

SSSC

Assurance Map 2023-2024

| Issue | lssue Owner | Identifying Implementi | Management risks and mitig ng controls. R ent Assurance. | (First Line) pating actions. eporting on pro | ogress. | Corporate Overs Designing policies | sight (Second s. Setting direc | line) tion. Ensuring o | compliance. Ass | urance oversi | ght. | Independent assu | rance (Third I | line) | |
|---|-----------------|--|--|--|---|---|---|---|--|--|--|---|--|---|---------------------------|
| | | Strategies and Business plans | Performance management - KPIs | Financial management and reporting | Statement of assurance checklist | Governance Structures & Processes (e.g. Council/ Committee reports and mitigating actions). | Functional Compliance reviews (Finance & Information security) | Internal Quality Control Checks (such as PSA self- assessment) | Internal business change (stage/ gateway review) undertaken by PMO | Stakeholder surveys and Complaints | Corporate Risk Management / Assurance | External Project/programme reviews (e.g. Scottish Government Independent Assurance Review) | External Accreditation /Certification (such as IIP, EFQM, PCIP and Cyber Essentials Plus) | Strategic Partners Assurance Reports (such as Care Inspectorate and Shared Services) | Internal Audit reviews |
| Risk Management | DoSP | | | | | | | | | | | | | | |
| Business Planning | CE & DoSP | | | | | | | | | | | | | | |
| Project Management | DoSP | | | | | | | | | | | | | | |
| Financial Management | Acting CE | | | | | | | | | | | | | | |
| Fraud | DoReg | | | | | | | | | | | | | | |
| Procurement | DoSP | | | | | | | | | | | | | | |
| Human resources | Acting DoWES | | | | | | | | | | | | | | |
| Equality, Diversity and Inclusion | DoSP | | | | | | | | | | | | | | |

| STEP 1– Iden | tify Source | | | | | | | | | | | | | | |
|------------------------------------|----------------|--|-------------------------------------|--|---|---|---|---|--|--|--|---|--|---|---------------------------|
| Issue | lssue Owner | Identifying Implementi | risks and mitig | ks and mitigating actions. Design controls. Reporting on progress. | | Corporate Overs | sight (Second I s. Setting direct | l ine) ion. Ensuring c | compliance. Ass | urance oversiç | ght. | Independent assurance (Third line) | | | |
| | | Strategies and Business plans | Performance management - KPIs | Financial management and reporting | Statement of assurance checklist | Governance Structures & Processes (e.g. Council/ Committee reports and mitigating actions). | Functional Compliance reviews (Finance & Information security) | Internal Quality Control Checks (such as PSA self- assessment) | Internal business change (stage/ gateway review) undertaken by PMO | Stakeholder surveys and Complaints | Corporate Risk Management / Assurance | External Project/programme reviews (e.g. Scottish Government Independent Assurance Review) | External Accreditation /Certification (such as IIP, EFQM, PCIP and Cyber Essentials Plus) | Strategic Partners Assurance Reports (such as Care Inspectorate and Shared Services) | Internal Audit reviews |
| Information Governance | DoReg | | | | | | | | | | | | | | |
| Health & Safety | DoSP | | | | | | | | | | | | | | |
| Legislative Compliance | DoReg& DoSP | | | | | | | | | | | | | | |
| Business Continuity Planning | DoSP | | | | | | | | | | | | | | |
| Cyber security | DoSP | | | | | | | | | | | | | | |
| Shared Services | DoSP | | | | | | | | | | | | | | |

| Issue | lssue Owner | Controls r | Management (First Line) Identifying risks | Corporate Oversight (Second Line) Designing policies. Setting direction. Ensuring compliance. Assurance oversight. | on | ange, audit. Reporting | Control RAG Rating (See Key below) | Assurance Sufficient (Y/N) |
|--------------------|----------------|---|--|---|--------------------------|--|--|----------------------------------|
| | | | | | Internal audit | Other sources of assurance | | |
| Risk Management | DoSP | Risk Management Policy Risk registers and appetite statement Risk management procedure Strategic risk register Directorate risk registers Department risk registers | Directorate Assurance Report Assurance Report (EMT) | Oversight and approval by A&A and Council (Assurance Report) Certificates of Assurance | Risk Management 20/21 | Committed to Excellence – EFQM accreditation | High | Yes |

Action Points

IRM Practical Risk Appetite and Risk Tolerance training – September 2023.

| Business | CE & | Strategic, | Directorate Assurance | Oversight and approval by A&A | Performance | Committed to | High | Yes |
|-----------------------|------|--|---|---|---|--|------|-----|
| Planning | DoSP | Strategic, Operational and Directorate Business Plans Procedure Performance Management Strategy People Strategy Strategic Outcomes Risk Register Business Plans and departmental objectives Operational Plan | Report Assurance Report (EMT) Budget setting and monitoring | and Council (Assurance Report, Strategic Plan) Certificates of Assurance | Reporting and KPIs 21/22 | Excellence – EFQM accreditation | nign | res |
| Project Management | DoSP | PMO policies, processes, handbooks and templates Programme management training Project and programme risk and issue registers Benefits Realisation | Directorate Assurance Report Assurance Report (EMT) PMO oversight, auditing and reporting Project risk reporting Highlight reports | Oversight by A&A and Council (Assurance Report) Certificates of Assurance Project and Programme Boards and sponsor groups | Change Management - business process review 20/21 Digital Transformation/I T Strategy 22/23 Future Proofing Programme 22/23 Future Proofing Programme 23/24 | Independent audit of projects and programmes when appropriate | High | Yes |

Identification of business planning activities carried out by all departments for 2024 – 2027.

Budget setting process underway. Finance to determine costings/budget required to complete the business planning objectives and EMT to review, refine and approve.

Internal audit and SG review undertaken of FPP.

Terms of reference for programme boards reviewed. Benefits and PMO highlight reports template reviewed.

| g Financial | Directorate Assurance | Oversight by A & A and Council | Budgetary | External audit | High | Yes |
|--|--|--|---|--|---|---|
| Strategy | Report | (Assurance Report & Financial | Control 21/22 | Monthly budget | | |
| Financial | Assurance Report | Strategy) | Procurement & | monitoring report to | | |
| Regulations | (EMT) | Certificates of Assurance | Creditors 22/23 | Sponsor Dept | | |
| Debt | EMT oversight of | Budget monitoring and approval | Payroll 22/23 | NFI process | | |
| Management Policy Delegated authority (Scheme of Delegation) Financial Planning Business cases Budget management training | budget setting Finance team compliance checks and reconciliations Monthly meetings between finance staff and budget managers | Annual report and accounts | Financial Sustainability 23/24 Debtors/Income 23/24 | Committed to Excellence – EFQM accreditation | | |
| | Strategy Financial Regulations Debt Management Policy Delegated authority (Scheme of Delegation) Financial Planning Business cases Budget management | StrategyReportFinancial RegulationsAssurance Report (EMT)DebtEMT oversight of budget settingPolicyFinance team compliance checks authority (Scheme of Delegation)StrategyMonthly meetings between finance staff and budget managersBusiness casesBudget management | StrategyReport(Assurance Report & Financial Strategy)Financial RegulationsAssurance Report (EMT)(Assurance Report & Financial Strategy)DebtEMT oversight of budget settingBudget monitoring and approval Annual report and accountsDelegated authority (Scheme of Delegation)Finance team compliance checks and reconciliationsBudget monitoring and approval Annual report and accountsFinancial PlanningMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managers | StrategyReport(Assurance Report & Financial Strategy)Control 21/22Financial RegulationsAssurance Report (EMT)Certificates of AssuranceProcurement & Creditors 22/23Debt Management PolicyEMT oversight of budget setting Finance team compliance checks and reconciliationsBudget monitoring and approval Annual report and accountsPayroll 22/23Delegated authority (Scheme of Delegation)Monthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersDebtors/Income 23/24 | StrategyReport(Assurance Report & Financial Strategy)Control 21/22 Procurement & Creditors 22/23Monthly budget monitoring report to Sponsor DeptDebtEMT oversight of budget settingBudget monitoring and approval Finance team compliance checks authorityPayroll 22/23NFI processDelegated authoritycompliance checks and reconciliationsMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersDebtors/Income 23/24NFI processBudget managementMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersDebtors/Income 23/24Debtors/Income 23/24Committed to Excellence - EFQM accreditationBudget managementBudget managersBudget managersDebtors/Income 23/24Debtors/Income 23/24Committed to Excellence - EFQM accreditation | StrategyReport(Assurance Report & Financial Strategy)Control 21/22Monthly budget monitoring report to Sponsor DeptFinancial RegulationsAssurance Report (EMT)Certificates of AssuranceProcurement & Creditors 22/23Monthly budget monitoring report to Sponsor DeptDebt Management PolicyEMT oversight of budget setting Finance team compliance checks authority (Scheme of Delegation)Budget monitoring and approval Annual report and accountsPayroll 22/23NFI processDebt Monthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersMonthly meetings between finance staff and budget managersDebtors/Income 23/24Comited to Excellence - EFQM accreditationBudget managementBudget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersBudget managementBudget and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersBudget managementBudget and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersIncome and budget managersBudget managementIncome and budget managersIncome and budget |

| Fraud | DoReg | Counter Fraud | Reporting in line with | Oversight by A & A and Council | Fraud | Output from CFS | High | Yes |
|-------|-------|------------------|------------------------|--------------------------------|----------------|---------------------|-------|-----|
| induu | DOKES | and Corruption | CFS Financial Crime | (Fraud and Assurance Report) | Prevention, | | i ngi | 165 |
| | | Framework | Response Plan | Certificates of Assurance | Detection and | NFI every two years | | |
| | | Procurement | | Counter fraud annual review by | Response 21/22 | | | |
| | | controls | | A&A | | | | ſ |
| | | Fraud training | | NFI Update report to A&A | | | | |
| | | CFS Financial | | Committee (Nov 22) | | | | |
| | | Crime Response | | | | | | |
| | | Plan | | | | | | |
| | | Whistleblowing | | | | | | ſ |
| | | Policy | | | | | | |
| | | Codes of Conduct | | | | | | |
| | | Financial | | | | | | |
| | | Controls | | | | | | |
| | | Payroll & | | | | | | |
| | | expenses | | | | | | |
| | | controls | | | | | | |
| | | Training and | | | | | | |
| | | preventative | | | | | | |
| | | work delivered | | | | | | |
| | | with CFS | | | | | | |
| | | Fraud Risk | | | | | | |
| | | Assessment | | | | | | |
| | | process | | | | | | |
| | | Compliance | | | | | | |
| | | Reviews | | | | | | |
| | | Intranet page | | | | | | |
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HLCG appointed as Fraud Liaison Officer and Lindsay MacDonald as Counter Fraud Champion

Broadcast by Fraud Liaison Officer and Counter Fraud Champion

HLCG has prepared SSSC fraud plan.

| Procurement | DoSP | Procurement | Biannual reporting to | Annual Procurement report to | Procurement & | NFI report | High | |
|-------------|--------|----------------------------------|----------------------------------|--|--|-----------------------------|------|--|
| | | Strategy | Procurement | A&A | Creditors 22/23 | | | |
| | | | Development Group | | | Committed to | | |
| | | Training | inc reporting on | Certificates of Assurance | | Excellence – EFQM | | |
| | | Procurement | agreed performance indicators | Annual Report and Accounts | | accreditation | | |
| | | policy note GPC guidance | Consultancy register | Report to A&A re NFI process | | External Audit review of | | |
| | | _ | | | | procurement | | |
| | | Procurement risk register | Procurement Team oversight | | | guidance GPC guidance | | |
| | | | | | | guidance | | |
| | | Procurement contract register | PSR Act reporting | | | PCIP | | |
| | | Financial | | | | | | |
| | | Regulations | | | | | | |
| | | Business cases | | | | | | |
| | | Scheme of | | | | | | |
| | | Delegation | | | | | | |
| Human | Acting | People Strategy | Directorate Assurance | Oversight by A & A and Council | HR data and | | High | |
| Resources | DoWES | HR policies | Report | (Assurance Report) | performance management | IIP Gold status | 5 | |
| | | Development | Assurance Report (EMT) | People Strategy annual report to Council | 21/22 | | | |
| | | discussions | People Strategy Board | Certificates of Assurance | Organisational Development 22/23 | | | |
| | | | | | Internal Workforce | | | |
| | | | | | Planning 23/24 | | | |
| | | | | | Travel and expenses 24/25 | | | |

Roll out of contract management training has commenced.

The two year procurement plan covering the period September 2023 to August 2025 is in place.

The Procurement Development Group (PDG) met in August 2023.

Review of EDIG membership.

Establishment of Community of Practise group.

Review of EQIA to be completed Autumn 2023.

| Equality, Diversity and Inclusion | DoSP | Equality, Diversity and Inclusion policy EQIAs Mandatory training Report template – Impact Assessments | People Strategy Board Equality, Diversity and Inclusion Group EDI Community of Practice group. | Certificates of Assurance Annual Report Equality Mainstreaming Report | Equality and diversity 20/21 | Committed to Excellence – EFQM accreditation SPA standards Equality, Mainstreaming and Outcomes Report Equality Delivery Plan | High | Yes |
|---|-------|--|--|--|------------------------------|---|------|-----|
| Information Governance | DoReg | Information Gov policies, processes & guidance Mandatory training Model Publication Scheme Data Champions Records Management champions | Directorate Assurance Report Assurance report (EMT) Quality Assurance & oversight by Info Gov Team Reporting to OMT | Oversight by A & A and Council (Assurance report) Certificates of Assurance Annual report Info Gov annual report to Council | Data protection 21/22 | Committed to Excellence – EFQM accreditation SPA standards | High | |
| Health & Safety | DoSP | Corporate H&S Policy and related policies and procedures Mandatory training H&S risk assessments | SSSC H&S Committee Performance reporting | Certificates of Assurance Corporate Health and Safety Policy approved by Council Annual Report | Health & Safety 22/23 | | High | |

Review of EDIG membership.

Establishment of Community of Practise group.

Review of EQIA to be completed Autumn 2023.

Work ongoing to review EQIA template and guidance.

Assessment against ICO Accountability Framework carried out and action plan developed.

SSSC H&S Committee established.

| Legislative Compliance | DoReg & DoSP | Legal services provide advice to all departments Horizon scanning by legal and policy teams Training Audit processes | Report to EMT | Certificates of Assurance Horizon scanning at A&A Committee | Compliance with legislation 24/25 | Committed to Excellence – EFQM accreditation | Medium | |
|------------------------------------|--------------------|--|---------------|---|--------------------------------------|--|--------|--|
| Business Continuity Planning | DoSP | Business ImpactAnalysesStrategic RiskregisterBusinessplanning strategyand plansBusinesscontinuity policyBusinesscontinuityprocedureSSSC IncidentManagementPlan | | Certificates of Assurance | | Committed to Excellence – EFQM accreditation | Medium | |

Creation of action plan to develop collaboration btw legal and policy teams, table of legislative requirements & training needs.

This work has commenced but not yet complete. Due date for completion now end December 2023.

Expected to be green at next review.

BCMS developed and full suite of documentation now in place.

Simulation exercise/walkthrough of SSSC Incident Management Plan to be conducted in Q4.

| Cyber Security | DoSP | Digital Strategy Digital Security policy Mandatory annual training Risk Register | Directorate Assurance Report Digital Development Programme Board | Certificates of Assurance Digital Development Sponsor Group Annual Report to Council | Cyber security 21/22 | Committed to Excellence – EFQM accreditation Collaboration with Scottish Government Cyber Resilience Team and NCSC Cyber Essentials | High | |
|--------------------|------|--|---|---|---|--|------|--|
| | | | | | | accreditation Cyber Risk Technical Assessment Supplier Assurance Recognition by EFQM accreditation | | |
| Shared Services | DoSP | Governance arrangements - Strategy, Management Agreement, Performance Measures, Risk Register Customer satisfaction survey | Shared Services Review Board Shared Services Oversight Group | Certificates of Assurance Annual report to Council | Shared Services 22/23 Shared Services governance arrangements 21/22 (phase 1 and 2) Shared Services 24/25 | Committed to Excellence – EFQM accreditation | High | |

Link to Index of Policies and Procedures

Key: RAG rating on the effectiveness of controls from assurance work undertaken

LOW: Significant concerns over the adequacy/effectiveness of the controls in place in proportion to the risks MEDIUM: Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks HIGH: Controls in place assessed as adequate/effective and in proportion to the risks Draft Cyber Incident Response Plan under development.

Simulation exercise to be conducted in Q4.

Review of shared services operational model ongoing.