AUDIT GLASGOW

Loch Lomond & The Trossachs National Park Authority

Establishment Visit

Final Report

August 2024

1 Introduction

1.1 As part of the agreed 2024/25 Internal Audit plan, we have carried out an unannounced spot check visit at the National Park Visitor Centre in Balmaha.

1.2 The National Park Visitor Centre in Balmaha, comprises an exhibition of the Loch Lomond and the Trossachs National Park, its geology, and the Highland Boundary Fault. The Visitor Centre also provides advice for visitors to the National Park.

1.3 The purpose of the audit was to gain assurance that there are adequate controls in place in relation to:

- Cash Management;
- Physical Security; and
- Information Security.

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

Cash Management

3.1 It was confirmed through discussion and observation that petty cash is being managed effectively at the Visitor Centre and we were able to reconcile the petty cash funds at the time of visit. Contents insurance cover for the safes is not in place, however due to the relatively low cash amount held in the safe (does not exceed £500), management have determined that insurance is not appropriate/required.

3.2 The Visitor Centre has two safes on-site. One is used for valuable lost property, the other is used to hold the petty cash funds and the proceeds from the accessible toilet (prior to it being taken to Headquarters for banking). However, we found that the keypad codes to access the safes have not been updated in the last three years.

3.3 We were advised that cash payments are not accepted by staff at the Visitor Centre. The only cash received is from the accessible toilet machines that charge £0.50 per user. Through discussion, it was found that when the machine is emptied, the contents are not reconciled to confirm that the amount is as expected before it is passed to Headquarters for banking.

3.4 We found that an Income Collection and Management Policy is in place, however the document was last updated in 2011. We were previously advised (in August 2022) as part of the 2022/23 Establishment Visit audit that this Policy was scheduled to be reviewed in 2022/23 as part of the Corporate Policy Review Plan therefore no recommendation was made at the time, however this has not been actioned as advised. Although there are procedures in place for the management of petty cash, these have not been reviewed since 2018.

Physical Security

3.5 The auditors were asked for identification and signed in by a member of staff and staff were easily identifiable via uniforms.

3.6 We confirmed that the Visitor Centre has secure doors and windows and observed that the reception area was appropriately staffed at the time of the visit.

3.7 We confirmed through discussion that various codes at the establishment have not been changed in several years or when turnover of staff occurs:

- Internal and external staff doors – An external door allowing access to the Visitor Centre and upstairs office. The internal door separating the reception area and toilets from the staff areas. We note that there are occasions when contractors are provided with door codes.
- Key box – Storage of keys during out of hours and keys not in use for the Visitor Centre, accessible toilet machine, and vehicles at the establishment.
- Security alarm – The alarm system for the entire establishment.

Information Security

3.8 We found at the time of the visit that all hard copy information was stored appropriately, with Ranger pocketbooks locked securely in private lockers and a clear desk policy being followed.

3.9 We confirmed that a register of all tablets held at the Visitor Centre is maintained and each tablet is encrypted via a six digit pin. Appropriate arrangements are in place for dealing with lost or broken devices, including ensuring that any data is remotely wiped.

3.10 Staff at the Visitor Centre were aware of the Information Security Policy and Record Retention Schedule. Reminders are issued regularly to staff in relation to information security issues and training requirements.

3.11 We also found that there is no regular review of user IT access rights.

3.12 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	Total
High	Key controls absent, not being operated as designed or could be improved. Urgent attention required.	1
Medium	Less critically important controls absent, not being operated as designed or could be improved.	1
Low	Lower-level controls absent, not being operated as designed or could be improved.	2
Service Improvement	Opportunities for business improvement and/or efficiencies have been identified.	0

3.13 The audit has been undertaken in accordance with the Public Sector Internal Audit Standards.

3.14 We would like to thank officers involved in this audit for their cooperation and assistance.

3.15 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 Control: Buildings, and the assets, information and people within them are adequately secured and managed appropriately.				
1	We were advised that the codes on the keypads for the safes, restricted access doors, key boxes and the security alarm have not been changed in the last three years. There is therefore no schedule in place to actively change codes, despite there being a high turnover of staff due to the use of seasonal staff. We were also advised that during this period, cleaners and some contractors have been provided with door codes. The current arrangements increase the risk that access to restricted areas and assets is granted to unauthorised individuals.	Management should update all door, key boxes, safe and alarm codes immediately to ensure that access is restricted to appropriate personnel. Thereafter the codes should be updated at least six monthly or when a contractor or cleaner no longer requires access. Management should also remind all establishments of the importance of changing codes regularly and request that any codes that have not been changed in the last six months are updated.	**High**	**Response:** Accepted The door, safe and alarm codes referred to have been updated immediately. Updating of door and alarm codes for all buildings will be scheduled in the estates management system as a recurring task for the Facilities Officer. A reminder will be sent to those responsible for maintaining security codes at all buildings of the importance of regular updates to codes. **Officer Responsible for Implementation:** Facilities Manager **Timescales for Implementation:** 31 Aug 2024

No.	Observation and Risk	Recommendation	Priority	Management Response
2	We were advised that for visitors to enter the accessible toilet, there is a small charge of £0.50 which must be paid into an automatic machine to release the door. The cash is held within the automatic machine until it is emptied. Once emptied by staff, the amount is counted but is not reconciled before being passed to Headquarters for banking. This increases the risk that misappropriation of funds may go unnoticed.	Management should ensure that the toilet income is reconciled by the Visitor Centre staff before being passed to Headquarters for banking. A record of this should be held for future reference.	**Low**	**Response:** Accepted A process for reconciling toilet income on site at Balmaha Visitor Centre will be explored. A challenge exists around technical knowledge of reconciliation function of toilet barriers. If reconciliation is not possible due to technical function then an additional measure will be put in place to reduce risk of fraud. **Officer Responsible for Implementation:** Facilities Manager and Ranger Team Leader **Timescales for Implementation:** 30 Nov 2024
3	We were advised that managers instruct the IT department to assign user access rights for new staff members and are expected to advise the IT department of any changes. However, a review of user access rights is not regularly carried out to ensure that the expected process is being undertaken and that access rights remain appropriate. The current arrangements increase the risk that users may have access to	Management should review user access rights on a regular basis to ensure that these remain up to date.	**Low**	**Response:** Accepted Review of user access rights to be undertaken on an annual basis. **Officer Responsible for Implementation:** IS Manager **Timescales for Implementation:**

No.	Observation and Risk	Recommendation	Priority	Management Response
	information which they should no longer have access to.			31 Dec 2024

Key Control: Cash management procedures are in place and up to date.

No.	Observation and Risk	Recommendation	Priority	Management Response
4	An Income Collection and Management Policy is in place, however the document was last updated in 2011. We were previously advised (in August 2022) as part of the 2022/23 Establishment Visit audit that this Policy was scheduled to be reviewed during 2022/23 as part of the Corporate Policy Review Plan therefore no recommendation was made, however this has not been actioned as advised. Although Petty Cash Procedures are in place, these have not been reviewed since 2018. This increases the risk that the documents may no longer reflect current practice and therefore incorrect practices may develop.	Management should review the Income Collection and Management Policy and Petty Cash Procedure to ensure that they are reflective of current practice. Thereafter the updated documents should be communicated to all relevant staff and reviewed regularly.	**Medium**	**Response:** Accepted Income Collection and Management Policy and Petty Cash Procedure are scheduled to be reviewed, updated and communicated to relevant staff as part of the ongoing overview of organisational Financial Policies and Procedures which is being undertaken and monitored as part of LL&T2021C / Financial Governance / Recommendation 1. These will then be reviewed regularly as part of the policy review timetable. **Officer Responsible for Implementation:** Finance Manger **Timescales for Implementation:** 31 Dec 2024