

1 Introduction

- 1.1 As part of the agreed Internal Audit plan, we have carried out a review of the volunteering arrangements in place within Loch Lomond & the Trossachs National Park Authority (the Park Authority).
- 1.2 Volunteering at the Park Authority began in 2003, initially within the Ranger Service. In 2012 volunteering was split into two pathways, Practical Conservation Volunteer (PCV) and Volunteer Ranger (VR). Since then, the hours contributed by volunteers have more than tripled and the Park Authority partners now utilise volunteers to help with the conservation and preservation of the park's natural and cultural heritage.
- 1.3 The Education, Inclusion, and Volunteering within the Park Authority is responsible for the recruitment, training, and deployment of volunteers. Volunteering Management Software, CERVIS, is used to keep track of all volunteers currently volunteering for the Park Authority. It allows volunteers to decide which opportunities they want to volunteer for and allows management to allocate these opportunities to the correct volunteer role.
- 1.4 The purpose of the audit was to provide assurance on the arrangements for the recruitment of volunteers and the process for deploying them across the Park Authority. The scope of the audit included confirming:
 - That all essential criteria for volunteers is clearly defined.
 - That the roles and responsibilities within the volunteering process are clear and understood.

- That a list of areas/tasks that volunteers can be involved in is held.
- The contact details on the Park Authority website in relation to volunteering are accurate and up to date.
- The process for receiving, reviewing and shortlisting volunteer applications, including any checks that are required.
- The process in place for deploying volunteers across the Park Authority, including how this is decided and by whom.
- That participants have been provided with relevant training and support to fulfil their role.
- That personal data is held in line with General Data Protection Regulation (GDPR) requirements, and
- The information reported to senior management and/or the Board in relation to volunteering.

2 Audit Opinion

2.1 Based on the audit work carried out a reasonable level of assurance can be placed upon the control environment. The audit has identified some scope for improvement in the existing arrangements and four recommendations which management should address.

3 Main Findings

- 3.1 We are pleased to report that key controls are in place and generally operating effectively. The expected criteria for volunteers have been clearly defined. There is a privacy notice for volunteers contained within the Register of Interest and Application Form which details all the information gathered during the recruitment process, including who the information may be shared with. The arrangements in place for the deployment of volunteers across the Park Authority are volunteer led and only opportunities which are not business critical are made available for selection. The contact details on the Park Authority website, in relation to volunteering information, are accurate and up to date. Information in relation to volunteering is reported to senior management and the Board.
- 3.2 However, our audit testing found that there are areas of non-compliance with expected controls. Through discussion, we found that there are agreed processes in place for receiving and reviewing applications, and that there are a number of volunteer related documents, however the documents do not fully reflect the agreed processes. The arrangements for

- disposing of volunteer records are not documented and have not been followed as required.
- 3.3 Through review of a sample of 15 volunteer files, we found that at least one part of the advised process was not followed in eight instances.
- 3.4 Although volunteers are required to be 16 years of age or over, volunteers are not required to provide identification unless they become a volunteer driver. Protection of Vulnerable Groups (PVG) checks are required for all VRs, however we found that the PVG information held is not in line with GDPR requirements.
- 3.5 Central training records which detail all the training undertaken by each volunteer are held, however through the sample testing, we found an instance where the required first aid training had not been undertaken.

3.6 An action plan is provided at section four outlining our observations, risks, and recommendations. We have made four recommendations for improvement. The priority of each recommendation is:

Priority	Definition		
High	Key controls absent, not being operated as designed or could be improved. Urgent attention required.	0	
Medium	Less critically important controls absent, not being operated as designed or could be improved.	3	
Low	Lower-level controls absent, not being operated as designed or could be improved.	1	
Service Improvement	Opportunities for business improvement and/or efficiencies have been identified.	0	

- 3.7 The audit has been undertaken in accordance with the Public Sector Internal Audit Standards.
- 3.8 We would like to thank officers involved in this audit for their cooperation and assistance.
- 3.9 It is recommended that the Chief Internal Auditor submits a further report to the Audit and Risk Committee on the implementation of the actions contained in the attached Action Plan.

4 Action Plan

No.	Observation and Risk	Recommendation	Priority	Management Response
Key C	Key Control: The arrangements in place for receiving and reviewing volunteer applications are documented.			
1	Although there is a documented recruitment plan which details a calendar and description of each step of the recruitment process, it does not clearly document the roles and responsibilities at each stage. We also found that the following processes are not documented: • Application review process. • Induction process. • Process for deploying volunteers. • PVG application and review process. • Monitoring and reporting arrangements. Where processes and roles and responsibilities are not documented, there is an increased risk that staff are unclear on the processes they are responsible for or that steps may be missed.	volunteering processes, including but not limited to those noted within the observation, are documented. This should include officers' roles and responsibilities. Thereafter, all documents should be reviewed regularly, updated as necessary, include version control,	Medium	Produce and implement version-controlled procedures for relevant processes, which are annually reviewed, updated if necessary, and shared with the relevant staff. As these processes cover a full year's delivery, having a 12-month implementation window allows us to document the process at the point of delivery ensuring it reflects any updates required. Officer Responsible for Implementation: Volunteer Advisor Timescales for Implementation: 28 February 2025

Action Plan

Audit Opinion

Through review of our sample testing, we found that one volunteer's record

exceeded the retention period.

No.	Observation and Risk	Recommendation	Priority	Management Response	
Key (Key Control: All volunteers meet the expected criteria and personal details are held in line with GDPR requirements.				
2	Although we were advised that volunteers must be 16 years or over, identification is not requested unless they want to become a volunteer driver. From review of 15 volunteer files, no form of identification confirming their age was held for seven volunteers. The remaining eight volunteers were all volunteer drivers. All VRs are subject to a PVG check, however following a review of a sample of 10 VR files, we found that in all instances, a copy of the Disclosure Scotland certificate was retained. As per GDPR requirements, personal information should not be retained for longer than required, therefore once the certificate has been checked and the volunteer recruited, the document should be securely disposed of. We were advised that volunteer records should be retained for three years after they become inactive, and that an officer has been allocated responsibility for reviewing and disposing of the records as required. However, we found that this process is not documented or scheduled.	 Put in place arrangements so that identification is obtained where this is required. Ensure that the organisation only holds a record of the Disclosure Scotland Certificate number and date of issue for all VRs to ensure GDPR requirements are being met. Ensure that a formal schedule for reviewing volunteer information is agreed and documented. Review the current records and ensure that any that have exceeded the retention period are disposed of securely. 	Medium	Response: Accepted ID check will be included in the recruitment process. We will ensure all personal data is processed in line with GDPR requirements. This will include updating our Disclosure Scotland certificate process, documenting our disposal process, and confidentially disposing of any records that have exceeded the retention period. Officer Responsible for Implementation: Volunteer Advisor Timescales for Implementation: 31 August 2024	

No.	Observation and Risk	Recommendation	Priority	Management Response
	If a form of identification is not sought for all volunteers, there is an increased risk of underage individuals being appointed. Holding personal information for longer than required, is in breach of GDPR requirements which could lead to the			
	Park Authority incurring financial penalties.			
Key (Control: The volunteering process is adhere	d to at all times.		
3	 From review of a sample of 15 volunteer files, we found that: One application was incomplete. Two volunteers had not completed a Volunteer Agreement. Four of the eight Driver Declaration forms had not been countersigned. Safe Driver Policy's for six of the eight volunteer drivers had not been countersigned. Where processes are not fully followed there is an increased risk that volunteers may not be fully equipped and/or suitable 	Management should remind staff of the importance of fully completing the volunteering process, including ensuring that all forms are signed. Action should be taken to review all volunteer records to address the issues identified in the sample testing.	Medium	Response: Accepted 1. Relevant processes will be documented and implemented as per control 1. 2. Records will be reviewed, and appropriate action taken to address any gaps. Officer Responsible for Implementation: Volunteer Advisor/ Behaviour Change Manager.
	for the role.			Timescales for Implementation:
				28 February 2025 as per recommendation 1
				2. 31 August 2024

Introduction

No.	Observation and Risk	Recommendation	Priority	Management Response	
Key (Key Control: Sufficient training and support have been provided to volunteers.				
4	delivered by staff to volunteers at the start	Management should review all VR training records to ensure that all VRs have completed the first aid training, and that it is up to date.	Low	Response: Accepted Records have been reviewed and all VRs requiring First Aid training (either new or refresher) have been scheduled. Records will be updated	
	A record of the formal training undertaken by each volunteer is maintained. However, through review of the training records we found that the required First			subsequently. Officer Responsible for Implementation:	
	Aid training which all VRs have to undergo has not been undertaken for one VR in the sample reviewed.			Volunteer Advisor	
	This increases the risk that volunteers are			Timescales for Implementation:	
	not suitably trained to undertake their role.			31 May 2024	