

Audit and Verification Activity 2023/2024

Date	Subject	Type of Scrutiny	Mode	Contact		Outcomes	
				UHI Shetland	Verifier	Actions	Good Practice
20/03/2023	Student Recruitment	Internal Audit		Laura Burden	BDO	That UHI Shetland proceed with the financial analysis exercise to determine the cost and income of courses and, where courses are loss making, UHI Shetland should document the justification for continuing to run the courses; and agreed actions to address the issues leading to the loss. This should form part of the annual portfolio review going forward.	<p>UHI Shetland takes a proactive approach in providing information to potential applicants through making presentations at schools, attending parents' evenings and career events, briefing local careers advisors on course provision, and hosting open days/evenings.</p> <p>Updates, such as changes in courses or finance cut off dates, are communicated through social media or directly with applicants/students as appropriate.</p> <p>Comprehensive information for each course is available on the SUHI website.</p> <p>UHI Shetland receives monthly updates from UHI on the level of interest shown and how this converts into formal applications. We found that UHI Shetland's</p>

							<p>conversion rate was consistently above the average for the academic partners.</p> <p>As part of the process for proposing a new course, a Course Costing Template must be completed which calculates the minimum viable number of students. Various options are considered where there are low recruitment numbers, such as re-recruiting, embedding the programme within another course, or running the course remotely with another partner.</p> <p>There are annual academic portfolio review meetings which look at the health and viability of taught courses.</p> <p>The Learning, Teaching and Research Committee receives reporting on student recruitment at each of their quarterly meetings. This report then forms part of the Principal's Report which goes to each Board Meeting.</p>
03/04/2023	Health and Safety	Internal Audit		Gemma MacGregor	BDO	Review Risk Assessment procedures, timescales and documentation.	There are clear and concise roles and responsibilities in relation to health & safety,

						<p>Tighten procedures and documentation of legionella checks.</p> <p>That participation in, monitoring and recording of Health and Safety awareness training be tightened.</p> <p>Risk Assessment, Safe Systems of Work and Health and Safety policies to be monitored in a timely manner and formally approved; periodic monitoring to be instituted.</p> <p>Display Screen Assessment completion rates to be monitored and failure to complete highlighted to the appropriate individual/line manager.</p> <p>The Operations and Estates Committee Terms of Reference to be amended to state the frequency of meetings.</p>	<p>which have been formally documented within the Health & Safety Policy.</p> <p>There is a suite of health & safety policies and procedures made available to staff via SharePoint.</p> <p>A high volume of risk assessments has been recorded on Peninsula.</p>
17/04/2023	BCP	Internal Audit		Gemma MacGregor	BDO	Perform a risk assessment to identify business-critical function and systems, and minimum resources required to operate these.	

					<p>Undertake impact assessments for each and develop clear action plans for each system.</p> <p>Identify and document the incidents that could cause the BCP to be invoked, including key roles and responsibilities.</p> <p>Core roles and responsibilities to be documented in detail in the BCP.</p> <p>The policy should be regularly reviewed.</p> <p>A testing schedule should be drawn up for business continuity, reflecting likelihood and impact of each risk, and ensuring a strategic approach to testing is developed and regular tests carried out. The plan should be reviewed to reflect the outcomes of each test.</p> <p>Business continuity training to implemented for relevant staff and a regular refresher programme put in place. Compliance to be monitored.</p>	
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						<p>BCP to be approved by committee and the decision documented in the minutes.</p> <p>Manager to consider business continuity risks, and to document and manage them in line with risk management processes.</p>	
July 2023	SCQF	External Verification	Blended	Kevin Briggs	Helen Murdoch	<p>Review process to be finalised, documented and forwarded to SCQF.</p> <p>Annual monitoring and review activity to be identified within the policy document; paperwork to be retained to support review processes.</p> <p>Institute review of programmes that fall outwith the annual review cycle.</p> <p>Inform SCQF of implementation of centralised recording for credit rated programmes.</p> <p>Review certificate and use of the term 'rated'.</p> <p>Detailed recommendations relating to certain courses.</p>	

Annex A – Detailed Findings, Health and Safety Audit

Recommendations	Good Practice
Management to review Peninsula to ensure that risk assessments which are incomplete are prioritised and completed, including the input of review dates.	
Reconsider the frequency of risk assessment to ensure that a suitable timescale is adopted for different risk assessments. Some should take place annually, but some could reduce to three-yearly unless changes to arrangements occur.	
Completion of risk assessments be monitored to ensure non-completion can be escalated before the due date has passed.	
That College ensures legionella checks take place as required and are fully, appropriately, recorded in the check logs.	
That checks be monitored by a second staff member to ensure there is oversight of the completion of checks.	
That staff completion of mandatory Health and Safety awareness training be fully recorded centrally, including completion date and the next refresher date.	
That completion of training is monitored regularly to ensure staff complete the training as and when required.	
That the Risk Assessment and Safe Systems of Work Policies be monitored in a timely manner and are thereafter subject to a formal approval process. The Policy should be reviewed and approved on a periodic basis, recommended to be every three years.	
Display Screen Assessment completion rates should be monitored regularly to identify any individuals who have not completed the questionnaire near to the due date. Non-completion should be raised with the individual and escalated to Line Managers where necessary.	
Health and Safety Policy to be amended to state the frequency at which fire risk assessments should take place; the policy should then be re-circulated to all staff.	
Health and Safety policies to be reviewed to identify that those that are due/overdue review, to ensure they are prioritised and amended as necessary.	
That the Operations and Estates Committee Terms of Reference be amended to state the frequency of meetings.	

Recommendations	Good Practice
<p>We recommend that UHI Shetland performs a risk assessment to identify all business critical functions and systems, and the minimum resources required to operate these. In addition, an impact assessment should be undertaken for each, and should be used to set a maximum allowable time to recover operations, and a target recovery time.</p>	
<p>Upon completion of the above, we recommend that clear action plans are developed for each business critical system or function. The action plan should document the process to be followed in the event of disruption, actions to be taken and procedures to be followed for restoration, and should be designed to achieve intended recovery times. It would be beneficial to record the above in a checklist-type, easy to read format.</p>	
<p>We recommend that UHI Shetland documents a range of incidents that could cause the BCP to be enforced, along with the procedures to be followed for each in a 'check list' format. Example incidents could include fire evacuation, a serious medical emergency, severe weather, terrorist threat, power failure and loss of gas supply. The above should be recorded in a checklist-type, easy to read format.</p>	
<p>We recommend that the BCP is updated to provide a detailed account of responsibilities for each relevant staff member. In addition, key roles and their responsibilities should also be confirmed, including first aiders and fire marshals. We also recommend that the responsibilities of the core BCT Team should be clearly documented within the BCP.</p>	
<p>Lastly, it should be ensured that required updates to roles and responsibilities are monitored and made immediately, particularly following any staffing changes to ensure these remain accurate.</p>	
<p>We recommend that UHI Shetland develops a testing plan/schedule for business continuity which should be reviewed regularly to ensure a strategic approach to testing is developed and implemented. This plan should ensure that varying categories of events are scheduled to be tested on a regular basis, based upon the likelihood and overall risk.</p>	
<p>We recommend that outcomes (including confirmation of the achievement of recovery times), lessons learned and required actions</p>	

Annex B – Detailed Findings, Business Continuity Planning

are formally documented, and thereafter reflected within the plan for each test.	
We recommend that the College implements business continuity training for relevant staff. Regular refresher training should be provided going forward (for example, every three years), and the College should ensure it maintains sufficient evidence of attendance/completion.	
We recommend that an IT Disaster Recovery Plan is developed to recover IT functions and systems, which should give consideration to Recovery Time Objectives and Maximum Tolerable Periods of Disruption.	
We recommend that the BCP is submitted for approval, and that meeting minutes clearly evidence the approval.	
We recommend that the College ensures that those given access to the full version of the BCP aligns to the key persons documented within the BCP, to ensure access is appropriately controlled.	
We recommend that management collectively consider any business continuity risks, and that these are documented and managed in line with UHI Shetland's risk management processes.	

Recommendations	Good Practice
Complete the review process underway in relation to the Shetland UHI Credit Rating Programme policy and forward a copy to SCQFP once finalised/ paperwork to support 4 stages of credit rating.	
Ensure the paperwork used within the credit rating process clearly captures the 4 stages noted (writing, credit rating, vetting and final sign off) and the decisions are clear to both an internal and external reader.	
Ensure the number of years (lifecycle) allocated to the credit rated programme at point of approval is clearly recorded within the paperwork.	
Incorporate annual monitoring and programme review activity within the policy document and that corresponding paperwork is in place to support both activities.	
Consider how credit rated programmes that fall outwith the usual cycle of annual curriculum review activity will be annually monitored.	
Advise SCQFP if the proposed decision to centralise the recording of all certificates for credit rated programmes goes ahead.	
Separate the History of Shetland in 100 sites programme entry on SCQF database into 2 separate records Part 1 and Part 2.	
Revisit the certificate and decide on whether the use of 'rated' needs to be supplemented to read credit rated or simply removed.	
Update the SCQF Database as follows: <ul style="list-style-type: none"> • Update the record for the Movie Maker for iPads programme as soon as possible. • Review the Recording Petty Cash Transaction programme as soon as possible and update the record on completion. • Check the full title of Introduction to Knitting Skills programme has been input correctly. 	
Revisit the two college certificate programmes Managing Heritage and Shetland's Archaeological Monuments being advertised on the college website at SCQF level 6 as these do not appear on the SCQF database.	