs approved by SLT and Board in August. ETA for publication is Sept 2024. Partially Implemented Revised Date Required 30 September 2024	The Social Media policy and the Jisc 'Building digital capabilities' tool are now in place. In particular, this tool is now being used as part of the career review process and includes a social media training aspect. This is also led by managers and monitored using this tool. Staff can all progress to a better level of understanding for social media areas and more. Fully Implemented



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R9 The Incident Response Process, and supporting playbooks, should be tested by way of a scenario-based desktop exercise to ensure staff know how to respond during an incident, and to also highlight any problem areas in the planned response.	2	Accepted. Action to address this recommendation will be included in the response to Recommendations 2 & 3.	Chris Sumner, Head of MIS, Head of HR, and the Clerk to Board	31 March 2023	August 2024 SLT availability has been limited. SLT will get training at the beginning of the year 24/25 and the presentation / scenario used can be shared as evidence of the incident response training Partially Implemented Revised Completion Date: 30 September 2024	There was testing of the College's incident response through real incidents in the last 12 months. A mixture of the restructure and conflicting priorities with the SLT meant that embedding the incident response process with the SLT was delayed, however SLT Incident Response Training was provided in November 2025. This included an exercise to work through a business continuity scenario and there was a lessons learned review at the end.



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
2022/09 - Student Support Fu	unds 2021/2	2	_			
R2 The College should undertake a review to identify digital study materials and determine a basis for apportioning costs to Bursary students, ensuring that the cost of any core teaching materials that should be covered by the core grant and any costs relating to non- Bursary students are excluded.	2	The College will analyse digital study costs and prepare a system of apportionment that differentiates between support provided to bursary funded and non-bursary funded students.	Head of Finance	31 March 2023	August 2024 We are currently working with our MIS/IT team to develop an evidence based report that shows a list of bursary students and usage amounts of digital study materials. Partially Implemented Revised Completion Date: 30 August 2024.	The College has been unable to make significant progress on this requirement to date. There is a new Head of Finance in position who will have a focus on all audit requirements going forward. The Head of Finance has reached out to the various business units that may be able to identify the costs. Little or no Progress Made Revised Completion Date: 30 September 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025			
2023/03 - Staff Recruitment a	2023/03 – Staff Recruitment and Retention								
R1 It is recommended that the College define timeframes for completion of the ongoing review of its recruitment and selection policies to ensure that these are completed in a timely manner and are issued to the relevant staff for their understanding.	2	Whilst the College has never had a recruitment policy, the College follows a strict procedure with recruitment and ensures consistency and quality for all employees. Following a review, the College is currently refreshing dated policies and implementing policies where there are gaps. This year, the Human Resources Committee has agreed to a recruitment policy being part of the next suite of new policies being implemented.	Head of Human Resources	20 January 2024	August 2024 On track for completion, management are expecting this to be by the end of December 2024. Partially Implemented Revised Completion Date: 31 December 2024	Due to capacity issues within the HR team, the development of the Policy has been delayed. The Policy is now in draft form and is currently going through an internal HR review before moving to the Senior Leadership Team, the Joint Negotiation Committee, the HR Committee and then the Board of Management. Partially Implemented Revised Completion Date: 1 December 2025			



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R2 It is recommended that the College prepare procedural documents to formally document the administration processes to be followed when recruiting a new member of staff, to ensure that the process can be consistently performed by anyone in the event of staff absences / unexpected turnover.	3	Whilst the College has never had a documented recruitment procedure, the College follows a strict procedure with recruitment and ensures consistency and quality for all employees. This will be updated with the current HR automation activities. Following a review, the College is currently refreshing dated procedures and implementing procedures where there are gaps. This year, the Human Resources Committee has agreed to a recruitment procedure being part of the next suite of new procedures being implemented.	Head of Human Resources	20 May 2024	August 2024 Due to delays in the implementation of the College's new HR & Payroll system, the Recruitment Procedure has been delayed. It is envisaged that this will happen by March 2025. Partially Implemented Revised Completion Date: 31 March 2025	There have been delays with the role out of iTrent features, including the Recruitment module. The priority has been in ensuring payroll and pensions accuracy. Employee Self-Service has now been rolled out, and the College is seeking to implement the recruitment module during the first half of the next academic year. In saying that, the module is already well developed and partially tested. Partially Implemented Revised Completion Date: 22 December 2025



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R3 It is recommended that copies of all originals held on file are signed as being reviewed and confirmed as an original document by the HR officer who was presented with the document for copying.	3	The College follows a strict procedure with recruitment activities. All copies of necessary, original documentation are sighted. The College agrees that by signing the copies as "original sighted" this would be further evidence of this process being implemented.	Head of Human Resources	20 December 2024	August 2024 This is on track for completion. Not Past Agreed Completion Date	A section is now included on the Interview Candidate Checklist, to confirm originals have been sighted. Fully Implemented
R5 It is recommended that the College set out a clear timeline for importing all relevant hard copy documentation to the new HR system iTrent, to ensure that this data transfer is completed in a timely manner and to avoid a protracted scenario where some information is held electronically and some information is still held in hardcopy files.	3	Following the implementation of the new HR System, the College will propose the importing of hard copy documentation. This will allow the College time to understand the time and process necessary to undertake this task. The College will aim to have a project plan for the importation by 20th May 2024.	Head of Human Resources	20 May 2024	August 2024 The new HR & Payroll system is not in place. It is envisaged that a subsequent project to upload hard-copy documentation will follow this and will likely commence around May 2025. Little or No Progress Made Revised Completion Date: 30 May 2025	The new HR & Payroll system is not fully in place yet. It is envisaged that a subsequent project to upload hard-copy documentation will follow this and will likely commence around December 2025. Little or No Progress Made Revised Completion Date: 31 May 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R6 It is recommended that the College implement ongoing engagement measures to capture levels of staff satisfaction to reduce the risk of employees leaving the employment of the College due to issues which could have been managed and resolved had they been identified earlier.	3	The College has historically measured engagement through various surveys. Whilst there have been regular surveys, they have followed the structure required by third party accreditations and have not provided the College with an engagement framework that is measured over time and across the employee journey. The College recognises this. It is included it in the HR & People Strategy.	Head of Human Resources	20 November 2025	The College is on track with this and is rolling out an Employee Engagement framework, along with an initial action plan. Not Past Agreed Completion Date	An employee engagement framework has been researched, developed and implemented. Initial baseline measures have taken place to assess the current status of engagement. Further activities will take place during the 2025-26 Academic Year to refine a process for assessment, measuring and responding to employee satisfaction and engagement. Partially Implemented Revised Completion Date: 29 January 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
2023/04 - Budgetary Control						
R1 The College should develop a formal budget setting timetable, setting out all key activities in the budget setting process from end to end, to ensure that all activities are completed timeously. The timetable may also assign tasks to responsible individuals, with target completion dates aligned with the Finance and Resources Committee meeting as appropriate.	3	Agreed.	VP for Finance, Resources and Sustainability	31 January 2024	August 2024 This is still in progress. Budget Preparation guidance document prepared, which builds out the intended timeline for budget setting in accordance with the wider curriculum planning exercise. This requires further update across the latter part of 2024 - early 2025. Partially Implemented Revised Completion Date: 28 February 2025	Alongside the Budget Preparation guide, Finance is developing a GANTT chart to formalise the timetable. Partially Implemented Revised Completion Date: 31 May 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R2 The College should consider developing enhanced real time financial information and dashboards, perhaps via Power BI, to allow Budget Holders to monitor actual income and expenditure against budget in real time.	3	Agreed. Finance will work with the Head of IT to further develop Power Bi information dissemination and monitoring.	VP for Finance, Resources and Sustainability	29 February 2024	August 2024 The College currently utilises Power BI for many reporting purposes within finance - one example is the temporary lecturing budgets. Further enhancements are required to ensure quality of data entry. The MIS developer team have also worked with Finance during the year to develop a schedule of reportable monthly income to enable income accruals to be booked for month end reporting purposes. This needs to be further developed to improve accuracy and to ensure it captures all income sources. The College is also targeting a larger commercial income drive to bolster reduced government grant funding. Power BI has been updated to enable courses to be identified as full cost recovery courses (i.e. not Credit bearing courses). (continued on next page)	Work has been undertaken to develop a monthly management account pack, which will give enhanced information to budget holders. This will include area specific actual vs budget data, with two-way commentary. Partially Implemented Revised Completion Date: 31 May 2026



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R2 (continued)	3				Curriculum managers and relevant teams have been briefed on the importance of making time critical updates to Power BI in order to deliver greater accuracy. Partially Implemented Revised Completion Date: 28 February 2025	



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
should document the month end process currently followed by Finance, including preparation of budgeting information to allow for prompt publication of income and expenditure by budget line for review and monitoring by Budget Holders. This should be adapted as the capabilities of BluQube are enhanced to include generation of reports immediately following the completion of the month end close process to provide timely information.	3	Agreed. The Finance Department are in the process of updating and formalising its operating and reporting calendar.	VP for Finance, Resources and Sustainability	31 March 2024	August 2024 A high-level timeframe has been discussed at Finance Team meetings in preparation for formal month end, albeit process not yet operational. The capabilities of Bluqube are now being discussed. A kick off meeting with Bluqube has been initiated for Thursday 29th August, with a consultant coming on site to enable changes on Sept 3rd. The College has now purchased the reporting package that bolts onto Bluqube and this will enable purpose built reports to be run once structures are set up. Additionally, an intended structure for cost centre roll ups was provided by Finance which will form the basis of structures required for reporting. (continued on next page)	Finance use a checklist to complete the monthly management accounts. There are plans to replace the current management account pack to enhance the process. There are also plans to enhance BluQube to include budget information, to allow for a better user experience. Partially Implemented Revised Completion Date: 31 May 2026



Original Recommendation Prior		Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R3 (continued)	3				The College has also provided an indication of the type of finance grid that it hopes to put in place. Partially Implemented Revised Completion Date: 31 March 2025	



Original Recommendation	Priority	Management Response	To Be Actioned By	No Later Than	Progress Previously Reported	Progress at November 2025
R4 The College should develop a formal training programme for Budget Holders, which they are required to complete before they undertake their budget monitoring role. Detailed written procedures and guidance documents should also be developed (in parallel with the development of this tailored training for Budget Holders). This will provide a useful reference document for all Budget Holders, which they can consult, as required, following the training.	3	Agreed. Staff absences have hampered the training of all staff re budgeting, but it is the intention of the Finance Department to have a manual covering financial processes and procedures, with this incorporating an emphasis on the dissemination of Budget preparation and Budgeting information and monitoring. A face-to-face budget training session will also be delivered to staff during a meeting of Curriculum Managers in early 2024.	VP for Finance, Resources and Sustainability	31 May 2024	August 2024 A formal training programme has yet to be put in place, but the College is allowing for a six-month period to embed the Bluqube reporting package and have it fully operational. The College would expect to roll out training to budget holders in conjunction with new reporting system capabilities. Partially Implemented Revised Completion Date: 31 March 2025	Progress was hampered by the restructure, following the VS process. The relevant users have now all been identified, so work can begin to train them. Budget process set for 2025/26, so focus will be on the next financial year. Little or no Progress Revised Completion Date: 31 May 2026





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A list of members' names is available for inspection at each of these addresses.



South Lanarkshire College

2024/25 Student Activity Data

Internal Audit report No: 2025/07

Draft issued: 10 November 2025

Final issued: 21 November 2025





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Management Summary

Introduction

The Guidance Notes issued by the Scottish Funding Council (SFC) on 13 August 2025, 'FES Return and Audit Guidance 2024-25' requested submission by South Lanarkshire College ('the College') of the FES return for session 2024/25, which includes the Credits data relating to College activity for the academic year 2024/25.

Guidance on completion of the 2024/25 return was issued by the SFC on 26 June 2024.

The Credits Audit Guidance requests that colleges obtain from their auditors their independent opinion on the accuracy of the FES return.

Scope of the Audit

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.

Audit Staffing

An Audit Director with 32 years' experience in the further and higher education sectors had overall responsibility for the planning, control and conduct of the audit and supervised and reviewed work performed by a Senior Auditor with nine years' experience in the sector. A Senior Manager with 20 years' experience in the sector was also involved in the planning and supervision of the audit.

The quality of audit work undertaken by the firm is enhanced through continuous review of procedures and the implementation of individual training programmes designed to address the needs of each team member.

The total number of audit days was 7, split ½ day for the Audit Director, ½ day for the Senior Manager and 6 days for the Senior Auditor.

Audit Findings

The points that we would like to bring to your attention have been grouped together under the following headings to aid your consideration of them:

- Introduction
- Systems and Procedures for Compilation of Returns
- Analytical Review

The action that we consider necessary on each issue is highlighted in the text for clarity and an action plan for implementation of these recommendations can be found in section 2.



Audit Findings (continued)

To aid the use of the action plan, our recommendations have been graded to denote the level of importance that should be given to each one. These gradings are as follows:

Priority 1	Issue subjecting the College 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 College to significant risk and which should be addressed by management.
Priority 3	Matters subjecting the College to minor risk or which, if addressed, will enhance efficiency and effectiveness.

Conclusion

Our report was submitted to the SFC on 3 October 2025. 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.

A copy of our Audit Certificate is included at Appendix I to this report.

Acknowledgements

We would like to take this opportunity to thank the staff at the College who helped us during our audit review.



Action Plan

Para Ref.	Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date
	Systems and Procedures for Compilation of Returns Non fundable Activity					
2.2.1 – 2.2.2	-	3	This was due to the overall course setup in some areas where the master course may have had one type of source of finance and the class area had not been updated. This is a manual process and not easily noticed in the older systems. The initial test of the FES return from unit-e and credit claims shows that the credits are only added to the student based on the correct criteria for the source of finance so this issue, shouldn't happen again. With many of these recommendations I would prefer to have an in-year check and confirmation with HL to confirm that the system is performing before the final return for 25/26 in October 2026	Yes	Head of Digital (previously Head of MIS) Chris Sumner	30 April 2026



Para Ref.	Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date
	Required Dates and Attendance					
2.3.1 – 2.3.4	R2 For courses of 20 weeks or less, the required date should be calculated based on the date 25% of the length of the course has lapsed.	3	This is a regular issue with the systems we have had previously, we do have controls in place for monitoring the change of required dates based on the change of mode of attendance but it's also clear that the SFC guidance has two parameters for the rule for short full time and when the 25% applies which has confused the operators. Going forward, we are hoping that we already have the validation applied to the unit-e system. An in-year review of this around April 2026 to confirm would be appreciated, if HL could confirm what evidence they would like from this to close this before we get to the final return.	Yes	Head of Digital (previously Head of MIS) Chris Sumner	30 April 2026



Para Ref.	Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date
2.4.1 – 2.4.3	R3 Ensure that in-year data integrity checks include a review of Modes of Attendance, and other key data such as Credits claimed, to identify conflicts and that data is amended as required.	2	The short full-time (SFT) courses have been the issue in this situation. There needs to a better strictness of the 18 weeks or less rule for the SFT course and not allowing CQM's extending beyond that 18-week period. Extending the period forces the MIS staff to change this to a full-time mode of attendance. This is a process issue and needs checked at the curriculum planning process rather than the system side. Evidence of controls is difficult with this other than to display the check of all short full-time courses at the beginning of the year and then an in-year check to ensure the full-time and short full time courses match in terms of weeks on the system. To fully close this audit point, would only display in the final return in Sept / October 2026.	Yes	Head of Digital (previously Head of MIS) Chris Sumner	31 October 2026



Para Ref.	Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date
2.6.1 & 2.6.2	R4 Ensure that Credits claimed agree to the course framework or individual modules undertaken by students, based on SQA (or other awarding body) credit rating or planned learning hours/40.	3	We already have a process known as "Credit matching" between the credits within the units and the claim against the student in the system. The improvement here would be to have the credit match completed more regularly and ensure that the units added are not modified excessively during the academic year. To fully close this audit point, would only display in the final return in Sept / October 2026.	Yes	Head of Digital (previously Head of MIS) Chris Sumner	31 October 2026



Main Report

1. Introduction

1.1 SFC Guidance

- 1.1.1 The Credits Audit Guidance issued by the Scottish Funding Council (SFC) on 13 August 2025 sets out, at **Annex C**, the key risk areas in relation to the preparation of the FES return. These are:
 - the average Credits claimed for full-time students exceeds levels indicated in the Credit guidance;
 - incorrect Credit value is claimed for collaborative provision;
 - claims for fee waivers and students with multiple enrolments;
 - spanning courses;
 - identification of non-fundable activity, both courses and students, including capturing of eligible enrolments and identification and recording of student withdrawals;
 - recording of progress for students on open / distance learning programmes;
 - identification and counting of infill students; and
 - claims for non-accredited work experience / placement.
- 1.1.2 For academic year 2024/25 we established that there had been no significant changes to the systems and procedures used in the compilation of the returns. We then carried out detailed testing, as necessary, to enable us to conclude that the systems and procedures were working satisfactorily. Detailed analytical review was carried out, including a comparison with last year's data, and obtaining explanations for significant variations by Price Group. The College has moved from SITS to Unit-E during the Summer of 2025, with all 2025/26 enrolments being handled in Unit-E.
- 1.1.3 As requested by the Credits Audit Guidance this report indicates: the scope of the audit; the approach taken; an indication of analytical review work performed; the extent of checking undertaken; review of prior year recommendations; and the main findings from our audit work. As requested by the guidance, the report also includes a summary of adjusted and unadjusted errors found during the course of the audit.



2. Systems and Procedures for Compilation of Returns

2.1 Introduction

- 2.1.1 Detailed testing at the year-end Credits audit included two main tests on courses and individual students.
- 2.1.2 The following tests were carried out for a sample of 15 courses selected from the SITS system:
 - Ensured that the course met the criteria for fundable activity set out in the Credits quidance.
 - b) Where applicable, ensured that the course met the definition of further or higher education set out in the Credits guidance.
 - c) Ensured that courses recorded as full-time met the definition for full-time as set out in the Credits guidance.
 - d) Checked the student total for a programme against course / class lists or course / class register. Checked calculation of the required date and ensured that students who had withdrawn prior to this date had been excluded from the Credits count; and
 - e) Checked allocation of Credits to courses is in accordance with the Credits guidance and, where Credits were claimed beyond normal full-time levels, that the claims could be appropriately justified by the College.
- 2.1.3 For a total of 36 students selected from the above courses the following tests were carried out, where applicable:
 - a) Ensured that the student met the criteria for fundable activity set out in the Credits guidance.
 - b) Checked back to signed enrolment forms, or electronic equivalent, for the 2024/25 academic year.
 - c) For infill courses, ensured that Credits were allocated according to the modules attended by individual students rather than by the default value for the courses being infilled.
 - d) Checked to student attendance / engagement records and, for withdrawals, checked that the withdrawal date noted on the system was the last date of physical attendance or engagement;
 - e) For students following courses of open / distance learning vouched to study plan etc. and ensured that required criteria was met; and
 - f) For students undertaking non-accredited work experience / placement ensured that the Credits value had been calculated in line with the Credits guidance.
- 2.1.4 The following tests were carried out by reviewing records for all College courses:
 - a) Compared the overall average Credits per full-time student against the SFC expected average of 17 Credits for full-time Further Education students and 15 Credits for full-time Higher Education students;
 - b) Confirmed that there were no claims for more than one full-time enrolment per student for 2024/25 and ensured that Credits had not been claimed in respect of courses that were related in respect of subject area, unless progression could be clearly established:
 - Confirmed that there were no claims for overseas students and students enrolled on full cost recovery commercial courses; and
 - d) Confirmed that Credits for spanning courses were claimed in the correct year.
- 2.1.5 We reviewed the systems for recording fee waiver entitlement and carried out an analytical review to ensure the accuracy of the fee waiver element of the FES return. For a random sample of 10 part-time students, we confirmed that College staff had verified the entitlement to benefit.
- 2.1.6 It was confirmed by the Head of Digital that there had been no collaborative activity during 2024/25, and no such courses were identified during our audit testing.

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2. Systems and Procedures for Compilation of Returns (continued)

2.1 Introduction (continued)

- 2.1.7 Before signing our audit certificate, we reviewed the final FES online report and the explanations for remaining errors.
- 2.1.8 From our review and testing of the systems and procedures used in the compilation of the returns, we concluded that overall, they were adequate to minimise risk in the areas identified in Annex C of the Credits Audit Guidance and were working satisfactorily as described to us.
- 2.1.9 The remainder of this section discusses issues identified during our review of the 2024/25 student activity data.

2.2 Non fundable Activity

- 2.2.1 The Credits Guidance states that programmes of learning which are fully funded from non-SFC sources are not eligible for funding.
- 2.2.2 During our review of the FES1 report for courses with non-fundable Source of Finance (SoF) codes, we identified two courses with small Credit claims, one with SoF code 10 (Other full cost recovery) Therapeutic Horticulture Infill (2 Credits claimed) and one with SoF code 5 (Cost recovery: Skills Development Scotland) L6 Paediatric First Aid (0.5 Credits claimed). It was confirmed by the Head of Digital that the Therapeutic Horticulture Infill course had been incorrectly coded and should have been recorded as SoF code 9 (SFC). Paediatric First Aid had been correctly coded as SoF 5 and therefore the Credits should not have been claimed. 0.5 Credits were removed from the final claim.

Recommendation

R1 Ensure courses are assigned correct Source of Finance codes and checks are in place to confirm no Credits are claimed against programmes fully funded from non-SFC sources.

2.3 Required Dates and Attendance

- 2.3.1 For 2024/25 the Credits guidance notes that colleges can claim Credits for full-time students on courses lasting for over 20 weeks if they are still active after 5 weeks from the course start date. For courses of 20 weeks or less, the student must be in attendance after 25% of the length of the course has lapsed.
- 2.3.2 One of the courses in our sample (Level 5 Fast Track to HNC Administration and IT was a Mode of Attendance (MoA) 5 course (short full time) per the FES1, with a duration of 18 weeks. Our calculation of the required date therefore used the 25% method and arrived at 23 February 2025. The College had used the over 5 weeks (+36 days) calculation and arrived at 25 February 2025. This was queried and the Head of Digital explained that the course was originally a full-time course and hence the 5 weeks calculation had been used, prior to the MoA being updated. The College has updated the required date on the FES reports. This impacted one student who withdrew on the 25 February 2025 and was eligible for 10 Credits once the new required date was applied.
- 2.3.3 For another course in our sample, L2 City and Guilds Diploma Plumbing, the over 5 weeks calculation had been used however the duration of the course was only 18 weeks. The course MoA was 17 (full-time) as it was a Further Education course where students undertook more than 15 Credits however the duration of the course had changed to be less than 20 weeks. In this case there was no impact on the Credits claim calculating the required date using the 25% method.

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2. Systems and Procedures for Compilation of Returns (continued)

2.3 Required Dates and Attendance (continued)

2.3.4 The College performed a global check on required dates for all courses based on start date +36 days for MoA 17 courses > 20 weeks and 25% of calendar days for all other courses to confirm that all are accurate. No impact on Credits was noted during this review.

Recommendation

R2 For courses of 20 weeks or less, the required date should be calculated based on the date 25% of the length of the course has lapsed.

2.4 Classification of Programmes

- 2.4.1 The Credits Guidance states that any student that undertakes 15 Credits or more, on a single programme of study, in a single academic year including spanning courses should be considered full-time. In addition, HNC students undertaking 12 Credits on a single programme in a single academic year should also be considered full-time.
- 2.4.2 As part of our audit testing we carried out a high-level review of the FES2 data at the time of our audit fieldwork to ensure that all courses marked with a MOA code of 17 (full-time) appeared to have been correctly classified based on the number of Credits per student. We identified 515 full-time Further Education students with less than 15 credits claimed and 36 full-time Higher Education students with less than 12 credits claimed. The Head of Digital advised that this had also been queried by the SFC and was explained as including courses such as those that are above the 18-week duration for a short full-time course set out in the FES 1 Guidance. There were also courses that included work experience / site work that are undertaken over 36 weeks but don't meet the 15 or 12 Credits thresholds. In summary, the College had initially classified most courses longer than 18 weeks in duration as MoA 17, however this may not always be the most suitable MoA based on the nature of the course. Following reclassifications, the final FES accepted by the SFC shows 73 full-time Further Education students with less than 15 credits claimed and no full-time Higher Education students with less than 12 credits claimed.
- 2.4.3 The FES error report provided at the time of our audit fieldwork showed 131 students with Credits claimed for two full-time courses based on MoA. The Head of Digital advised that the majority of these relate to short full-time courses where a student would complete two in an academic year, however, because they may be slightly over the SFC criteria for a short full-time course (18 weeks), they were coded as full-time, similar to the above. Following reclassifications, the final FES accepted by the SFC shows only 9 students with Credits claimed for two full-time courses.

Recommendation

R3 Ensure that in-year data integrity checks include a review of Modes of Attendance, and other key data such as Credits claimed, to identify conflicts and that data is amended as required.



2. Systems and Procedures for Compilation of Returns (continued)

2.5 Average Credits Claimed for Full-Time Students

- 2.5.1 For 2024/25 the Credits guidance noted that claims for individual students / programmes will vary but colleges should not exceed an overall average of 17 Credits for full-time Further Education students or 15 Credits for full-time Higher Education students across the full-time cohort, including those additional part-time courses on which these students enrol. Overall average Credits per full-time student in excess of this may be subject to further scrutiny.
- 2.5.2 We noted from the final FES that the averages for the College were slightly above these values at 17.6 Credits (23/24: 17.8) for full-time Further Education students and 15.6 Credits (23/24: 15.6) for full-time Higher Education students.
- 2.5.3 From previous discussion with the SFC, we understand that there is an expectation going forward that average Credit claims should move towards 17 and 15 respectively. We understand that the SFC Funding Policy team may choose to contact colleges to seek more information on why they are above those averages and agree any action required.
- 2.5.4 The final FES error report accepted by the SFC shows 22 instances of excessive credits claimed for full-time Further Education students (ranging between 26 and 34 credits for 11 students with two enrolments) and 17 instances of excessive credits claimed for full-time Higher Education students (all but one being 22.75 Credits for HND Childhood Practice).

2.6 Credit Values

- 2.6.1 For one course in our sample (HND Social Science), the FES 2 report showed the claim as 15.5 Credits per student, for a total of 19 eligible students. From review of the course framework, it was noted that the total Credits per student was 15. From discussion with the Head of Digital it was confirmed that the claim should have been based on the 15 Credits shown in the course framework. Therefore, 0.5 Credits was overclaimed per student, totalling 9.5 Credits for the course which was adjusted in the final claim.
- 2.6.2 For another course in our example (SVQ3 Modern Apprenticeship Hair), a student had a Credits claim of 8 on the FES2 initially received for audit. All students were enrolled on different modules for this course and therefore individual enrolment reports were reviewed for the sample students to verify individual Credits claims. When reviewing the enrolment report, it showed that this student was only enrolled on modules valued at 3 Credits. This was queried with the Head of Digital who confirmed the error. The student had previously achieved the other SQA units and therefore these should not have been claimed again. All other students on the course were checked by the College and it was confirmed that there was no wider issue. The overclaim of 5 Credits was deducted for the final claim.

Recommendation

R4 Ensure that Credits claimed agree to the course framework or individual modules undertaken by students, based on SQA (or other awarding body) credit rating or planned learning hours/40.



3. Analytical Review

- 3.1 The analytical review by Price Group for the current year, included at Appendix III of this report, showed significant variances in Price Groups 1, 2 and 3. These were discussed with College management. The explanations we received provided us with additional assurance that the Credits claim does not contain material errors:
 - Price Group 1 decrease of 1,322 Credits due to a drop off from certain courses, where
 the courses were either unviable or moved to a more commercial offering with a full cost
 recovery model in 2024/25. Some courses were adjusted into Price Group 2 or 3; and
 - Price Group 2 and 3 increase of 429 and 458 Credits respectively due to some reclassification of courses from Price Group 1 as well as some additional demand for courses in these price groups i.e. ESOL increased from one class to five between 2023/24 and 2024/25.



Appendix I - Copy of Audit Certificate

South Lanarkshire College College Way East Kilbride G75 0NE

3 October 2025

To Whom it May Concern

Auditor's Report to the Members of the Board of Management of South Lanarkshire College

We have audited the FES return which has been prepared by South Lanarkshire College under SFC's Credit Guidance for colleges issued 26 June 2024 and which has been confirmed as being free from material misstatement by the College's Principal in her Certificate dated 2 October 2025.

We conducted our audit in accordance with the 2024-25 audit guidance for colleges. The audit included an examination of the procedures and controls relevant to the collection and recording of student data. We evaluated the adequacy of these controls in ensuring the accuracy of the data. It also included examination of evidence relevant to the figures recorded in the student data returns. We obtained sufficient evidence to give us reasonable assurance that the returns are free from material misstatements.

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.

Stuart Inglis
Director
For and on behalf of Henderson Loggie LLP
Chartered Accountants
Dundee Office
stuart.inglis@hlca.co.uk

3 October 2025

Date FES returned: 2 October 2025



Appendix II – Summary of Adjusted and Unadjusted Errors

Report Para	Error identified	Adjusted/unadjusted	Approx. Value
2.2.2	Claim made for non-fundable activity	Adjusted	-0.5 Credits
2.3.2	Student excluded due to incorrect calculation of required date	Adjusted	+10 Credits
2.6.1	Incorrect Credits claim per student for HND Social Science	Adjusted	-9.5 Credits
2.6.2	Incorrect Credits claim for one student on SVQ3 Modern Apprenticeship Hair	Adjusted	-5 Credits



Appendix III – Price Group Analytical Review 2023/24 and 2024/25 – Figures

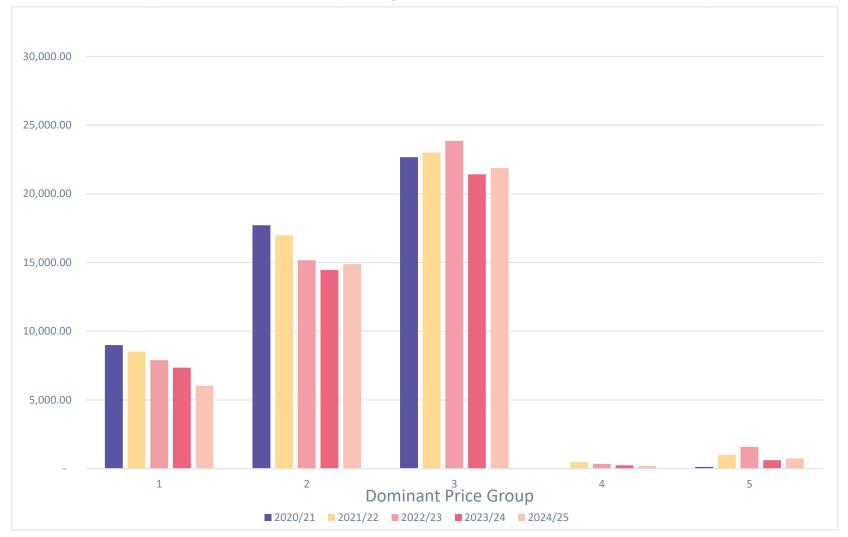
Price Group	2023/2024 Credits	2024/2025 Credits	Variance Credits	Variance %
1	7,352	6,030	(1,322)	(18.0)
2	14,456	14,885	429	3.0
3	21,417	21,875	458	2.1
4	238	199	(39)	(16.4)
5	614	740	126	20.5
	44,077	43,729	(348)	(8.0)

College Funded Target 2024/25:

43,601 Credits



Appendix IV – Price Group Analytical Review 2020/21 to 2024/25 – Graph





Appendix V – Updated Action Plan – Student Activity Data 2023/24

Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date	Progress at October 2025
Systems and Procedures for Compilation of Returns						
Allocation of Credits to Courses						
R1 For all College devised units, the College should ensure that adequate supporting evidence is available for planned learning hours to verify the Credits claim	3	College Units or "Non-SQA" units are a frequent issue. While I agree with the recommendation to get better at reporting the evidence, the College uses far fewer non-SQA units in its courses than previous years. That said, the timetabling and attendance for these modules needs improved using our current timetabling system. We will monitor this more closely with the timetabled hours vs actual hours power reporting as this was invaluable in the audit. At curriculum planning process, the CM's will be challenged for using the non-SQA units, preventing unnecessary use of units in the courses. Record of work evidence is a lot clearer this year and can be used as supportive evidence for these modules.	Yes	Head of MIS (Chris Sumner)	30 September 2025	No similar issues identified during 2024/25 testing Fully Implemented



Recommendation	Grade	Comments	Agreed Y/N	Responsible Officer for Action	Agreed Completion Date	Progress at October 2025
Required Dates and Attendance						
R2 Ensure that the required dates for programmes and students recorded on the FES1 and FES2, respectively, are calculated in line with the Credits guidance.	3	Required date issues was not an issue at course level but it was at student level if the student finished early. The power bi report we use for checking the required date has been modified so we can see the student required date might be incorrect and reviewed at each FES quarter returns.	Yes	Head of MIS (Chris Sumner)	30 September 2025	Issues noted with the calculation of required dates during our sample testing for 2024/25 (see paragraphs 2.3.1 to 2.3.3 in Main Report. Partially Implemented





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A list of members' names is available for inspection at each of these addresses.



South Lanarkshire College

2024/25 Student Support Funds

Internal Audit report No: 2025/09

Draft Issued: 27 November 2025

Final Issued: 27 November 2025





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Appendix III	Education Maintenance Allowance Return and Audit Certificate	•						
Appendix IV	Updated Action Plan – 2023/24 Student Support Funds							



Management Summary

Introduction

Colleges receive **Discretionary Funds** from the Scottish Funding Council (SFC) and the Student Awards Agency for Scotland (SAAS) to provide financial help for students, where access to or continuance in, further or higher education would otherwise be denied due to financial hardship. The maximum payable from the Further Education Discretionary Fund in 2024/25 was £5,000. Colleges could award sums above this limit in exceptional circumstances with prior approval from SFC. The cap for the Higher Education Discretionary Fund was removed in 2024/25 with no maximum amount payable per student.

Childcare Funds sit alongside the Discretionary Funds to provide assistance with the cost of formal childcare expenses. From academic year 2011/12, childcare funds for higher education students formerly allocated to colleges by SAAS, were transferred to the SFC who now allocates childcare funding direct to colleges for all eligible further and higher education students. No limit is placed on the amounts individuals can access and colleges have the flexibility to determine award levels themselves. Priority must however be given to certain groups, including lone parents and mature students, when allocating funds from the Further and Higher Education Childcare Fund.

The Discretionary and Childcare Funds must be administered, and payments made, in accordance with SFC and SAAS guidelines.

Bursary funds are given to students at the discretion of a college to help maintain that student in their education beyond their compulsory school leaving date. An award can include allowances that cover a student's maintenance, travel and study costs. Colleges can also use bursary funds for allowances to cover costs incurred by a student living in college-approved accommodation, or due to having dependants and / or special education needs.

Colleges must apply the terms of the National Policy for Further Education Bursaries, together with applicable legislation and supplementary letters issued by the SFC, when using the funds allocated to them for bursary purposes. The policy sets out the minimum criteria, maximum rates and minimum contribution scales that a college must apply in allocating bursary funds. In recognising that the bursary fund is cash-limited, colleges may have to exercise discretion to target support to meet local priorities and the needs of their students. SFC expects colleges to award students their full calculated bursary award. Where a college chooses to supplement bursary funds from its own resources it may use the additional resources as it sees fit.

Education Maintenance Allowances (EMAs) provide financial support for 16- to 19-year-olds from low income households who are attending non-advanced full-time education at school, college or are home educated. Eligible students receive £30 per week, which is targeted at young people from the lowest income families.

EMAs must be administered, and payments made, in accordance with SFC and Scottish Government guidelines

Audit Scope

For the 2024/25 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.



Audit Objectives

The audit objectives were to ensure that:

- The College complies with the terms, conditions and guidance notes issued by SFC, SAAS and the Scottish Government;
- Payments to students are genuine claims for hardship, bursary or EMA, and have been processed and awarded in accordance with College procedures; and
- The information disclosed in each of the returns for the year ending 31 July 2025, is in agreement with underlying records.

Audit Approach

The audit approach included:

- Reviewing new guidance from SFC, SAAS and the Scottish Government and identifying internal procedures;
- · Agreeing income to amounts awarded;
- Reconciling expenditure through the financial ledger to returns, investigating reconciling items;
- Reviewing College analysis spreadsheets for large or unusual items, obtaining explanations where necessary; and
- Carrying out detailed audit testing, on a sample basis, on expenditure from the funds.

Audit guidance issued by the SFC was utilised.

Action Plan

The action that we consider necessary on each issue is highlighted in the text for clarity and an action plan for implementation of these recommendations can be found in section 2.

To aid the use of the action plan, our recommendations have been graded to denote the level of importance that should be given to each one. These gradings are as follows:

Priority 1	Issue subjecting the College 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 College to significant risk and which should be addressed by management.
Priority 3	Matters subjecting the College to minor risk or which, if addressed, will enhance efficiency and effectiveness.

Findings and Conclusions

We were able to certify all three fund statements 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 one minor observation arising from our audit work. The College does not operate a separate interest-bearing bank account for the Higher Education 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.

111.

Findings and Conclusions (Continued)

In our covering letter to the SFC enclosing the Auditors' Report for the **Education Maintenance Allowance Return** we noted one minor observation arising from our audit work. The College has made Administration claims totalling £2,385 for 2024/25 on the monthly EMA returns, which agrees to the year-end statement. During the 2023/24 Academic Year the College had failed to claim EMA Administration payments for 17 of the supported students, resulting in an underclaim of £255 as noted in our 2023/24 covering letter. The College made the appropriate adjustment in the February 2025 monthly return. We established however that the College had 159 accepted EMA student applications in 2024/25 and therefore the total Administration claim, including the adjustment for 2023/24, should have been £2,640, giving rise to an underclaim of £255, which is to be adjusted by the College in the next Administration claim for 2025/26.

The FE Student Support Bursary Policy Guidance for AY 2024-25 notes that colleges spend on Study Expenses Allowance (Study Costs) should be in line with the sector average of between 5-6% of their total Student Support spend. In our covering letter to SFC enclosing the Audited **Discretionary Fund**, **Further and Higher Education Childcare Fund and Bursary Return** we noted that SLC's spend on Study Costs amounts to 6.8% of total Student Support spend. The figure was calculated based on total Student Support spend on Bursary and, subsequent to issue of our letter to SFC, it was clarified that the percentage of spend on study costs should refer to the overall total Student Support spend. This would therefore take the level of the College's study costs to 4.2% and below the threshold and not at a level where we would expect the SFC to be seeking any further explanations.

In addition, the following points were noted during the course of our audit:

Bursary Return - Study Costs

Where study materials (textbooks, kit, protective clothing etc.) are purchased by the College from suppliers and provided to Bursary students, these are claimed on the FES based on planned costs rather than actual spend. The College maintains a spreadsheet showing planned and actual costs by department so that an overall check can be made to ensure that the total study costs claimed do not exceed actual spend. As in prior years, the 2024/25 spreadsheet showed overs and unders, by department and expenditure category, and the overall amount claimed was higher than budgeted spend during the year by £3,785.69. This includes spend of £6,456 relating to exams and other fees which includes the costs of Disclosure Scotland checks (PVGs) for students enrolled on courses which require PVG clearance. For the purposes of our audit, this overclaim was not material in relation to the total Bursary spend.

We recommended in previous years that the College should ensure that distribution lists identifying Bursary students in receipt of study materials are maintained for each purchase invoice charged to the Bursary fund. We also recommended that, based on the current approach, the College should ensure that the planned study costs for each course still reflect the specific items or materials needed for the course and the current price from suppliers. We noted that during 2024/25 the College initiated the set-up of study kit lists for each department. in a similar format to those previously used by the Hairdressing department. For each student, these show the product description and quantity for each kit item provided. Distribution lists are not maintained for each purchase invoice, however, our follow up of recommendations raised in 2023/24 (see Appendix IV) noted that the College is now focussing on tracking actual spend per class and is working to further improve tracking processes during 2025/26. Implementation of the College's updated processes will be considered as part of the 2025/26 student support funds audit. Although, as noted above, differences remained between actual and planned spend, we noted that these appear to be much tighter this year, indicating that improvements to tracking costs is having a positive impact.

Copies of the fund statements and audit certificates are provided at appendices I to III of this report.

Acknowledgments

We would like to take this opportunity to thank the staff at the College who helped us during our audit.

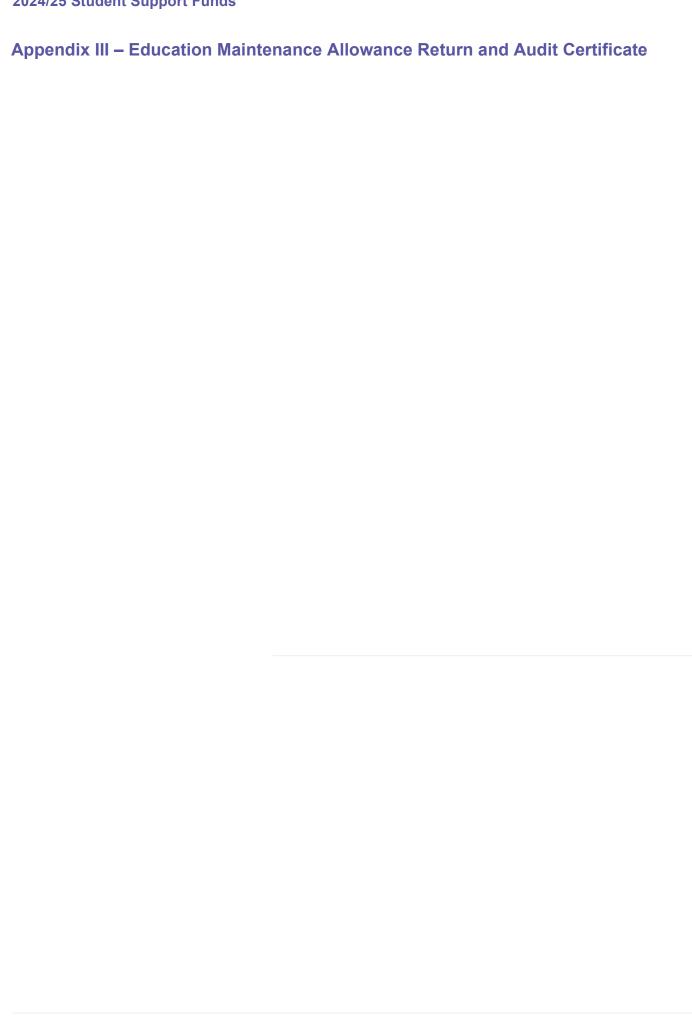


Appendix I – Further Education Discretionary Fund, Further and Higher Education Childcare Fund and Bursary Return and Audit Certificate



Appendix II – Higher Education Discretionary and Childcare Fund Return and Audit Certificate







Appendix IV – Updated Action Plan – 2023/24 Student Support Funds

Recommendation	Grade	Management Comments	Agreed Y/N	Responsible Officer For Action	Agreed Completion Date	Progress at November 2025
R1 We would repeat last year's recommendation that the College should ensure that distribution lists identifying Bursary students in receipt of study materials are maintained for each purchase invoice charged to the Bursary fund, and based on the current approach, that the planned study costs for each course still reflect the specific items or materials needed for the course and the current price from suppliers.	3	The College will continue to analyse all study costs monthly and reconcile back to Cost of Course forms, adjusting the Teqios system where required, and reconciling this to the general ledger. With regards to distribution lists, we have implemented a document during the monthly reconciliation process that lists all bursary students and their course code / spend available etc however this was deemed insufficient as it did not tie in to actual spend. We now just need to find a way of attaching actual spend to this document. I will work with the CM's on this to see if there perhaps needs to be a better record kept of study cost spend at class level.	Yes	Management accountant	28 February 2025	The College initiated the set-up of study kit lists for each dept. in a similar format to those used by the Hairdressing dept. For each student these show the product description and quantity for each kit item provided. Distribution lists are not maintained for each purchase invoice. The College is focussing on tracking actual spend per class and is working to further improve tracking processes for 2025/26. Audit testing for 2024/25 noted that the difference in budget v actual spend per cost category within each course, and overall budgeted spend v actual spend appear to be much tighter this year, indicating that improvements to tracking costs is having a positive impact. Partially Implemented Revised Completion Date: 30 September 2026



Recommendation	Grade	Management Comments	Agreed Y/N	Responsible Officer For Action	Agreed Completion Date	Progress at November 2025
R2 The College should ensure that expenditure is correctly categorised on the study costs spreadsheet to allow a more accurate comparison of planned and actual expenditure.	3	The cost of course forms will be updated to show a more realistic split of bursary spend for each department, departments that have 'other' as a category of spend with no history of any actual spend within this category will have this amount spread over the other categories based on likely spend. Invoices that have a number of different categories of bursary spend will be allocated accordingly	Yes	Management Accountant	31 December 2024	This work will tie in with the development of the study kit lists to get a better idea of what each course will likely spend on each category. Cost of course forms will be tailored to match the study kit lists. Audit testing for 2024/25 noted that the difference in budget v actual spend per cost category within each course, and overall budgeted spend v actual spend appear to be much tighter this year, indicating that improvements to tracking costs is having a positive impact. Partially Implemented Revised Completion Date: 28 February 2026
Bursary Return – Categorisation R3 The College should review student Award Assessment categorisation on the FES and ensure that any apparent misstatements are fully investigated and resolved.	3	A monthly check of FES categories will be implemented to ensure any mis-categorised student will have their details corrected by the student support team before any over / under payment takes place.	Yes	Management Accountant	31 December 2024	The Student Support team was not able to check a monthly FES due to time constraints of other departments. However, no similar issues were noted during testing in 2024/25. Partially Implemented Revised Completion Date: 28 February 2026



Recommendation	Grade	Management Comments	Agreed Y/N	Responsible Officer For Action	Agreed Completion Date	Progress at November 2025
Bursary Return – Additional Support Needs (ASN) Costs R4 Ensure that a check is made on the categorisation of ASN costs to ensure that they are correctly disclosed on the FES.	3	The monthly category check above will also include a quick check of ASN costs to ensure they are being disclosed correctly.	Yes	Management Accountant	31 December 2024	The Student Support team was not able to check a monthly FES due to time constraints of other departments. However, no similar issues were noted during testing in 2024/25. Partially Implemented Revised Completion Date: 30 September 2026





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Satisfactory

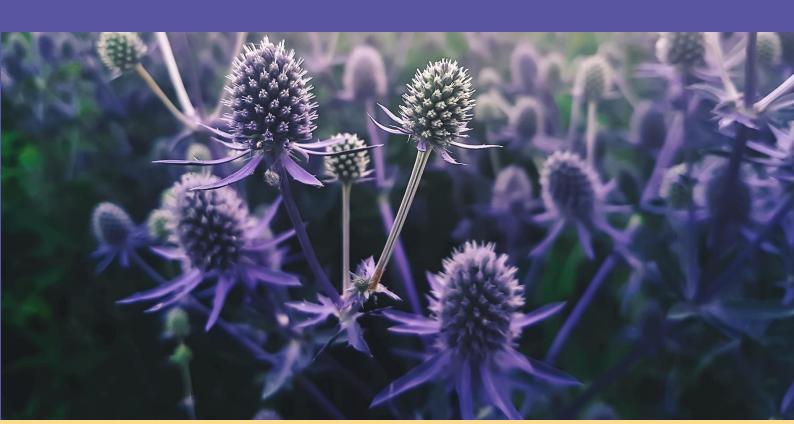
South Lanarkshire College

Environmental Sustainability

Internal Audit report No: 2025/06

Draft issued: 24 November 2025

Final issued: 25 November 2025





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Level of Assurance

In addition to the grading of individual recommendations in the action plan, audit findings are assessed and graded on an overall basis to denote the level of assurance that can be taken from the report. Risk and materiality levels are considered in the assessment and grading process as well as the general quality of the procedures in place.

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.

Action Grades

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.



Management Summary

Overall Level of Assurance

Satisfactory

System meets control objectives with some weaknesses present.

Risk Assessment

This review focused on the controls in place to mitigate the following risks on the South Lanarkshire College ('SLC' or 'the College') Strategic Risk Register (as at August 2025):

• Risk 15 - That the College is not on track to meet the Scottish Government net zero sustainability priorities (Score = 6).

Background

As part of the Internal Audit programme at SLC for 2024/25, we carried out a review of the systems in place for Environmental Sustainability. Our Audit Needs Assessment identified this as an area where risk can arise and where Internal Audit can assist in providing assurances to the Audit and Risk Committee and management that the related control environment is operating effectively, ensuring risk is maintained at an acceptable level.

Part 4 of the Climate Change (Scotland) Act 2009 (hereafter referred to as 'the Act') places duties on public bodies relating to climate change. The duties on the face of the Act require that a public body must, in exercising its functions, act:

- a) in the way best calculated to contribute to the delivery of the targets set in or under Part 1 of this Act:
- b) in the way best calculated to help deliver any programme laid before the Scottish Parliament under section 53; and
- c) in a way that it considers is most sustainable.

In doing so, public bodies must have regard to the guidance *Public Bodies Climate Change Duties: Putting Them Into Practice* issued by the Scottish Government in 2011.

In direct response to the international Paris Agreement, the Climate Change (Scotland) Act 2009 was amended by the Climate Change (Emissions Reduction Targets) (Scotland) Act 2019, increasing the ambition of Scotland's emissions reduction targets to net zero by 2045. While the interim target to reduce emissions by 75% by 2030 has been scrapped, the long-term aspiration to reach net zero by 2045 remains.

In February 2021, Scottish Colleges' Statement of Commitment on the Climate Emergency was published. The colleges had come together to establish and commit collaboratively to delivering on a set of 10 key actions.

111.

Scope, Objectives and Overall Findings

This audit included a review of the College's current position in relation to its strategic plans and operational arrangements to ensure compliance with the Climate Change (Scotland) Act 2009.

The table below notes each separate objective for this review and records the results:

Objectives	Findings			
Our review sought to obtain	Level of Assurance	1	2	3
reasonable assurance that:		No. of Agreed Actions		
The College has established the carbon baseline position and has set out and communicated the climate change aspirations for the College.	Good	-	-	-
 Roles and responsibilities around climate change action and environmental sustainability, including leadership of climate change projects, have been clearly articulated. 	Satisfactory	-	-	2
Initiatives are in place to educate staff and students on environmental sustainability.	Good	-	-	-
4. There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably.	Satisfactory	-	-	2
 There is a procurement focus on sustainability during the tender process and initiation of contracts. 	Good	-	-	-
6. The College works in partnership with stakeholders / contractors re sustainable practice, including links to the Local Authority to drive forward plans to decarbonise the estate.	Good	-	-	-



Environmental Sustainability

Scope, Objectives and Overall Findings (continued)

Objective	Findings			
Our review sought to obtain reasonable assurance that:	Level of Assurance	1	2	3
7. There are appropriate arrangements in place to update the Board on the progress being made to deliver on actions around climate change and sustainability.	Good	-	-	-
Overall Level of Assurance	Satisfactory	-	-	4
		System meets control objectives with some weaknesses present.		

Audit Approach

Through discussion with the Vice Principal – Finance, Resource and Sustainability and the three Climate Change Operational Leads, and review of relevant documents, we examined the extent to which the above objectives were met.

This audit included an element of business process review and therefore included several facilitated workshops with the members of the Climate Change Action Team (CCAT) including support and curriculum staff from across the College as well as the Student President. We examined the College's current plans and operational arrangements to address climate change and identified improvements to the current processes.



Summary of Main Findings

Strengths

- The College's Strategy 2030 sets a clear commitment to achieving net zero, with a baseline of 3,306 tCO₂e in 2009/10.
- Annual Climate Change Emergency Action Plans (CCEAP) are published, with the 2024/25 plan released in September 2024 and the 2025/26 draft in place, outlining year-on-year targets and progress achieved.
- The Environmental Sustainability Policy (February 2025) and public website provide transparent communication on goals and progress.
- The Vice Principal Finance, Resources & Sustainability leads on environmental sustainability strategically, with operational delivery by the Climate Change Operational Leads (CCOLs) including the Head of Facilities.
- The CCAT includes representatives from across the College and meets monthly, with a documented remit and annual self-evaluation to drive improvement.
- Despite organisational changes in 2024/25, the CCAT remained operational and continued to progress actions.
- Sustainability is embedded across governance, curriculum, and operations, with regular review and improvement overseen by the CCAT.
- Staff and students are engaged through events (e.g., "Love Your Planet" week), training (e.g., Carbon Literacy courses in 2025), and digital resources.
- Partnerships with external organisations (e.g., Biffa, Home Energy Scotland, Aramark, Dalkia, CLIC) extend sustainability education and practice beyond the campus.
- The College achieved a "Gold" Environment Association of Universities and Colleges (EAUC)
 Leader Scorecard in February 2025 and uses the EAUC FE/HE Climate Action Roadmap for
 self-assessment and planning.
- The 2023/24 Public Bodies Climate Change Duties report shows a consistent downward trend in College emissions.
- Decarbonisation plans, including a commissioned report in March 2024, guide investment and operational improvements, with data-driven monitoring and reporting.
- The Procurement Policy (May 2024) and Strategy (2025/26 update scheduled for November 2025) embeds sustainability in all procurement activity.
- Tender evaluation templates and contract clauses ensure environmental criteria are considered, with performance tracked via performance indicators and regular supplier engagement.
- The College applies Community Benefit Clauses in all regulated procurements and aligns with sector sustainability standards through framework agreements.
- Participation in regional and sector-wide initiatives (e.g., EAUC, Zero Waste Scotland, CLIC) supports continuous improvement and knowledge sharing.
- Strong operational controls and regular engagement with staff, contractors, and local businesses reinforce the College's commitment to sustainability.
- The College demonstrates strong governance and oversight of its sustainability and decarbonisation commitments through structured reporting and Board-level engagement.
- Throughout 2024/25 and into 2025/26, the Board received and approved updated CCEAP, with quarterly updates provided via the Finance & Resources Committee (FRC) on key projects, progress, and risks.
- Sustainability and climate change risks are embedded in the Strategic Risk Register, with the Audit & Risk Committee actively reviewing controls and audit outcomes.
- At the operational level, the Strategic Lead and Senior Leadership Team (SLT) receive
 monthly Facilities Reports and CCEAP Progress Reports, ensuring sustainability remains a
 live and monitored priority across all levels of the organisation.



Environmental Sustainability

Summary of Main Findings

Weaknesses

- The remit and membership requirements of the CCAT should be updated to ensure job titles remain up to date and all key stakeholders are represented, and roles and accountabilities of membership are clear.
- The CCOLs were the main action owners identified on the CCEAP. Reliance on a small group for delivering sustainability actions risks capacity issues; actions should be more widely delegated, such as across CCAT members. The proposed part-time Sustainability Officer role should also have sufficient capacity to sustain the momentum built up at the College.
- The Environmental Sustainability Policy (February 2025) should be updated to reference the Greenhouse Gas Protocol and guidance that clearly defines Scope 1, 2, and 3 emissions for future continuity and reporting accuracy.
- A comprehensive zero-to-landfill strategy, with measurable targets and clear ownership, should be developed to ensure that all waste streams are addressed and Net Zero goals are met.

Acknowledgments

We would like to take this opportunity to thank the staff at South Lanarkshire College who helped us during the course of our review.



Main Findings and Action Plan

Objective 1 - The College has established the carbon baseline position and has set out and communicated the climate change aspirations for the College.

The College's Strategy 2030 sets six commitments for which one is to "lead the transition to net zero and tackle urgent skill gaps" and related goal of Sustainability with the top line ambition "to be a future proofed independent and financially viable organisation able to invest and collaborate for growth and resilience, and to work towards achieving a Net Zero campus community". The Estates Strategy was under development by management at the time of our review.

To drive the importance of sustainability to the College, there is:

- A dedicated landing page on its public website, detailing the changes made to the campus to reduce its carbon emissions and linking readers to the College's Sustainability Policy (not dated) and current Climate Change Emergency Action Plan (CCEAP).
- Online Sustainability Policy (not dated) details the values and goals of wider sustainability efforts, not just environmental, within the curriculum.
- A CCEAP established annually to drive environmentally sustainable actions across campus and facilities, as well as the curriculum and wider community. The 2025-26 CCEAP was in draft at the time of the audit fieldwork in line with the beginning of the new academic year. The 2024/25 CCEAP (September 2024) is published and a status report provided for review. The CCEAP is owned by the Senior Leadership Team (SLT).
- A dedicated Environmental Sustainability Policy (February 2025) owned by the Head of Facilities that sets out the College's approach to reducing waste, conserving energy, influencing sustainable practices, and achieving Net Zero by 2040 and in line with Environment Association of Universities and Colleges (EAUC) guidelines. It is available on the College's intranet for staff.
- The College also has FNT2030 SCCEES Climate Action Category / Commodity Management Plans for SLC, covering key areas: Energy, Food, Furniture, Travel, and ICT (Information Systems). They are part of the wider University and College Sectors Supply Chain Climate and Ecological Emergency Strategy (SCCEES), which is endorsed at sector level and aims to address the climate and ecological emergency across seven Primary Impact Areas of Climate Change (PIACC). These plans are updated annually.

The Draft CCEAP 2025-26 (September 2025) demonstrates that the College is ambitious and fully supports achieving net zero by 2040 or earlier as set out by the Scottish Colleges' Statement of Commitment to the Climate Emergency. From the baseline year of 2009/10 (3,306 tCO $_2$ e), the College has reduced its carbon emissions by 2,402 tCO $_2$ e. It has a commitment to reduce its carbon emissions by 100 tCO $_2$ e year on year, in order to achieve an interim target of 242 tCO $_2$ e for Scope 1 emissions by 2030 and net-zero emissions by 2040.



Objective 2 - Roles and responsibilities around climate change action and environmental sustainability, including leadership of climate change projects, have been clearly articulated.

The Vice Principal – Finance, Resources & Sustainability is the College's strategic lead for environmental sustainability. Operational delivery is overseen by the Head of Facilities, who owns the College's Environmental Sustainability Policy (February 2025). Delivery of sustainability actions is managed by the Climate Change Operational Leads (CCOLs) who consist of the Head of Facilities, Head of Curriculum, and Deputy Head of Curriculum.

A Climate Change Action Team (CCAT), which operates under a documented remit approved by the SLT, is also established. The CCAT is aligned with the elements of the FE/HE Roadmap and has established key objectives and operational targets for the reduction of carbon emissions and supports the delivery of the 17 United Nations (UN) Sustainability Development Goals (SDGs) which enable positive environmental, social, and economic development. The group consists of volunteer representatives from across senior management, support services, curriculum, and the student association. The CCAT generally convenes monthly throughout the academic year, although the CCOLs also collaborate regularly as part of business-as-usual activities.

Understanding that recent organisational restructuring may have resulted in a reduction in the capacity of CCOLs, and to demonstrate its commitment to sustainability, the College is considering a shared Sustainability Officer role with another institution. Discussions also highlighted that one of the challenges experienced by the College is the timely identification and application for external funding opportunities. Understanding this challenge, responsibility has been delegated to the Business Innovation Team, who will feedback opportunities to the CCAT. The new Sustainability Officer role is proposed to also participate in seeking external funding opportunities.

As noted in **Objective 1**, actions to progress sustainability efforts are documented in the CCEAP. Progress of actions is monitored and reported to the CCAT, with minutes tracking operational delivery and monthly CCEAP Progress Reports detailing the status of key actions.

In line with good practice, the CCAT completes an annual self-evaluation to its effectiveness, with any actions brought forward into improvement planning. The CCAT 2024/25 Evaluation further identified actions to strengthen further student involvement and representation from APUC.

Despite organisational change and management taking on new roles and responsibilities over the 2024/25 academic year, we found that the CCAT remained operational, and actions were progressed. However, there are two observations for management to address to ensure roles and responsibilities are fully understood and there is continued momentum should there be further change in the future.



Objective 2 Roles and responsibilities around climate change action and environmental sustainability, including leadership of climate change projects, have been clearly articulated (continued).

Observation	Risk	Recommendation	Management Respo	onse
The documented remit of the CCAT is not dated, making it difficult to confirm that the information reflects current organisational arrangements. We found that the CCOL job titles require to be updated following the recent organisational restructure. Currently, attendance by other members of the CCAT is voluntary. The remit also does not specify the key stakeholder groups that must attend the CCAT. For example, the remit does not determine the requirement for membership from other critical areas out with estates and the curriculum, such as quarterly attendance by the Strategic Lead, or meeting attendance by APUC / Supply Chain Manager (responsible procurement), ICT (digital reporting), the Business Innovation Team (external funding activity), or HR (training) or those with partnership responsibilities.	Beyond the CCOL, roles and responsibilities for members of the CCAT may not be fully understood resulting in delays to progressing key actions and decisions.	R1 - Management should update the CCAT remit and define key stakeholder groups that must attend, for example, the Strategic Lead, APUC / Supply Chain Manager, ICT, the Business Innovation Team, or HR, or those with partnership responsibilities. Meeting minutes should track attendance and apologies, to encourage attendance.	Agreed, relevant charpost restructure and clearly by the Senior To be actioned by: No later than: 30 June	will be set out Leadership Team. Wilma MacLeod
This omission risks gaps in representation. Consequently, our review of member attendance on CCAT minutes noted that, out with core members, attendance from CCAT members was not consistent				
over the 2024/25 academic year, with a few members not attending across the year. Note that minutes to the April 2025 meeting also did not track who attended the meeting.			Grade	3



Objective 2 Roles and responsibilities around climate change action and environmental sustainability, including leadership of climate change projects, have been clearly articulated (continued).

Observation	Risk	Recommendation	Management Respo	nse
Out of 25 actions listed on the CCEAP 2024-25, only two were delegated to owners who were not one of the three CCOLs. This results in the achievement of the College's sustainability goals being heavily reliant on the CCOLs' capacity. While a shared Sustainability Officer role with another institution may offer financial and collaborative benefits, management interviews highlighted that a part-time post could limit time and institutional presence needed to deliver key activities, placing	Management do not have the capacity to drive and coordinate sustainability initiatives across the College, potentially slowing progress as the College nears the 2030 Net Zero target for Scope 1 emissions.	R2 - Management should take steps to ensure that there is sufficient capacity within the Sustainability Officer role, particularly as key Net Zero deadlines approach. Additionally, CCEAP actions should be distributed more widely across the CCAT so to strengthen delivery and	Agreed, this post nee role to drive forward t required. To be actioned by: 0 No later than: 31 Ma	he actions Craig Ferguson
continued reliance on the CCOLs.		accountability.	Grade	3



Objective 3 - Initiatives are in place to educate staff and students on environmental sustainability.

The College demonstrates a commendable commitment to environmental sustainability and has taken a comprehensive, inclusive and multi-layered approach to embed it across its operations, education, and culture. Sustainability is not treated as a standalone initiative but is integrated into governance structures and the curriculum.

We found that the College has embedded a wide range of environmental sustainability initiatives across governance, curriculum, operations, and partnerships, with regular review and improvement overseen by the CCAT. Sustainability is integrated into the curriculum, with good practice shared via Teams and newsletters, and CCAT meetings attended by representatives from Support Services and Curriculum who disseminate updates departmentally.

There are ambitions to map the 17 UN SDGs across the curriculum, with efforts underway to identify gaps and improve course content.

Curriculum areas actively reduce waste and emissions, promote responsible resource management, and minimise paper usage.

Staff awareness is supported and maintained through events like the August 2025 SLC Staff Conference, where CCOLs and APUC presented the College's sustainability goals. Training includes sustainable procurement for new budget holders, Carbon Literacy and Community Links programmes, with funding secured for a two-day Carbon Literacy course currently underway.

Student engagement is fostered through induction packs, digital resources, and events such as "Love Your Planet" week, which featured activities like litter picking and energy awareness in collaboration with partners including Biffa and Home Energy Scotland.

Practical campus measures include multi-waste bins, reusable cup schemes, aluminium-can recycling, e-waste disposal, IT energy-saving initiatives, and printing impact tracking.

The College also works with external partners such as Aramark, Dalkia, and the College Local Innovation Centre (CLIC), extending sustainability education to local businesses and earning recognition through sector awards.



Objective 4 - There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably.

In February 2025, the College was awarded a "Gold" rating in the EAUC Leader Scorecard for 2024–2025, demonstrating sector-leading practice in sustainability. The College has actively followed the EAUC FE/HE Climate Action Roadmap, using it as a framework to guide progress and set ambitions to achieve 'Leading' status across its five core elements: Leadership and Governance, Estates and Operations, Learning and Teaching, Partnerships and Engagement, and Data Collection.

As part of the draft 2025/26 CCEAP, the College's CCOLs have completed a self-assessment against the Roadmap criteria. This assessment has established the College's current position on the Roadmap as follows:

Element	Emerging Colleges which are just beginning to address sustainability.	Established Colleges with an established approach to sustainability.	Leading Colleges which are models to others on sustainability.
Leadership and Governance		✓	
Teaching and Learning			✓
Estates and Operations		✓	
Partnership and Engagement			✓
Data Collection		1	

The College has also demonstrated an ongoing commitment to reducing its carbon emissions. The latest published Public Bodies Climate Change Duties (PBCCD) report for the 2023/24 academic year records total emissions at 842.3 tCO₂e. Analysis of published figures confirms a consistent downward trend, with Scope 1 emissions reducing by an average of 12.9 tCO₂e per year. This rate of reduction indicates that the College is on track to meet its interim Scope 1 target of 242 tCO₂e by 2029. Furthermore, total emissions are decreasing at an average rate of 175.98 tCO₂e per year, aligning with the College's overall net zero objectives. The next PBCCD report for 2024/25 is scheduled for submission in November 2025.

The highest emissions recorded on the 2023/24 PBCCD are those aligned to electricity (373.01 tCO₂e), natural gas (330 tCO₂e), and general including construction waste (128 tCO₂e).



Objective 4 - There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably (continued).

Observation	Risk	Recommendation	Management Respo	nse
The Environmental Sustainability Policy (February 2025) does not explicitly reference the Greenhouse Gas (GHG) Protocol, nor does it define the emissions that fall under the Scope 1, Scope 2, or Scope 3 emissions. This lack of detail makes it difficult to demonstrate how direct and indirect emissions are categorised by the College to ensure they are line with reporting requirements. As a result, it was unclear from the 2023/24 PBCCD and the documents reviewed whether emissions reported under the "Transport – Car" category were correctly allocated given that the vehicle ownership was not specified. For example, Scope 1 should cover vehicles owned or leased by the College, while Scope 3 should include business travel in employee-owned vehicles.	Emissions may be misclassified in statutory reports, leading to inaccurate carbon accounting and benchmarking between similar organisations.	R3 - The Environmental Sustainability Policy should either be updated, or related guidance created, to reference the GHG Protocol, clearly defining the College's categories that define Scope 1, 2, and 3 emissions in order to ensure alignment with the GHG protocol. This may require discussion with other similar organisations to ensure consistency across the sector.	Agreed. To be actioned by: 0 No later than: 30 Jun	
Similarly, Refrigerants (R410A) would be Scope 1 if these emissions are leaks from the College's own HVAC equipment.			Grade	3



Objective 4 - There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably (continued).

To support forward planning and inform future investment decisions on reducing emissions, the College commissioned Mott MacDonald Ltd to produce a Decarbonisation Report for the Main Campus Building (March 2024). The report sets out a pathway for the campus to achieve net zero emissions in line with College targets. Key recommendations included:

- Investment in improved energy monitoring and metering (submetering and half-hourly gas metering);
- Decarbonisation of domestic hot water provision through electric point-of-use systems;
- Replacement of the heating plant with heat pump-based solutions (air source or ground source, with solar photovoltaic-thermal (PV-T) options);
- Expansion of solar PV capacity on the main building roof;
- Upgrades to heating infrastructure to maximise heat pump efficiency; and
- Engagement with District Heat Networks as part of the local authority's strategy.

However, the successful implementation of these recommendations is contingent upon securing further capital investment. Our discussions with the Vice Principal – Finance, Resources & Sustainability highlighted that this is known, and management are reviewing investment prioritisation and exploration of external funding opportunities.

While future investment is decided upon, the CCEAP tracks the progress of current endeavours. This includes work underway to improve the digital infrastructure particularly in relation to room utilisation and the use of room sensors that will report when rooms are not in use thereby triggering actions to minimise energy consumption in those areas. Improved digital infrastructure projects also include the review of data analysis using Power BI to allow College wide dashboard reporting on the status of emissions and improved data storage solutions via the cloud.

Our review of Facilities Reports over the 2024/25 Academic Year also noted concerted efforts to reduce general waste. Across the reviewed facilities reports from February 2024 to August 2025, general waste, which previously accounted for around half of total waste, has shown a notable downward trend, supported by targeted actions from the CCAT and improved reporting systems provided by Biffa. Construction and Demolition waste remains well-tracked, with spikes linked to specific projects and robust controls in place to prevent misuse of College skips.

Overall, the College's approach is increasingly data-driven, with weekly, monthly and quarterly reporting supporting management oversight, and ongoing engagement with staff, contractors, and external partners to drive further reductions in waste and promote sustainable practices. Our review of facilities raw data to that presented in the Estates Figures noted no issues.

While there is clearly significant efforts underway to target the key emission areas, we recommend the following to enhance arrangements further:



Objective 4 - There are appropriate targets, actions and milestones in place to demonstrate the steps the College is taking to contribute to climate change mitigation and to climate change adaptation, and to act sustainably (continued).

Observation	Risk	Recommendation	Management Respo	nse
Our review of the 2023/24 PBCCD highlighted that landfill waste (both general and construction / demolition), remains a significant contributor to Scope 3 emissions. While the Head of Facilities is actively leading efforts to reduce waste, there is currently no documented Zero-to-Landfill Strategy outlining specific targets and actions. We were unable to locate supporting documentation that would demonstrate forecasting and quantified targets and actions through to the 2040 Net Zero goal. FNT2030 SCCEES Climate Action Category / Commodity Management Plans. There plans were for key commodities produced by the College, with action plans to reduce waste for the current academic year only. However, they did not document all waste produced and the actions underway, such as waste	Without a documented zero to landfill strategy, with quantifiable targets and actions, investment requirements and risks across all waste commodity areas, the College may risk not achieving its Net Zero goals.	R4 - Management should consider developing a zero-to-landfill strategy with clearly defined commodity targets, actions (not just key commodities) and assigning ownership of actions within a waste management plan across key stakeholder groups, including staff and students. Consideration should be given to linking plans to performance indicators, such as performance achieved with waste contractors.	Agreed, in recent mo waste has decreased. There needs to be a japproach with curriculand the waste contract. To be actioned by: (No later than: 30 June)	but is still high. oint working ilum, procurement ctors. Craig Ferguson ne 2026
produced within curriculum areas and related plans to responsibly dispose of this.			Grade	3



Objective 5 - there is a procurement focus on sustainability during the tender process and initiation of contracts.

The College demonstrates robust compliance with the Sustainable Procurement Duty through a well-structured combination of policy, operational practice, and continuous improvement. Its commitment is publicly stated on the Procurement landing page and operationalised through the Procurement Policy and Procedure (May 2024), which includes specific guidance for budget holders and contract managers on necessity, whole-life cost, and climate impact. The updated Procurement Strategy for 2025/26, aligned with Objective 4 on Sustainable Behaviours, is scheduled for Board review in November 2025 following APUC input. Tender evaluation templates for services such as Waste Management and Catering include dedicated sections for Sustainability, Ethics, Added Value, and Innovation, enabling evaluators to assess supplier contributions to the College's Climate Emergency commitments. These include waste treatment methods prioritising reuse, Scope 3 emissions reduction, low-emission transport, and community benefit programmes.

Individual contracts reference the Climate Change Act 2008 and Environmental Protection Act 1990, with embedded sustainability clauses covering eco-friendly products, recycling, fuel minimisation, and contingency arrangements. Contractors, such as the Waste Management provider, are responsible for monitoring trends and advising on improvements, with performance tracked via KPIs. Procurement is also conducted through framework agreements including with CPC and APUC, ensuring alignment with sector sustainability standards. Curriculum leads confirm environmental considerations in purchasing decisions, such as low-VOC (volatile organic compound) paints in Painting & Decorating and recycling arrangements for materials like copper and lead in Plumbing.

Procurement activity is supported by a dedicated Supply Chain Manager who engages with sector-wide forums, including the APUC-hosted Procurement Strategy Group for Colleges. The College applies Community Benefit Clauses in all regulated procurements, even below the £4 million threshold, where proportionate, and without compromising value for money. Annual Procurement Reports evidence alignment with the Sustainable Procurement Duty, and internal audit testing has confirmed compliance while identifying opportunities for closer collaboration between procurement and sustainability teams. Evaluations incorporate price and quality criteria, with sustainability assessed through a dedicated test covering environmental impact, fair work, and social value. Sample testing of contracts, including Biffa and Human Resources Information System (HRIS), confirmed objectivity in panel assessments. Sustainability risks are also considered at the project strategy stage, embedding environmental considerations from the outset. All relevant procurement information, including environmental conditions for goods and services, is transparently published on the College's website.



Objective 6 - the College works in partnership with stakeholders / contractors re sustainable practice, including links to the Local Authority to drive forward plans to decarbonise the estate.

The College also demonstrates a clear and sustained commitment to sustainable practice and decarbonisation, underpinned by strong partnerships and operational controls. Through the CCAT, the College collaborates regularly with external partners including Biffa (waste and recycling), Aramark (catering), Dalkia (energy management), Lanarkshire Association of Mental Health (aluminium can recycling), and APUC (procurement). Dalkia, for example, has provided a free energy audit with recommendations such as central boiler control, projected to save £6,000 and reduce carbon emissions by 10.3 tonnes annually, with further upgrades under consideration.

Engagement with South Lanarkshire Council and participation in regional forums such as EAUC meetings and Travelknowhow (with SPT and Calcommuter) further support decarbonisation and sustainable travel planning. The College is actively involved in sector-wide sustainability projects including the CLIC programme, Developing the Young Workforce (DYW), Zero Waste Scotland, and EAUC, and maintains compliance with national reporting frameworks such as PBCCD and CCEAP.

The College also engages its supply chain and local businesses through CLIC and procurement events, reinforcing its commitment to community-wide sustainability.

While the College's proactive approach positions it well to meet its sustainability and decarbonisation goals, management has acknowledged that some partnership initiatives face delays due to time and resource constraints. The planned introduction of a Sustainability Officer is expected to mitigate this risk and enhance coordination.

It is also recognised that there is a need for deeper engagement with students and local businesses, which the 2025/26 CCEAP aims to address through improved communication and expanded opportunities for involvement.



Objective 7 - There are appropriate arrangements in place to update the Board on the progress being made to deliver on actions around climate change and sustainability

The College demonstrates strong governance and oversight of its sustainability and decarbonisation commitments through structured reporting and Board-level engagement. Over the 2024/25 academic year, the Board received and approved the updated CCEAP, which included a review of progress against 2023/24 actions, new targets, and a detailed action plan for the year ahead. Following approval in November 2024, the CCEAP was published on the College's sustainability landing page, ensuring transparency for stakeholders. The CCAT provided quarterly updates to the Board via the Finance & Resources Committee (FRC), covering key sustainability projects such as solar PV installation, building management systems, and waste management improvements, alongside progress on carbon literacy training, decarbonisation initiatives, and data enhancement.

Throughout 2024/25, and into 2025/26, the Board continued to receive regular updates on sustainability projects and CCEAP progress through facilities and capital expenditure reports. The FRC maintained active scrutiny, with sustainability and climate change risks monitored and escalated through quarterly reporting. This ensured operational delivery remained aligned with strategic objectives. The FRC also approved the Procurement Policy and Strategy in May 2024, providing oversight of sustainable procurement activity. Sustainability and climate change risks are embedded within the College's Strategic Risk Register, with the Audit & Risk Committee playing a key role in reviewing mitigating controls and audit outcomes related to environmental risk.

At an operational level, the Strategic Lead and SLT receives monthly Facilities Reports and CCEAP Progress Reports, ensuring that sustainability remains a live and monitored priority across all levels of the organisation.





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A list of members' names is available for inspection at each of these addresses.



Satisfactory

South Lanarkshire College

Building Maintenance

Internal Audit report No: 2025/08

Draft issued: 25 November 2025

Final issued: 25 November 2025





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Level of Assurance

In addition to the grading of individual recommendations in the action plan, audit findings are assessed and graded on an overall basis to denote the level of assurance that can be taken from the report. Risk and materiality levels are considered in the assessment and grading process as well as the general quality of the procedures in place.

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.

Action Grades

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.



Management Summary

Overall Level of Assurance

Satisfactory

System meets control objectives with some weaknesses present.

Risk Assessment

This review focused on the controls in place to mitigate the following risks on the South Lanarkshire College ('the College') Strategic Risk Register (as at August 2025):

- Risk 5 That there are insufficient funds for capital project and maintenance requirements (post-mitigation score – 12);
- Risk 6 That there is a failure to meet statutory and legislative health and safety (post-mitigation score 10);
- Risk 7 That there is business interruption due to major disaster, IT failure etc. (post-mitigation score 12);
- Risk 11 That there is a failure to safeguard the health and wellbeing of staff and students (post-mitigation score – 3); and
- Risk 15 That the College is not on track to meet the Scottish Government net zero sustainability priorities (post-mitigation score 6).

Background

As part of the Internal Audit programme at the College for 2024/25 we carried out a review of the systems in place for Building Maintenance. Our Audit Needs Assessment identified this as an area where risk can arise and where Internal Audit can assist in providing assurances to the Audit and Risk Committee and management that the related control environment is operating effectively, ensuring risk is maintained at an acceptable level.

Responsibility for overseeing the College's estates management and building maintenance sits with the Vice Principal Finance, Resources and Sustainability. They are supported by the Head of Facilities and the Depute Head of Facilities.

The College had an Estates Strategy in place which defined its approach to managing its estate from 2009 to 2019. A new Estates and Sustainability Strategy was under consideration at the time of this audit being undertaken, in which the College aims to reflect the changes in the building and wider estates condition, the College's financial landscape and its current and future student needs.

A planned preventative maintenance (PPM) programme is in place at the College to ensure that its assets are adequately maintained within their useful life. The College has a contractor in place which oversees its PPM programme and reports any remedial works directly to the Head of Facilities.

111.

Scope, Objectives and Overall Findings

This review examined the extent to which College forward planning will support lifecycle maintenance for the College estate given the limitations on available funding.

The table below notes each separate objective for this review and records the results:

Objective	Findings					
The objective of this audit was to gain		1	2	3	Actions	
reasonable assurance that:		No. of	Agreed A	ctions	already planned	
1. The College has an Estates Maintenance Strategy in place which is aligned with the College's strategic planning objectives and other relevant strategies.	Requires Improvement	-	1	-		
2. Oversight of the Estates Maintenance Strategy, including review of implementation and funding risks, have been aligned to an appropriate committee reporting to the Board.	Good	-	-	-		
3. Progress made on lifecycle maintenance projects, and expenditure against budget, is monitored by management and an appropriate committee(s). The process includes arrangements to ensure value for money is achieved.	Good	-	-	-	✓	
4. Regular condition surveys are undertaken, and other good quality information is available, to inform asset management decisions.	Satisfactory	-	-	1		
5. Plans are in place to maintain the College's assets in good condition, as economically as possible, and in line with manufacturer's warranty conditions, in order to meet changing and rising standards as far as they can be foreseen.	Good	-	-	-	✓	
6. There is a comprehensive cyclical testing and maintenance programme that covers all items requiring regular testing or maintenance under the relevant legal and regulatory framework.	Satisfactory	-	-	2		
	Outlessate	0	1	3		
Overall Level of Assurance	Satisfactory	Syster		ntrol objective ses present.	es with	



Audit Approach

Through discussion with the Vice Principal Finance, Resources and Sustainability, Head of Facilities and other relevant staff, and review of relevant documentation including plans, policies, procedures and management information etc., we established the systems and controls that have been put in place to ensure that these responsibilities are met. We have reported on areas where expected controls are found to be absent or where controls could be further strengthened.

Compliance testing was carried out where necessary to ensure that the controls in place are operating effectively, including selecting a sample of jobs from the PPM programme and confirming that the work has been carried out in line with expected standards and frequency.

Summary of Main Findings

Strengths

- A wider College Strategy is in place which defines the focus of the College's strategic objectives up until 2030, which includes a focus on estates.
- An exploration session was undertaken in June 2025 which involved key staff and management within the College to provide input into a potential new Estates Strategy.
- Consideration of student needs is incorporated into existing estates management works by the Facilities team.
- A Facilities Report is provided to the Finance and Resources Committee quarterly which details the ongoing estates works as well as sustainability matters.
- A quarterly Capital Expenditure report is submitted to the College's Finance and Resources Committee quarterly.
- Value for Money is a key part of the procurement processes to help achieve the best value contract, against which the performance of the contractor is monitored.
- An Asset Assessment Report was prepared by a specialist contractor in 2022 from which the College developed an annual PPM programme.
- An additional condition survey was undertaken in 2022 over the cladding due to the focus on this across the country, noting no major issues.
- The PPM programme and the job frequencies are defined by the compliance requirements, and where the PPMs are not compliance related, are defined by the manufacturer recommendations.
- New technologies have been implemented by the College to achieve carbon goals and improve energy efficiencies.

Weaknesses

- The College's previous Estates Strategy is not reflective of the current College Strategy, the current financial landscape in which the College operates, and the staff and student needs in 2025 and thereafter.
- There is no cycle of condition surveys in place to review the physical condition of the College's campus and the individual assets within it.
- The College did not provide evidence that six-monthly PPM had been completed for one item in our sample (Canopy Kitchen Extract) in line with the PPM schedule. Evidence was available of maintenance having been carried out in April 2025 but not October 2025.
- From inspection of the PPM schedule for 2025/26, it was established that the schedule defines: the specific PPM, the week in which it is scheduled to be undertaken, and its frequency (annually, 6 monthly, and 3 monthly). As such, there is no record of the specific date on which the works are required to be undertaken, or the costs associated with these works.



Summary of Main Findings (Continued)

Actions In Progress

- At the time of this review being undertaken, the Vice Principal Finance, Resources and Sustainability is in the process of developing a comprehensive budget monitoring schedule which includes all departments and can be filtered for each level of review (budget holder, Curriculum Manager, Departmental Head, Principalship).
- At the time of this review, the College's Finance Manager was in the process of incorporating 15-minute meetings each month to discuss budget performance with each of the budget holders across the College, to help improve oversight of the College's spending.
- At the time of this review being undertaken, the College was in the process of implementing a new annual PPM for its lifts, which was to be added to the annual PPM plan once implemented.

Acknowledgments

We would like to take this opportunity to thank the staff at South Lanarkshire College who helped us during the course of our review.



Main Findings and Action Plan

Objective 1 – The College has an Estates Maintenance Strategy in place which is aligned with the College's strategic planning objectives and other relevant strategies.

At the time of this review, the College was in the process of updating its Estates Strategy, and a high-level document was published following the 'Exploration Session' held in June 2025 to support the formulation and roll out of a draft Estates Strategy. This notes how the College's Facilities team can help achieve the overall strategic objectives for the College, and the findings from this will be incorporated into the new Estates Strategy document.

College Strategy

From review of the College's Strategy 2030 which was considered at the exploration session, it was noted that the four strategic priorities of the College as a whole are:

- 1. **Student Experience**: To provide a responsive, high-quality and entrepreneurial, destination focussed curriculum, embedding holistic support services, and lifelong learning opportunities for the communities the College serves.
- 2. **People and Culture Development**: To recruit, retain, develop and recognise talented staff who will enable students to reach their full potential.
- 3. **Growth and Innovation**: To provide an estate and digital infrastructure for 21st century learning, and to collaborate on innovative and mutually beneficial partnerships.
- 4. **Sustainability:** To be a future proofed independent and financially viable organisation able to invest and collaborate for growth and resilience, and to work towards achieving a Net Zero campus community.

As part of this, the College's Facilities team can contribute to the strategic objectives by undertaking two key initiatives, and these are:

- To create space that is more responsive to student needs, is welcoming and accessible.
- To provide a modern and engaging space for staff, student, guests and visitors.

As part of these two initiatives, the College is focussing on three key areas of the campus for development and improvement to enhance the learning experience for its students. These are:

- Student Advice Centre The College is considering the current layout of the offices and environment within the Student Advice Centre with a view to having an office space which is responsive to student needs and create a Health and Wellbeing Hub. From discussions with the Head of Facilities it was noted that the aim of this area is to facilitate Guidance and Support / Counselling services and have an integrated inclusion of a health and wellbeing space which students can use.
- Library and Learning Centre The College is considering rebranding the area to create an engaging and welcoming study space which will incorporate library services, group and individual study space including quiet study, study skills and support workshops.
- Reception Area and Main Space As the entry point for the building, the College is reviewing its options for increasing the security of staff located in this area to ensure a comfortable climate for staff.



Objective 1 – The College has an Estates Maintenance Strategy in place which is aligned with the College's strategic planning objectives and other relevant strategies (continued).

From discussions with the Vice Principal Finance, Resources and Sustainability, it was established that the College has not progressed with the Estates Strategy following the exploration session due to limited staff resources and other College commitments. As such, a recommendation has been raised.

Observation	Risk	Recommendation	Management Resp	oonse
The College's previous Estates Strategy is not reflective of the current College Strategy 2030, the current financial landscape in which the College operates, and the staff and student needs in 2025 and thereafter. As such, the focus of the College's estates and building maintenance works is defined by the Principalship and the Facilities team.	There is a risk that the College does not achieve its strategic goals regarding its estates, due to the absence of an up-to-date Estates Strategy.	R1 – It is recommended that the College develops its new Estates Strategy, which reflects the College's financial landscape, student needs and physical condition, in a timely manner to ensure alignment with the wider College Strategy.	The College is currently considering a longer-term plan to renovate some areas of the Campus to better support both student and staff needs and expects to use the residual months of academic year 2025-2026 to engage consultancy support to help design a fi for purpose infrastructure plan that will underpin and help to shape a revision the Estates strategy. To be actioned by: Vice Principal – Finance, Resources & Sustainability No later than: 31 July 2026	
			Grade	2



Objective 2 – Oversight of the Estates Maintenance Strategy, including review of implementation and funding risks, have been aligned to an appropriate committee reporting to the Board.

From discussions with the Vice Principal Finance, Resources and Sustainability, it was noted that the College's Principalship meets every Tuesday to discuss all College matters, of which estates is one. In addition to this, reporting mechanisms are in place to provide the relevant information to both the College's Principalship and the Board.

Facilities Report

The Head of Facilities prepares a Facilities Report which details the College's ongoing works and any estates related issues, which is presented to the Finance and Resources Committee on a quarterly basis. The areas of focus are reviewed and agreed by the Principalship before the projects are submitted to the Finance and Resources Committee for approval, and as such the report details the works for the previous quarter for the purposes of update and reporting. From inspection of the most recent Facilities Report, it was noted that the following information was included:

- Facilities Works undertaken in the period;
- Contract Monitoring;
- Sustainability;
- Waste;
- Energy Consumption Water Use;
- Risk; and
- Equalities.

In addition to this, it was noted that the Principalship review business cases for both practical purposes and financial viability to ensure that these are feasible. Elements also under consideration include the impact on the wider College and potential alternative uses of the space. From discussions with the Vice Principal Finance, Resources and Sustainability it was established that the new Estates Strategy document will address the sustainability and digital requirements, as well as considering methods of generating commercial income through use of the buildings / estate. The newly created Business Innovation department has a remit to focus on the income generation from use of the estates, as it was noted that the College has previously had requests from external parties for use of the space. It was highlighted that previous cases of external use of the facilities were risk assessed, however complications prevented these from progressing.

From discussions with the Head of Facilities, it was noted that some elements of the previous strategy will be factored into the new document to ensure that it captures the requirement for putting student needs first and enhancing the estate to create a better learning environment. However, the landscape in which the College operates is significantly different from 2019 and, as such, College management has made judgments based on the current environment, student needs and financial limitations to make estates decisions. An example of this would be that the College has installed Lapsafe cabinets where students can store their laptops securely and charge them at the same time. It has also installed more charging ports and sockets across the campus due to the students' increased reliance on mobile phones. It was noted that once the new strategy is developed, this will be reported to the Finance and Resources Committee prior to its sign off by the Board, and the College's progress against the objectives within it will be reported regularly to the Finance and Resources Committee.



Objective 3 – Progress made on lifecycle maintenance projects, and expenditure against budget, is monitored by management and an appropriate committee(s). The process includes arrangements to ensure value for money is achieved (continued).

Budget Monitoring

From discussions with the Vice Principal Finance, Resources and Sustainability, it was noted that currently, budgets are agreed for each department for the duration of the College's financial year. These are then monitored through monthly reports which are issued to the budget holders for review, and the Management Accountant requests that they raise any concerns with them. It was noted, however, that a new process is being implemented in which the Finance Manager will issue the monthly budget report to all budget holders and set up 15-minute meetings with every budget holder to discuss their performance the previous month, to both enhance the budget holders' understanding of their responsibilities, and the Finance Manager's understanding of potential issues. As such, an action in progress has been noted.

The Vice Principal Finance, Resources and Sustainability has developed a detailed financial schedule for every department, detailing the income and expenditure down to each individual employee within each department. The aim of this document is that the financial data pulls into Curriculum Manager summaries, Departmental summaries, Principalship summaries and subsequently the Principal's high level summary. The data is imported from the College's finance system, bluQube, on a monthly basis, and is reconciled against the general ledger in bluQube to ensure that the data is accurate. Within the schedule, building maintenance is captured in the 'overheads' tab, in order for the departmental costs to be reviewed. It was noted that at the time of this review, this was planned to go live in January 2026 and, as such, an action in progress has been noted.

CAPEX

Quarterly Capital Expenditure reports are in place at the College, which detail the projects that have been undertaken under both the capital and revenue budgets. The total amount available for 2024/25 was noted as being £850k, split into c. £425k for both capital and revenue spend. From inspection of the May 2025 Capex report, it was noted that the spend YTD was £514k, and therefore there was c. £336k remaining of the budgeted amount. The Vice Principal Finance, Resources and Sustainability noted that the ongoing projects would be continued, and any remaining projects were to be reviewed for relevance and would be moved to 2025/26 where there was still a business need. From inspection of the August 2025 report, the spend for the remainder of the 2024/25 financial year was included. From this, a total spend of c. £637k was recorded, leaving £213k remaining against the initial budget. The progress against each of the projects was noted as being monitored at the quarterly Finance and Resources Committee meetings where the capex reports are presented.

Value For Money

It was noted that a key part of the College's value for money processes is undertaken by the College's Procurement team, overseen by the APUC Supply Chain Manager. The Procurement team reviews the contracts in place across all departments within the College, to identify opportunities for procuring the services provided by multiple suppliers into one contract with one supplier, in order to obtain better value for money. The APUC Supply Chain Manager also liaises with their APUC colleagues for any specialist contracts to help ensure that they procure a good value for money service. Additionally, the College utilises frameworks for ensuring that it procures a high quality of service for the best price, and the Head of Facilities liaises with the APUC Supply Chain Manager to ensure they are undertaking the correct procurement exercise in line with the College's requirements and achieving the best value for money at the same time. Contractor performance is then monitored against these terms by the Head of Facilities to ensure that the agreed terms are being achieved.



Objective 4 – Regular condition surveys are undertaken, and other good quality information is available, to inform asset management decisions.

Following the issues identified from the Grenfell fire in London, the College commissioned a survey to ensure that it complied with the safety regulations. Additionally, due to severe weather and some loose fittings, a number of incidents where pieces of the cladding have come off have also occurred. The College procured the services of consultants who inspected the condition of the panels across the building, with an additional contractor inspecting behind the decorative panels to check for water ingress and other related issues. From these inspections, the College's buildings were noted as being in good condition, with minor works raised due to some surface corrosion and issues with some of the screws. Another survey was undertaken of the full College campus to note the condition of the mechanical, electrical, HVAC and drainage systems. The findings from these were collated and passed back to the Head of Facilities, noting that the assets had been maintained to the expected standard, however, it was highlighted that some assets were approaching the end of their useful life and were required to be replaced in the short to medium term.

Cladding Condition Report 2022

The cladding across the College's campus was noted as having minor issues relating to water ingress in certain areas, particularly those where there were additional pieces added to the surface cladding for design purposes. Other minor points were noted around downpipes which were blocked and areas of vegetation / build up in gutters etc. which were required to be removed. At the time of this review being undertaken, all remedial works related to this inspection had since been completed. No issues were noted regarding the concerns raised by the Grenfell fire.

Mechanical, Electrical and Public Health (MEPH) Asset Assessment Report

As noted above, in 2022, the College contracted consultants to review the current condition of the MEPH installations within the College building and advise existing condition, or lifecycle replacements, that are considered essential or could be deprioritised over the next 10-year period. In addition to this, a planned preventative maintenance (PPM) schedule was prepared and passed to College management for distribution.

As part of this, the consultants identified the current condition (as at 2022) and the specific maintenance requirements for the following mechanical and electrical systems in place:

Mechanical

- LTHW Systems
- Cold Water Systems
- Heating and Ventilation Systems
- Drainage Systems
- Air Conditioning Systems

Electrical

- LV Distribution
- Fire Alarms
- Lighting
- Small Power
- Security
- Lightning Protection and Communications



Objective 4 – Regular condition surveys are undertaken, and other good quality information is available, to inform asset management decisions (continued).

Observation	Risk	Recommendation	Management Respo	nse
There is no cycle of condition surveys in place to review the physical condition of the College's campus and the individual assets within it. Management information is obtained through existing surveys and reactive works which have arisen.	There is a risk that the College does not have sufficient information on the condition of its assets, on which to base management decisions.	R2 - Consideration should be given to scheduling condition surveys in the coming years to identify the areas of focus in line with the College's strategic goals and the new Estates Strategy, once this is in place.	The College will cons more routine condition provide a timeline in 2 undertaken in future y To be actioned by: H No later than: 31 July	n surveys and will 2026 for work to be vears. Head of Facilities
			Grade	3



Objective 5 – Plans are in place to maintain the College's assets in good condition, as economically as possible, and in line with manufacturer's warranty conditions, in order to meet changing and rising standards as far as they can be foreseen.

An annual PPM cycle is in place at the College which covers all its key maintenance and compliance areas against both the manufacturers' recommendations and any relevant legislation and regulations. This is managed and monitored by the Head of Facilities and the Depute Head of Facilities who engage with the contractors to ensure that the works are undertaken in line with the required timeframe. In addition to standard PPMs, the College has installed high specification technology such as air source heat pumps and underfloor heating, which is required to be maintained in line with the manufacturer's requirements. The installation dates of each of the assets and the PPM requirements are recorded on the Facilities team's building management system (BMS), against which judgments are made by the Head of Facilities on when these are required to be replaced based on their useful life.

The Head of Facilities noted that the College reduced the number of contractors to help achieve a higher quality of service, and this should also help to maintain assets to a standard where they can fulfil their useful life, however any significant repairs are reviewed against replacement costs in line with the College's value for money considerations. The College is aiming for its campus to be carbon zero, however changes to electrical appliances such as the training kitchens would require alignment with the SQA's teaching specifications and the College's budgets and, as such, individual consideration must be given to each project to ensure the College is making the best use of its funds.

The PPM schedule is held by the Facilities team and contains the details of each of the PPMs and the frequency of the works required. This is held in PDF format on the Facilities shared drive, and within the BMS along with the worksheets for the completed works. At the time of this review being undertaken, the College was in the process of implementing a new annual PPM for its lifts, which was to be added to the annual PPM plan once implemented. As such, an action in progress has been noted.

Reactive works are also undertaken at the College, which are raised to the Facilities team for either passing to the relevant contractors or to the two in-house Maintenance Officers. These are recorded on the BMS and monitored for completion by the Facilities team. It was noted that both the Head of Facilities and the Depute Head of Facilities review the dashboard within the BMS on a daily basis to ensure that any works are addressed in a timely manner, and that any outstanding PPMs have been sufficiently followed up on.



Objective 6 – There is a comprehensive cyclical testing and maintenance programme that covers all items requiring regular testing or maintenance under the relevant legal and regulatory framework.

The College's PPM schedule is passed to a contractor for completion of all non-gas safety PPMs, and another contractor for the gas safety works, on an annual basis, The contractors then undertake the works based on the specification of the PPMs and the week in which the works are scheduled to be completed. The schedule contains PPMs which are to be undertaken annually, six-monthly or three-monthly, covering areas such as HVAC, leak detection, fire dampeners and smoke detection, as well as gas and electrical safety.

As above, completion of the PPM works is monitored through the BMS system. It was noted by the Head of Facilities that the College is hoping to migrate to a Computer Aided Facilities Management (CAFM) system in the future, which will provide more detailed information on the works.

In order to establish whether the PPM schedule was being undertaken in line with the agreed dates and to the required standard, a sample of PPMs from the 2025/26 schedule was selected and the worksheets from each job obtained and inspected. From inspection of the documentation for the sample of 10 completed PPMs, the following was noted:

- Nine of the 10 PPMs were confirmed as completed in the week of the agreed schedule, or before;
- Nine of the 10 PPMs were evidenced as having been undertaken in line with the required frequency;
- Remedial works were undertaken where required for the PPMs reviewed; and
- Worksheets were reviewed and retained by the Facilities team for all jobs.



Objective 6 – There is a comprehensive cyclical testing and maintenance programme that covers all items requiring regular testing or maintenance under the relevant legal and regulatory framework (continued).

Observation	Risk	Recommendation	Management Respo	nse
The College did not provide evidence that six-monthly PPM had been completed for one item in our sample (Canopy - Kitchen Extract) in line with the PPM schedule. Evidence was available of maintenance having been carried out in April 2025 but not October 2025.	There is a risk that the College cannot evidence that the PPM schedule is being delivered on time by its contractors.	R3 – Review the system for monitoring PPM to ensure that all is completed in line with the agreed PPM schedule and that evidence to confirm this is retained.	The College has required from the contractor as monthly PPM check in 2025 was only return. September 2025, with check in October 202 be reported back to the part of its standard cowith improvements extended in the Cotober 1 Additionally, an enhant PPM schedule as not support monitoring ar to evidence the composition works. To be actioned by: No later than: 31 Maintenant in the Cotober 1 Additionally in the Cotober 2 Additionally in the Cotober 3 Addit	s to why the 6 - performed in April ed to the College in n no recurring PPM 5 noted. This will ne contractor as portract monitoring expected and a be initiated in 2025 check. Incement of the led at R4 will better and provide a means eletion of PPM Head of Facilities
			Grade	3



Objective 6 – There is a comprehensive cyclical testing and maintenance programme that covers all items requiring regular testing or maintenance under the relevant legal and regulatory framework (continued).

Observation	Risk	Recommendation	Management Respo	nse
From inspection of the PPM schedule for 2025/26, it was established that the schedule defines: the specific PPM, the week in which it is scheduled to be undertaken, and its frequency (annually, six-monthly, and three-monthly). As such, there is no record of the specific date on which the works are required to be undertaken, or the costs associated with these works.	There is a risk that the PPMs cannot be accurately monitored for timely delivery and against budget due to the absence of this information on the PPM schedule.	R4 – It is recommended that the College formalises the specific times planned for each of the PPM works to ensure that these are accurately recorded, and that the costs of these works are clearly documented and understood prior to them being undertaken.	The College is currently enhancing its PPM to include a lower level of detail, including specific timelines for PPMs and the costs associated with these works. Initially this will be retained and updated manually with the expectation that a Computer Aided Facilities Management (CAFM) system could be utilised in future years. To be actioned by: Head of Facilities No later than: 31 March 2026	
			Grade	3



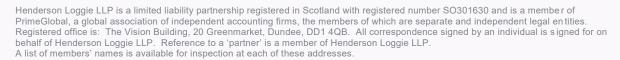


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AUDIT AND RISK COMMITTEE

DATE	02 December 2025		
TITLE OF REPORT	Rolling Audit Recommendations Monitor		
REFERENCE	07.1		
AUTHOR AND CONTACT DETAILS	Paddy Feechan, Head of Finance paddy.feechan@slc.ac.uk		
PURPOSE:	To present an update on the work that has been undertaken by the College to address previous audit recommendations.		
KEY RECOMMENDATIONS/ DECISIONS:	 The Committee is asked to: Note 3 new recommendations were added as a result of the Student Activity audit. Note 8 recommendations being marked as complete during the last quarter, with progress being made on residual recommendations. 		
RISKS	 That the College does not have appropriate internal controls to safeguard its staff, students and assets. That the College does not have adequate risk management processes and procedures in place. 		
RELEVANT STRATEGIC AIM:	 Successful Students The Highest Quality Education and Support Sustainable Behaviours 		
SUMMARY OF REPORT:	 3 new recommendations were added in the quarter. 8 recommendations have been closed off during the same period. There are now 21 outstanding recommendations on the monitor covering 3 Staff Recruitment & Retention, 4 Budgetary Control, 4 Student Support Funds, 4 Student Activity (Credits), 1 Publications and Communications, 1 Procurement and Purchasing/Creditors, 3 Business Process Review Space Management/Room Utilisation and 1 Payroll & Pension Management. Resources have been constrained throughout the quarter, with unexpected staff absences alongside unfilled vacancies. There are also ongoing system implementations across the departments that have required significant time investment. The Committee is also advised that the audit reports for Building Maintenance, Student Funding and Environmental Sustainability are to be presented at the Audit & Risk Committee on 2nd December and any recommendations related to those assignments will be reflected in the next update in February 2026. 		

1 INTRODUCTION

1.1. This paper provides an update of the College's progress in responding to Internal Audit Recommendations from prior audit engagements. It is a centralised point of reference for logging of all actions taken to ensure that the recommendations are enacted. The report is subject to an internal review by the Senior Leadership Team (SLT) on a quarterly basis, with updates provided by the owner of the recommendations. This ensures sufficient focus and commitment from the College to ensure that recommendations are accepted and enacted.

2 BACKGROUND

2.1 Internal Audit is a necessary function to ensure good governance and control within each area of college operations. The report details findings from Internal Audits with College management response to those findings and suggestions as to timeframes for completion of work required to address concerns raised.

3 CYBER SECURITY

- 3.1 The one audit recommendation was closed off in the quarter.
- 3.2 The Incident Response Process, and supporting playbooks, that was originally in plan for the SLT at the Staff Development Day in December 2024 had been moved to November 2025 due to competing priorities. The first internal session was duly completed in November 2025, with the first external training scheduled for March 2026. Annual training will be required to ensure that this recommendation remains closed.

4 HEALTH & SAFETY

- 4.1 The College has now closed the 1 remaining recommendation.
- 4.2 With a new Health & Safety Advisor now in post under the responsibility of People Services, an annual Health & Safety report has been drafted for consideration at the November 2025 People and Culture Committee.

5 STAFF RECRUITMENT & RETENTION

- 5.1 Three recommendations remain in progress as at November 2025. The College remains committed to improving its staff recruitment and retention management and work is underway to ensure full compliance with the following recommendations through refreshment of key policies and procedures and through the implementation of the new HR system which is and will continue to improve reporting capabilities.
- 5.2 The new HR system is now the lead payroll system at the College however as has been previously advised, there have been delays in the project, leading to delays in various modules, for which HR estimates a revised timeline for completion of December 2025 and May 2026.
- 5.3 In addition, owing to the work ongoing with the pension contribution project and the restructure and voluntary severance, the prioritisation of refreshing dated policies procedures and specifically, implementing a Recruitment Policy, have been pushed out. Subsequent progress updates will be brought to the next committee meeting.

6 BUDGETARY CONTROL

- 6.1 The College remains committed to enhancing the quality of financial reporting and specifically the annual budget process through the closure of the remaining 4 audit recommendations.
- 6.2 It was planned that for the budget setting process for 2025-26, progress would be made to fully document a budget process and ensure Budgeting takes account of scenario planning with detailed local input from budget holders, instead of a central framework. This was not possible due to the Head of Finance being appointed in the middle of the process. However, a more detailed review of all expense streams was considered, along with a robust review of all income. There was also a detailed analysis of capital expenditure undertaken by the College's internal CAPEX team.
- 6.3 With the new Head of Finance now in post work to embed a more formalised month end process is still ongoing. There is work being done on a month end pack to enhance the output for all curriculum and support areas, to allow budget holders to control their own individual budgets, to allow for greater scrutiny and accountability.
- 6.4 In respect of training for Budget holders in budget and financial information, Head of Digital and Head of Finance attended the Curriculum Management meeting to describe how the budget process was set, and how this would be set in future years, advising that the budget holders would be more involved in the process. An excel version of budget reports is being targeted for release to budget holders in early December, containing results from the new Academic year for 2025-26 to date.

7 STUDENT SUPPORT FUNDS

- 7.1 The College recognises the importance of the student support funds audit and the role that the College plays in administering public funds to qualifying students. There are 4 outstanding audit recommendations on the monitor as at November 2025.
- 7.2 These recommendations are now expected to be completed by February 2026, once the full quota of students is contained within the FES return and new processes can be tested and evidenced during the audit preparation phases for the return.
- 7.3 Monthly check of FES categories will be implemented to ensure any miscategorised students will have their details corrected by the student support team before any over/under payment takes place prior to the end of the academic year.

8 STUDENT ACTIVITY (CREDITS)

- 8.1 The College is committed to ensuring upmost accuracy in credit claims for student activity through greater data checks and through the latter implementation of a new student record system to auto-enhance data integrity.
- 8.2 The College has closed 1 recommendation from 2023/24 during the audit cycle in September 2025 and expects to close the residual 1 audit recommendations, which has been partially implemented, during 2025/26.

8.3 Additionally, the 2024/25 audit has identified a further 3 recommendations which the Head of Digital is hoping to close between April and September 2026.

9 PUBLICITY AND COMMUNICATIONS

- 9.1 The audit focused on the systems in place within the College for the management of positive and negative publicity externally, and internal communication.
- 9.2 As reported in August 2025, the Vice Principal for Finance, Resources & Sustainability was unable to attend the Media Training course in March 2025 due to illness. The training has been rescheduled for March 2026, so once completed, the 1 remaining audit recommendation will be closed off.

10 PROCUREMENT AND PURCHASING/CREDITORS

- 10.1 There is 1 recommendation remaining in respect of the amendment of approvals of low value purchase orders in PECOS to Vice Principals (rather than requiring sign off by the Principal), to reduce the risk of a bottleneck at senior level. It is anticipated that all updates (including communication of all changes to relevant staff) will now be targeted by end of March 2026.
- 10.2 Owing to the ongoing College restructure and the work that will be required in PECOS to revise system parameters and approvals, it was decided to allow more time for this recommendation and ensure that the new College structure still aligns with current proposal before incurring a significant amount of rework to revise approvals again in the imminent future.
- 10.3 The College has identified the changes it would like to make, with regards to procurement thresholds, and will present these to SLT and at the next Finance & Resource Committee in February 2026. If agreed, these will be implemented to allow the audit point to be closed out fully.

11 BUSINESS PROCESS REVIEW: SPACE MANAGEMENT & ROOM UTILISATION

- 11.1 There are 3 recommendations in progress for this audit.
- 11.2 This review focused on the processes utilised by staff for the completion of course unit information, timetabling (courses, staffing and room allocation), dissemination of timetables, and calculation of room utilisation. While the review concluded that the College has a strong collaborative approach to timetabling and space management, with close working between Curriculum Managers across the College, there is room for improvement.
- 11.3 All recommendations remain in place for completion by February 2026. The Estates Strategy is in progress for launch during 2025/26 to align to the new strategic priorities which have come into effect in August 2025. A roundtable exercise was conducted in June 2025 with internal colleagues to better understand requirements of the Campus, drawing out key themes for inclusion in a revised Estates Strategy, An initial view of the Estates Strategy will be prepared and brought to Committee for consideration and wider input in due course.
- 11.4 In addition, the new access control system will support with the production of a centralised room booking system. However, the system is now only in early stages of being implemented and so the recommendation cannot be concluded at this time.

12 CONSULTANCY REVIEW: PAYROLL AND PENSIONS MANAGEMENT

- 12.1 There were 12 recommendations returned from this independently arranged audit to review controls and processed within payroll and pensions management.
- 12.2 The College acknowledges that many of the recommendations raised can only be fully completed on the full implementation of iTrent, the Payroll system and the production of reports that will support more detailed monthly checks and analysis.
- 12.3 The College has closed 5 of these recommendations during this quarter, leaving just 1 recommendation to be actioned. It may take until the end of the current academic year to close out this recommendation as the college awaits the release of new iTrent modules.

13 RESOURCE IMPLICATIONS

- 13.1 Despite the lack of closure of a larger proportion of recommendations this quarter, the Committee is asked to note that progress has been made over the summer term, despite challenges in staff absences, annual leave and the ongoing restructure and recruitment of postholders who will ultimately support with the enactment of some of these recommendations. Notably:
- 13.1.1 The Budgetary Control procedures are being actively reviewed and improved for roll out in 2026/27 budget process, with the Head of Finance now in place;
- 13.1.2 iTrent reporting capability continues to evolve to ensure reports are available to achieve more effective oversight and reporting by exception by People Services and Finance teams;
- 13.1.3 the Estates Strategy session in June 2025 was hosted to begin the process of updating and refining the Estates Strategy for wider Board consumption in due course;
- 13.1.4 The Access Control system is currently being implemented and will in due course enable the College to complete the recommendations noted under the Space Management and Room Utilisation audit, but this is a longer-term goal.
- 13.2 The Committee is also advised that the audit reports for Building Maintenance, Student Funding and Environmental Sustainability are to be presented at the Audit & Risk Committee on 2nd December and any recommendations related to those assignments will be reflected in the next update in February 2026.

14 EQUALITIES

14.1 There are no new matters for people with protected characteristics or from areas of multiple deprivation which arise from consideration of the report.

15 RISK AND ASSURANCE

- 15.1 That the College does not have appropriate internal controls to safeguard its staff, students and assets; and
- 15.2 That the College does not have adequate risk management processes and procedures in place.is is on the front cover as well, so suggest retaining if further detail is required.

16 RECOMMENDATIONS

16.1 The Committee is asked to:

- 16.1.1 Note 3 new recommendations were added as a result of the Student Activity audit.
- 16.1.2 Note 8 recommendations being marked as complete during the last quarter, with progress being made on residual recommendations.

Appendix 07.2 Audit Recommendations Monitor as at 31 October 2025



AUDIT AND RISK COMMITTEE

DATE	02 December 2025		
TITLE OF REPORT	SLC Strategic Risk Register Commentary		
REFERENCE	08.1		
AUTHOR AND CONTACT DETAILS	Paddy Feechan, Head of Finance paddy.feechan@slc.ac.uk		
PURPOSE:	To provide members with an update to the risk management		
KEY RECOMMENDATIONS/ DECISIONS:	 arrangements of the College. Members are recommended to: review and approve the strategic risk analysis contained in the College's Strategic Risk Register and the commentary therein; and note 9 amendments to risk scorings since July 2025 in respect of credits, capital spend, corporate governance, learning, employee journey and reputation. 		
RISK	That College strategic risks are not identified, and mitigating actions are not taken.		
RELEVANT STRATEGIC AIM: SUMMARY OF REPORT:	 The Student Experience People and Culture Development Growth and Innovation Sustainability Of the fifteen risks identified, 1 post mitigation score has increased, and 4 post mitigation scores have decreased. As well as this 2 pre mitigation scores have increased, and 2 pre mitigation scores have decreased. The highest risk to the College during November 2025 was in respect of financial stability and, to an extent, remains outside of the control of the College, owing to Government funding restrictions. However, the College continues to encourage full cost recovery and commercial delivery of programmes to bolster income streams. The College acknowledges that there is insufficient funding for capital and maintenance works and as the Campus continues to age, there is likely to be a higher demand for capital funding to support renovations. The restructure in the College has also delayed the ability to train the Senior Leadership Team (SLT) in Business Interruption processes. While the College recognises that it can react well to Campus closures, it cannot evidence that it has robust procedures in place for longer term business continuity without the completion of essential training. The risk register also contains assurance mapping against each risk into those assurances that are gained from internal sources (management reporting and quality assurance 		

sources (e.g. internal/external audit, Education Scotland,
Scottish Funding Council). This is to support the conclusion of
an audit recommendation from 2023/24.

1. INTRODUCTION

- 1.1. This paper provides a commentary on the College's strategic risk register as reviewed by the Risk Management Group (Senior Leadership Team) on 04 November 2025. The risk register is an important document that demonstrates the College's commitment to the establishment and maintenance of effective governance and control arrangements.
- 1.2. Commentary has been added to each risk to justify decisions to maintain risks at current levels where required.
- 1.3. The Committee raised the need to put enhanced focus on the ever-increasing area of Artificial Intelligence (AI). The use of AI in the modern world is growing and could present a huge risk for the college if not monitored and handled correctly. Within the Strategic Risk Register for November 2025 there are new columns relating to AI. The College plans to update the Risk Register accordingly, to include AI within the risk commentary itself, rather than as a separate column going forward.
- 1.4. The committee is also asked to note that the November 2025 register contains a suggested assurance mapping against each risk, indicating assurances that are gained from internal sources (management reporting and quality assurance arrangements) and those that are gained from more external sources (e.g. internal/external audit, Education Scotland, Scottish Funding Council). This is to support the conclusion of an audit recommendation from 2023/24.

2. RISK ONE - FINANCIAL STABILITY

- 2.1 Post-mitigation risk remains at 20. The political landscape is not within the control of the College and as grant funding makes up over 70% of total income, financial sustainability for the College and the wider sector remains a challenge.
- 2.2 Funding for 2025/26 largely represents a flat cash scenario with only a minimal £45k increase in learning & teaching grant funding. The College has tried to mitigate the risk of financial stability through its restructure and voluntary severance scheme.
- 2.3 The College continues to diversify income streams through the provision of full cost recovery courses and benefited from the Scottish Government 60% funding for employer National Insurance increases in 25/26.

3. RISK TWO - FAILURE OF FINANCIAL CONTROLS

- 3.1. Post mitigation risk remains at 10. This is below the inherent risk rating of 15 inferring that the management of financial controls is being sufficiently monitored by the College.
- 3.2. The newly appointed Head of Finance is now in post, offering an enhancement to the financial control environment. There is also a Finance Improvement plan being implemented, which should further enhance the environment with the introduction of temporary resource and finance system consultancy support.
- 3.3. However, it is recognised that new systems such as Itrent (Payroll System) and Unit-E (Student record systems) which will have financial interactions are not fully operational yet and so the College has maintained risk scorings to reflect that the financial control environment will only be more fully supported when these systems are completely integrated with the finance system.

4. RISK THREE - CREDIT TARGET

- 4.1. The post mitigation risk increases from 5 to 10, with inherent risk remaining at 15.
- 4.2. Not all curriculum areas have recruited to targets in August, which is reflected in the increased score and is generally expected in the early months of the Academic Year prior to January intakes. Mitigations are actively being made by curriculum to maximise class sizes.
- 4.3. Modern Apprenticeship (MA) monitoring continues, following the changes in the performance indicator (PI) from the previous risk review. Monthly finance and resources meetings continue to assure that all external contracts (inlc. MA's) are closely monitored. If there are any risk emerging, there are changes made to support these contracts.

5. RISK FOUR - THERE IS A BREACH OF LEGISLATION AND ASSOCIATED REGULATIONS

- 5.1. The College continues to be confident that its arrangements for legislation compliance (including GDPR, HR. Quality and Finance) means that it can record a lower risk score. The latest review has not flagged any concerns or requirement to change the inherent risk score or the post mitigation score.
- 5.2. The description of this risk has been enhanced to include HR, Quality and Finance so as to ensure that it is broader in scope.
- 5.3. The ownership of data protection has been transferred from MIS to Governance. There will be shared ownership for a handover period, to ensure a successful transition.

6. RISK FIVE - CAPITAL FUNDING REQUIREMENTS

- 6.1. The inherent risk score has increased from 12 to 16. There has been no change to post-mitigation risk scoring of 12.
- 6.2. The College acknowledges that there is insufficient funding for capital and maintenance works and as the Campus continues to age, there is likely to be a higher demand for capital funding to support renovations.
- 6.3. In the last quarter, ongoing concerns have been voiced regarding the robustness of the existing cladding and a further issue with one of the lifts in the College, for which the College has noted an expression of interest in securing Scottish Funding Council SFC Emergency capital funding, given an estimated cost of circa £320k,
- 6.4. Mitigations include quarterly CAPEX meetings to ensure progress is being made on capital projects that are priority. However, the College recognises that it needs to implement a capital investment plan and related policy to ensure that projects are planned and scheduled across the year and processes for the approval of large-scale works are being followed. This will be progressed in the coming months.

7. RISK SIX – THERE IS A BREACH OF LEGISLATION AND ASSOCIATED REGULATIONS IN RESPECT OF HEALTH AND SAFETY

- 7.1. The inherent risk score remains at 15, with post mitigation risk remaining as it was in the prior quarter, at a score of 10.
- 7.2. Staff resource continues to work to capacity to get through policies and procedures updates as required. Regular H&S Committee meetings take place internally to ensure

- follow up and closure of key actions raised. Compliance with H&S related audits and inspections is standard practice at the College.
- 7.3. The new Health & Safety is now in post, reporting to People Services. There is continued support in this area from the Facilities department to allow for a smooth transition to the new area. The role has brought in a few enhanced measures already, with a view to further improvements. The score reflects the continued focus during transition but will be monitored for improvement in the coming quarters.

8. RISK SEVEN - BUSINESS INTERRUPTION

- 8.1. Inherent risk score remains at 15 and post mitigation risk score stays constant at 12.
- 8.2. The restructure in the College has delayed the ability to train the Senior Leadership Team (SLT) while changes to staffing are occurring. Once all postholders are appointed and the restructure is in place, the College will go through BCP testing with the SLT with AJ Gallaghers, the insurance provider. The initial training for SLT, given internally, took place in November, with the external training scheduled for March 2026.
- 8.3. While the College recognises that it can react well to storms and unexpected Campus closures and staff can perform their duties remotely, it cannot evidence that it has robust procedures in place for longer term business continuity without the completion of training for a broader range and severity of incidents (e.g. fire, flood damage, cyber attack).

9. RISK EIGHT - DAMAGE TO THE INTEGRITY OF MANAGEMENT INFORMATION SYSTEMS

- 9.1. The risk scoring has been maintained at 6 (inherent risk) and 3 (post-mitigation risk) respectively.
- 9.2. As per last quarter, the College is aware that to keep this as an area green, completion of the audit recommendation for incident response for SLT and continual staff training will need to be maintained. The first step has taken in place in November, with internal training, with externally led training to follow in March 2026.

10. RISK NINE – FAILURE TO ACHIEVE ACCEPTABLY HIGH LEVELS OF LEARNING AND TEACHING AND ASSESSMENT

- 10.1. The inherent risk score is 12, whilst the post-mitigation risk has remained at 4.
- 10.2. The restructure within the Quality department, coupled with 'quality' now being formally embedded within the Curriculum Manager role, helps to mitigate against this risk going forward.

11. RISK TEN - THERE IS A FAILURE TO PROVIDE AN ENGAGING AND EFFECTIVE EMPLOYEE JOURNEY

- 11.1. There has been an increase to the inherent risk scoring, moving from 8 to 16; alternatively post-mitigation risk has decreased from 16 to 8.
- 11.2. There has been an engaging Consultation process to support the restructure of the College and its voluntary severance programme. People Services roles will now include enhanced engagement with employees and managers across the College. Furthermore, the College continues to engage with College Employers Scotland and trade unions during this period of change for support staff representation.

11.3. The People Service Advisor role has been changed. Now each department will have their own dedicated Advisor in a business partnering model, which should also enhance the employee journey. Internal training and development are ongoing to support the new post holders.

12. RISK ELEVEN - THERE IS A FAILURE TO SAFEGUARD THE HEALTH AND WELLBEING OF STAFF AND STUDENTS

- 12.1. There has been no change to risk scorings, with inherent risk at 9 and post-mitigation risk remaining at 3.
- 12.2. As advised previously, this is a positive area for the College and Student and Staff wellbeing and safety continues to be of upmost importance. Policies and procedures are well embedded, and the College is currently undertaking the welfare student internal audit with Henderson Loggie.
- 12.3. The College remains up to date with new legislation, such as Martyn's law, and is viewing the future investment in security guards on Campus as a further mitigation against this risk.

13. RISK TWELVE - THERE IS A FAILURE TO PROVIDE A ROBUST LEARNER EXPERIENCE TO SUPPORT ONWARD PROGRESSION

- 13.1. There has been no change to the inherent risk scoring (staying at 8) but the post-mitigation risk has dropped from 12 to 4.
- 13.2. Students failing to engage with the bursary assessment process as early as possible continues to cause delays in students receiving funding which can adversely affect attendance and attainment. However, it is noted that the Bursary team have worked conscientiously to support bursary applications, and much progress has been made across the last year.
- 13.3. There are also students who are still waiting for needs assessments and while these cases are outstanding, there is a risk to those students in being able to complete their studies with appropriate support and ultimately progressing to positive destinations post-College.
- 13.4. However, as advised previously, mitigations include the restructure of Extended Learning Support (ELS) at the College which will further support the student experience when postholders are appointed.
- 13.5. Curriculum planning meetings have also taken place across all areas. These have been supported by stakeholder engagement and a focus on future skills requirements. These should prepare students for a more progressive pathway.

14. RISK THIRTEEN - FAILURE OF CORPORATE GOVERNANCE

- 14.1. There are reductions to the scoring of this risk in November 2025. Inherent risk has reduced from 25 to 12, and the post mitigation score has reduced from 20 to 6.
- 14.2. The scores had previously taken a sharp increase primarily due to the delay by the Scottish Government of the appointment of the Regional Chair. This has since been remedied, and the Board are actively recruiting dynamic members to enhance Board membership.

- 14.3. The External Effectiveness Review also demonstrated the robust governance in place at the College.
- 14.4. Training and Induction of new Board members regularly occurs, with the support of the Governance Professional and College Development Network.
- 14.5. The Board were invited to attend the Board Development Day at the college in November. This session was well attended, and initial feedback from the session was positive.

15. RISK FOURTEEN - ADVERSE REPUTATIONAL RISK

- 15.1. There is a change to the inherent risk scoring, dropping from 16 to 12. Post mitigation risk has also decreased, from 12 to 9.
- 15.2. The employment tribunal concluded in December 2024 with the result going in favour of the College. However, the College remains vigilant to a 3(10) ruling lodged by the appellant and so makes no change to its risk scorings in this intervening period.
- 15.3. New Board member inductions are ongoing and follow a robust programme. The recruitment of new members also follows a rigorous process.
- 15.4. The College's Principal and Governance Professional are both members of the Good Governance Steering Group.

16. RISK FIFTEEN - THE MEETING OF NET ZERO SUSTAINABILITY PRIORITIES

- 16.1. The inherent risk scoring has been maintained at 9, with post-mitigation risk remaining at 6. It will be increasingly difficult for the College to drive forward with larger capital investments to support net zero if funding is not available.
- 16.2. The Scottish Government is currently consulting with stakeholders to inform the new statutory guidance for reporting on climate change duties under the Climate Change (Scotland) Action 2009. The Climate Change Leads are working with the Environmental Association of Universities and Colleges to compile the College's response.
- 16.3. The College, through its Climate Change Action Team, continues to demonstrate a healthy engagement with all internal and external requirements in respect of environmental sustainability. The College recently attended a Teams call in November 2025 with South Lanarkshire Council to discuss potential for District Heating Networks in East Kilbride.
- 16.4. As set out in the planned restructure for the College, a 1 FTE Sustainability Officer post will be created. This position should mitigate risk further by enabling the College to have a dedicated resource to establish more sustainable practices and to identify available funding streams.

17. CYBER RISK REGISTER

- 17.1. The Committee is asked to note that actions outstanding have now been completed, mainly supporting risks that were already green.
- 17.2. There are no changes to the scoring in this risk register.

18. DATA PROTECTION ICO ACCOUNTABILITY TRACKER

- 18.1. The Committee is asked to note that the following:
 - 18.1.1 Data protection monitoring and compliance has moved to the Governance Professional and will be reviewed in academic session 2025-26.
 - 18.1.2 There is no change to the work undertaken to date.

19. EQUALITIES

19.1. There are no new matters for people with protected characteristics or from areas of multiple deprivation which arise from consideration of the report.

20. RISK AND ASSURANCE

20.1. That College strategic risks are not identified, and mitigating actions are not taken.

21. RECOMMENDATIONS

- 21.1. Members are recommended to:
 - 21.1.1 review and approve the strategic risk analysis contained in the College's Strategic Risk Register and the commentary therein; and
 - 21.1.2 note 9 amendments to risk scorings since July 2025 in respect of credits, capital spend, corporate governance, learning, employee journey and reputation.

APPENDICES

Document 08.2 The College's Strategic Risk Register

Document 08.3 SLC Cyber Risk Register

Document 08.4 SLC Data Protection ICO Accountability Tracker



DATE	12 November 2025		
TITLE OF REPORT	Cyber Risk Register Update – Nov 2025		
REFERENCE	08.3A		
AUTHOR AND CONTACT DETAILS	Chris Sumner, Head of Digital chris.sumner@slc.ac.uk		
PURPOSE:	Informational update on the cyber risk register and any major changes to the scores.		
KEY RECOMMENDATIONS/ DECISIONS:	 Members are asked to: Note the contents of the risk register Note the updates in Column V (Comments) from our Depute head and the work on-going to maintain or improve our scores. 		
RISK	Cyber security risk leading to potential consequences, such as financial loss, reputational damage, or operational disruption.		
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability 		
SUMMARY OF REPORT:	This is a standard review and update of any risks within the College's cyber risk register. The scores have been reviewed, and the College is pleased to say that nothing has been increased. There are several new systems/software changes coming in the next few months which will make a positive change to some of the risks that are still progressing to green.		
	Please use the "comments" column to view the comments of the Depute Head of Digital for each risk. As a summary the College is currently:		
	 Using new software from Microsoft and improving our defences at computer level Increasing the training for staff Turning on new functions for our current software such as backup systems and vulnerability scanners Looking to purchase additional log monitoring software through a shared service with Jisc (Acumen) To note the College have also had the bi-annual cyber board 		
	report which will form part of the ARC committee papers		



DATE	12 November 2025		
TITLE OF REPORT	SLC Bi-annual Cyber Report – Nov 2025		
REFERENCE			
AUTHOR AND CONTACT DETAILS	Chris Sumner, Head of Digital chris.sumner@slc.ac.uk		
PURPOSE:	This is bi-annual report to give an insight into the controls and KPI's the College has regarding cyber security. This allows Members to be assured of the monitoring of cyber incidents, threats and improvements to the College's service.		
KEY RECOMMENDATIONS/ DECISIONS:	 Members are asked to: note the contents of the bi-annual report; raise any questions about abbreviations or computer jargon so the reporting can be improved; and question the statistics and key performance indicators (KPIs) being used. 		
RISK	Cyber security risk leading to potential consequences, such as financial loss, reputational damage, or operational disruption.		
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability 		
SUMMARY OF REPORT:	 This is the first time the College has had a cyber report of this kind. The template is from the information security shared service, HEFESTIS. The template had a lot of KPI's that could be used, however, to ensure it was not too technical the IT Team reviewed it to provide easy to obtain relevant KPI data for Members to be assured of the Colleges' cyber security position, other than the information given in the risk register. The report shows general overview of the College's cyber position, framework descriptions and progress made on cyber tasks. The sections of particular interest and areas for improvement. The report will be improved each time the College reviews the KPIs, some will just be figures whereas items such as the incident response and business continuity will have additions to the report due to the on-going work in those areas. 		

	Members are also welcome to suggest areas of KPI's that they would like to see in the report in the future.
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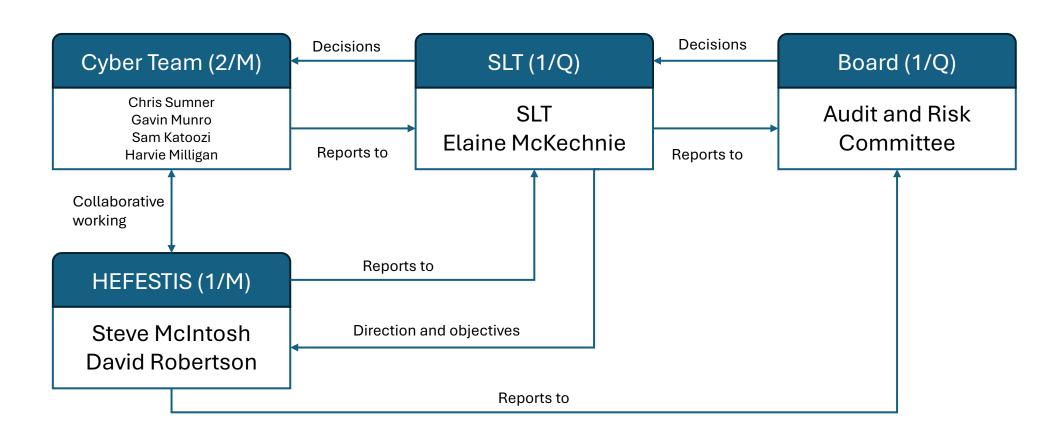
Bi-Annual Cyber Report November 2025

Chris Sumner

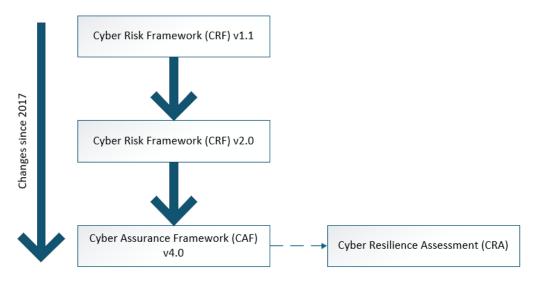
Head of Digital

Chris.Sumner@slc.ac.uk

Governance Organisational Structure



Compliance Monitoring Scottish Government Frameworks



https://www.gov.scot/news/keeping-scotland-digitally-secure/

Cyber Risk Framework (CRF) v1.1

Original framework which was launched as the public sector cyber action plan in 2017 and had only 1 revision from 1.0 to 1.1. Many of the sections of this framework have stayed however, it was previously based on a 3-tier system, which was Baseline, Target and Advanced

Cyber Risk Framework (CRF) v2.0

This was introduced at the end of 2023, in a similar layout to the original 1.1 version. This is the current framework for assessing cyber risk. The biggest difference is changes to the tier system going from 3 down to 2 tiers. Tier 1 is the original Baseline and Target items, and Tier 2 is the advanced items. As of June 2025, the CRF v2.0 will be retired for the Cyber assurance Framework below

Cyber Assurance Framework (CAF) v4.0

Scottish Government decided that the CRF was doing the same work as the UK Government and pulled support for the CRF. The UK Government have this framework already established and future reports for the board will be based on this framework

Cyber Resilience Assessment (CRA)

As part of the Scottish Government changes from CRF to CAF, they have introduced the "Cyber Observatory" and from that all colleges are to complete the cyber resilience assessment by December 5th. This is a far smaller assessment but does form part of this compliance. This is alongside the UK Government CAF assessments

Compliance Monitoring Cyber Resilience Framework (CRF) – Tier System (1 and 2)

Tier Changes 2023 to 2025

There has been progression from different versions of the CRF where there were 3 tiers to 2 tiers. The future of the framework will remain at 2 tiers.

To explain the tiers further and why it's important to look at Tier 1 specifically is explained in this table. If the basics are covered in our approach with SLC the Tier 1 system will protect most risks. The Tier 2 issues/items are far more advanced and are very focused. To breach or hack our system for a Tier 2 item it would need to be a highly sophisticated and targeted attack.

The focus has been at Tier 1 and from this point forward in the report, the scoring is based on Tier 1 analysis. However, in the next report we will be able to introduce the Tier 2 items as part of the new CAF assessment.

Feature	Tier 1	Tier 2
Privilege Level	Allows highly privileged	Allows privileged functions.
	functions.	
Scope of Access	Access typically applies to a	Access is limited to a small
	wide range of critical	number of components.
	systems. Access is	
	constrained compared to	
	Tier 0, but still broad.	
Impact of Compromise	Could cause widespread	Impact is more limited,
	disruption to essential	requiring an attacker to
	functions.	compromise additional
		systems for a wider impact.
Purpose	To manage the most	To manage access to less
	significant administrative	critical, or more isolated,
	access points to critical	components that still
	infrastructure (short of the	require some level of
	foundational root of trust,	privilege
	Tier 0).	

Compliance Monitoring Cyber Essentials

CE Basic/Plus

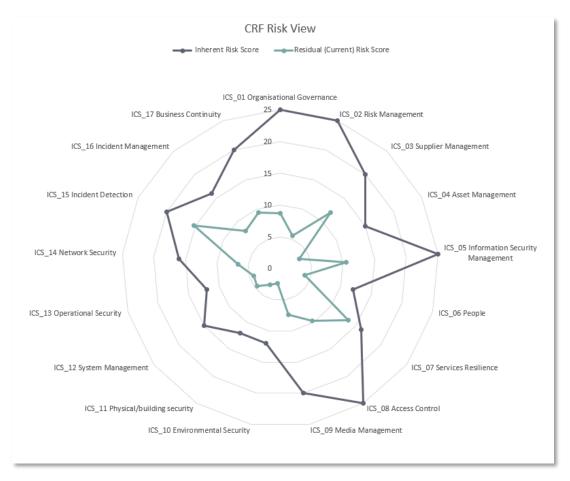


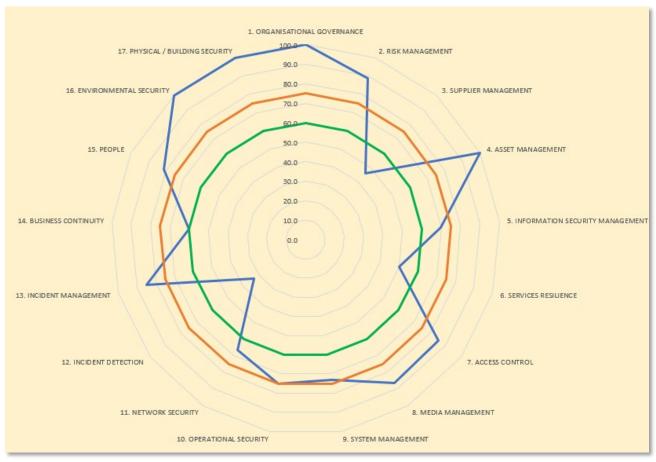
NCSC Certificate Search - Cyber Essentials



Compliance Monitoring Cyber Resilience Framework (CRF)

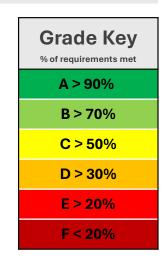
Scoring - CRF v1.1 to CRF v2.0





Compliance Monitoring Public Sector CRF – Tier 1 24/25

	Manage		Protect	Detect		Respond & Recover		
А	Organisational Governance	С	Information Security Management		D	Incident Detection	В	Incident Management
В	Risk Management	В	People				С	Business Continuity
D	Supplier Management	С	Service Resilience					
А	Asset Management	В	Access Control					
		В	Media Management					
		Α	Environmental Security					
		Α	Physical Building Security					
		В	System Management					
		В	Operational Security					
		С	Network Security					

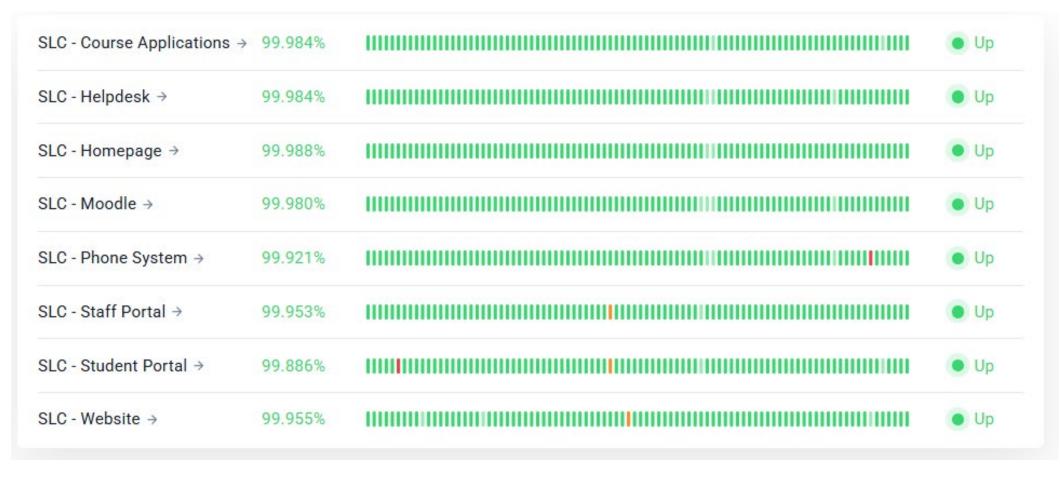


Supplier Management Core KPIs

KPI	Description	Purpose	Nov 2025
Supplier Risk Assessment Completion Rate	Percentage of suppliers assessed for cyber and data protection risks.	Ensures due diligence and risk visibility.	Current Position: APUC framework purchases have cyber security and data protection requirements as part of the T&C's for the software contracts. Our supplier list includes around 46 suppliers of which 5 suppliers are not via an APUC framework or T&C's. Meaning that our supplier risk assessment completion rate is roughly 89% The 11% of suppliers not assessed may have cyber and data protection controls in place however, it is not been collected and reviewed by SLC IT staff. Improvements to be made: - Ensure suppliers are on frameworks or have some sort of cyber risk assessment. - Ensure that suppliers are performing to contractual standards (Microsoft, Turnitin)
Response Time to Supplier Issues	Average time taken to respond to supplier-related security or service issues.	Measures agility and coordination.	Current Position: Most suppliers have a software status page which is displayed on the next few slides. One of these is our dashboard which includes our own servers as well as cloud provided services. Microsoft currently don't have a dashboard for monitoring, but incidents are displayed on the log. Recent global outage only slightly affected us due to our hybrid setup Improvements to be made: - Dashboard for monitoring Microsoft services - Obtain access to other new cloud services that maybe missing. (Bluqube, Skillsminer)

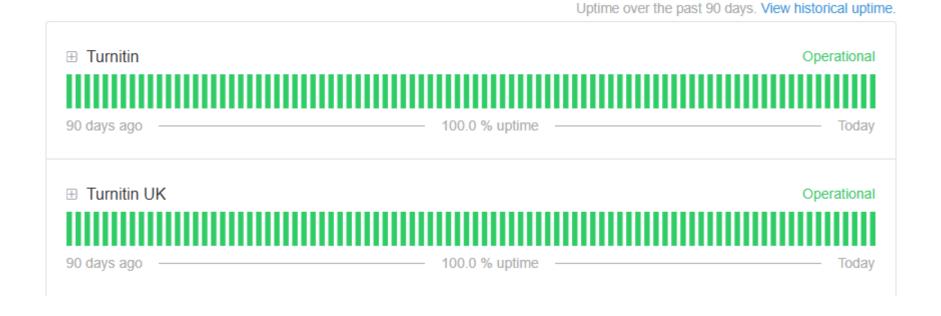
Supplier Management SLC Uptime

SLC - Uptime Robot



Supplier Management Turnitin Uptime

Turnitin Status Page



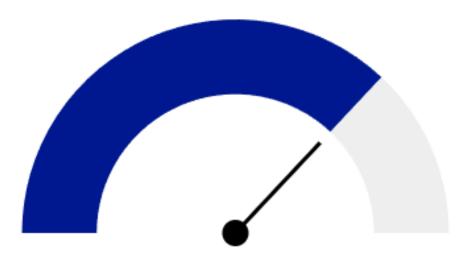
Data Security Core Data Security KPIs

KPI	Description	Purpose	
Data Classification Coverage	Percentage of institutional data that has been classified (e.g. public, internal, confidential).	Ensures visibility and appropriate handling of sensitive data.	Current Position: Microsoft allows us to monitor the data control in the college. On the next slide, we display the overall posture score and breakdown. If we had a data loss or incidents, this score would automatically change. We also have not fully utilised the Microsoft Purview software so an example of scores is shown Improvements to be made: - Fully enable the purview system and report the scores for easy "wins" - Staff training on Microsoft 365 Compliance
Access Control Effectiveness	Percentage of data assets with role-based access controls correctly applied.	Reduces risk of unauthorised access and supports least privilege.	Current Position: We are currently using the Microsoft Defender service for risky users. Again, there is an overview score which benchmarks you against other organisations of similar size. We currently at 54% against a benchmark of 48%, which initial sounds low however, the breakdown of scoring shows that we have some work to do around the control of "Apps" Improvements to be made: - Use the dashboard to improve scores - Transition to Microsoft Defender for our main security platform from "withsecure"
Encryption Coverage	Percentage of sensitive data encrypted at rest and in transit.	Measures compliance with data protection standards.	Current Position: Encryption has always been well maintained by the college and we have encryption on ever device. However, we have moved to intune for monitoring of our successfully deployed encryption by a software called bitlocker. Improvements to be made: - Maintain the deployment and re-encryption for data at rest - Improve the email encryption process with the move off old mail flows

Data Security Data Classification (Purview)

Overall compliance score

Your compliance score: 74%



11816/15917 points achieved

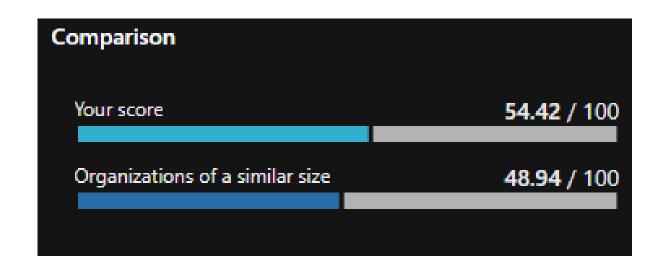
Solutions that affect your score

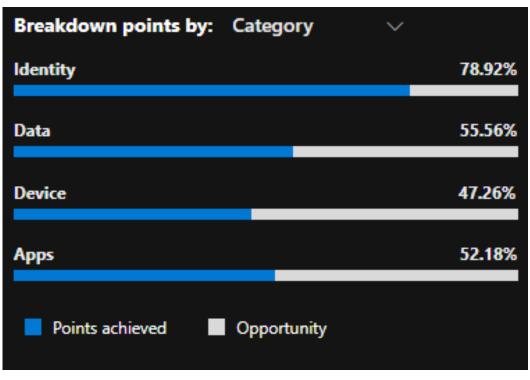
Taking key actions in your compliance solutions will increase your overall score.

Solution	Score contribution	Remaining actions
Audit	0/54 points	10
Azure Information Protection	0/54 points	2
Cloud App Commit	0/54	17
COMIN COMIN	ig sooi	4
Complianc		
Data investigation	0/12 points	2
Data loss prevention	0/82 points	4
Exchange	0/119 points	7
Exchange Online Protection	0/135 points	5

Data Security

Identity (Access Control) – Microsoft Defender





Data Security

Intune BitLocker Deployment (Encryption Coverage)

Device and user check-in status

4474

Error

Conflict 331

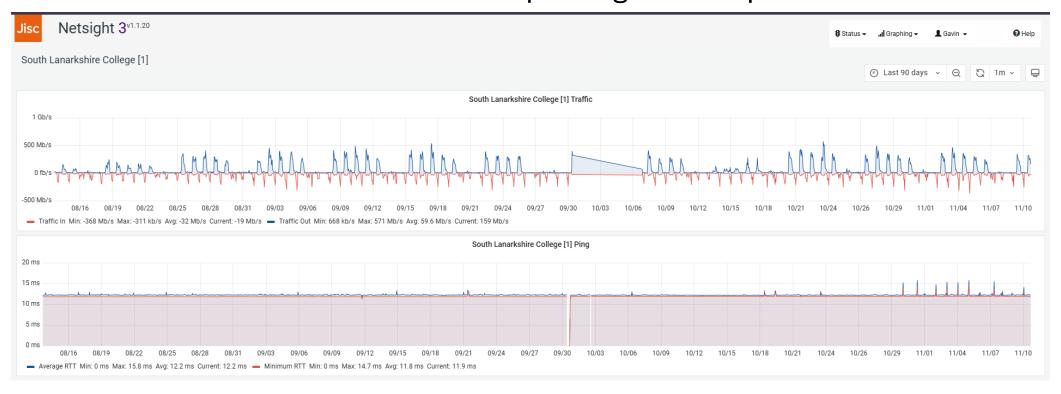
Not applicabl

In Progress

Network Security Perimeter Firewall

Connection Information – Jisc Netsight

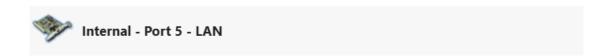
Campus connection: 2 x 1Gbps (Passive Failover) – 1Gbps active Utilisation: low 250Mbs – med 500Mbps – high 750Mbps



Network Security

Perimeter Firewall (Rate and Intrusion Prevention/Detection)

Firewall - Smoothwall



Interface ethE

MAC Address f8:f2:1e:ee:b7:70

IP Address 10.40.1.17 Netmask 255.255.0.0

Broadcast Address

10.40.255.255

MTU 1500

Sent / Received

Bytes 5.3 TiB / 3.6 TiB

Sent Total 5391494258

Sent Errors 0 (Dropped: 0 Overruns: 0 Carrier:

0)

Received Total 3963602745

Received Errors 6507 (Dropped: 11603175 Overruns: 0 Frame: 6507)



IPS alert occurances

Priority	Date:	The second second	This month
High			74
Medium			186
Low			53
Portscan			0
-			0

IDS alert occurrences

Priority	The State of	This month
High		237
Medium	100	3433
Low		4
Portscan		0
-		0

Incident Detection Threat Analytics

Recent Publications or Threat Level changes

It's important that we continue to review the threat horizon as it may inform the changes in risk in the cyber risk register. As a KPI for this report, any recent publications can inform the potential impact of recent attacks and breaches.

The most recent publication from UK government was a review of the economic impacts of cyber attacks which was issued on the 12th November 2025. Link to the full report is below:

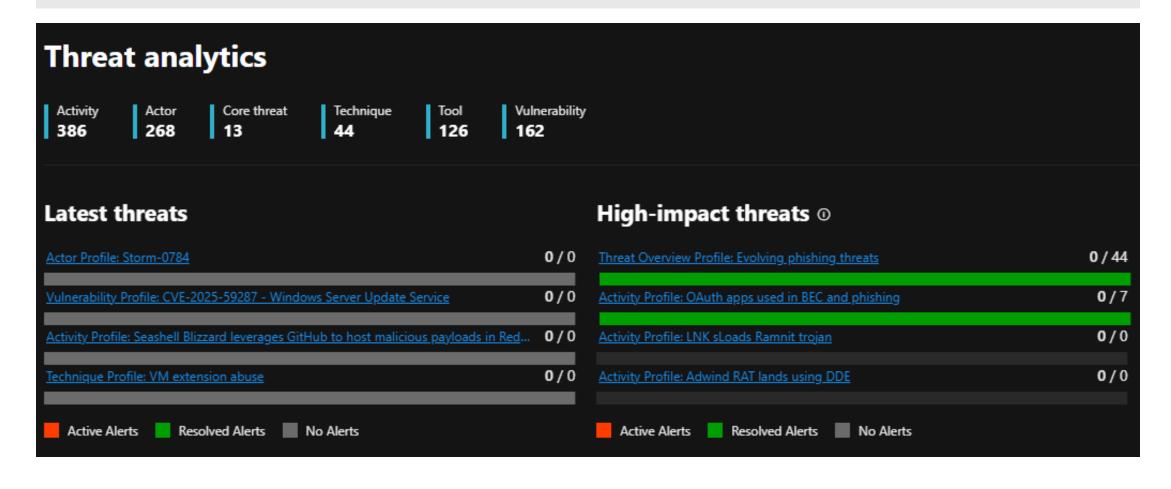
https://www.gov.uk/government/publications/independentresearch-on-the-economic-impact-of-cyber-attacks-on-theuk

Key Statistics From the UK Gov Report (12/11/2025)

- The average cost of a significant cyber attack for an individual business in the UK is almost £195,000.
- Scaling this to an annual UK cost, generates an estimate of £14.7 billion, equivalent to 0.5% of the UK's GDP.
- Frontier Economics estimates that 437,000 people became victims of fraud due to data breaches that took place in 2023. This is approximately 11% of all the estimated victims of fraud in the 2023 Crime Survey for England and Wales.
- Libraries: A cyber attack resulting in eleven days of disruption to library services is estimated to cost £0.02 million, with an estimated frequency of once every seven months

Incident Detection

Threat Analytics



Additional KPI's Suggested Future KPI's for this report

KPI	Description	Purpose
User Awareness and Training Completion	Percentage of staff/students completing data protection and security training.	Promotes a culture of security and reduces human error.
Business Continuity RTO and RPO Compliance	Measures the percentage of critical systems recovered within the agreed Recovery Time Objective (RTO) Recovery Point Objective (RPO) after a disruption.	Ensures that recovery times meet business expectations and minimize operational downtime. Validates that data integrity and continuity are maintained, reducing the risk of significant data loss.
Incident Response – Total Incidents and response times from detection to closure	Measure the time to detect and remediate and incident and the number of incidents per year	Ensures that incident detection rates are at a reasonable standard and that incidents are closed efficiently and safely

The board are welcome to suggest KPI's or to request deeper dives into specific areas of the framework of cyber security. This full report will be updated twice a year with the metrics showing "distance travelled" or improved KPI's



AUDIT AND RISK COMMITTEE

DATE	2 December 2025
TITLE OF REPORT	Audit Committee Remit
REFERENCE	11
AUTHOR AND CONTACT DETAILS	Vari Anderson, Governance and Compliance Professional Vari.anderson@slc.ac.uk
PURPOSE:	To request members to approve the updated Audit Committee Remit.
KEY RECOMMENDATIONS/ DECISIONS:	Members are recommended to:
RISK	That the College does not have up to date committee remits in place ensuring compliance with the Code of Good Governance for Scotland's Colleges.
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability
SUMMARY OF REPORT:	The remit of the Audit and Risk Committee has been revised to remove references to the Lanarkshire Regional Strategic Body.

1. INTRODUCTION

1.1 The purpose of this paper is to provide an overview of the updated Audit and Risk Committee Remit for the approval of all members, the full document can be found at Annex A.

2 REMIT

- 2.1 The remit covers the composition and membership of the committee and highlights in particular that the Committee and its Chair will be appointed by the Board and will consist of members with no executive responsibility for the management of the College.
- 2.2 At least one member should have a background in finance, accounting or auditing but membership should not be drawn exclusively from people with such a background. The Principal and the Chairing Member of the Board of Management cannot be members of the Audit and Risk Committee. No member of the Committee can also be a member of the Finance and Resources Committee.

3 AMENDMENT

3.1 The remit of the Audit and Risk Committee has been revised to remove references to the Lanarkshire Regional Strategic Body.

4 PURPOSE

- 4.1 The purpose of the Audit and Risk Committee is to assure the Board of Management that the College has in place a system of governance, internal controls and risk management which is being maintained and developed to meet legislation and regulations applying to the sector.
- 4.2 The Committee must support the Board and the Principal by reviewing the comprehensiveness, reliability and integrity of assurances: the College's governance, risk management and internal control framework
- 4.3 The Committee should normally meet four times a year. The internal auditor should normally attend all Audit Committee meetings, together with other staff invited to attend. The external auditor should normally attend any meetings where external audit issues are being considered or otherwise at the request of the Chair.

5 EQUALITIES

5.1 There are no new matters for people with protected characteristics or from areas of multiple deprivation which arise from consideration of the report. The Committee Remit has appropriate mechanisms of referral in place should matters relating to equalities be raised.

6 RISK

6.1 That the College does not have up to date committee remits in place ensuring compliance with the Code of Good Governance for Scotland's Colleges.

7 RECOMMENDATIONS

- 7.1 Members are recommended to:
- 7.1.1 Approve the draft Audit Committee Remit
- 7.1.2 Remit to the Board for approval



BOARD OF MANAGEMENT

AUDIT AND RISK COMMITTEE REMIT

Composition and Membership

The Board of Management will establish a Committee to the Board to be known as the Audit and Risk Committee.

The Committee and its Chair will be appointed by the Board and will consist of members with no executive responsibility for the management of the College. There shall be not less than three members. A quorum shall be three members. At least one member should have a background in finance, accounting or auditing but membership should not be drawn exclusively from people with such a background. The Committee may, if it considers it necessary or desirable, co-opt members with particular expertise to assist its work but co-opted members shall not count towards the quorum, nor shall they have voting rights. The Principal and the Chairing Member of the Board of Management cannot be members of the Audit and Risk Committee. No member of the Committee can also be a member of the Finance and Resources Committee.

In terms of the Audit & Assurance Handbook, Elected Staff and Student Board Members, being classified as executive members, should not normally be appointed to membership of this Committee but if any such are appointed then non-executive members must constitute a majority both of the committee itself and of those present and voting.

The Principal and the Vice Principal of Finance, Resources and Sustainability should normally attend each meeting at the request of the Chair.

Attendance of other Board Members shall be entirely at the discretion of the Committee Chair

The Committee will hold annually a private meeting (without College Executives present) with internal and external auditors to discuss audit issues. Audit and Risk Committee Members or the internal or external auditors may request an additional private meeting at any time should there be issues that require to be discussed.

Purpose

The purpose of the Audit and Risk Committee is to assure the Board of Management that the College has in place a system of governance, internal control and risk management which is being maintained and developed to meet legislation and regulations applying to the sector. The Committee must support the Board and the Principal by reviewing the comprehensiveness, reliability and integrity of assurances: the College's governance, risk management and internal control framework. Further detail is provided in Annex A.

Alignment with Strategic Priorities

The Audit and Risk Committee is aligned to the College's latest strategic priorities of:

- Student Experience
- Culture and People Development
- Growth and Innovation
- Sustainability

With a particular focus on the following values:

- Passionate about our roles and responsibilities
- Continually improving Delivering community and social value reducing our environmental impact.

Terms of Reference

The role of this Committee is to provide oversight and challenge regarding the progress the college is making against the duties outlined below but in addition the Committee shall consider any issues relating to strategic risk as may have been referred to it by any other Committee or by Management

Equalities

In addition to the overarching role in respect of Audit & Risk, the Committee is required to consider the implications of all decisions and recommendations being considered from the perspective of Equalities – and this will be a standing item on all committee papers.

In addition to the protected characteristics as defined by the Equalities Act 2010, the Committee shall consider equality of opportunity for all, irrespective of socio-economic background.

In the event that the Committee identifies any concerns with Equalities, the same shall be referred as appropriate to the Learning Teaching and Student Experience Committee and/or the People and Culture Committee

Collaboration and Partnership

The Committee is required, wherever possible and appropriate, to work in partnership with neighbouring Colleges, Local Authorities and Local Community Bodies to achieve the best learning outcomes for students and the most cost- effective use of resources.

Proceedings

The Committee should normally meet four times a year. The internal auditor should normally attend all Audit Committee meetings, together with other staff invited to attend. The external auditor should normally attend any meetings where external audit issues are being considered or otherwise at the request of the Chair.

Authority

The Committee is authorised by the Board to investigate any activity within the terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Board to obtain independent professional advice and to secure the attendance of non-members with relevant experience and expertise if it considers this necessary.

Duties of the Audit Committee (see Annex B)

The duties of the Committee are as follows:

Effectiveness and Financial Control

- Reviewing the processes for ensuring the effectiveness of the financial and other internal control systems;
- Ensuring that all significant losses and cases of impropriety have been properly investigated and that the internal and external auditors, the Board of Management, [the Regional Strategic Board] and SFC have been fully informed of the matter where appropriate;
- Approving and monitoring of the College's policy on fraud, irregularity and whistleblowing, and how they are applied;
- Reviewing and advising the Board of Management on its compliance with corporate governance requirements and good practice guidance;
- Monitoring, annually or more frequently, if necessary, the implementation of approved recommendations relating to both internal and external audit services and promote coordination of the two services;
- As regards securing Value for Money, ensuring that the College has systems and procedures to promote economy, efficiency and effectiveness. This may require identifying specific value for money studies.

Risk Management

- Advising the Board of Management on the concepts and requirements of risk management;
- Acting as a catalyst for risk management activity across the institution;
- Ensuring appropriate audit work on risk management;
- Bringing higher level risks, as identified in the Risk Register and discussed at Audit and Risk Committee meetings, to the attention of the Board of Management.
- For the avoidance of doubt, Risk will be a standing item on all Board and Committee agendas.

Internal Audit

- Advising the Board on the criteria for the selection, appointment and remuneration of the internal auditor;
- Considering and advising the Board of Management on the audit needs assessment and the strategic and annual audit plans;
- Considering and advising the Board of Management on internal audit reports;
- Receiving an annual report from the internal auditor, which should include an opinion on the degree of assurance that can be placed on the systems of internal control.

External Audit

- Whilst it is now the responsibility of Audit Scotland to appoint the College's external auditors, the Audit Committee should review the remuneration of the external auditor and the scope of their work, including any non-audit services provided;
- Reviewing the external auditor's Management Letter and management response and having direct access to the external auditor; reporting to the Board where contents of Management Letter contains references to lack of effectiveness of financial controls;
- Considering and advising the Board of Management on external audit reports and management letters taking into account: comments on accounting policies; compliance with accounting standards and the most recent SFC Accounts Direction; estimates and judgements used in the preparation of the financial statements; completeness of disclosure and context; and the statements on corporate governance, risk management and internal control:
- Considering the College's financial statements in conjunction with the Finance Committee and recommending, in tandem with the Finance and Resources Committee, that the Board of Management approve the Annual Report and Financial Statements each year;
- Facilitating one meeting per annum without the attendance of College officers, between Committee members and the external and internal audit providers to discuss the work undertaken during the year and any issues that may have arisen.

Other Duties

- Reviewing relevant reports from the Scottish Funding Council, Audit Scotland, the Scottish Government and other organisations;
- Monitoring the performance and effectiveness of external and internal audit, and reporting on this to the Board of Management;
- Meeting with audit providers at the joint meeting with the Finance Committee, and as required, outwith the presence of College staff, to discuss, in particular, the remit of the Committee or issues arising from the audit of the financial statements.
- Monitoring the performance and effectiveness of the College's procurement arrangements, as measured via audits and reviews undertaken by APUC;
- Monitoring the College's compliance with the Code of Good Governance for Scotland's Colleges
- Considering the College's risk appetite annually or as deemed appropriate, during the year and make a recommendation to the Board of Management for its approval;

Reporting Procedures

The Committee should direct the minutes and appropriate papers of its meetings to the Board of Management for approval. After approval, the Committee's minutes, and any appropriate papers, must then also be published on the College's website subject only to the statutory exemptions contained within the Freedom of Information Act 2000.

The Committee will produce an annual report which it will submit to the Board, accompanied by the internal auditor's annual report. A copy of this annual report must be submitted to the Funding Council within one month of being presented to the Board of Management.

Effectiveness of the Committee

The Committee shall refer to the Code for Good Governance for Scotland's Colleges and:

- Undertake an annual self-evaluation exercise of the performance of the Audit and Risk Committee which will be forwarded to the Board of Management for their information
- Prepare an annual report for the Board of Management on the performance and duties undertaken by the Committee.

ANNEX A

Terms of Reference

Terms of reference take due cognisance of the current version of the following:

- "Statement of Responsibilities of Auditors and of Audited Bodies" (Audit Scotland);
- "Audit Committee Handbook" (Scottish Government);
- "Statement of Recommended Practice Accounting for Further and Higher Education" (HE / FE SORP Board);
- "Code of Audit Practice" (Audit Scotland);
- "Financial Memorandum"
- "UK Corporate Governance Code" (Financial Reporting Council);
- "Scottish Public Finance Manual" (Scottish Government);
- "Government Financial Reporting Manual" (FreM) (UK Government)
- Financial Reporting Standards (FRS 102)
- Code of Good Governance for Scotland's Colleges

The main consideration is to ensure that the Audit Committee is independent and has sufficient authority and resources to form an opinion and to report on adequacy and effectiveness of the internal control system, including risk management and governance.

Responsibility for internal control remains fully with management, who should recognise that internal audit can only provide 'reasonable assurance' and cannot provide any guarantee against material errors, loss or fraud. Internal audit also plays a valuable role in helping management to improve systems of internal control and so to reduce the potential effects of any significant risks faced by the College. Risk management provides the opportunity for internal audit work to be efficient and focused. It does not necessarily imply that internal audit activity has to be increased.

Internal audit can also provide independent and objective consultancy advice specifically to help management improve the internal control system, including risk management and governance. In such circumstances, internal auditors apply their professional skills in a systematic and disciplined way to contribute to the achievement of corporate objectives. Such advisory work contributes to the opinion that internal audit provides on internal control, including risk management and governance.

ANNEX B

Audit Appointment – Internal Audit

- The overview of the tender process for the appointment of internal audit providers, deciding the length of the agreement and any other pertinent factors to be considered
- The consideration of the appointment of the internal audit providers following the tender process and the subsequent recommendation to the Board.
- Review of the draft plan for work presented by the internal audit providers for the term of their appointment

Governance

• Review of the remit of the Audit and Risk Committee (annually – May / June)

Also Annually

- (a) Duties related to the review of the annual audited financial statements (at the October / November meeting)
- Review of the Annual Report of the to the Board of Management and the Auditor General for Scotland (the "Annual Report"). This is to be done in conjunction with the review of the audited Financial Statements. The Committee has to agree that the draft Financial Statements can be considered by the Finance Committee. The Committee must also agree to forward the Annual Report to the Board of Management for their approval.
- Review of the external audit report of consolidated accounts
- Discussion of matters of concern with the College's external and internal audit providers that may have arisen during the year. This should be done in the absence of College staff and executive officers.

(b) Other annual duties

- Preparation of the Annual Report of the Audit and Risk Committee to the Board of Management (October / November meeting)
- The determination of the external audit fee, the range of which is advised by Audit Scotland, and the external audit plan (May / June meeting)
- Review of the draft plan for work presented by the internal audit providers for the following year, with reference to the initial appointment documentation (August / September meeting)
- Review of the audit programme of the College's Quality Audit Group (October/ November meeting)
- Completion of the self-assessment checklist from the Audit and Assurance Committee Handbook (February / March meeting)
- Consideration of Risk Appetite (May / June meeting)

Quarterly meetings

Consideration of:

- internal audit reports, including an update on progress of the annual cycle of internal audits
- College Risk Register
- the Technical Bulletins issued by Audit Scotland
- audits undertaken by external organisations such as Skills Development Scotland and the local authorities
- audits undertaken by the College's own Quality Audit Group



AUDIT AND RISK COMMITTEE MEETING

7.05.1.7	THE RICK COMMITTEE INCETING			
DATE:	2 December 2025			
AGENDA REF:	13			
TITLE OF REPORT:	Governance Rolling Review			
AUTHOR AND	Vari Anderson			
CONTACT DETAILS	vari.anderson@slc.ac.uk			
PURPOSE:	To update the Board on the most up-to-date Rolling Review			
	document and the updates made thereto.			
KEY RECOMMENDATIONS/ DECISIONS:	The Board is recommended to: Note that the Rolling Review is a dynamic document and is therefore always a work in progress and comment as appropriate on the latest version, as attached. Note the updates provided on the latest document			
RISK	 Governance is recognised as a potential strategic management risk and appropriate mitigating actions such as maintaining a dynamic Rolling Review is fully consistent with best practice. 			
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability 			
SUMMARY	 This report sets out the latest version of the Rolling Governance Review for information and comment. It focuses on the principles of good governance with subheadings of importance relating to each principle. It also includes key policies and governance documents which the College is required to keep under review. 			

1. INTRODUCTION

1.1 This paper sets out the latest version of the Rolling Governance Review.

2. BACKGROUND

2.1 The Governance Improvement Plan was established to address any identified or emerging issues identified in the ongoing review of Governance at South Lanarkshire College. This plan was completed, and the Board of Management agreed that there should now be a "Governance Rolling Review".

3. GOVERNANCE ROLLING REVIEW

- 3.1 The principles of good governance are:
 - Leadership and Strategy
 - Quality of the Student Experience
 - Accountability
 - Effectiveness
 - Relationships and Collaboration
- 3.2 The Governance Rolling Review focuses on these areas, with relevant subheadings of importance.
- 3.3 The Rolling Review now provides visible audit evidence of the role of the Board in monitoring key Policies and key Governance documents such as the Scheme of Delegation, the Committee Terms of Reference and Standing Orders all of which the College is obligated to keep under review. The review dates of key policies and procedures has been updated following the discovery that several policies had surpassed the recommended review date. Any policies in this category are in the process of being updated.
- 3.4 Robust operational systems are already in place, but it is consistent with best practice that the Board has visible oversight of all key matters affecting both governance and management.
- 3.5 Since the previous rolling review document was presented in September 2025, one green item has been amended to amber due to recent work in this area (3.2 of the rolling review).

4 RISK

4.1 Governance is recognised as a potential strategic management risk and the Audit & Risk Committee has already requested that the Governance Rolling Review should be a standing item on its agenda.

5 EQUALITIES

5.1 There are no new matters for people with protected characteristics or from areas of multiple deprivation which arise from consideration of the report.

6 RECOMMENDATIONS

- 6.1 The Board is recommended to:
- 6.1.1 Note that the Rolling Review is a dynamic document and is therefore always a work in progress and comment as appropriate on the latest

version, as attached.
6.1.2 Note the updates provided on the latest document.

ROLLING GOVERNANCE REVIEW DRAFT

The actions to deliver improvement contained in this plan will be developed and implemented to address any previously identified or emerging issues as noted by way of the "Ongoing Review of Governance" at South Lanarkshire College (SLC). This is proceeding following consultation with Board Members and Senior Staff. A RAG system has been used to enable tracking of progress against actions and timescales.

Development Categories	Issue	Action	By Whom and When	Status and Progress Update as at Nov 2025
Leadership & Strategy	1.1 Conduct in Public Life	Training in New Code of Governance to be provided	Governance Professional January 2023 already completed but Governance Professional to ensure that CDN online training completed	All Board Members should engage with the online training pack now available via CDN as part of ongoing training. All Board Members receive a comprehensive induction advising on the Code. Gordon Hunt (CDN) attending the Board Training Day on 18 November for refresher training. July 2025 Governance Professional encourages all board members to complete the CDN online training course and promotes other governance courses. (Amber)
	1.2 Vision & Strategy	Involve Trade Unions (TUs) on Board	Governance Professional	September 2025 There has been an indication from Unison that they may nominate a trade union representative in the coming months, as one of their members is currently undergoing training. November 2025 No update however it has been confirmed that not having a TU representative is not considered a breach of legislation. (Amber)
	1.3 Performance	Refresh paperwork for self-assessment and evaluation and plan for externally	Governance Professional	July 2025 GP refreshed all self-assessment paperwork and has introduced induction/leavers surveys to ensure the Board is fully evaluated.

		facilitated self- assessment review		November 2025 The externally facilitated review report was published on 30 September 2025. (Green)
	1.4 Corporate Social Responsibility	Improve dialogue & communication with all stakeholders	Principal / Chair March 2024	The stakeholder letter has now recommenced. (Green)
		Board member involvement in the understanding of learning, teaching and assessment and work of the College. Subject to agreement with teaching staff.	Principal / Vice Principal for Learning and Teaching and the Student Experience.	 This is to provide an opportunity for Board members to engage with staff and students. They may do this by: Speaking with curriculum managers or support managers; Informally (and with agreement and notification) pop into classrooms to speak to lecturers and students where appropriate. Attending (with prior agreement) team meetings. In Committee it was recommended that the Board be represented at staff events, where appropriate. GP sends out campus events to board members. (Green)
2 Quality of Student Experience	2.1 Relevant High- Quality Learning which meets local, regional and national skills needs.	Board members through strategic planning days to undertake a curriculum review.	Principal and Vice Principal for Learning, Teaching and the Student Experience Ongoing	At the April Planning Day members participated in a skills planning workshop, with external input. The Board have been kept updated on the restructure. Curriculum Planning has started with an update planned for Members at the next round of committees. (Green)
	2.2 Student and Engagement and Quality Monitoring & Oversight	Work with the Student Association (SA) and Class Reps to	Vice Principal Learning, Teaching and	Reinstate the Student Parliament with Board members attending where appropriate.

		improve Quality Monitoring feedback. Identify mechanisms for recognising and rewarding input of student body to support quality	the Student Experience Ongoing	Also, through the Board Member Conversations as outlined in 1.4 give members an opportunity to engage with students. (Amber) The Learning and Teaching Committee oversees progress of the Quality Enhancement Plan presented. Where possible the College would welcome more Board member involvement, and there has been a "Dragons Den" initiative which has been successful. July 2025 New VP is now in place and can take forward. November 2025 Newly revamped SLC Way launched incorporating student engagement. (Amber)
3 Accountability	3.1 Accountability & Delegation	Involve staff in discussions on facing challenge	Principal and VP for Finance, Resources and Sustainability	All staff receive a key message update after every Board meeting. July 2025 Staff were involved in the restructure process and a consultation was held to help shape the new roles. November 2025 SLT and middle managers attended a session with Professor Joe Little which discussed challenges faced by the college sector. College Newsletter contains the Audit Scotland, SFC College sustainability reports as (Green)
	3.2 Risk Management	Connect risk appetite to risk register	Vice Principal Finance, Resources and Sustainability	November 2025 Chair of Board, ARC, Exec Team met with Emma Tilley in early November to discuss how Henderson

3.3 Audit Committee	Membership to be adjusted in line with New Code	Governance Professional	Loggie can support the Board on risk management. Work in this area will be ongoing. (Amber) October 2025 Membership was refreshed for the first committee cycle of the academic year. Gordon Hunt from CDN attended the meeting to deliver a presentation outlining the responsibilities of Audit and Risk Committee members. (Green)
3.4 Remuneration Committee	Terms of reference to be revisited.	Governance Professional & Chair	Implemented and updated October 2025. (Green)
3.5 Financial & Institutional Sustainability	Identify opportunities and address challenges in context of "flat cash" settlement. Explore options for best use of resources to generate income. Explore options for 3 rd sector partnerships.	Principal and Vice Principals Ongoing	October 2025 Work is ongoing in this area. The VP for Student Experience and Innovation has been conducting various partnership meetings over the past few weeks. (Amber) November 2025 Note that a new SLC pipeline report has been introduced to the Finance and Resources Committee to monitor progress.
3.6 Staff Governance	Facilitate regular opportunities for Board members to engage with staff and staff representatives	Principal & Governance Professional [Ongoing]	Governance Professional advises Board Members of campus events which they can attend to engage with staff. Such as 'Pastries with a Purpose' and CLIC events. October 2025 The Staff Newsletter is running a 'Spotlight on' session to introduce the Board to staff and welcomes introductions. (Green)

		Improve information flow to appointed staff representatives	Principal & Governance Professional	Minutes are published in a timely manner on the website and 'key messages' are communicated to all staff through the staffing teams channel. (Green)
		Involve appropriately skilled staff by way of attendance at Committee Meetings and also participation in Strategy and Training days	Principal & Governance Professional	Members of SLT attend to present papers at meetings. More support staff to be encouraged to attend meetings, for example, HR Committee to be attended by HR staff, Facilities staff etc. October 2025 Staff across curriculum/professional services have been encouraged to attend meetings to do deep dives into certain areas and contribute to conversations. (Green)
4.1 Effectiveness	4.2 Board Chair	Plan for appointment of new Chair in 2024	Principal & Governance Professional June 2024	Implemented (Green)
	4.3 Senior Independent Member	Refresh Training & Support	Governance Professional	A new SIM has been appointed. CDN guidance and online training course has been sent to SIM and will be fully supported by the Governance Professional. (Green)
	4.5 Board Members	Identify Training needs	Governance Professional November 2025	November 2025 Board Member training is ongoing with new Board Members joining the Board. Skills matrix has been completed and GP continues to advise Board Members of training opportunities.
				Gordon Hunt from CDN attended the first ARC of the academic session and will be presenting at the Board Training Day. Work is ongoing for Emma Tilley to host a session on risk management for the ARC.

				(Amber)
	4.6 Principal & Chief Executive	Set objectives and identify any training needs.	Chair June 2025	October 2025 The Chair and Vice Chair have an action from the remuneration committee to set objectives for year 2025/26. (Amber)
	4.7 Governance Professional	Recruit new postholder	Board	Implemented. (Green)
		Agree overarching policy on resolving issues around grievance, breach of contract and conflict of interest	Governance Professional / Human Resources Director	The new Chairs Committee remit now provides a suitable mechanism. (Green)
	4.8 Appointment Induction & Training	New processes in anticipation of TU membership	Governance Professional	SLC has had TU observers at Committees and Board for several months. Formal induction has now taken place. (Green)
	4.9 Board Evaluation	Revisit and refresh process and procedure	Governance Professional [Ongoing]	External Effectiveness Review was positive in respect of our process and procedure. The GP will continue to revisit and refresh processes, as appropriate. (Amber)
5 Relationships & Collaboration	5.1 Partnership Working	Build Collaborative initiatives with Regional Partner	Governance Professional and Principal	July 2025 Principal is now the Chair of the College Partnership West group and attends Skills Led Regional Planning sessions. Quarterly meetings are held with South Lanarkshire Council relating to collaboration. SLC attended the Board Training Day in November to discuss opportunities. (Amber)

		Community Development	Principal and Vice Principal for Learning Teaching and the Student Experience. [Ongoing]	Ongoing. (Amber)
6 Other	6.1 Equalities	Equalities Awareness Training	Governance Professional Ongoing Training	A dedicated training session has already been provided by the former Governance Professional and is available on the Board Portal, but a refresher might usefully be considered at some future point. The Board manual now includes a briefing on this topic. (Green)
	6.2 Student Association Support & Recognition	Student Awards Funding	Management Ongoing Support	Senior staff are already supporting the SA in seeking funding from the Educational Foundation but further mechanisms for rewarding student effort are being considered. (Amber)

Schedule of Key Policies & Procedures		
Policy	Date	Due for review
Anti Bribery Policy	September 2024	September 2027
Dignity at work	July 2023	No Date – in process of being updated
Disciplinary Policy & Procedure	July 2023	June 2024 – in process of being updated
E Signature Policy	June 2024	May 2026
Equality Policy	Nov 2023	No Date – in process of being updated
Fee Waiver Policy	July 2023	July 2026
Fees Policy	June 2024	May 2025
Finance Regulations	June 2024	June 2026
Fraud & Anti Corruption Policy	June 2024	May 2027
Grievance Policy & Procedure	July 2023	November 2027
Lettings Policy	September 2024	September 2027
Procurement Policy	June 2024	April 2026
Safeguarding Policy	June 2024	August 2027
Staff Code of Conduct	Oct 2023	March 2026
Student Discipline Policy & Procedure	April 2023	August 2026
Whistleblowing Policy	July 2023	November 2030
Note that this element of the Rolling Review is	under ongoing review and further polici	es may be added at request of Committees

Schedule of Governance Documentation for Ongoing Review					
Code of Conduct	Reviewed as required by Standards	Up to date			
	Commission				
Committee Remits	For review four yearly or as required	Last review 2025			
Scheme of Delegation	Ditto	Last review 2025			
Standing Orders	Ditto	Last review 2024			
Code of Good Governance	Current edition 2024	Adopted			

Technical Bulletin 2025/3

Technical developments and emerging risks from July to September 2025





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Accessibility

Auditors can find out more and read this bulletin using assistive technology on the Audit Scotland website www.audit.scot/accessibility.

1: Introduction

Purpose

The purpose of Technical Bulletins from Audit Scotland's Innovation and Quality (I&Q) business group is to provide auditors appointed by the Auditor General for Scotland and Accounts Commission for Scotland with:

- information on the main technical developments in each sector during the quarter
- information on professional matters during the quarter that are expected to have applicability to the public sector
- summaries of responses to any requests from auditors for technical consultations with I&O.

Appointed auditors are required by the Code of Audit Practice to pay due regard to Technical Bulletins. The information on technical developments is aimed at highlighting the key points that I&Q considers auditors in the Scottish public sector require generally to be aware of. It may still be necessary for auditors to read the source material if greater detail is required in the circumstances of a specific audited body. Source material can be accessed by using the hyperlinks.

Any specific actions that I&Q recommends that auditors take are highlighted in **bold**.

Technical Bulletins are also published on the Audit Scotland <u>website</u> and therefore are available for audited bodies and other stakeholders to access. However, hyperlinks to source material indicated with an asterisk (*) link to files on Audit Scotland's SharePoint* and are only accessible by auditors.

Highlighted items

I&Q highlights in the following table a selection of the items in this Technical Bulletin that are of particular importance:

Highlighted items		
I&Q has published guidance for auditors on the certification of WGA returns [paragraph 1]	CIPFA/LASAAC has issued a consultation on the 2026/27 Code of Practice for Local Authority Accounting [paragraph 5]	Audit Scotland has issued guidance for auditors on reporting on performance in the annual audit report [paragraph 8]
I&Q has published guidance for auditors on the certification of NDR income returns [paragraph 11]	I&Q has issued two technical guidance notes related to the audit of the college sector [paragraph 23 and 26]	The SFC has issued an accounts direction and guidance notes for colleges in 2024/25 [paragraph 30]

Consulting with I&Q

Auditors should consult with I&Q by completing an <u>enquiry form</u> and submitting it to <u>TechnicalQueries@audit-scotland.gov.uk.</u>

2: All sectors

TGN on 2024/25 WGA returns

- **1.** I&Q has published a Technical Guidance Note (TGN) to provide auditors with guidance on examining and reporting on the 2024/25 Whole of Government Accounts (WGA) returns of public bodies in Scotland. TGN/WGA/25 is provided with supporting material to auditors on SharePoint* and also on the Audit Scotland website.
- 2. The National Audit Office (NAO) are the group auditor for WGA. Testing and reporting procedures that auditors are required to undertake in respect of providing assurance to the NAO on 2024/25 WGA returns above the threshold is included in the TGN. The procedures are consistent with the NAO's Group Audit Instructions but tailored to Scottish bodies. Reporting procedures include the submission of an Assurance Statement in a form prescribed by NAO.
- **3.** No examination is required for bodies below the threshold, although auditors are required to complete the first eight sections of the Assurance Statement (except for minor bodies) and submit it to the NAO.
- 4. Auditors should examine and report on the 2024/25 WGA returns of public bodies in Scotland in accordance with the TGN, and make the required submissions as soon as reasonably practicable.

3: Local Government Sector

Consultation on the 2026/27 accounting Code

- **5.** <u>CIPFA/LASAAC Local Authority Code Board</u> has issued two exposure drafts of the accounting code for 2026/27, covering:
 - Amendments to IFRS 9 and IFRS 7; and
 - Adaptations to IFRS 15 and IAS 20
- 6. The main items in the Invitation to Comment (ITC) applicable to Scotland are:

Area	Proposals
Removal of the EFA	It is proposed to remove the EFA in its current form. The Better Reporting Group is currently reviewing statutory overrides, including how they are presented in the accounts, which will impact on considerations regarding the EFA. CIPFA/LASAAC are seeking views on the removal of the EFA and replacement with an alternative statement.
Format and structure of the Code	CIPFA/LASAAC have developed two proposals for the structure and format of future Codes:
	 Proposal one is similar to the approach adopted in the Government Financial Reporting Manual (FreM) which requires users to refer directly to the underlying accounting standards. This proposal can more easily highlight divergences between the Code and the accounting standards. Proposal two is more aligned to the current Code structure and continues to set out requirements for specific elements of the accounts, incorporating wording directly from the underlying standards.
Changes to accounting standards for 2026/27 - Amendments to the classification and measurement of financial instruments (IFRS 9 and IFRS 7)	 Changes aim to clarify and improve how financial instruments are classified and measured and include: accounting for liabilities settled via electronic payment systems to ensure consistency in timing and recognition of settlement. assessing contracts for electricity from renewable sources to determine if they qualify for the own-use exemption from IFRS 9. If not, they are treated as financial instruments and measured accordingly.

Guidance is provided to support the application of hedge

Area	Proposals
	accounting for agreements not qualifying for the 'own use' exemption.
	 enhanced disclosures under IFRS 7 require authorities to consider the detail to be disclosed, the appropriate level of aggregation, and whether additional explanations to evaluate any quantitative information are required.

7. Responses to the consultation should be submitted via the <u>online survey</u> by 12 October 2025.

Performance reporting guidance 2024/25

- **8.** Audit Scotland has published <u>guidance*</u> on performance reporting in the Annual Audit Reports (AARs) for the 2024/25 audit of councils.
- **9.** The guidance sets out the following key principles for auditors to consider in their reporting on performance:
 - Present performance information clearly and succinctly, allowing conclusions on performance and trends
 - Balance reporting of local indicators and priorities against national indicators and datasets
 - Use charts and exhibits where appropriate
 - Present clear conclusions on performance
- **10.** The guidance includes a number of good practice examples from a sample of 2023/24 AAR. Auditors may wish to refer to this guidance when reporting on councils' performance in 2024/25.

2024/25 Non-domestic rates income returns

- **11.** I&Q has published TGN/NDR/25 on certifying non-domestic rates (NDR) income returns. The TGN provides guidance for auditors on the examination of the NDR income return, including highlighting the main risk areas. The TGN is provided to auditors on SharePoint* and also on the Audit Scotland website.
- 12. Auditors should certify 2024/25 NDR income returns in accordance with TGN/NDR/25

4: Central Government Sector

2024/25 remuneration report disclosure calculator

- **13.** Deloitte have issued a <u>report*</u> on the tool used by MyCSP to calculate cash equivalent transfer values (CETV) disclosure information for 2024/25 Remuneration Reports. MyCSP administer the Civil Service pension arrangements on behalf of the Cabinet Office and provide disclosure information to a number of Scottish public bodies
- **14.** The report assesses the processes and controls in place as 'Satisfactory' which means they are considered adequate in the circumstances.
- 15. Auditors should refer to this report when auditing CETV values in 2024/25.

IFRS 17 supplementary application guidance

- **16.** HM Treasury has issued supplementary application guidance to support bodies in applying paragraph B11 of IFRS 17 and in assessing whether a contract meets the definition of a financial guarantee contract under IFRS 9.
- **17.** Paragraph B11 defines insurance risk and sets the criteria for determining whether a contract falls within the scope of IFRS 17. The guidance provides common examples of contracts where bodies may need to apply IFRS 17 paragraph B11, such as:
 - where a body awards a contract to a supplier and also provides an indemnity
 - some professional indemnity insurance (PII) contracts issued to non-executive directors, which typically fall outside the scope of IFRS 17.

Amendments to SPFM

- **18.** The Scottish Government has issued two Finance Guidance Notes (FGN) which update sections of the Scottish Public Finance Manual (SPFM).
- **19.** <u>FGN 2025/4</u> expands the Major Investment projects section to provide guidance to clarify the purpose, scope and requirements of the Digital Portfolio. The update sets out the mandatory approach to be taken by relevant public bodies. This includes:
 - the criteria for inclusion in the Digital Portfolio
 - links to the portfolio processes and guidelines
 - information on the Digital Portfolio Board.
- **20.** <u>FGN 2025/5</u> amends the guidance and templates included in the AO Spend Control Process. The process is a temporary measure introduced as a result of the current challenging financial position.

- 21. For 2025/26, the process applies to:
 - expenditure in excess of £5m
 - any expenditure that is new or outside existing budgets and delivery plans, repurposes underspends, or is novel and/or contentious
- **22.** The Spend Control template should be completed after financial appraisals have been made to ensure budgetary control and approval of expenditure.

5: College Sector

TGN on risks of material misstatement in 2024/25

- **23.** I&Q has published Module 18 of the TGN 2025/1. The TGN is intended to inform auditors' judgement when identifying and assessing potential misstatements in the 2024/25 annual report and accounts of audited bodies generally. Module 18 provides:
 - guidance on applying the other modules to the audit of the 2024/25 annual report and accounts of colleges
 - supplementary guidance on the risks of misstatements in areas specific to colleges.
- **24.** Module 18 is available with the rest of the TGN and supporting material to auditors on SharePoint* and is also freely available to download from the Audit Scotland website.
- 25. Auditors are expected to pay due regard to Module 18 and use it as a primary reference source when performing 2024/25 audits of colleges. Auditors should advise I&Q of any intended departures from the guidance

Independent auditor's reports for college accounts in 2024/25

- **26.** I&Q has published TGN 2025/6(C) to provide auditors with model forms of Independent Auditor's Reports (IAR) which should be used for the 2024/25 annual accounts of colleges in Scotland.
- **27.** Auditors are required by the Code of Audit Practice to prepare their IARs in accordance with the TGN. The TGN is available with supporting material to auditors on SharePoint* and is also freely available from the Audit Scotland website.
- **28.** The model forms of IARs set out in the appendices of the TGNs have been tailored to reflect relevant legislation and augmented by the reporting requirements of the Auditor General.
- 29. There are no significant changes to the previous guidance and model IARs.

2024/25 accounts direction and guidance

- **30.** The <u>Scottish Funding Council (SFC)</u> has issued their <u>Accounts Direction for Scotland's Colleges 2024/25</u> and <u>guidance notes</u> on completion of the 2024/25 financial statements. The direction requires colleges to:
 - comply with the SORP in preparing their financial statements
 - include a Performance Report and Accountability Report in their annual report and accounts in accordance with the FReM.

- **31.** Specific mandatory disclosure requirements for colleges are set out in Appendix 2 to the direction.
- **32.** The guidance notes are designed to supplement the accounts direction and cover key disclosures in the financial statements, including model disclosure notes set out at Annexes A to F.
- **33.** There are no significant changes to the accounts direction or guidance notes from 2023/24.

6. Fraud and irregularities

This chapter provides a synopsis of a statutory report from the Controller of Audit which highlighted weaknesses in internal control at the audited body.

Auditors should consider whether weaknesses in internal control which facilitated the fraud may exist in their bodies and take the appropriate action.

Invalid supplier

34. A third party impersonated a foreign supplier and committed bank mandate fraud. The public body paid £34,000 to a fraudulent bank account.

Key features

The public body received a mandate to amend an international supplier's bank account details. The mandate was signed by their key contact at the supplier. The bank details were amended and a payment made.

The key contact at the supplier had been impersonated and their signature was forged. The issue was identified when the supplier informed the public body that the payment had not been received.

The fraud was possible as automated bank checks cannot be carried out on international bank accounts. Phone call verification was not carried out for foreign suppliers due to time differences and/or language barriers.

The public body now require any amendments to international bank details to be verified by telephone or by Teams.

Payroll expenditure

35. An employee received £12,000 of salary to which they were not entitled.

Key features

A new employee received a contract and was paid for full time employment despite working part time as agreed with their manager.

The fraud was identified when the manager reported the employee's recent absence to HR.

The fraud was possible as the manager did not notify HR that the new employee would be working part time.

The body is currently reviewing its procedures.

Technical Bulletin 2025/3 Technical developments and emerging risks from July to September 2025



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Rùnaire a' Chaibineit airson Ceartas agus Seannghaisgich Cabinet Secretary for Justice and Home Affairs Angela Constance MSP



F/T: 0300 244 4000

E: cyberresilience@gov.scot

To: Chief Executives / Principals/

Commissioners of public sector organisations

22 October 2025

Dear Public Sector Leader

Annual Public Sector Cyber Resilience Assessment

In past years you will have received correspondence from John Swinney MSP, former Deputy First Minister and Cabinet Secretary for Covid Recovery regarding your organisation's cyber resilience arrangements. Responsibility for public sector cyber resilience is now within my portfolio, and I am writing to you to seek an update on your organisation's cyber resilience maturity in continuation of this important exercise.

Cyber incidents, whether in Scotland, or worldwide, coupled with increasing global tensions, make clear to us that we must be ready – and able – to mitigate the risks. An updated Strategic Framework for a Cyber Resilient Scotland will be launched in November, and this will continue to re-emphasise that the Scottish public sector must prioritise protection of our public services so that we can defend against and respond efficiently to cyber incidents.

I am writing to ask that your organisation completes and returns the 2025 Public Sector Cyber Resilience Assessment (CRA) by 5th December 2025. The CRA is being delivered this year through the Scottish Cyber Coordination Centre's (SC3) Cyber Observatory. The Cyber Observatory is a central capability that will improve the collation, analysis and understanding of the cyber security maturity of the public sector in Scotland. Through secure, data-driven technology, the Cyber Observatory will provide better insights including identification of capability gaps and security risks, that will support I support informed decision-making and benchmarking across sectors – ultimately contributing to a more collaborative and responsive cyber security environment.

For local authorities and organisations regulated under the Network and Information Systems regulations, completed assessments and subsequent analysis will be shared confidentially as appropriate with trusted, national security cleared partners in Local Government Digital Office, Scottish Health Competent Authority or the Drinking Water Quality Regulator for Scotland for the purposes of ensuring that these sub sectors can be appropriately supported where necessary.

I am keen that we do not lose the momentum built up over the past 5 years and ensure that

we continue to further strengthen the cyber resilience of our public sector. The Assessment seeks information on the cyber resilience posture of your organisation and will allow the Scottish Government to identity any key common areas of challenge and risk across the public sector, inform future policy direction and ensure that the right kind of support can be provided where necessary.

For example, in recent years the responses have highlighted that cyber exercising continues to prove challenging for public bodies. I am sure you will agree that planning for cyber incidents should be of paramount importance to all organisations. As a result of knowledge gained from previous years, the Scottish Government has supported the sector through the provision of facilitated exercises utilising the National Cyber Security Centre's Exercise in a Box. More recently, the SC3 has launched a suite of exercise scenarios which can be used to deliver exercises online and in-person.

We intend to roll out the Cyber Resilience Assessment in phases, beginning with 9 pilot organisations today. After this first phase, guidance and support will be provided when organisations are invited into the online Observatory to complete their returns. We expect to rollout the Cyber Resilience Assessment to all public sector bodies by 5th November 2025.

Resources and available support

I recognise that ensuring strong cyber resilience can involve resource burdens for public sector organisations. The Scottish Government believes it is important that all organisations view the costs of appropriate cyber resilience as a fundamental part of the overall cost of resilient digital public services. Building cyber resilience into wider digital budgets is one potential way to support this.

We continue to encourage organisations to consider cyber resilience on a **risk-based and proportionate basis**. Unless required by regulation or external bodies, it is for individual public sector organisations to judge whether to prioritise resources to make improvements to either mitigate the risks, or to accept those risks, and that these decisions should be carefully documented within risk management processes.

The Scottish Government, through the SC3, will continue to support public sector bodies, including through the provision of:

- Regular sharing of threat intelligence with the community, through both regular threat reports and targeted Cyber Resilience Early Warning (CREW) and Threat Intelligence Priority Reporting (TIPR) notices where appropriate.
- Vulnerability Management services, including awareness raising of critical vulnerabilities relevant to the sector, triaging of vulnerability disclosures and web facing vulnerability scanning services.
- Cyber exercising advice, support and facilitation to ensure organisations are regularly testing, simulating a range of cyber security threats to the organisation and improving their incident response arrangements/..
- Incident coordination and multi-agency support to ensure that organisations who are victim to a cyber attack can receive the appropriate support and guidance. Public

Sector Bodies should follow the Public Sector Cyber Incident Notification Procedure to report cyber incidents to SC3, Police Scotland and the National Cyber Security Centre (NCSC).

Feedback

My officials stand ready to offer support and advice on the completion of the Cyber Resilience Assessment. Please send all questions and feedback to the Cyber Observatory team at cyberobservatory@gov.scot.

Finally, I would like to offer you my thanks in advance for prioritising this work. I look forward to our organisations continuing to work constructively together to ensure that Scotland's public sector is leading by example in our drive to thrive as a cyber resilient nation.

Yours sincerely,

ANGELA CONSTANCE

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AUDIT AND RISK COMMITTEE

DATE	2 December 2025
TITLE OF REPORT	SFC's Expectations of Good Governance
REFERENCE	16
LINK	SFC's Expectations of Good Governance
AUTHOR AND CONTACT DETAILS	Vari Anderson, Governance and Compliance Professional Vari.anderson@slc.ac.uk
PURPOSE:	To provide an overview and request members note the contents of the SFC's Report and the Lessons Learned carried out for the College.
KEY RECOMMENDATIONS/ DECISIONS:	 Members are recommended to: Note the terms of SFC's Expectations of Good Governance Note the terms of the lessons learned carried out for the College
EQUALITIES	There are no adverse implications for equalities identified within the attached report.
RISK	Absence of good governance practices could expose the College to reputational risk and potential breaches of the Code or relevant legislation.
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability
SUMMARY OF REPORT:	 The report aims to strengthen governance practices across colleges and universities. It draws on lessons learned from recent governance effectiveness reviews and Professor Gillies' report on the University of Dundee. The paper outlines what the Scottish Funding Council (SFC) has learned about sector governance, its expectations, and how it will monitor progress toward the Good Governance outcome within the OFAM framework. SFC commissioned a desk-based review of the latest governance effectiveness reports and governance statements. Analysis of college sector reports identified several strengths, alongside developmental areas highlighted in the report. The Gillies Report primarily addressed issues at the University of Dundee but included a section summarising broader lessons for the sector.

 EMcK previously presented a lessons-learned paper to the Audit and Risk Committee and the Board.
 VA has undertaken a similar review of the SFC publication, which was circulated to the Board on 30 September 2025 and is available here.



AUDIT AND RISK COMMITTEE

DATE	2 December 2025
TITLE OF REPORT	External Effectiveness Review
REFERENCE	17
LINK	External Effectiveness Review
AUTHOR AND CONTACT DETAILS	Vari Anderson, Governance and Compliance Professional Vari.anderson@slc.ac.uk
PURPOSE:	To provide an overview and request members note the terms of the Externally Facilitated Effectiveness Review
KEY RECOMMENDATIONS/ DECISIONS:	Members are recommended to: Note the terms of externally facilitated effectiveness review.
EQUALITIES	There are no adverse implications for equalities identified within the attached report.
RISK	Not conducting an externally facilitated effectiveness review at least once every three to five years would constitute a breach of Section D24 of the Code.
RELEVANT STRATEGIC AIM:	 The Student Experience People and Culture Development Growth and Innovation Sustainability
SUMMARY OF REPORT:	 The external effectiveness review comprised several stages designed to provide a comprehensive assessment of the Board's effectiveness. The review highlighted the Board's strong enthusiasm and commitment since the College became a Regional College The report acknowledges the exceptional challenges and significant changes since the previous effectiveness review in 2021, noting that the work undertaken has strengthened governance. It also recognised the launch of our new ambitious strategy and the robust strategic planning process that supported it. The reviewer confirmed that the Board demonstrates a clear commitment to the principles of good governance, with a rigorous approach that ensures continued best practice.

- The Rolling Review was commended for providing assurance that good governance principles are firmly embedded within our governance arrangements and Board operations.
- The report made two recommendations:
 - Building the Board Team given that over half of our members have joined in the last 18 months it is important we keep building the Board team. In order to ensure engagement with the strategic plan, the strategic planning process should be included as part of the induction. College Response: The Governance Professional's Board Induction includes a section on the strategy and the process carried out in launching this.
 - Board and Committee Papers although the volume of papers has reduced, there is recognition that there is still scope for improvement. College Response: Work is already underway to reduce the amount of papers included in the Board pack, including the introduction of cover sheets and links for Matters for Information.