

2025 Question - Forvis Mazars	2025 Management Response
<p>1) What are management's processes in relation to:</p> <p>a) undertaking an assessment of the risk that the financial statements may be materially misstated due to fraud or error (including the nature, extent and frequency of these assessments);</p> <p>b) identifying and responding to risks of fraud in the organisation, including any specific risks of fraud which management have identified or that have been brought to its attention, or classes of transactions, account balances, or disclosure for which a risk of fraud is likely to exist;</p> <p>c) communicating to employees views on business practice and ethical behaviour (for example by updating, communicating and monitoring against the organisation's code of conduct); and</p> <p>d) communicating to those charged with governance the processes for identifying and responding to fraud or error?</p>	<p>a) A formal fraud risk assessment was conducted in May 2025 and the results will be reported to the audit and risk committee. This followed an assessment against 47 individual risks, which were scored in terms of impact and likelihood. No medium or high rated risks were identified in relation to financial statement misstatement and there were no identified risk increases in the period since the previous formal fraud risk assessment.</p> <p>b) The National Park Authority has a risk management framework, which has been reviewed by the Audit and Risk Committee (ARC) and presented to Board. This sets out the tools in place to manage and report on risk including our risk registers, the methodology for assessing risk (impact and likelihood), the risk types and the risk categories. The definition of financial risk includes non-compliant financial reporting and the impact assessment quantifies the financial risks (which would include misstatement in the financial statements). There is a corporate wide risk register and a project risk register and the owners will identify risks for reporting to the High Priority Project Board and Executive team (and upwards to the ARC and Board). Any risks that impact the financial statements, including any risk of financial statement misstatement, would be reported through the registers.</p> <p>c) The Authority issued the most recent version of the Staff Code of Conduct in March 2023. This outlines the standards of behaviour expected from all members of staff. This was circulated to all staff via an update on Park Central.</p> <p>d) The risk management framework identifies the reporting and escalation of risks, including trigger points. This highlights the escalation to the High Priority Project Board, Executive and ARC and Board of risks within the risk registers. It is based on scoring in terms of impact and likelihood.</p>

<p>2) What is management's processes to identify and respond to the risk of fraud and possible breaches of internal control? Is management aware of any breaches of internal control during 2024/25? Please provide details.</p>	<p>A fraud, bribery and corruption policy is in place which outlines our approach to fraud risk, including prevention and responding to fraud and fraud risk. There are processes across the organisation, including IT, HR, Finance and Legal to prevent and identify fraud. There is a Fraud Response Plan which outlines the arrangements in place when a suspected fraud is reported.</p> <p>One attempted fraud incident occurred in 2024/25 - A request was made to update the bank account details of a supplier by a third party. Our financial procedures were able to pick up the fraudulent request and Police Scotland were informed. External Audit, Internal Audit, our Scottish Government Sponsorship Team and members of the Audit and Risk Committee were all notified of the incident in April 2024.</p>
<p>3) Do you have knowledge of any actual, suspected or alleged fraud during the period 1 April 2024 to 31 March 2025? Where appropriate please provide details.</p>	<p>See previous response</p>
<p>4) Do you have any suspicion that fraud may be occurring within the organisation? Please provide details.</p> <p>a) Has management identified any specific fraud risks within the organisation? Please provide details.</p> <p>b) Does management have any concerns that there are areas within the organisation that are at risk of fraud? Please provide details.</p> <p>c) Are there particular locations within the organisation where fraud is more likely to occur? Please provide details.</p>	<p>There are no specific fraud risks identified and management do not have any concerns or suspicions that fraud may be occurring. The instance of suspected defrauding by a third party referenced was identified internally by the application of our financial procedures.</p>

5) Are you satisfied that internal controls, including segregation of duties, exist and work effectively? Please provide details.

- If not, where are the risk areas?
- What other controls are in place to help prevent, deter or detect fraud?

Yes.

Internal Audit

The internal audit process provides independent scrutiny around internal control and provide an annual opinion, in addition to the specific audit reports for the year. Recommendations from independent Internal Auditors form a key and essential element in informing the effectiveness of the systems of internal control. The Board’s Audit & Risk Committee also plays a vital role in this regard, through its review of audit recommendations arising from reviews of internal control systems and its consideration of proposed management action. In particular, the Audit & Risk Committee is tasked with overseeing the development of internal audit plans, reviewing the scope, efficiency and effectiveness of the work of Internal Audit, confirming the adequacy of internal control systems, promoting best practice and bringing any material matters to the attention of the full Board. Detailed findings of all audit reviews are presented to both management and the Audit & Risk Committee and are published on our website with the ARC papers.

Statements of Assurance

Each member of the Executive team prepares an annual statement of assurance that is presented to the CEO, as Accountable Officer, and shared with the Audit & Risk Committee.

These annual statements indicate that reasonable assurance can be placed on the adequacy, effectiveness, robustness, and proportionality of each of the Services arrangements for control, governance and risk management in the year. The operational managers responsible for each area feed into this process. Areas for improvement are identified, alongside improvements that have been made in the year as well as reviewing any planned improvements for the previous year.

In addition to these processes, policies and procedures are in place to ensure appropriate controls and segregation of duties are in place. Staff are clear on their responsibilities and trained to ensure knowledge and competence. In addition to segregation of duties and the pervasive controls, further controls include reconciliations, restricted systems access, management accounts, budget monitoring and specific controls over the procurement process.

<p>6) How are staff encouraged to report their concerns about fraud, and what are the types of concerns they are expected to report? Please provide details.</p>	<p>There are a few reporting channels for fraud available to staff outlined in the fraud procedure and there is also a whistleblowing policy. These policies are on the intranet for all staff. Where a whistleblowing issue is raised and the person concerns asks for their identity to be protected, it will not be disclosed without consent and as far as is reasonably practical.</p> <p>Staff are required to report any suspected fraudulent activity and are supported by the organisation.</p>
<p>7) From a fraud and corruption perspective, what do you consider to be high risk posts within the organisation? Please provide details.</p> <ul style="list-style-type: none"> • How are the risks relating to these posts identified, assessed and managed? 	<p>The highest risk posts within the organisation are those with the ability to authorise spending. As a NDPB, we are governed by the SPFM and the Scottish Government Framework Agreement which set out our operating environment. This includes approval limits within the organisation. Further, we have a delegated authority policy and scheme of delegation by level and role within the organisation, which determines the monetary value of for approving purchase orders and invoices. In addition, the SG Procurement framework sets out thresholds and requirements for procurement authority. As such, the governance framework across the organisation ensures consistency in approval limits in line with SG requirements. In 2024/25 we undertook a review of our suite of finance policies and simplified their presentation, creating a series of guidance documents - including regarding the authorisation of spend.</p>
<p>8) Are you aware of any related party relationships or transactions that could give rise to instances of fraud? Please provide details.</p> <ul style="list-style-type: none"> • How are the risks associated with fraud related to such relationships and transactions mitigated? 	<p>None identified</p> <p>There is a Register of Interests policy in place. (Board Members obligations are covered in the Code of Conduct for NPA board members). This requires staff to report their interests and any conflicts, including potential for fraud risk, reviewed with the line manager. On an annual basis, the Exec and Board Register of Interests are reviewed against financial transactions in the year to check and report on any related party transactions. These are presented to the Audit & Risk Committee</p>

<p>9) Are you aware of any entries made in the accounting records of the organisation that it believes or suspects are false or intentionally misleading? Please provide details.</p> <ul style="list-style-type: none"> • Are there particular balances where fraud is more likely to occur? Please provide details. • Are there any assets, liabilities or transactions that it believes were improperly included or omitted from the accounts of the organisation? Please provide details. • Could a false accounting entry escape detection? If so, how? • Are there any external fraud risk factors which are high risk of fraud? Please provide details. 	<p>Management are not aware of any entries in the accounting records of the organisation that it believes or suspects are false or intentionally misleading.</p> <p>Accounting estimates for pensions and property valuations are supported by valuation reports from the relevant third party experts.</p> <p>Third party cash held in respect of the Greater Cononish Glen management bond is correctly excluded from the NPA Annual Accounts.</p> <p>Management accounts are scrutinised on a regular basis by the Finance Manager, relevant Operational Managers and the Exec team.</p>
<p>10) Are you aware of any organisational, or management pressure to meet financial or operating targets? Please provide details.</p> <ul style="list-style-type: none"> • Are you aware of any inappropriate organisational or management pressure being applied, or incentives offered, to you or colleagues to meet financial or operating targets? Please provide details. 	<p>There is no organisational or management pressure to meet financial or operating targets. The budget review process in Q2 allows for revision of the annual budget targets in response to organisational and external conditions and priorities.</p>

11) How does management gain assurance that all relevant laws and regulations have been complied with. For example:

- a) What process is in place for identifying and responding to changes in laws and regulations? Please provide details.
- b) What arrangements are in place for the Audit and Risk Committee and/or Board to oversee this process?
- c) What arrangements are in place for communicating with employees, non-executive directors, partners and stakeholders regarding the relevant laws and regulations that need to be followed? Please provide details.
- d) Do you have knowledge of actual or suspected instances where appropriate laws and regulations have not been complied with, and if so what actions management is taking to address it? Please provide details.

Compliance with laws and regulations is the starting point for the organisation's policies and procedures. Changes in policy are reviewed by the Policy Review Group.

The organisation has an in-house Legal Team which includes three experienced, qualified solicitors. There are also various other specialist advisors in other teams such as Health and Safety Officer, Information Officer (FOI, Data Protection, Records Management), Parks for All Group (Equality) and they are responsible for advising on compliance with relevant legislation. Other staff operating in their roles within the organisation have the requisite qualifications, skills and knowledge of their areas and are required to keep up to date with legislative changes and to identify any areas of non-compliance and risk e.g. procurement, enforcement etc. Where appropriate, external legal advice is obtained from our external solicitors.

Part of the core role of the Legal Team and other specialists advisers is to identify relevant legal requirements and to ensure any potential non-compliance is identified as a risk and escalated via appropriate reporting process e.g. Project Board of Executive.

Project set up documentation requires staff to work with the Legal Team to scope out legal requirements and then to report on them to the Project Board. Risk management framework includes 'legal risk'. Regular independent internal audits are carried out assist to ensure compliance with relevant policies, procedures and any relevant legislation or regulation. In the event that any non-compliance is identified via an internal audit, this reported to the Audit & Risk Committee and appropriate action taken.

The Executive Team prepare annual Statements of Assurance for review by the Accountable Officer, Head of Internal Audit, and Audit & Risk Committee and these highlight areas for improvement.

a) A quarterly legal update report is provided to the Executive Team and Operational Managers by the Legal Manager, which includes an assessment of the likely impact on the organisation and any actions that need to be taken to ensure compliance.

The Legal Team also have a slot at Health and Safety Committee meetings, to present relevant statutory and caselaw updates. A link to the HS is included in the legal update report that goes to the Executive.

The Legal Team and other specialists provide regular training sessions to staff on relevant legal topics, which are well attended by our staff.

There are no known changes to the regulatory environment that would significantly impact on the Financial Statements.

b) Alongside the internal audit reports, statements of assurance and reporting of any fraud, bribery or corruption issues noted above, the Corporate Risk Register includes a risk entitled "Statutory Compliance Requirements" which ensures their oversight of how the Authority manages the risk of statutory non-compliance through the mitigations outlined and scrutinised by the Board and Committee.

From September 2025, a legal update report on new laws and regulations and the impact on the organisation will be shared annually with the Audit and Risk Committee.

c) Formal induction process by Governance & Performance Team ensures that all new staff are made aware of the NPAs statutory framework, legal powers and duties and governance requirements. A quarterly legal update report highlighting new legislation, caselaw and guidance is shared with Executive and Operational Managers, to be shared with relevant teams.

New and updated policies and guidance are communicated through updates on Park Central - the Authority's intranet which accessed by all staff. Board Members receive updates on legal matters through the monthly Board Bulletin. Training and drop-in sessions are provided as appropriate on relevant legal topics, some of which are recorded and uploaded to our Intranet.

	<p>d) No known issues of suspected or actual non-compliance with laws or regulations, with an ongoing impact on the 24/25 financial statements.</p> <p>A website accessibility audit by the Government Digital Service identified that our website is non-compliant in some areas with the Public Sector Bodies (Website and Mobile) No 2 Accessibility Regulations 2018. Our website accessibility statement has been updated to refer to any outstanding issues. A new compliant website is currently under development, to be launched in March 2026 and we are providing regular updates on progress to ECHR.</p>
<p>12) Are you aware of any actual or potential litigation or claims that would affect the financial statements? Please provide details.</p>	<p>a) The Authority is defending a legal action raised in the Court of Session by The Forestry Partnership 2008 LLP in relation to claimed access rights through our Glenoglehead site for the unrestricted transportation of felled timber from the adjacent forestry plantation.</p> <p>The parties have been to mediation and are in the course of implementing the terms agreed at said mediation. If the agreed terms cannot be implemented there may be a future liability for legal costs, which may be material.</p> <p>b)The Park Authority has an ongoing dispute with respect to work carried out at one of our sites. External legal advice is that details of the disputed matters cannot be released into the public domain at this time and must remain confidential.</p> <p>The Park Authority is working with legal advisors and independent experts to resolve the disputed issues as efficiently and as cost effectively as possible. The Park Authority has kept the Scottish Government informed of developments. Officers believe the risk that the Scottish Government will claw back grant funding is minimal.</p>

	<p>d) HR Matters: At the moment, there are no litigation claims in progress.</p> <p>-We are aware of two potential HR claims which relate to the period April 1 2024 - 31 March 2025 and which could result in litigation. We do not believe either potential claim would result in a material impact on our financial statements should they occur and should the National Park Authority be unsuccessful in any resulting litigation.</p> <p>- The Trade Union UNISON is disputing the pay-award that we implemented in March 2025, covering April 2024 to March 2025 inclusive. Based on the signed agreement in place, Unison do not have recourse to claim any payments, but Unison could ballot members on potential strike action. This could lead to a loss of working time and potential overtime by non-union members to cover absences.</p>
<p>13) How has management assessed and satisfied itself that it is appropriate to adopt the going concern basis in preparing the financial statements?</p>	<p>Lomond & The Trossachs National Park which was created in 2002 under the National Parks (Scotland) Act 2000. The Loch Lomond and The Trossachs National Park Designation, Transitional and Consequential Provisions (Scotland) Order 2002 designated the National Park Authority as the body charged with delivering the aims of the National Park. Therefore unless legislation was amended to remove the status of the National Park there is a requirement for the Authority to continue to exist and be funded by Scottish Government (SG).</p> <p>The service provided by the Authority is unique in relation to delivery of the aims of Loch Lomond & The Trossachs National Park.</p> <p>The CEO and Executive team work closely with our Sponsor Team at SG, with regular meetings and communications. These communication lines would alert management to any events/ conditions around the future services of the National Park</p> <p>No known factors that would impact the going concern basis. The Authority has a 5-year capital spending allocation from 20/21 to 25/26.</p> <p>Financial scenario planning has been completed for SG through a series of commissions. If GIA uplifts were not awarded, then we would balance our budget by reducing activity and discretionary spend. Although cuts would impact the delivery of outcomes, they would enable us to</p>

	<p>deliver core functions and operate as a going concern. As we have a current 1 year settlement for revenue, a conservative approach is taken to long term fixed commitments (e.g. recruitment).</p>
<p>14) Has management identified any events or conditions since the assessment was undertaken which may cast significant doubt on the organisation's ability to continue as a going concern? Please provide details.</p>	<p>None identified. Scottish Government continue to signal an increasingly challenging overall financial budget. The NPA are periodically asked to complete Commissions requesting all opportunities to increase the efficiency of our functions are taken, all opportunities to offer services in different ways are taken, reclassification/alignment/mergers are considered and when options are exhausted a reduction of service.</p> <p>Such conditions may limit the strategic and operational activities of the Authority but it would not undermine the ability to continue as a going concern.</p>