

### Audit and Assurance Committee Meeting

Date of Meeting	Tuesday 10 October 2023
Paper Title	Systems of Internal Control – Annual Review
Agenda Item	11
Paper Number	AAC1-G
Responsible Officer	Jim Godfrey, Finance & Resources Director
Status	Disclosable
Action	For Decision

#### 1. Executive Summary

**1.1.** This report enables GCRB to undertake its annual review of the Systems of Internal Control.

#### 2. Recommendations

**2.1.** The Committee is invited to **comment** on, and subject to amendment, **recommend** to the Board, the annual review of the Systems of Internal Control.

#### 3. Background

- **3.1.** The Scottish Public Finance Manual (SPFM) is published by the Scottish ministers to provide guidance on the proper handling and reporting of public funds. The manual sets out the relevant financial requirements, promotes good practice and high standards of propriety.
- **3.2.** The SPFM is applicable to GCRB (and the Glasgow Colleges) and includes guidance on the systems of internal control within public bodies. The guidance was updated, by the Scottish Government in February 2023.
- **3.3.** Accountable officers are required to prepare governance statements as part of the annual report and financial statements for which they are responsible. To enable governance statements to be approved, the accountable officer requires assurances on the maintenance and review of systems of internal control.
- **3.4.** Internal systems comprise the whole network of systems established in an organisation to provide assurance that organisational objectives will be achieved, with reference to:
  - risk management;
  - the effectiveness of operations;
  - the economical and efficient use of resources;
  - compliance with applicable policies, procedures, laws and regulations;
  - safeguards against losses, including those arising from fraud, irregularity or corruption; and
  - the integrity and reliability of information and data.
- **3.5.** However, the existence of policies and procedures does not guarantee that effective controls are in place to manage the risks. Effective monitoring and review are key components of an effective system of risk management and internal control.
- **3.6.** The Board, and its committees, receive reports during the year and these reports specify the risks relating to the specific report. In reviewing these reports, the Board consider how the risks have been assessed, how they have been managed or mitigated, and the implications for the overall strategy.

#### 4. Annual Review

- **4.1.** In addition to its on-going review of risk, the Board is also required to complete an annual review of the effectiveness of its systems of internal control. To assist with the annual review, the Scottish Government publishes an internal control checklist.
- **4.2.** GCRB has undertaken annual reviews of its systems of internal control beginning in October 2017. The updated checklist has been completed for GCRB in 2023 and is attached as an annex to this report. As a result of completing this review, some issues have been identified to progress within GCRB's operational plans for 2023-24.

#### 5. Risk and Compliance Analysis

- **5.1.** The systems of internal control are designed to reduce the risks faced by GCRB. This comprehensive annual review of the internal controls identifies areas of strength that provide assurance to GCRB. This level of assurance enables the Board to be satisfied that it can complete the annual statement on the systems of internal control. This review also identifies some areas for development, and these will be taken forward within the GCRB operational plan.
- **5.2.** There are no specific legal implications arising from this paper. However, robust systems of internal control are essential in achieving the strategic ambition of having effective governance arrangements.

#### 6. Financial and Resource Analysis

**6.1.** There are no specific resource implications arising from this report.

#### 7. Equalities Implications

**7.1.** There are no equalities implications as a direct result of the report's recommendation. However, the issue of equality is specifically addressed in the checklist.

#### 8. Learner Implications

**8.1.** There are no direct learner implications of this report.

ISSUE	RESPONSE	DETAILS, INCLUDING REVIEW WORK YOU HAVE CARRIED OUT TO VERIFY RESPONSE (MANDATORY)	GUIDANCE NOTE (WHERE APPLICABLE)
1. Risk Management			
1.1 Do you have processes in place to identify and manage risks to the delivery of divisional business plans, (including objectives and targets and that this information is reviewed on an on-going basis?)	Yes/ <del>No</del>	The Board's approach to risk management has been reviewed and updated, reflecting the recommendations provided by the Internal Auditor. The Risk Register links to the objectives within the Strategic Plan. The Risk Register is reviewed at Executive Meetings and at each Board meeting. It is intended that the risk register will be updated again in 2023-24, once the board has determined its new strategic plan.	<ul> <li>Your objectives should be the focus of any risk management information; risk identification needs to be undertaken with a clear strategy and clarity of purpose. Risk identification an important part of business/project planning, managing performance and prioritising effectively. Confidence levels will be shaped by:</li> <li>the identification and recording of key business risks as part of business planning activity; regular management discussions take place that consider risks and objectives together alongside performance monitoring.</li> <li>processes that ensure the right people are involved in the management of risk and that each stage in the process is being actively recorded and managed.</li> <li>you revisit risks periodically to ensure that updates or changes to business planning activity, objectives or projects reflect the current situation.</li> <li>the maintenance of risk registers, and that there is a nominated person within your division/team with responsibility for coordinating the update of the register</li> <li>risks are owned and managed by a named person who is responsible for coordinating any actions.</li> <li>risks to delivery are discussed as often as is appropriate at key senior team and governance meetings within your division.</li> <li>You engage with your risk champion within your Directorate who has the responsibility to ensure that systems and processes are in place and are consistent with the SG Risk Management approach.</li> </ul>

1.2 Do you employ a systematic approach to help the identification and prioritisation of your risks and manage them by allocating resources proportionately in alignment with your business plans?	Yes/ <del>No</del>	The identification, and prioritisation, of risks takes place at each meeting of the Board. Information is provided by the Executive to help inform the decisions of the Board. All risks are reviewed at least once in the academic year.	<ul> <li>A systematic approach to risk identification should be taken to ensure you have a complete risk profile. Confidence levels will be shaped by:</li> <li>using a simple technique that provides a wide scan of areas that may affect objectives such a PESTLES or SWOT Analysis.</li> <li>undertaking risk identification exercises periodically and/or when priorities or circumstances change and/or when new pieces of work start.</li> <li>using available sources of data to support risk identification and prioritisation</li> <li>consideration of cost, feasibility, probability, risk appetite and the potential impact when determining how to address your risks.</li> <li>utilising diverse perspectives from stakeholders, your teams, division, directorate, project, or programme and think about what arrangements are in place in your area to ensure that risk information is supporting your decision-making.</li> </ul>
1.3 Is risk management activity within your area led from the top, actively promoted, and delivered by branch heads and team leaders alongside support from your Directorate's Risk Champion	Yes/ <del>No</del>	Risk management is led by the GCRB Executive Director and is an integral component of the work of the GCRB executive. All risks, are assigned to an owner, and progress monitored. The risk register is reviewed by the executive team on a regular basis and at each meeting of the Board and changes analysed. The risk registers of the colleges are reviewed (on a quarterly basis) by the GCRB Finance & Resources Director and a summary considered at each meeting of the GCRB Audit and Assurance Committee.	<ul> <li>Effective communication is vital to effective risk management. Confidence levels should be shaped by:</li> <li>Deputy Directors, Branch Heads and Team Leaders understand their responsibilities and are actively involved in the identification and management of risk.</li> <li>the Risk Champions within your Directorate are known and utilised to support the development of your risk management approach.</li> <li>all risks, once identified, are assigned to an owner who has responsibility for ensuring that the risk is managed and monitored over time.</li> <li>colleagues at all levels have a clear understanding of the current risk landscape, are empowered to identify, and raise risks for discussion and emerging risks are recorded risk management is viewed as a continual learning process, good practice is shared and communicated allowing your teams to benefit from lessons learned in a project or programme.</li> <li>risk is discussed as a regular part of management/senior team discussions lines of communication are clearly articulated and documented to ensure that relevant teams and colleagues are informed of further action, escalation, and the general outcome of discussions.</li> <li>risk escalation routes are clearly documented, and risk discussion forms a part of formal (and informal) management and team meetings, with information communicated in both directions to ensure common understanding and feedback on risk matters.</li> </ul>

1.4 Are you assured that all staff have undertaken basic risk management training in your area and understand their role in the identification and management of risk?	Yes/ <del>No</del>	The development needs of staff are reviewed during 1- 2-1 meetings with the GCRB Executive Director. In addition, staff participate in risk workshops alongside board members.	<ul> <li>Ensuring all staff have the right level of skills and training to ensure effective engagement with the risk management process is key. Everyone in the organisation has a role in helping to identify and manage risks, therefore it is essential that all staff have a basic understanding of risk management policy and process. All staff but especially those who lead risk management activity should have some risk management training to ensure a base level of knowledge of the corporate processes. Confidence levels should be shaped by:</li> <li>all staff should have at minimum completed basic training.</li> <li>key staff with particular responsibility, or interaction with, risk management have undertaken further training.</li> <li>risk champions have completed appropriate learning</li> <li>key staff may have undertaken equivalent training from external training providers such as CIPFA, the Institute of Risk Management (IRM) or Management of Risk (MoR) qualification.</li> <li>lessons learned exercises are undertaken where appropriate to learn from for example perceived failures (e.g., an unforeseen risk or a crystallised risk which turned out more damaging than expected) and instances where risks have been managed well, to see whether there is anything to be gained by repeating effective techniques elsewhere.</li> </ul>
1.5 Do you regularly review your key risks (including cyber risks and threats), record them on a risk register or equivalent which is compliant with risk management guidance and do you receive reports on the management of those key risks and controls/mitigating actions?	Yes/ <del>No</del>	The risks are recorded on the GCRB risk register and reported to each meeting of the Board. Management of each risk is outlined in the Risk Management Action Plans.	<ul> <li>Good risk management means documenting and assessing identified risks, implementing controls and actions to reduce risks to within agreed levels. Risk documentation must be reviewed regularly to ensure that appropriate action is being taken and progress documented. Risk Registers should be a dynamic means of recording risks, reporting on risks should include analysis and ask key questions of risk owners – it should not always be a review of the risk register. Confidence levels should be shaped by:</li> <li>recording risks on an appropriate risk register held a directorate/divisional/project/branch level and in compliance with SG guidance.</li> <li>processes which utilise risk register detail and the knowledge of wider outside influences to support your understanding of the wider risk landscape and help to recognise current pressures across a project or programme.</li> <li>routinely looking across your risk landscape and perform deep dives on key risks.</li> <li>risks form a part of regular management discussions with controls, actions, target scores and dates scrutinised, preferably using a form of reporting other than the risk register to summarise risks or drive focus on key aspects of the risk register and focus management attention.</li> </ul>

			<ul> <li>processes in place to escalate key risks ensuring effective communication, increasing awareness of the risk, and highlighting where more senior supportive action is needed.</li> <li>lines of communication to ensure that relevant teams and colleagues are informed of further action, escalation, and the general outcome of discussions.</li> </ul>
1.6 Have you articulated your appetite to key risks, and do you use this to help identify the extent	Yes/ <del>No</del>	determined by the Board and r recorded in the risk register alongside each risk. The risk appetite is also set out in the	Your risk appetite should reflect the level of risk that you are prepared to accept (and not accept) for different types of risk in order to achieve your objectives. Ensuring you understand your appetite for risk is essential to helping you prioritise risk mitigations, and therefore resources, on those risks outside of your agreed acceptable limits. Risk appetite should be considered within the wider context of your Directorate and DG to ensure that your approach is appropriate. Confidence levels should be shaped by:
to which you need to address your risks?		Plans.	<ul> <li>having clearly articulated risk appetite statements/or equivalent for the most appropriate categories of risk either within your division's projects, programmes or at directorate level.</li> <li>having clear definitions that provide lower-level examples to clarify meaning for use during day-to-day processes and procedures. This can help guide and advise staff on what is expected of them as part of a programme. For example, when staff should avoid actions or particular risks, when they should not allow certain things to happen and where people should look to take more risk.</li> <li>having effective measures that can actively monitor performance against the appetite definitions as well as the overall statements. This can be taken from appropriate IT and other systems to support the risk management processes, such as financial information, people information, consultation information etc. All forms of measurement need to be appropriate to the relevant environment.</li> <li>using target scoring within your risk register to ensure you risk appetite is reflected in the register, supporting effective discussion when current scores are beyond the target/risk appetite and when risks are close/proximate.</li> </ul>
1.7 Do you have a Business Continuity Plan covering your business area which has been reviewed and updated and exercised in the last year?	Yes/ <del>No</del> (Limited to risk)	Business continuity is a critical issue for the region but a lower risk for GCRB (as an entity). Reliance is placed upon the assigned colleges having individual systems and processes to ensure business continuity.	Every Division should either have a separate Business Continuity Plan in place or be covered within its Directorate Business Continuity Plan. Plans should be regularly reviewed and updated and should be exercised at least annually (to allow for changes in personnel, responsibilities, priorities, working practices, processes, and procedures and in the external and internal context; and to apply lessons learned). The plan should describe how essential business across the Division would carry on in the event of losing staff, building access or corporate systems such as ICT. These should consider situations where many staff are working from home and ensure robust communication and incident management arrangements are in place (e.g., sign up to

			GroupCall as well as local business area-specific arrangements). Exercise scenarios should test these arrangements.
1.8 Do you have disaster recovery plans/arrangements in place for the event of the loss of key systems (including corporate ICT systems and line of business applications) upon which your and/or other operations depend?	Yes/ <del>No</del> (Limited to risk)	Disaster recovery is a crucial issue for the region but a lower risk for GCRB (as an entity). Reliance is placed upon the assigned colleges having local systems and processes to ensure recovery from disaster. The internal audit plan (2021-22) includes a review of the regional arrangements for disaster recovery. GCRB responded very effectively in response to the closure of the office/City of Glasgow College as a result of Covid-19. We transitioned seamlessly to remote working and made full use of the technology (Board Effects, MS Teams etc) to maintain our core services.	Local response to the possible loss of corporate functions and resources (e.g., accommodation, SCOTS, SEAS, eRDM, e-HR, MiCase, line of business applications) might be considered in the context of divisional risk management, incident management and business continuity processes and procedures. Where local systems are in operation, including but not exclusively ICT systems, the business area has a responsibility to ensure that plans are in place for business continuity and for recovery e.g., back-up data to ensure that services can be fully restored. Business areas with staff in non-main buildings may have local arrangements in place in the event of loss of key facilities and resources. Your recovery plans/arrangements should be tested regularly to ensure they are fit for purpose and meet your needs in the event of a loss or continuity event; your level of confidence should reflect the extent to which you have tested your plans and updated them accordingly.

2. Business Planning	·	XX	
2.1 Do you have a divisional business plan that contains clear business objectives which are linked to key National Performance Outcomes and where appropriate the Programme for Government and have these objectives been translated into short, medium and long term measurable targets against which performance and progress are measured?	Yes/ <del>No</del>	The Board launched its Strategic Plan for 2017-2022 in October 2017. GCRB continues to develop its operational plan which includes the specific targets to deliver its ambitions. The Strategic Plan is being reviewed in 2022 with a view to the new plan being in place in January 2023.	Business plans should be based on a minimum of a three- year period but also reviewed annually, they should also form the basis for any risk management information. Confidence levels should be shaped by your business objectives/SMART targets are reflected and documented in the Divisional Plan and via staff performance appraisal forms at all levels as appropriate. Plans provide a clear link (golden thread) to your Directorate's Plan and provide a clear set of priorities.
2.2 Have new and/or radically changed work programmes been referred to Finance, Procurement and/or Internal Audit for advice?	Yes/ <del>No</del>	Each year, GCRB delivers the regional Programme for Action. Several programmes have been developed with the support, and procurement advice, of the Scottish Funding Council and APUC. The regional Programme for Action was reviewed by the internal auditor as part of the internal audit plan 2021-22.	New initiatives or spend, or changed systems should normally be discussed with Finance, Procurement and Internal Audit colleagues before proposals are finalised. For change initiatives managed as projects or programmes, section 3 (major investment) or 4 (projects) should be completed. The approaches and methodologies toolkit provides some guidance on the difference between Business As Usual and projects. In terms of undertaking change, the Improvement Framework is one of the main mechanisms underpinning the Scottish Government's approach to Public Service Reform.
2.3 In developing targets, do you identify performance measures which take account of inputs, outputs National Performance Outcomes and the Programme for Government?	Yes/ <del>No</del>	The targets within the Regional Outcome Agreement were modified for 2021-22 in response to the impact of Covid-19. Despite the pandemic, the Glasgow college region has continued to deliver its core outcomes.	This question seeks to find out if the relationship between inputs, outputs and outcomes is being applied in developing performance measures.
2.4 Do you regularly receive timely, relevant and reliable reports on progress and performance against key indicators and targets alongside your risk information and take corrective action where necessary?	Yes/ <del>No</del>	Regular progress reports are reported to the Performance and Resources Committee on a range of financial, performance, assurance and governance matters.	This could take the form of regular reports prepared for consideration at progress meetings or updates provided in the context of regular meetings with managers. Corrective action might involve the reprioritisation/reallocation of resources (budgets and staff) and the reordering of key business priorities.

3. Major Investment			
3.1 Has your area been responsible for the initiation or delivery of one or more major investment projects during the past financial year? (If not, please ignore the other questions in this section)	<del>Yes</del> /No	There haven't been any Major Investment Projects (>£5m) within the Glasgow colleges region since GCRB achieved fully fundable operational status.	<ul> <li>Major investment projects are defined in the <u>Major</u> <u>Investment Projects</u> section of the <u>Scottish Public Finance</u> <u>Manual</u> (SPFM) but can also be defined as initiatives:</li> <li>requiring spending over and above departmental expenditure limits</li> <li>requiring primary legislation</li> <li>being innovative or contentious</li> <li>All Major Investment Projects must adhere to the guidance in the <u>SPFM</u>, and its key principles should be adopted in relation to all investment projects.</li> </ul>
3.2 Do/did your project's governance arrangements align with the Scottish Government's strategic and sector specific governance procedures?	<del>Yes/No</del>	Not applicable.	<ul> <li>Relevant procedures include the following:</li> <li>Declaring all new major projects to the <u>PPM-CoE</u> by means of the submission of a completed <u>Risk Potential Assessment form</u> (see 3.3).</li> <li>Issuing the SRO with an appointment letter, confirming their responsibilities and the aims, objectives, timescales and funding arrangements for the project.</li> <li>Putting arrangements in place to address each of the SG's <u>Programme and Project Management (PPM)</u> <u>Principles</u>.</li> <li>For construction and infrastructure projects, complying with the guidance in the <u>Construction Procurement Manual</u>.</li> <li>For IT and digitally enabled projects, registering the project with the Digital Assurance Office_and complying with the Technology Assurance Framework; including compliance with the Digital First Service Standard for new digital public services and Scottish Government corporate systems.</li> </ul>

3.3 Have you assessed your project(s) in line with the SG's assurance procedures and engaged with the appropriate assurance process?	<del>Yes/No</del>	Not applicable.	<ul> <li>Relevant procedures include the following:</li> <li>Completing the <u>Risk Potential Assessment Forms</u> to determine the potential complexity of your project(s).</li> <li>Submitting the completed RPA to the SG's Portfolio Programme and Project Assurance Hub for review of your project's assurance needs.</li> <li>Actively engaging with corporate assurance providers, taking advice on board and promptly acting on review recommendations.</li> <li>Major projects over £20m in value, or of critical importance/unusual scale or nature to the procuring organisation, or revenue funded, or procured through competitive dialogue, may require Key Stage Reviews (KSRs) during key procurement stages. KSRs are undertaken by the <u>Scottish Futures Trust</u>.</li> </ul>
3.4 Do you have an up-to-date case for change (e.g. business case) demonstrating continued strategic alignment, viability and value added, and providing business justification for each project?	<del>Yes/No</del>	Not applicable.	Projects must be appraised in accordance with the <u>Appraisal</u> <u>&amp; Evaluation</u> section of the SPFM. This must include clear links to strategic priorities, and an options appraisal supported by solid evidence that the chosen option provides the best commercial value. The five-case model provides a robust and accessible approach to project appraisal and business justification.
			You must be able to demonstrate the on-going justification of the need for your project and should regularly review the case for change to ensure its currency.
			For projects including a procurement element, you must also be able to demonstrate compliance with the <u>Procurement Section</u> of the SPFM.
			For construction and/or an infrastructure project, you must be able to demonstrate compliance with the <u>Construction</u> <u>Procurement Manual</u> . Further guidance and support is available from the Scottish Government's Construction Procurement Policy Unit.

3.5. Have you assessed your capability and capacity to deliver your project(s) and are you aware of when you need specialist resources and how to secure the specialist resource?	Yes/No Not applicable.		The SRO must be appointed at the earliest possible stage of the project. Clear roles and responsibilities should be assigned and levels of delegated authority clearly identified and agreed. These should be documented in formal letters of appointment between the Investment Decision Maker and the SRO and between the SRO and various post holders within the Project Management Structure.
			You should ensure that people appointed to positions within the project's governance and management structure have the skills, experience and knowledge necessary to fulfil their role, using existing performance management and PLP arrangements in accordance with question 8.1.
			Internal and external specialist resources required for the successful delivery of the project should be identified and secured at planning stage. For consultants, you must comply with the <u>Scottish Government Consultancy</u> <u>Procedures</u> in accordance with question 7.4.
3.6 Have you put all necessary arrangements in place to assess the realisation of benefits and capture lessons from the delivery of your project(s)?	<del>Yes/No</del>	Not applicable.	<ul> <li>Necessary arrangements include:</li> <li>Ensuring that benefits are identified, plans for the realisation of benefits are put in place, and delivery of benefits is measured to demonstrate that the intended return on investment is being achieved. The IPA has published a "Guide on Effective Benefits Management in Major Projects".</li> <li>Capturing lessons during the project lifecycle and sharing as appropriate. The Lessons Toolkit provides some guidance on how to capture lessons.</li> <li>As part of the OGC Gateway Review 5, Operations Reviews and Benefits Realisation guidance for Senior Responsible Owners, ensuring that:</li> <li>A Post Project Review to establish how well the project was managed is carried out.</li> <li>Post Implementation Reviews (also known as Post Occupancy Reviews for construction projects) to establish if the original project objectives are being achieved are carried out. This review is likely to be repeated.</li> <li>All feedback is used to inform future project delivery.</li> </ul>

4. Project Management			
4.1 Has your area been responsible for delivering one or more projects - other than major investment projects – during the past financial year?	<del>Yes</del> /No	The Programme for Action 2021-22 incorporates projects that are based upon the principles of best value and effective project management.	This section covers all projects not included in the SPFM definition of a "major project", including non-capital projects such as new policy delivery or changes to existing policy, business change projects. The <u>Approaches and methodologies toolkit</u> provides some guidance on the difference between business as usual and projects.
4.2 Did/do your project's governance arrangements align with the Scottish Government's strategic and sector specific procedures?	Yes/ <del>No</del>	The projects within the Programme for Action were aligned to the Regional Outcome Agreement 2021-22 and aimed to deliver aspects of the Ministerial Letter of Guidance (e.g. services for Care Experienced Learners and addressing issues of Child Poverty).	<ul> <li>The general principles set out in the Major Investment Projects section of the SPFM should be applied proportionately, as appropriate, to all investment projects.</li> <li>Relevant procedures include: <ul> <li>Putting arrangements in place to address each of the SG's Programme and Project Management (PPM) Principles. Information to help with this can be found in Delivery Essentials.</li> <li>For construction and infrastructure projects, complying with the guidance in the <u>Construction Procurement</u> <u>Manual</u>. Further guidance and support is available from the Scottish Government's Construction Procurement Policy Unit.</li> <li>For IT and digitally enabled projects, complying with the Technology Assurance Framework, further guidance is available from the Digital Assurance Office.</li> </ul> </li> </ul>
4.3 Have you assessed your project(s) in line with the Scottish Government's assurance procedures and engaged with the appropriate assurance process?	<del>Yes/No</del> Partially	The Risk Potential Assessment Form has been considered and it provides a useful checklist. However, the projects (within the Programme for Action 2021-22) were relatively small and the Assessment Form too detailed.	<ul> <li>Relevant procedures include the following options:</li> <li>Completing the <u>Risk Potential Assessment Forms</u> to determine the potential complexity and risk of your project(s).</li> <li>Submitting the completed RPA to the SG's Portfolio Programme and Project Assurance Hub.</li> </ul>

4.4 Do you have an up-to-date case for change (e.g. business case) demonstrating continued strategic alignment, viability and value added, and providing business justification for each project?	Yes/ <del>No</del>	For each project, within the Programme for Action, there are project documents which sets out the project outcomes and benefits. The documentation, relating to the Programme for Action, was reviewed as part of the Internal Audit programme for 2021-22.	<ul> <li>Projects must be appraised in accordance with the <u>Appraisal</u> <u>&amp; Evaluation</u> section of the SPFM. This must include clear links to strategic priorities, and an options appraisal supported by solid evidence that the chosen option provides the best commercial value. The <u>five-case model</u> provides a robust and accessible approach to project appraisal and business justification.</li> <li>You must be able to demonstrate the on-going justification of the need for your project and should regularly review the case for change to ensure its currency.</li> <li>For projects including a procurement element, you must also be able to demonstrate compliance with the <u>Procurement Section</u> of the SPFM, should your project include procurement.</li> <li>For construction and/or an infrastructure project, you must be able to demonstrate compliance with the <u>Construction Procurement Manual</u>. Further guidance and support is available from the Scottish Government's Construction Procurement Policy Unit.</li> </ul>
4.5 Have you assessed your capability and capacity to deliver your project(s) and are you aware of when you need specialist resources and how to secure the specialist resource?	Yes/ <del>No</del>	Delivery of the projects was only feasible with the allocation of resources. GCRB allocated £266k for the financial year 2021-22. In addition, funding (of £326k) was secured for three projects thereby increasing the total resources provided to learners in Glasgow.	The SRO must be appointed at the earliest possible stage of the project. Clear roles and responsibilities should be assigned and levels of delegated authority should be clearly identified and agreed. You should ensure that people appointed to positions within the project's governance and management structure have the skills, experience and knowledge necessary to fulfil their role, using existing performance management and PLP arrangements in accordance with question 8.1. Internal and external specialist resources required for the successful delivery of the project should be identified and secured at planning stage. For consultants, you must comply with the <u>Scottish Government Consultancy</u> <u>Procedures</u> in accordance with question 7.4.

4.6 Have you put all necessary arrangements in place to assess the realisation of benefits and capture lessons from the delivery of your project(s)?	Yes/ <del>No</del>	The projects (within the Programme for Action) include performance measures and project outcomes that will enable the benefits to be captured and outcomes measured.	<ul> <li>Recommended arrangements include:</li> <li>Ensuring that benefits are identified, plans for the realisation of benefits are put in place, and delivery of benefits is measured to demonstrate that the intended return on investment is being achieved. The IPA has published a "Guide on Effective Benefits Management in Major Projects", which should be applied in a proportionate way.</li> <li>Capturing lessons during the project lifecycle and sharing as appropriate. The Lessons Toolkit provides some guidance on how to capture lessons.</li> <li>Conducting an End of Project Evaluation Review, including the review and handover of benefits identified in the business case to an accountable owner.</li> </ul>
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# 5. Financial Management

5.1 Do you ensure that a documented business case has been prepared for any policy proposal? Do you ensure that your Finance Business Partner (or equivalent) and, as necessary, Internal Audit Division is involved at the earliest possible stage in the	Yes/ <del>No</del>		Finance should also be consulted on any novel or contentious spending proposal and any matter which includes issues of financial propriety and regularity. Further guidance on the Role Of Finance is available on the Intranet. The need to consult Finance might also be included in induction material and local desk instructions.
preparation of all policy proposals etc. which may have resource, control or other finance related implications and that they are kept informed of developments?		example, SFC, External/Internal Auditors and APUC.	

5.2 Do you have procedural instructions, cleared with Finance, about how financial matters are handled within the area and are processes in place for regular monitoring of compliance with these instructions?	Yes/ <del>No</del>	Yes, GCRB approved its financial procedures in March 2017. These procedures are regularly reviewed.	Local desk instructions should be drawn, as appropriate, from the key principles of the SPFM. Instructions should be in place covering the arrangements for entering into commitments and for approving and processing the resultant payments, including VAT – and ensuring adequate separation of duties. This may also cover other matters such as delegated authorities, budget monitoring procedures and the requirement to consult Finance on all proposals that may have resource or other finance related implications. Monitoring of compliance should be supported by regular management checks and the consideration of financial matters at regular meetings with your managers.
5.3 Do you delegate financial authority to staff at appropriate levels?	Yes/ <del>No</del>	The Board has a scheme of delegation with approval limits set for the Board, Chair and Executive Director. The scheme of delegation was reviewed by the Board in 2021 with new arrangements in place to ensure that decisions can be taken at the most appropriate level.	Delegated financial authority (i.e. where members of your staff have full responsibility for budgets and take decisions without having to refer upwards) will not be appropriate in many Divisions but where it is you should provide details of the broad arrangements e.g. set out in desk instructions, financial responsibility statements. This is separate from Delegated Purchasing Authority (DPA). The authority required to make and authorise payments etc within SEAS and the authority to purchase in EASEbuy are also separate authorities. (General guidance on <u>Delegated Authority</u> is available in the SPFM. Guidance on the Scheme of Delegation is available on the Intranet.)

5.4 Is there adequate separation of duties where required and are staff with these duties adequately trained to discharge their responsibilities in that regard?	Yes/ <del>No</del>	Duties are segregated as far as is reasonably practicable given the size of GCRB. GCRB's banking administration is performed by SFC staff and is subject to SFC protocols underpinned by a Service Agreement.	This should apply to activities such as authorising and processing payments and receipts or awarding grants. There may be concerns (e.g. within small units) where the rules on separation of duties cannot practically be achieved. In such circumstances the response should relate to whether the local arrangements (e.g. compensating controls) agreed with Finance are working satisfactorily.
		GCRB is supported by City of Glasgow College in respect of financial payments and receipts. This provides an additional level of control, and segregation of duties, to complement the internal procedures of GCRB. Where appropriate, GCRB uses the expertise within one of the colleges, or external advisors, as appropriate. The arrangements in respect of the segregation of duties are set out in the financial procedures.	(The requirement for appropriate separation of duties is included in a number of sections of the SPFM, notably those covering Expenditure and Payments and Income Receivable & Receipts.) This covers all staff involved in the financial process. The level of knowledge and training should be related to the part played by the individual in the financial process. Individual duties should be covered in desk instructions. All staff with responsibility for entering into contracts, raising purchase orders or issuing invoices etc. should have a knowledge of the rules relating to VAT and the ability to recover and or charge VAT. Note that this is separate from the authority required to make and authorise payments within SEAS or to purchase within EASEbuy.
5.5 Do you have arrangements to ensure that all assets for which the area is responsible are properly managed and safeguarded? Do you ensure that Finance (and Property where applicable) are informed of any changes to assets?	Yes/ <del>No</del>	The only assets owned by GCRB are laptop computers used by GCRB staff. These assets are recorded within a register but are not capitalised within the financial statements. The register contains details of each laptop including information such as serial numbers. The assigned colleges are responsible for the management arrangements in respect of the assets they own. GCRB relies upon the internal controls, and procedures, of the assigned colleges in respect of the assets they own.	Only assets for which the area is responsible need to be considered here. This will include those assets on a locally maintained inventory of valuable and attractive items. The response should consider safeguards such as those against unauthorised use or disposal. (Guidance on <u>Property Management</u> and <u>Fraud</u> is available in the SPFM.) Capitalised expenditure (PPE and Intangibles) must meet the approved corporate thresholds and definitions, and be supported by Asset Addition forms. Any disposal of previously capitalised assets should be recorded correctly in SEAS and supported by Asset Disposal forms. Further guidance is available from your Finance Business Partner and via Saltire.

5.6 Do you have effective arrangements in place to ensure that you are managing and monitoring any money due to the Scottish Government and that it is collected within reasonable timescales?	<del>Yes/No</del>	Not applicable as GCRB is not expected to generate income.	Further detail on Debt recovery can be found in the <u>Income</u> receivable and receipts section of the SPFM.
5.7 Do you have procedures for ensuring that proper and accurate accounting records are maintained and entries in them are properly authorised?	Yes/ <del>No</del>	The accounting records are maintained using the finance system of City of Glasgow College. From July 2019, accounting transactions are recorded in a separate company record within the college finance system. The Finance & Resources Director regularly reviews the accounting records and produces a budget report for consideration by the Performance & Resources Committee.	The response to this question needs to reflect both the provision of information needed for accounting purposes (e.g. the proper and timely entry of data into SEAS and/or EASEbuy) and for cash management purposes. The response should also take into account the controls in place within your area to ensure that only authorised personnel have access to the SEAS system. (Guidance on SEAS and EASEbuy is available on the Intranet.)
5.8 Do you have procedures in place for effective monitoring and reviewing of financial information and budgets for which you are responsible?	Yes/ <del>No</del>	The financial information, and budgets, of GCRB are monitored on a monthly basis and a report prepared for each meeting of the Performance & Resources Committee. The Finance & Resources Director reviews the financial reports and returns of the assigned colleges.	<ul> <li>The response should reflect the following:</li> <li>Measures to ensure that financial systems contain accurate and up to date information;</li> <li>Measures to monitor the security of financial information; and</li> <li>Local arrangements for monitoring and reviewing administration costs and programme budgets</li> <li>Measures should include regular management checks.</li> <li>Arrangements for reviewing budgets should be consistent with re-profiling information returned to Finance. (Guidance on Budget and Financial Management is available on the Intranet.)</li> </ul>
5.9 Are agreed budget plans documented and disseminated within your area?	Yes/ <del>No</del>	The GCRB Budget is relatively small, both in the size of the non-staff costs and also the number of transactions. The Executive Director, and Finance & Resources Director, review the budget as necessary.	The review of the regular financial reports needs to take account of both the review internally within the area as well as external reporting of outcomes and any remedial action required.

5.10 Do you regularly review internal financial reports which report actual against budget outturn and discuss progress with your Director or equivalent?	Yes/ <del>No</del>	The GCRB Budget is reviewed on a regular basis and a revised forecast out-turn provided to each meeting of the Performance & Resources Committee. Financial Forecast Returns (for both GCRB and the consolidated region) are reported to the Scottish Funding Council on a regular basis (most recently in September 2022). These returns are also reported to, and considered by, the Performance and Resources Committee.	You will wish to consider here the mechanisms in place for communicating budgetary information both at the beginning of the year and changes made in-year whether at the time of formal monthly or quarterly reviews or at other times. This would also cover the transfer of funds between one area and another or between the centre and your area.
5.11 Do you ensure that that the Subsidy Control Unit is consulted on all proposals that may have subsidy implications?	Yes/ <del>No</del>	GCRB would consult with the Subsidy Control Unit if it became aware of circumstances that required it do so.	Guidance on the <u>EC State Aid Rules</u> is included in the SPFM. More detailed guidance is available from the State Aid Unit.
5.12 Do you ensure that any grant proposals and payments follow the relevant guidance in the SPFM and internal guidance?	Yes/ <del>No</del>	GCRB follows the SPFM, and conditions of grant in respect of the receipt of Grant in Aid it receives and the way it disburses grant to the assigned colleges.	The section of the SPFM on <u>Grant &amp; Grant in Aid</u> includes references to checklists covering the grant proposal, application and assessment processes and a Model Offer Grant Letter document. SG Grant Management guidance can be found on the SG Intranet.

5.13 Do you ensure that any grants awarded are linked to the National Performance Framework National Outcomes, including the contribution the grant is expected to make to achieving National Outcomes and how this will be monitored and evaluated.	Yes/ <del>No</del>	The allocation of grant (to the assigned colleges) is conditional upon the achievement of the outcomes set out in the Regional Outcome Agreement. Achievement of these outcomes is monitored on a regular basis including reports to each meeting of the Performance and Resources Committee. The annual evaluation of the Regional Outcome Agreement 2021-22 takes place in autumn 2022 and will be submitted to the Scottish Funding Council in December 2022.	The National Performance Framework (NPF) is Scotland's well-being framework and was refreshed in 2018. The NPF is intended to inform discussion, collaboration and planning of policy & services across Scotland, encompassing the public sector, businesses, civil society and communities. It broadly sets the strategic direction for non- reserved policy areas, which should be aligned to the NPF and National Outcomes, including the work of Public Bodies. It also represents a closer partnership approach with local government to the delivery of services in Scotland. The approach to setting, reviewing, and reporting on progress to achieving the National Outcomes, is set out in the Community Empowerment Act 2015. Grants awarded should have a shared understanding of the joint priorities to contribute towards the National Outcomes. This should include what public spending supports, what this aims to achieve, the contribution it is expected to make to National Outcomes and evidence for this, how plans are being delivered, and the impact this is having.
5.14 Do you have confidence that all of your staff who are involved in the management of grants have the skills and training to allow them to manage their grants effectively?	Yes/ <del>No</del>	Training is available as required and discussed in 1-2-1 meetings between the Executive Director and Finance & Resources Director.	<ul> <li>Ensuring key staff have the right level of skills and training to ensure effective engagement with the grant management process is key. Confidence levels should be shaped by:</li> <li>Staff regularly refer to the grants guidance on Saltire before commencing any grant award</li> <li>Staff involved in grant management have at undertaken the SG Due Diligence Grants e-Learning</li> <li>Grant managers are engaged with the Grants Managers network on yammer</li> <li>Your grant managers are actively sharing lessons learned within the business area from experience.</li> </ul>
5.15 Do you have procedures in place to monitor any Losses, Special Payments and Gifts in year?	Yes/ <del>No</del>	Procedures are in place but there have not been any losses, special payments or gifts within 2021-22.	Losses, Special Payments and Gifts should be disclosed each year. The SPFM includes guidance on Losses & Special Payments and Gifts giving guidance on the various types of Losses, special payments and gifts and the approval process. You should ensure the guidance is followed to correctly report any of these transactions.

5.16 Do you have year-end procedures in place to ensure all Annual Accounts returns are completed in a timely and accurate manner?	Yes/ <del>No</del>	The GCRB Finance & Resources Director works in conjunction with finance colleagues (of the assigned colleges) to ensure that the Annual Accounts returns are submitted to SFC in accordance with the relevant guidance and Accounts Direction.	There are various returns due to finance as part of the annual accounts process. You should have procedures in place to ensure that information requested can be provided to Finance in an accurate and timely manner. Information requested will be used to ensure income and expenditure are recorded in the appropriate financial year and that any assets or liabilities of the Scottish Government are reviewed and appropriately accounted for. This includes consideration of committed and contingent balances.
6. Fraud			·
6.1 Are operational managers and all members of staff within your area aware of their responsibilities with regard to the prevention and detection of fraud?	Yes/ <del>No</del>	The Anti-Fraud Policy and Anti-Bribery policies were originally approved by the Board in 2017. These policies were reviewed (by the Executive) in September 2021 and presented to the Audit & Assurance Committee for consideration on October 2021.	<ul> <li>Confidence levels should be shaped by;</li> <li>Awareness of the relevant guidance in the section on Fraud in the SPFM which might be brought to the attention of staff periodically and other relevant local guidance.</li> <li>The linking of induction materials to the relevant internal guidance on fraud prevention – there is a</li> </ul>
6.2 Are any cases of suspected fraud within your area dealt with in accordance with the <u>Scottish</u> <u>Government Fraud Action Plan?</u>	Yes/ <del>No</del>	There have not been any instances of fraud within GCRB in 2021-22. An instance of alleged was identified within City of Glasgow College in 2018-19 and has been the subject of two audit reports. The College has taken action to address a number of recommended areas for improvement. The final 'lesson learned' report was considered by the Audit and Assurance Committee in October 2022.	<ul> <li>comprehensive guide on saltire.</li> <li>Within the SG ensuring that staff have undertaken the civil service learning on fraud prevention for staff and managers accessible via Civil Service Learning.</li> <li>Unless separate prescribed procedures are in place any suspicion of fraud (internal or external) should be reported to the SG Governance and Risk Team via email or the Crimestoppers Hotline 08000 15 16 28.</li> </ul>

7. Procurement			
7.1 Do you ensure that the Scottish Procurement and Commercial Directorate (SPCD) are consulted from the earliest possible stage on any proposals that may involve procurement activity?	<del>Yes/No</del>	The question is not directly applicable to GCRB due to the arrangements within the FE Sector and the Glasgow College Region. GCRB uses the specialist advice available from Advanced Procurement for Universities and Colleges (APUC) for all procurement matters.	Guidance on the role of the Scottish Procurement and Commercial Directorate (SPCD), guidance on Buying Goods, Services or Works and the Security Questionnaire is available on the Intranet. The need to consult SPCD might be included in induction material and local desk instructions. SPCD must be consulted on any novel or contentious spending proposal and any matter which includes issues of procurement propriety or regularity.
7.2 Do you have sufficient staff with Delegated Purchasing Authority (DPA) to meet your business needs?	<del>Yes/No</del>	The question is not directly applicable. However, the GCRB scheme of delegation sets out levels of authority to enter into contracts on behalf of GCRB. Only the Executive Director, and appointed Deputy, has Delegated Purchasing Authority which is sufficient to meet the purchasing needs of GCRB.	DPA is the authority from the director of Procurement and should on a personal basis to permit permanents SG members of staff to enter into a contract for goods, services and works and oversee the process leading up to and including the award of a contract and any subsequent contract changes on behalf of the Scottish Ministers. This is separate from financial authority and the authority to make purchases on EASEbuy. Please confirm how many staff in your area have DPA and if the number does meet your business needs. (Guidance on DPA is available on the Intranet).
7.3 Do you have contracts in place for all procurement spend in your division whether bespoke contracts for your area or corporate contracts available for use across the Scottish Government?	Yes/ <del>No</del>	Expenditure on non-staff costs is relatively small for GCRB. Bespoke contracts are implemented with advice from APUC. For routine expenditure, for example, stationery/equipment, GCRB uses the corporate contracts available to the college sector/Scottish Government.	Divisions should understand if their procurement spend is covered by contract and should be aware of the Scottish Government contract register.
7.4 Is all procurement activity within your area undertaken in accordance with the <u>Procurement</u> <u>Policy Manual</u> ?	Yes/ <del>No</del>	GCRB aims to meet the requirements of the Procurement Policy Manual in full. GCRB makes a small number of purchases each year.	Evidence should be provided by staff with DPA to assure Division Heads that all procurement activity has been conducted with the <u>Procurement Policy Manual</u> . Specific guidance on the operation of the electronic <u>Purchasing</u> Card and the EASEbuy System.

7.5 Does your area's use of external consultants comply with the <u>Scottish Government</u> <u>Consultancy Procedures</u> ? This includes using the consultancy account codes on the Purchase Orders that are created in the purchasing system.	Yes/ <del>No</del>	On occasions, GCRB uses external consultants for specialist services (e.g. legal advice). However, the use of consultants is limited.	Contracts for consultancy of up to £10K in value need to be approved at Deputy Director level. Consultancy contracts between £10K and £50K need to be approved at Director General level. Consultancy contracts above £50K must be authorised by the Cabinet Secretary for Finance, Economy and Fair Work. If there have been no such cases during the period then please provide a nil response. Consultancy expenditure must be coded against the account codes stated in the <u>Consultancy Procedures</u> . Management checks on consultancy expenditure on SEAS should be carried out to ensure approval was sought at the appropriate approval level prior to purchase.
7.6 Is the number of staff authorised and trained to act as purchasing system requisitioners and approvers consistent with your Division's needs?	Yes/ <del>No</del>	The Executive Assistant is trained to use the on-line purchasing system. This is consistent with GCRB's needs. In the event of the Executive Assistant being unavailable, GCRB will seek assistance from staff within City of Glasgow College.	Staff who are authorised as purchasing system requisitioners and approver need to recognise the importance on the financial information being entered correctly. The amount of knowledge and training does, of course, need to be related to the part played by the individual in the financial process. Individual duties might be covered in desk instructions. Details of available training are provided on the EASEbuy training page.
7.7 Do you ensure that staff with electronic Purchasing Cards (ePCs) are fully aware of their responsibilities to monitor compliance and meet ePC policy?	<del>Yes/No</del>	Not applicable. GCRB does not use electronic Purchasing Cards.	Monitoring of compliance might be achieved by regular management checks and the consideration of financial matters at regular meetings with your managers. (Guidance on ePC is available on the Internet.)
7.8 Do you ensure that staff are complying with the prompt payment of suppliers to meet the 10 day payment commitment?	<del>Yes</del> /No	Payments are processed by City of Glasgow College on behalf of GCRB. The average time taken to pay suppliers in 2021-22 exceeds the 10-day payment commitment.	Relevant guidance regarding the prompt payment of suppliers policy must be brought to the attention of staff periodically and/or in reviewing training requirements.
7.9 Do you have in place appropriate arrangements in your area to ensure effective contract management enabling delivery of both technical and commercial requirements?	Yes/ <del>No</del>	Arrangements are in place for monitoring in accordance with the performance outcomes set out in each contract.	Staff managing contracts should have the knowledge and skills to deliver both the technical and commercial conditions of the contract. Staff can seek guidance or arrange for Contract Management services to be delivered by the SPCD Contract Management Team. Additional guidance is also available on the <u>Procurement Journey</u>

8. Human Resources			
8.1 Do you have workforce and resourcing plans that enable you to match resources to priorities and do they support increased diversity?	Yes/ <del>No</del>	The workforce plan, and organisational structure, was agreed by the Board in October 2017. The organisational structure was reviewed by the Board in October 2018. An additional post of Project Manager (Environment and Sustainability) was approved by the Board in 2020-21. This is a two-year, fixed term post, which is due to expire on 31 July 2022.	<ul> <li>SG People Strategy sets the context for people management and development, helping to ensure we have the right people in the right place. Confidence levels will be shaped by activity such as:</li> <li>effective processes to monitoring and manage workforce numbers and cost</li> <li>identifying any single points of failure and establishing a response (i.e. succession planning)</li> <li>adherence to corporate processes regarding recruitment</li> <li>actions to increase diversity through recruitment and succession planning</li> <li>What evidence do you draw on to inform action, e.g. Workforce planning returns (BUD1), People and Finance metrics, diversity monitoring information on eHRr?</li> </ul>
8.2 Do you have processes in place to develop staff and increase capability to support diverse, high performing teams?	Yes/ <del>No</del>	The Executive Team meets on a weekly basis to consider matters of priority, risk management and forward planning. The meetings help to determine future workplans and target resources to meet need. The Executive Director meets with individual team members on a 1-2-1 basis to agree priorities, plans and training needs.	<ul> <li>The People Strategy sets the context for people management and development, helping to ensure we have the right skills now and for the future. Confidence levels will be shaped by activity such as:</li> <li>having personal and divisional learning/capability plans reflecting corporate priorities, local business needs and the diverse needs of your workforce</li> <li>effective processes for identifying and developing talent</li> <li>application of best People Management practice is highly valued, supported and openly recognised</li> <li>adherence to corporate processes regarding performance management (i.e. monthly conversations and development discussions)</li> <li>What evidence do you draw on to inform action, e.g.: corporate guidance on most effective learning approaches (i.e. 70/20/10)</li> </ul>

8.3 Are line managers at all levels skilled in managing performance and supporting the wellbeing of their staff?	Yes/ <del>No</del>	The number of staff engaged by GCRB is small and therefore management of the number, and cost, is straightforward. The HR team of Glasgow Clyde College provide support and advice to GCRB. In general, the terms and conditions of GCRB staff follow those applicable to Glasgow Clyde College. All employees are actively involved in the running of GCRB and participate in the team meetings. The Executive Director ensures that all team members are supported in respect of their well-being.	<ul> <li>The People Strategy sets the context for people management and development, helping to ensure a workplace culture for individuals to bring their whole selves to work, to thrive and be successful.</li> <li>Confidence levels will be shaped by activity such as: <ul> <li>on-time completion and recording of performance appraisals</li> <li>role modelling of the Civil Service Code, inclusive leadership (SCS Leadership Statement) and the People Strategy behaviours and ways of working at all levels</li> <li>adhering to corporate processes regarding attendance management, conduct and performance management (guidance for SCS)</li> <li>adhering to fairness at work policy and signposting wellbeing support services</li> <li>management and leadership learning and development support</li> <li>using MI to identify and take action where absence rates or reasons raise concern'</li> <li>having in place, and effectively assessing, meaningful diversity objectives at all levels</li> <li>adhering to flexible working policy</li> <li>implementing reasonable adjustments to enable disabled people to fulfil their potential</li> <li>having high diversity declaration rates and analysing and using the information effectively to advance diversity and inclusion</li> <li>What evidence do you draw on to inform action, e.g. People Survey results, Directors MI pack, Attendance Management Monthly Reports.</li> </ul> </li> </ul>
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9. Equality & Diversity			
9.1 Are all new, revised or strategically significant policies/activities/projects in your area assessed, in line with legislative requirements, for their impact on people with one or more of the Protected Characteristics listed in the Equality Act 2010 at the earliest possible stage in the policy development process?	Yes/ <del>No</del>	Key delivery plans such as the Regional Outcome Agreement and the Regional Curriculum and Estates Plan were assessed with an EQIA. From September 2018, all committee/board reports have included a specific section on equality impact.	This question relates to the SG's responsibilities under the statutory Public Sector Equality Duty, and the specific duty to assess and review policies and practices (s.5, EA 2010 (Specific Duties) (Scotland) Regulations 2012). You are expected to ensure that new or revised policies and activities in your area are assessed for their impact on people with one or more of the protected characteristics in the Equality Act 2010. An EQIA process helps you to look at how your proposed policy/activity might affect people differently because of their protected characteristics (and should be done before decisions are made, at the earliest stage of the policy development process, so that the results of the assessment inform policy decisions. Guidance on EQIAs is available on the Intranet.
9.2 Are you confident that all staff in your division have the capacity to embed equality in all that they do, they are able to access and that they use the guidance available on Saltire and know where to seek advice and guidance as required?	Yes/ <del>No</del>	Staff have an awareness of equality and promote this throughout their work. Additional personal development will be provided to anyone that needs this and will be discussed through 1-2-1 sessions with the Executive Director.	<ul> <li>The First Minister has made clear her ambition for equality and human rights to be embedded in everything SG does; this question seeks to find out if SG staff have capacity to deliver on the equality dimension to that ambition. In answering this question you should consider whether staff have had sufficient information, training, guidance and support to enable that aim to be realised, considering for example if:</li> <li>they have good awareness of equality issues from induction, updated via appropriate CPD</li> <li>they know about and use the SG equality evidence finder</li> <li>they know about and engage with equality groups</li> <li>they have sufficient time to consider equality matters in planning policies/activities.</li> <li>You will want to consider what steps you have taken to ensure that your staff are able to find do use the SG's equality guidance and tools that are available on the Intranet.</li> </ul>

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9.3 Are you confident that any procedures in place to ensure that equality considerations are embedded into all policies/activities/projects in your area are delivering improved outcomes for people with protected characteristics?	Yes/ <del>No</del>	GCRB meets with the equalities impact group across the three colleges. This well- established group has been successful in providing a shared regional overview and response to equalities issues, and working to ensure that they provide meaningful, effective outcomes to guide and improve policy and practice. This is an addition to equalities review being considered for all work which is put forward to GCRB committees and boards, and seek to ensure that these provide opportunity for improvement by informing decisions. In addition, equalities data is captured across the region and this is considered and reviewed as part of the review of curriculum as well as policy and process.	<ul> <li>This question relates to the extent to which processes, such as Equality Impact Assessments, designed to ensure that the consideration of equality is embedded into the policy development process are delivering meaningful outcomes for the people whose lives SG seeks to improve.</li> <li>Specifically, EQIA must consider impacts on equalities groups based on the three tests of the Public Sector Equality Duty (PSED) it is required to address:</li> <li>Does this policy eliminate discrimination for each of the 9 Protected Characteristics (PC). If not, is the discrimination justifiable?</li> <li>Can it be mitigated?</li> <li>Does this policy foster good community relations between people of PC groups?</li> <li>You should consider what evidence (both quantitative and qualitative) about equality outcomes is being used to inform decisions; whether any processes are more about collation than improvement; whether evidence is being used to demonstrate due regard to the three needs of the PSED and whether any processes exist for their own sake rather than because they have a clear link to improving outcomes.</li> </ul>
9.4 Are you confident that any schemes operated by your Division for funding the work of external stakeholders deliver improved outcomes for people with protected characteristics?	Yes/ <del>No</del>	GCRB provides funding to the three Glasgow colleges to provide services to all, including those with protected characteristics. The Glasgow colleges each have their own policies, procedures and initiatives designed to promote equality, diversity and inclusivity.	This question relates to the extent to which funding for partners' activities and projects (or core funding for partners designated as intermediaries) aligns to improved outcomes for people with protected characteristics under the Equality Act 2010. You will want to consider how robust your processes for linking funding to outcomes are, and what steps you take in guiding funded organisations towards strategic priorities for improved equality outcomes. If a private or voluntary organisation provides a 'public function' it is subject to the general equality duty. Public functions can also be carried out by private or voluntary organisations, for example when a private company manages a prison or when a voluntary organisation takes on responsibilities for child protection.

10. Information			
10.1 Does your division demonstrate best practice information management including compliance with relevant legislation?	Yes/ <del>No</del>	The Audit Committee received a detailed GDPR action plan in October 2018 and received an update report annually thereafter. GCRB has reviewed its privacy notice and made this available via the website.	<ul> <li>The General Data Protection Regulation and Data Protection Act 2018 came into force in May 2018. Have you:</li> <li>registered your information assets that contain personal data, and reviewed your existing assets</li> <li>reviewed the legal basis for any personal data processing</li> <li>updated any privacy notices</li> <li>updated any contracts with third parties that include personal data processing</li> <li>documented any personal data sharing in a data sharing agreement</li> <li>conducted a Data Protection Impact Assessment (aka Privacy Impact Assessment) where required</li> <li>made sure your staff know what to do if a security incident involving personal data takes place</li> <li>identified any personal data processing for law enforcement purposes covered by part 3 of the Data Protection Act 2018? Guide to law enforcement processing</li> <li>identified any personal data being processed outside of the UK.</li> </ul>
10.2 Have you reviewed your information assets over the past financial year and updated the Scottish Government Information Asset Register (IAR) accordingly?	Yes/ <del>No</del>	Arrangements for the storage of information assets has been reviewed as part of the development plan to ensure compliance with GDPR.	IAOs (usually Deputy Directors) are responsible for ensuring that their information assets are recorded on the corporate Information Asset Register (IAR). Guidance can be found on the IAR pages on Saltire. See guidance on "What is an Information Asset?" in the IAO Handbook.
10.3 Are access control mechanisms in place for each system?	<del>Yes</del> /No	This does not take place at present but will be reviewed in conjunction with the Data Protection Officer.	Access control mechanisms for each system are documented by IAOs. Control Mechanisms are in place for physical access and access to information. Location of information assets are registered on the Information Asset Register.

10.4 Has your Information Asset Owner been trained in the role and is this training up to date?	Yes/ <del>No</del>	GDPR training was previously provided to all staff and awareness raised in respect of staff responsibilities. The responsibilities of the Executive Director, in respect of data protection compliances, have been confirmed.	IAOs (usually Deputy Directors) are responsible for ensuring that their information assets are recorded on the corporate Information Asset Register (IAR). Guidance can be found on the IAR pages on the Intranet. See guidance on "What is an Information Asset?" in the IAO Handbook.
10.5 Do any supporting staff have an awareness of the role and responsibilities of an IAO and have they been trained in information handling?	Yes/ <del>No</del>		Staff are available to discharge these roles and have undergone or are undergoing appropriate training. Non-core bodies will have their own SIRO. Guidance on mandatory roles can be found on the intranet. Mandatory eLearning packages (Data Protection and Responsible for Information) can be found on the intranet.
10.6 Can you confirm that information risk assessments have been carried out for all information assets?	Yes/ <del>No</del>	High level risk assessments have been completed for all information assets. The risk assessments show the controls and mitigation measures.	Information risk assessments should be carried out as appropriate for the classification of the information asset; the restriction of access to information as appropriate; the training of staff in handling sensitive information; the management of processing of personal data; the impacts of loss or corruption of information; and so on. Such risk assessments should extend to procurements and shared services initiatives, and to all delivery partners, suppliers and contractors. Management and monitoring of supplier security and information assurance arrangements must take place. Mandatory eLearning packages (Data Protection and Responsible for Information) can be found on the intranet.
10.7 Do you have processes in place for dealing with security incidents involving data?	Yes/ <del>No</del>	GCRB appointed a Data Protection Officer (in May 2018). One of the key duties of the postholder is to provide specialist support, and advice, if a data breach should occur.	Incidents would relate to cases where information (both personal and non-personal) may have been accidentally exposed, lost or made unavailable regardless of whether this has resulted in harm to individuals. IAOs are aware of and follow the corporate process in place to report, manage and recover from information risk incidents. Lessons have been learnt, and shared, from incidents (if any). Local managers have a responsibility to ensure that staff are aware of and comply with the relevant guidance, to initiate checks where non-compliance is suspected and to monitor suppliers. Managers have a responsibility to ensure that all staff and suppliers are aware of their responsibilities to safeguard Government information. An IAO checklist for dealing with security incidents can be found on the intranet.

10.8 Have you had any information security incidents involving data in your area over the past financial year that you did not record on the corporate security incident reporting tool?	<del>Yes</del> /No	There haven't been any information security incidents in 2021-22 and therefore there are no recorded incidents.	It is recognised that security incidents involving data and information handling will happen and it is important that business areas are comfortable reporting these when they have occurred. Areas that have reported or have nothing to report would provide the highest assurance in this category, Failure to report or inconsistent reporting would provide less assurance.
			Please include brief details of how many; when; what were the circumstances; whether personal data was involved. An IAO checklist for dealing with security incidents involving data can be found on the intranet. Please open the document and refer to section 5.

# 11. Health & Safety

11.1 Have you assessed if you have designated essential workers, and have all COVID related risk assessments been completed?	Yes/ <del>No</del>	GCRB is not considered to have designated essential workers.	Covid-19 occupational risk assessment and Covid-19 Wellbeing form require to be completed and regularly reviewed.
11.2 Are all of your staff aware of the facility to request home working equipment?	Yes/ <del>No</del>	Yes, all GCRB staff have been provided by with equipment to facilitate remote working.	The Covid-19 Homeworking Equipment mailbox should be used for requests. Guidance on Home Working equipment and set up is on the Intranet.
11.3 Do you have an appointed and trained Health and Safety Liaison Officer?	Yes/ <del>No</del>	The Executive Director is responsible for Health and Safety and is supported by the Executive Team.	Health and Safety Liaison Officers perform key health and safety functions which help managers discharge their own responsibilities. In particular, local health and safety inductions and first point of contact for Display Screen Equipment queries.
11.4 Do you have a mechanism to keep in contact with staff who work for you?	Yes/ <del>No</del>	The Executive Team usually meet twice a week (normally Tuesday and Thursday). Additional meetings are organised as required.	Managers are encouraged to stay connected with staff who are working from home.

12. Sponsored Bodies			
12.1 Non Departmental Public Bodies - Is your area responsible for sponsoring any NDPBs or other bodies? (If not, please ignore the other questions in this section.)	Yes/ <del>No</del>	The Assigned Colleges are not NDPBs. However, for the purpose of this section of the questionnaire, the responses are based upon the fact the Assigned Colleges are considered to be 'other bodies'.	Please complete for all of the bodies you sponsor answering each question separately and highlight key points of interest (good or bad). Guidance can be found in the NDPB Sponsorship Guidance Notes. A list of public bodies in Scotland is available on the <u>National Public Bodies Directory</u> .
12.2 National Outcomes - Do the operations, business planning and objectives of the public body align with the National Performance Framework (NPF), National Outcomes and Programme for Government?	Yes/ <del>No</del>	The Strategic Plan approved by GCRB in May 2017 sets out the future direction for the organisation. The Regional Outcome Agreement details the deliverable outcomes required of the Assigned Colleges. Both documents reflect the Scottish Government's Purpose and National Outcomes. Other national outcomes are reflected in developmental activities of GCRB e.g. our Regional Programme of Action.	The National Performance Framework (NPF) is Scotland's well-being framework and was refreshed in 2018. The NPF is intended to inform discussion, collaboration and planning of policy and services across Scotland, encompassing the public sector, businesses, civil society and communities. It broadly sets the strategic direction for non-reserved policy areas, which should be aligned to the NPF and National Outcomes, including the work of Public Bodies. It also represents a closer partnership approach with local government to the delivery of services in Scotland. Supporting documents such as the corporate plan, business plan, and framework documents should be in place to enable the sponsor team to develop a shared understanding of joint priorities to contribute towards the National Outcomes, and engagement strategies fully reflect these. The Scottish Parliament Budget Review Group (SPBRG) recommended that Public Bodies should consistently set out how they plan to contribute towards specific National Outcomes in the NPF in their published corporate and business plans, and report on their contribution to National Outcomes through their annual reports, to support parliamentary scrutiny of activities and public spending. This means providing public information about the strategic direction and operational delivery of public bodies and how this aligns to National Outcomes and the NPF.

12.3 Framework Documents - Is there an up to date Framework Document in place, and published, with your sponsored body, with appropriate arrangements in place to monitor adherence to this?	Yes/ <del>No</del>	A Financial Memorandum exists between the Scottish Funding Council and GCRB. A similar document exists between GCRB and each of the Assigned Colleges. A Service Agreement is also in place between Scottish Funding Council and GCRB. The Financial Memorandum and Service Agreement are reviewed on a regular basis.	You should be able to confirm that Framework Documents are finalised or otherwise, that they are up to date, and were subject to proper consultation (including with Public Bodies Unit, your Finance Business Partner (or equivalent) and the Directorate for Internal Audit and Assurance. Details of the steps taken to monitor these areas should also be provided. Governance structures, processes, systems and controls should be in place to ensure robust financial management and monitoring, and compliance with the <u>Scottish Public</u> <u>Finance Manual</u> . Guidance on the role of the sponsoring team is set out in the Model Framework Document for Executive NDPBs and is provided at <u>Annex 3</u> of the Scottish Public Finance Manual section on Accountability.
12.4 Effective Boards - Are you assured that the Board of your sponsored body is undertaking its functions effectively?	Yes/ <del>No</del>	The Board of GCRB undertakes a self- evaluation exercise on an annual basis. The self-evaluation is undertaken on an annual basis with the most recent exercise being completed in May 2022. An externally facilitated evaluation was completed in April 2021.	<ul> <li>The four main functions of public body Boards are:</li> <li>to ensure that the body delivers its functions in accordance with Ministers' policies and priorities;</li> <li>to provide strategic leadership;</li> <li>to ensure financial stewardship; and</li> <li>to hold the Chief Executive and senior management team to account.</li> <li>Boards play a vital role in the accountability chain and therefore it is essential that they have the capability and capacity to perform their functions effectively.</li> </ul>

12.5 Effective Boards – Has your sponsored body undertaken board succession planning as it is described in the <u>guidance notes</u> and is the board ready for the reporting requirements under the Gender Representation on Public Boards Act?	Yes/ <del>No</del>	The Chair is appointed by Scottish Ministers via a public appointments process. The current Chair was appointed on 6 January 2018. The Board's Nominations and Remuneration Committee undertakes succession planning annually and in the course of recruiting new members. The Committee also considers diversity succession planning as part of this process, and approves and publishes a Diversity Succession Plan annually. Gender data is published as appropriate.	<ul> <li>Boards should ensure that they maximise opportunities to develop and attract diverse candidates that meet the body's needs and legislative requirements, See the Succession Planning <u>Guidance</u> for Public Body Boards (as published in February 2017).</li> <li>Designate a person on the board, or have a nominations committee, to take the lead on board appointments</li> <li>Map current skills in the board and the skills needed in the future, within the context of the public body's strategic plan and the board's role</li> <li>Draw up a timeline of when individual board members' and chairs' appointments come to an end or are up for renewal and identify action that can be taken to attract a diverse range of candidates (provide shadowing, mentoring, co-opt potential talent).</li> <li>Provide opportunities to develop prospective board members, particularly for people from groups that are under-represented on your board.</li> <li>Take specific and measurable actions to attract women and meet the Gender Representation Objective - <u>See Guidance here</u>.</li> </ul>
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12.6 Relationships – Are arrangements in place to support strong, strategic relationships with the public body to ensure effective collaboration in delivering business/corporate plans?	Yes/ <del>No</del>	The GCRB Board includes the Chairs of the Assigned College Boards, and at executive level, the Glasgow Colleges Group structure and the collaborative management regional lead arrangements provide a basis for working in partnership to deliver shared strategic objectives.	Sponsorship should always be considered a strategic activity, based on strong relationships characterised by openness, trust, respect and mutual support. The objective is to find ways of working with bodies that engage and empower them in a shared vision and understanding of the strategic environment, while ensuring proportionate arrangements are in place to safeguard public funds and incentivise performance.
			In 2017, the Executive Team and Ministers agreed an approach which has at its core supportive, trusting relationships at a senior level; an appropriate place for the SG in the accountability chain – Ministers holding Chairs to account for the actions of Boards, Boards holding Executives to account for performance - and ensuring proportionate arrangements to safeguard public funds and incentivise performance; and a greater focus on strengthening the Boards and Accountable Officers of public bodies through induction and on-going support.
			As part of this Ministers also agreed revised pay policy and procurement controls. the importance of sponsorship and the relationships between sponsors and public bodies is seen as being crucial in empowering public bodies to deliver outcomes.
			It would be helpful if Sponsor Teams could provide some information, commenting specifically on their experiences from adopting this approach to sponsorship.
12.7 Finance – Does your sponsored body demonstrate financial capability by providing accurate and timely financial monitoring and forecasting information to the Scottish Government?	Yes/ <del>No</del>	As part of the process of attaining 'fully operational status', GCRB has an organisational structure that includes the post of Finance & Resources Director. Financial information is provided to the Scottish Funding Council in accordance with the requirements for the financial forecast returns.	Sponsorship should always be considered a strategic activity, based on strong relationships characterised by openness, trust, respect and mutual support. The objective is to find ways of working with bodies that engage and empower them in a shared vision and understanding of the strategic environment, while ensuring proportionate arrangements are in place to safeguard public funds and incentivise performance.
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	It would be helpful if Sponsor Teams could provide some information, commenting specifically on their experiences from adopting this approach to sponsorship.

12.8 Fair Work - Is your sponsored body an exemplar as a Fair Work employer: demonstrating commitment to fairness through being an accredited Living Wage employer, promoting:- equality, youth employment, engagement and workforce development and working to deliver the Fair Work Convention's Fair Work Framework?	Yes/ <del>No</del>	The Glasgow Region Strategic Plan for College Education includes a commitment to promote and embed Fair Work values and Behaviour. GCRB is an accredited Living Wage employer, as are all three colleges in Glasgow.	Is your sponsored body an accredited Living Wage employer and if not when does the body envisage this will be reached? For example, you may wish to check if the body is an accredited Living Wage employer; has it got an invest in youth plan with stretching targets to recruit and develop young people (e.g. recruiting Apprentices); runs an employee engagement survey and takes action on the results; works in positive partnership with trades unions. How have you used procurement policies to encourage the living wage and youth employment in your supply chain? The Equality Action Plan for Apprenticeships aims to ensure that our Apprenticeship family is open to all in our society. You should look to provide some detailed examples of how your sponsored body (as an employer) is taking action to tackle equality issues and any information that it has taken to register as a living wage and/ or carer positive employer. Please provide information which will highlight the actions your sponsored body has been doing to support Youth Employment. As an example; a public body organisation is a disability confident employer, carer positive employer. They are ambitious about diversity and inclusion. They encourage applications from the right candidates regardless of age, disability, race, sex, gender identity, sexual orientation, pregnancy and maternity, religion or belief. They may also have published an Apprenticeships Equality Action Plan 3rd annual update in 2019 outlining progress and the focus for activity in 2019-20.
12.9 Assurance - Has your sponsored body engaged with the	<del>Yes/No</del>	Not applicable.	Systems should be in place to ensure all business cases are assessed.
appropriate authority and recorded all relevant projects with the appropriate authority?			For all <u>Major Investment Projects</u> as defined in the <u>Scottish</u> <u>Public Finance Manual</u> : a <u>Risk Potential Assessment Form</u> should be completed and submitted to the SG's Portfolio, Programme and Project Assurance Hub.
			For investment in projects containing an IT or digital elements:

			<ul> <li>For investment in projects containing an IT or digital elements:</li> <li>Integrated Assurance and Approval Plans should be completed for projects by your sponsored body.</li> <li>Projects should be registered on the Project Register, held by the Digital Assurance Office.</li> <li>Further advice can be found on the <u>Technology</u> Assurance Framework or by emailing Digital Assurance Office</li> <li>For construction and infrastructure projects:</li> <li>Projects should be registered on the SG's Infrastructure Projects Database if they have an Outline Business Case prepared and a total capital investment of £5 million or more.</li> </ul>
12.10 Fraud - Does your sponsored body have effective arrangements to counter fraud, bribery and corruption through a well communicated counter fraud policy, an up-to-date fraud action plan and effective avenues for reporting suspicions of fraud?	Yes/ <del>No</del>	GCRB approved an Anti-Bribery Policy at the meeting of the Board on 22 May 2017 and an Anti-Fraud Policy on 30 October 2017. Both of these policies were reviewed by the Board in 2021.	Processes should be in place to ensure that policies for fraud response are consistent with SG guidance, including a review of current fraud response activity, whilst ensuring robust reporting procedures have been adopted by sponsored bodies. Further information can be found in the <u>Fraud section of the</u> <u>SPFM</u> and the SG Counter Fraud Strategy, Policy and Response Plan and <u>Protecting Public Resources guidance</u>
12.11 Procurement - How does your sponsored body use public procurement to support a green recovery and wider climate and circular economy ambitions through procurement, embedding climate considerations in organisational procurement related activities?	Yes/ <del>No</del>	In 2021, GCRB appointed a Project Manager (Environment and Sustainability) as part of the regional Programme of Action. This two- year, fixed term post will support the Glasgow college region's approach to tackle climate change.	See Protecting Scotland, Renewing Scotland: The Government's Programme for Scotland 2020-2021 Page 49 A National Mission To Create New Jobs Good Jobs and Green Jobs. Contact, Capability Development manager, CSGPD Scottish Procurement, <u>procurementcapabilityenquiries@gov.scot</u>
12.12 Procurement - What measurable improvements has your sponsored body made to contract management?	Yes/ <del>No</del>	In 2018, GCRB took the decision to reduce the reliance upon external contractors. As a result, expenditure on contractors significantly reduced.	Contact, Capability Development manager, CSGPD Scottish Procurement, procurementcapabilityenquiries@gov.scot

# 13. Compliance

13.1 Do you have processes in place to ensure compliance with applicable existing, new and updated policies, procedures, laws and regulations – including those referred to separately in this Checklist e.g. the SPFM?	Yes/ <del>No</del>	GCRB regularly monitors sector updates (e.g. Colleges Scotland briefings and SFC announcements). The GCRB Executive Team also participate in sector/role specific forums to ensure GCRB is updated on compliance issues.	Processes might refer to desk instructions, local checklists, retention schedules and/or periodic management checks e.g. relating to the existence of statutory authority for expenditure and the holding / provision of information
13.2 Do you have appropriate arrangements in place to ensure staff are appropriately trained and supported to handle FOI and EIR requests in line with legislative requirements?	Yes/ <del>No</del>	<ul> <li>Handling of requests received under FOI(S)A and EI(S)R is overseen by a member of staff with appropriate knowledge and experience. Arrangements are reviewed periodically to ensure compliance</li> <li>GCRB's publication scheme was reviewed against the revised model scheme in October 2018 and some revisions identified to ensure full compliance.</li> </ul>	under the Data Protection and Freedom of Information Acts. The level of response should reflect the work of the Division. (Guidance on Data Protection responsibilities and FOI is available on the Intranet.)

13.3 Are your staff appropriately trained and aware of their Data Protection and information security responsibilities?	Yes/ <del>No</del>	Data protection and records management arrangements are proportionate to the small scale of the organisation as a data controller. Data Subject Access requests are overseen by the Board Secretary. Data Protection training was previously provided to all staff.	IAOs must ensure that their staff successfully complete the mandatory eLearning packages (Data Protection and Responsible for Information) (please note: specific IAO training module). All staff should have read and understood the relevant policies and guidance (such as DPA, IT Code of Conduct, and Records Management). All staff should be aware of how to handle requests for personal data: from individuals (Subject Access Requests) as well as 3rd parties; and when a Data Sharing Agreement is appropriate. (Guidance can be found on the Intranet: Subject Access Requests; Conduct; Data Protection.
13.4 How confident are you that your staff are aware of the cyber threats pertinent to your business. Are you and your staff taking all required actions about safeguarding your information assets and the corporate infrastructure? Are any risks of attack known, understood and formally accepted?	Yes/ <del>No</del>	City of Glasgow College provides all IT services to GCRB. GCRB relies upon the cyber security measures that the college uses to protect its own software and systems. City of Glasgow College continues to develop its approach to Cyber Security and holds Cyber Essentials Plus accreditation.	<ul> <li>Staff need to be aware of the main cyber risks and be taking action to mitigate the risk of a cyber-incident.</li> <li>Staff have to be aware of and minimising their cyber risk in the following areas: password protection, building access, social media, workspace – desk area, computer/laptop, remote working – anywhere outside a Scottish Government building including working from home, on transport, in public spaces, the cloud.</li> <li>Any procurement and business process must take regard of cyber threats. Any risk the business takes in this area must be stated, understood and signed off. Any threat to the corporate infrastructure requires additional clearance.</li> </ul>
14. Review	1		1
14.1 How confident are you about the robustness of your arrangements for reviewing and improving the effectiveness and efficiency of controls in your area?	Yes/ <del>No</del>	The GCRB Executive Team continually review the effectiveness and efficiency of GCRB's internal controls. This checklist provides a very useful tool to assist with the review process.	You should be reviewing internal controls in your area at appropriate points in time e.g. when processes change or operational shortcomings come to light. Has anything happened during the course of the financial year that has raised questions about the controls that you have in place? E.g. has the running of the regular financial monitoring exercises suggested any shortcomings? Have there been any particular queries that may lead to doubts about how the controls are operating?

Yes/ <del>No</del>	The GCRB Executive Team is confident that the evidence available underpins the assessment above. This assessment is also supported by independent review, for example internal audit.	You should provide details of any key weaknesses identified and the steps taken to resolve these. How confident are you that you and your staff are sufficiently aware of the types of independent review (e.g. Internal Audit, independent assurance and Gateway Review, ICT Assurance Review, Digital First Review, review by external consultants) to support your assurance, and of how to access them?
Yes/ <del>No</del>	The Internal Audit Plan for 2021-22 details the areas of activity that have been subject to independent review. If recommendations are made these are incorporated into an action plan that is implemented by the GCRB Executive Team and overseen by the Audit & Assurance Committee.	You should provide details of any key weaknesses identified and the steps taken to resolve these. How confident are you that you and your staff are sufficiently aware of the types of independent review (e.g. Internal Audit, independent assurance and Gateway Review, ICT Assurance Review, Digital First Review, review by external consultants) to support your assurance, and of how to access them?
Yes/ <del>No</del>	The principal independent reviews have been undertaken by internal and external audit. Action plans have been produced in response to recommendations and progress reported on a regular basis to the Audit & Assurance Committee.	
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<del>Yes</del> /No	There are no other issues that the executives of GCRB are aware of.	Provide here details of any other control problems, specific to your area of responsibility, which you have encountered during the year.
	Yes/ <del>No</del> Yes/ <del>No</del>	Yes/NoThe revidence available underpins the assessment above. This assessment is also supported by independent review, for example internal audit.Yes/NoThe Internal Audit Plan for 2021-22 details the areas of activity that have been subject to independent review. If recommendations are made these are incorporated into an action plan that is implemented by the GCRB Executive Team and overseen by the Audit & Assurance Committee.Yes/NoThe principal independent reviews have been undertaken by internal and external audit. Action plans have been produced in response to recommendations and progress reported on a regular basis to the Audit & Assurance Committee.Yes/NoThere are no other issues that the