B

AUDIT & RISK COMMITTEE

12 February 2026

Internal Audit Assignment - Safeguarding

1.0 PURPOSE OF PAPER

Choose an item.

1.1 The purpose of this paper is to provide the Committee with findings of the internal audit for Safeguarding.

2.0 EXECUTIVE SUMMARY

2.1 The Committee approved the Internal Audit plan for 2025/26 on 22 May 2025. The plan included a review of safeguarding.

2.2 The review of has been undertaken during November 2025.

2.3 The audit has raised no recommendations and has an overall conclusion as "Strong". The full report contained in Appendix A

3.0 RECOMMENDATION(S)/ACTION(S) REQUIRED

3.1 I recommend that the Audit and Risk Committee note the report contained in Appendix A.-

4.0 BACKGROUND

4.1 The Financial Memorandum with the SFC requires the College to have an effective internal audit function and that the duties of that function conform to the professional standards of the Chartered Institute of Internal Auditors. For incorporated colleges and Regional Boards, the operation and conduct of internal audit must comply with Public Sector Internal Audit Standards and, where relevant, the Scottish Public Finance Manual. Internal Audit is to provide the Regional Board, the Principal and senior management with assurances on the adequacy of the internal control system.

4.2 The Internal Audit Service is contracted to wbg who provide an annual plan of the areas to be audited. The plan for 2025/26 was approved by the Committee on 22 May 2025. The plan included a review of safeguarding.

5.0 SAFEGUARDING

5.1 The audit was undertaken between 27 October and 3 November 2025.

5.1.1 One observation and 21 areas of good practice were identified resulting in an overall conclusion is “strong”. The full report is contained in Appendix A.

“Following our review, we can provide strong level of assurance surrounding the systems and processes for safeguarding in place at the College”.

6.0 IMPLICATIONS AND CONSIDERATIONS

6.1 Financial Implications

6.1.1 There are no direct financial implications from the report.

6.2 Learner Implications

There are no direct implications from the contents of this report.

6.3 Staff Implications

There are no direct staff implications from the contents of this report.

6.4 Equality and Diversity Implications/Equality Impact Assessment

There are no direct equality and diversity implications from the contents of this report.

6.5 Sustainability/Environmental Implications

There are no direct sustainability or environmental implications from the contents of this report**.**

7.0 RISK COMMENTARY

7.1 The student and staff at the College are key to the successful delivery of colleges aims and objectives. Strong safeguarding policies, procedures and governance ensure the College adheres to current legislative and guidance, reducing the risk of breaching any and reducing the impact if there are any breaches or failures.

8.0 CONCLUSION

8.1 The internal audit of safeguarding within the College has conclude the College has strong systems and processes in place.

Kirsty Robb, Vice Principal Finance & Corporate Services

Previous Board or College Committee Approvals: Audit & Risk Committee, 22 May 2025

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For publication ☒	**Not for publication** ☐ **If not, why not?**

Borders College

Internal Audit
2025-26

Safeguarding
November 2025

Overall Conclusion

Strong

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The matters raised in this report came to our attention during the course of our audit and are not necessarily a comprehensive statement of all weaknesses that exist or all improvements that might be made.

This report has been prepared solely for Borders College's individual use and should not be quoted in whole or in part without prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any third party.

We emphasise that the responsibility for a sound system of internal control rests with management and work performed by internal audit should not be relied upon to identify all system weaknesses that may exist. Neither should internal audit be relied upon to identify all circumstances of fraud or irregularity should there be any although our audit procedures are designed so that any material irregularity has a reasonable probability of discovery. Every sound system of control may not be proof against collusive fraud. Internal audit procedures are designed to focus on areas that are considered to be of greatest risk and significance.

1 Executive summary

Overview

Purpose of review

The purpose of this review was to assess whether Borders College (the College) systems and procedures for safeguarding were fully compliant with legislation and the College were taking all necessary steps to protect its students. This review sought to provide assurance to the Board, via the Audit Committee, that the safeguarding arrangements were adequate.

This reviewed formed as part of our 2025/26 Internal Audit Annual Plan.

Scope of review

Our objectives for this review were to assess if:

- The College keeps up to date with legal requirements and ensures that policies and procedures are revised accordingly.
- There are clear responsibilities and accountabilities for safeguarding arrangements at senior level.
- The College self-assessment processes ensure that the impact of safeguarding provision is measured effectively.
- The College has robust systems and processes for dealing with safeguarding issues reported, which include the escalation process.
- Staff have received appropriate training on the College's safeguarding arrangements to enable them to be confident and well equipped to promote safeguarding in a sensible and proportionate way.

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

1 Executive summary

Limitation of scope

There was no limitation of scope.

1 Executive summary

Background

Safeguarding Policy

The College have a Safeguarding Policy in place. This Policy was last updated in July 2024 and is next due to be reviewed in July 2026. Following our review of the Safeguarding Policy, we can confirm that it appropriately details the roles and responsibilities of key individuals, identifies the safeguarding team members, and provides their contact information.

The Policy was developed in collaboration with the Joint Consultative Committee Policy (JCCP), a committee within the College that includes representatives from the College Union, members of the Executive Team, and other members of the College management team. The JCCP is responsible for reviewing new or revised policies and approving them for publication.

As part of the development process, a consultation was carried out with the Safeguarding Team and Student Associates, and an impact assessment was completed to identify areas for change within the safeguarding arrangements in place at the College. The final draft was then presented to the JCCP for review and approval prior to its formal adoption.

The College also has a supporting Safeguarding Guidance for Staff in place. This guidance was last updated in July 2024 and is next due to be reviewed in July 2026 in line with the Safeguarding Policy review schedule. This guidance provides information in relation to supporting disclosures, reporting concerns, and good practice in relation to safeguarding children, young people and protected adults.

As part of our review, we noted that the guidance document refers to a Safeguarding Officer and identifies that there are four members of the Safeguarding Team. However, discussions with the Director of Student Support Services clarified that the term "Safeguarding Officer" in the guidance actually refers to the Safeguarding Team as a whole. Further we identified that the Safeguarding Team is currently made up of three individuals. Please refer to **Section 4: Observations** for further information.

1 Executive summary

Protecting Vulnerable Groups (PVG) Checks

As part of our review, we met with the Director of People Services and the Director of Student Support Services to discuss the current arrangements for conducting PVG checks. A walkthrough test was performed on a sample of five new starters who joined the College from August 2025 to confirm that the required checks had been completed prior to their commencement with the College. No issues were identified from this testing.

We also reviewed the procedures for renewing PVG checks for existing staff. The Disclosure (Scotland) Act 2020 requires that all individuals working within a 'regulated role' requires membership within the PVG Scheme. We were able to confirm that this is the case for the College's staff members where the lifetime PVG model is due to be replaced by five-year membership renewal cycles from 1 April 2026 onwards. The College are already in discussions with Disclosure Scotland to identify the best course of action for completion of PVG renewals and are in the process of developing a system to effectively complete and monitor these renewals.

Discussions with key personnel revealed that all contractors must sign in at Reception upon arrival and complete the Authorised Contractors log. This process helps determine their activities and whether a permit to work is necessary. Contractors are issued a visitor pass, and their College contact collects them from Reception and is responsible for supervising them throughout their visit. General visitors follow a similar process; however, they are not required to complete the Contractors log but must complete the Visitor log.

Safeguarding Team

To ensure a consistent response to safeguarding issues involving learners, the College has a robust Safeguarding Team, the Team is outlined below:

- The Director of Student Support Services;
- Assistant Principal, Curriculum; and
- Student Support Services Manager.

Through discussions with key personnel, it was established that the Director of Student Support Services has been formally assigned the role of Designated Safeguarding Lead for the College. Our discussions confirmed that the Director is fully aware of the responsibilities attached to this position, and that staff and students have been appropriately informed of this designation.

1 Executive summary

Awareness of Safeguarding

We were able to conduct a walkthrough of the College's SharePoint which contains extensive information that staff can reference surrounding the safeguarding arrangements in place at the College. Examples are outlined below:

- Different forms of safeguarding, such as bullying, and neglect.
- What is safeguarding and a cause of concern.
- Prevent.
- Links to the Safeguarding Policy, Safeguarding Guidelines for staff, Safeguarding Online Tracking Module, and the Referral Form.

Student awareness of safeguarding is promoted through posters displayed around the College and information available on the student portal. The portal outlines the Report for Support feature, which allows students and staff at Borders College to report incidents of bullying, harassment, discrimination, gender-based violence, hate crime, and racism.

Management Reporting

The College have a Health, Safety & Safeguarding Committee that meet on a quarterly basis. The Director of Student Support Services provides a safeguarding update during these quarterly meetings. Typically, these updates include coverage of current safeguarding referrals, training undertaken by the Director of Student Support Services, and key updates within the sector, most recently this covered differences between what constitutes a safeguarding incident and a safeguarding concern.

We reviewed the Q1 from 2025/26, Q3 and Q4 from 2024/25, and we can confirm that there is robust reporting.

Training

The College delivers safeguarding training to all staff every two years, which also includes Prevent training. In addition, the Safeguarding Team and other relevant personnel receive enhanced, role-specific training to ensure they have the knowledge required for their responsibilities. The Director of People Services is responsible for monitoring and recording staff attendance at all safeguarding training sessions.

1 Executive summary

Work Undertaken

In line with our objectives, we undertook the following work:

Objective 1: The College keeps up to date with legal requirements and ensures that policies and procedures are revised accordingly.

- We reviewed the documented Safeguarding Policy and Procedure in place to confirm they are appropriate, reflect good practice and provide reference to legal requirements.
- We conducted a walkthrough of the College's Barbour System (compliance monitoring system) with the Health & Safety Manager to assess whether it is being used appropriately.

Objective 2: There are clear responsibilities and accountabilities for safeguarding arrangements at senior level.

- We discussed the safeguarding arrangements in place at the College with the Director of People Services, Director of Student Support Services, and the Health & Safety Manager to confirm that the arrangements are appropriate and that staff members understand their roles and responsibilities regarding safeguarding.
- We reviewed the College staff SharePoint to assess whether this contained relevant safeguarding information.

Objective 3: The College self-assessment processes ensure that the impact of safeguarding provision is measured effectively.

- We discussed and evaluated the steps the College has taken and the plans that are in place to improve safeguarding at the College.
- We reviewed the College Equality Outcomes Action Plan that covers 2025 to 2029 to assess whether these actions have been on track to being actioned. The Plan includes a safety theme, which outlines how the College will ensure a safe environment and build confidence in the safety-related processes, procedures, and support mechanisms in place.
- We reviewed the Health, Safety & Safeguarding Committee minutes for Q1 of 2025/26 and Q3 and Q4 for 2024/25 to assess whether there is appropriate reporting arrangements surrounding safeguarding.

1 Executive summary

Objective 4: The College has robust systems and processes for dealing with safeguarding issues reported, which include the escalation process.

- We conducted a walkthrough review of the College safeguarding system, ProMonitor, with the Director of Student Support Services to assess that the College has robust systems.
- We sampled a total of two referrals to confirm that information was appropriately logged, actions were taken in line with the referral in a timely manner and the student continued to be monitored.

Objective 5: Staff have received appropriate training on the College's safeguarding arrangements to enable them to be confident and well equipped to promote safeguarding in a sensible and proportionate way.

- We reviewed the arrangements in place to make all staff and the safeguarding team aware of the safeguarding arrangements in place.
- We reviewed the training arrangements in place for staff to assess if they are suitably equipped to deal with safeguarding issues that arise.

1 Executive summary

Conclusion

Overall conclusion

Overall Conclusion: Strong
Following our review, we can provide strong level of assurance surrounding the systems and processes for safeguarding in place at the College. We have raised one observation for consideration. Please refer to **Section 4: Observations** for further information.

Summary of recommendations

Grading of recommendations				
	High	**Medium**	**Low**	**Total**
Safeguarding	0	0	0	0

As can be seen from the above table there were no recommendations made which we have given a grading of high.

1 Executive summary

Areas of good practice

The following is a list of areas where the College is operating effectively and following good practice.	
1.	Following our review, we are able to confirm that the Director of Student Support Services provides the Health, Safety & Safeguarding with comprehensive information regarding safeguarding on a quarterly basis thereby ensuring that Committee members receive robust updates in relation to the College's safeguarding provisions.
2.	The College's Equality Outcomes Action Plan for 2025–2029 emphasises its commitment to creating a safe environment for both learners and staff. To achieve this, the College have key themes in place that play a vital role in establishing and maintaining key processes for the effective management and monitoring of safeguarding and child protection.
3.	There is strong correlation between the risk management process and safeguarding. The Risk Register includes risks and controls which relate to the safeguarding and protection of students.
4.	We were able to confirm that the College has robust arrangements in place to ensure that any safeguarding referrals are monitored robustly. Specifically, the Safeguarding Team meets on a monthly basis to discuss the current safeguarding referrals and keeps each other informed on the current resolution/escalation of cases.
5.	The College actively promotes safeguarding awareness among both learners and staff. Comprehensive information is provided to learners through posters and the student portal, while staff have access to the safeguarding flowchart and support resources such as Prevent and Police Scotland links on their staff SharePoint.

1 Executive summary

The following is a list of areas where the College is operating effectively and following good practice.	
6.	The College Director of Student Support Services has the delegated responsibility for safeguarding. We can confirm that the Director of Student Support Services is fully aware of their responsibilities attached to this position, and that staff and students have been appropriately informed of this decision.
7.	The College's recruitment procedures are strong, and safeguarding is covered as part of the recruitment process for all College Academic Staff and Support Staff.
8.	Through discussions with key personnel, we can confirm that safeguarding and prevent is embedded fully within the curriculum and learning support. Within the curriculum, appropriate arrangements are in place for childcare and social care programmes. In terms of learning support, individual Learning Support Plans are uploaded to each student's ProMonitor profile alongside their Student Support Plan. Together, these documents outline each student's learning needs as well as any wellbeing or safeguarding concerns.
9.	The College has a dedicated Safeguarding Team this being as follows: | Director of Student Support Services; | Assistant Principal - Curriculum; and | Student Support Services Manager.
10.	Safeguarding is given prominence on the College website. We have reviewed the College website and can confirm that this provides relevant information for all stakeholders.

1 Executive summary

The following is a list of areas where the College is operating effectively and following good practice.	
11.	The College regularly conducts surveys of its staff and students. We have reviewed the results of the most recent surveys carried out which indicate that both staff and students feel that the safeguarding arrangements in place at the College are effective.
12.	The College maintains strong links with external support agencies, where safeguarding and Prevent matters are regularly discussed. Information and links to these agencies are available on both the student and staff portals.
13.	The College has data sharing arrangements in place with other agencies. When data sharing takes place, the correct procedure is followed, and authorisation is given prior to any information being shared.
14.	The College can demonstrate compliance with legal requirements. The Safeguarding Policies and Barbour System are compliant with the relevant legislation and requirements.
15.	The College maintains a comprehensive Safeguarding Policy, last updated in July 2024 and scheduled for review in July 2026. This policy applies to all staff and students and outlines the College's commitment to ensuring a safe and secure environment for everyone. The Policy is supported by a comprehensive set of guidelines that provide further detail to staff on how to manage safeguarding issues.
16.	We can confirm that the College are registered with Disclosure Scotland for all employee PVG checks. PVG checks are also completed for any students completing a course placement.

1 Executive summary

The following is a list of areas where the College is operating effectively and following good practice.	
17.	We benchmarked Borders College's Safeguarding Policy against our client base; we found that its safeguarding arrangements are sufficient.
18.	The College is committed to supporting vulnerable students through its Safeguarding Policy and recognises that this can support College's contribution to the Prevent duty. Specifically, the College's Safeguarding Guidance for Staff and the SharePoint have effective coverage of Prevent.
19.	We were able to confirm that the College have strong protocols in place with regard to staff checking and vetting. This includes the completion of the appropriate PVG checks prior to their employment commencing and referee checks.
20.	The College provide new staff with safeguarding training that provides an effective overview of the safeguarding arrangements at the College. Staff also receive training every two-years on updates to safeguarding guidance and regulation.
21.	Following discussions with the Director of Student Support Services, we found that the College has robust arrangements in place for recording and monitoring safeguarding referrals. As part of our review, we assessed the Wellbeing Check, which has been adapted from the CORE-10 outcome measurement tool. This tool is used to assess a student's level of psychological distress based on their responses to ten mental wellbeing questions. In addition, we sample-tested two safeguarding referrals to confirm that they had been appropriately managed and recorded by a member of the safeguarding team. We can confirm that the College effectively monitors and records all referrals through the ProMonitor system.

2 Benchmarking

We include for your reference comparative benchmarking data of the number and ranking of recommendations made for audits of a similar nature in the most recently finished internal audit year.

Safeguarding

Benchmarking				
	High	Medium	Low	Total
Average number of recommendations in similar audits	0	0	1	1
Number of recommendations at Borders College	0	0	0	0

From the table above it can be seen that the College has a lower number of recommendations compared to those colleges it has been benchmarked against

3 Observations

The following is a list of observations from our review	
1.	The College's Safeguarding Policy and Safeguarding Guidance for Staff documents refer to a "Safeguarding Officer" and indicates that there are four members of the Safeguarding Team. However, discussions with the Director of Student Support Services confirmed that, in practice, there are only three members of the Safeguarding Team, and the term "Safeguarding Officer" is used to refer collectively to the team rather than to an individual role. The College may wish to review and update its Safeguarding Policy and Safeguarding Guidance for Staff documents to ensure they clearly and accurately reflect the current structure of the Safeguarding Team.

4 Audit arrangements

The table below details the actual dates for our fieldwork and the reporting on the audit area under review. The timescales set out below will enable us to present our final report at the next Audit Committee meeting.

Audit stage	Date
Fieldwork start	27 October 2025
Closing meeting	3 November 2025
Draft report issued	7 November 2025
Receipt of management responses	16 January 2026
Final report issued	16 January 2026
Audit Committee	2 December 2025
Number of audit days	5

5 Key personnel

We detail below our staff who undertook the review together with the College staff we spoke to during our review.

Wbg			
Partner	Graham Gillespie	Partner & Head of Internal Audit	gg@wbg.co.uk
Director	Stephen Pringle	Director of Internal Audit	sp@wbg.co.uk
Manager	Siobhan Archibald	Internal Audit Manager	sma@wbg.co.uk
Auditor	Megan Clarke	Internal Auditor	mc@wbg.co.uk

Borders College			
Key Contacts:	Debbie Kerr	Director of People Services	dkerr@borderscollege.ac.uk
	Katrina Fitzgerald	Health & Safety Manager	kfitzgerald@borderscollege.ac.uk
	Amy Brydon	Director of Student Support Services	abrydon@borderscollege.ac.uk
Wbg appreciates the time provided by all the individuals involved in this review and would like to thank them for their assistance and co-operation.			

Appendices

A Grading structure

For each area of review, we assign a level of assurance in accordance with the following classification:

Assurance	Classification
Strong	Controls satisfactory, no major weaknesses found, no or only minor recommendations identified.
Substantial	Controls largely satisfactory although some weaknesses identified, recommendations for improvement made.
Weak	Controls unsatisfactory and major systems weaknesses identified that require to be addressed immediately.
No	No or very limited controls in place leaving the system open to significant error or abuse, recommendations made require to be implemented immediately.

A Grading structure

For each recommendation, we assign a grading either as High, Medium, or Low priority depending on the degree of risk assessed as outlined below:

Grading	Classification
High	Major weakness that we consider needs to be brought to the attention of the Audit Committee and addressed by Senior Management of the College as a matter of urgency.
Medium	Significant issue or weakness which should be addressed by the College as soon as possible.
Low	Minor issue or weakness reported where Management may wish to consider our recommendation.

B Assignment plan

Purpose of review

The purpose of this review is to assess whether Borders College (the College) systems and procedures for safeguarding are fully compliant with legislation and the College are taking all necessary steps to protect its students. This review will seek to provide assurance to the Board, via the Audit Committee, that the safeguarding arrangements are adequate.

This review forms as part of our 2025/26 Internal Audit Annual Plan.

Scope of review

Our objectives for this review are to assess if:

- The College keeps up to date with legal requirements and ensures that policies and procedures are revised accordingly.
- There are clear responsibilities and accountabilities for safeguarding arrangements at senior level.
- The College self-assessment processes ensure that the impact of safeguarding provision is measured effectively.
- The College has robust systems and processes for dealing with safeguarding issues reported, which include the escalation process.
- Staff have received appropriate training on the College's safeguarding arrangements to enable them to be confident and well equipped to promote safeguarding in a sensible and proportionate way.

Our approach to this assignment took the form of discussion with relevant staff, review of documentation and where appropriate sample testing.

Limitation of scope

There is no limitation of scope.

Audit approach

Our approach to the review will be:

- Discussion with the College staff responsible for safeguarding to establish the current arrangements.
- Establishing the process by which the College ensures that it keeps up to date with changes to legal requirements and ensures policies and procedures are appropriately revised. We shall test this to assess whether this is operating as expected in practice.
- Obtaining the roles and responsibilities of those involved with the safeguarding arrangements. This will include considering whether these are appropriate and also that there is sufficient involvement by those at a senior level.
- Obtaining any self-assessments undertaken by the College. We shall consider whether safeguarding is included within the self-assessment process. We shall assess whether this is sufficient and is reflective of what is happening in practice.
- Establishing the training which is undertaken by staff in respect of safeguarding.
- Establishing and assessing the information provided to management and the Board in respect of the College's safeguarding. We shall consider the quality and frequency of this information.
- Establishing what internal quality reviews are undertaking by the College in respect of its safeguarding arrangements.
- Assessed whether the appropriate Disclosure Scotland checks have been undertaken on existing staff. We shall also complete testing on new starts to assess whether the appropriate Disclosure Scotland check is in place prior to them commencing employment with the College. We shall investigate any discrepancies with the College.
- We shall consider how staff, students and visitors to the College are made aware of its safeguarding arrangements.
- Establishing the process for dealing with any safeguarding issues reported to the College.

Potential key risks

The potential key risks associated with the area under review are:

- There is a risk that due to the College's safeguarding arrangements not being robust or appropriately managed, learners could be harmed or that the College is not a safe place for the most vulnerable learners.
- If staff are not sufficiently trained, with refresher training being given periodically, there is a risk that the College's safeguarding arrangements are not as effective as they are expected to be.
- There is a risk that the College may be subject to litigation due to non-compliance with the legal requirements. This could lead to reputational damage as well as financial loss.
- There may not be clear responsibilities and accountabilities for safeguarding arrangements at senior level.
- The College's self-assessment process does not include safeguarding as part of its process.