



Meeting	Audit, Risk and Assurance Committee
Date	7 November 2023
Location	Online
Title of Paper	SPA Corporate Strategy and Audit and Improvement Recommendations Update
Presented By	John McNellis, Head of Finance, Audit and Risk
Recommendation to Members	For consultation
Appendix Attached	Appendix A - SPA Corporate Strategy 2023/26 – Progress Summary Q2 2023/24 Appendix B - SPA audit and inspection recommendations

PURPOSE

To provide the Audit, Risk and Assurance Committee (ARAC) with an update on:

- Progress against the SPA Corporate Strategy achievement of milestones for Q2 2023/24; and
- Open recommendations from all SPA corporate audit and inspection activity.

The paper is presented in line with the corporate governance framework of the Scottish Police Authority (SPA) and Audit, Risk and Assurance Committee (ARAC) terms of reference and is submitted for consultation.

1. BACKGROUND

- 1.1 The SPA Corporate Strategy 2023-26 and supporting Implementation Plan 2023-26 was approved by the Board in March 2023. The plan outlines five strategic outcomes linked to **147 actions** underpinned by **492 milestones** to aid tracking of delivery.
- 1.2 Progress against completion of the corporate strategy milestones is reported to ARAC on a quarterly basis.
- 1.3 Progress against audit and inspection recommendations are routinely reported to ARAC, these are tracked through an action tracking software tool called 4Action.
- 1.4 In addition, other committees may also consider specific updates on progress where relevant to their terms of reference.

2. FURTHER DETAIL ON THE REPORT TOPIC

- 2.1 In Q2 2023/24 **110** corporate strategy milestones were due to be achieved; **79** of these milestones were achieved (**72%**).
- 2.2 During Q2 there was an exercise completed to determine the deliverability of some of the milestones given known and anticipated resource challenges. **Appendix A** provides full details of all milestones delayed or re-phased within the quarter.
- 2.3 Since the last report to ARAC there has been no new audit recommendations identified for SPA Corporate.
- 2.4 In April 2023 HMICS published their Assurance Review of the Scottish Police Authority Forensic Toxicology Provision. There are a total of twenty five recommendations arising from this review. The majority are to be jointly actioned by various parties. Eight recommendations include actions for SPA corporate to address.
- 2.5 Action plans to address the recommendations have been developed in collaboration with Police Scotland and Forensic Services and have been approved by HMICS.

3. FINANCIAL IMPLICATIONS

- 3.1 There are no specific financial implications from this report, however, the implementation of some actions are likely to require financial resources.

4 PERSONNEL IMPLICATIONS

4.1 There are no specific personnel implications associated with this paper.

5 LEGAL IMPLICATIONS

5.1 There are no specific legal implications associated with this paper.

6 REPUTATIONAL IMPLICATIONS

6.1 There are no reputational implications associated with this paper, however there are potential reputational implications associated with the pace and effectiveness with which the recommendations are addressed.

7 SOCIAL IMPLICATIONS

7.1 There are no social implications associated with this paper.

8 COMMUNITY IMPACT

8.1 There are no community impact implications associated with this paper.

9 EQUALITIES IMPLICATIONS

9.1 There are no equality implications associated with this paper.

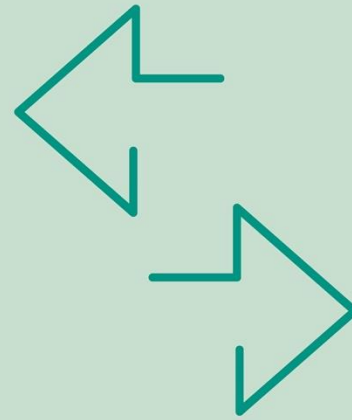
10 ENVIRONMENT IMPLICATIONS

10.1 There are no environmental implications associated with this paper.

RECOMMENDATIONS

Members are requested to note the updates provided.

SPA Corporate Strategy 2023-2026 Progress summary Q2 2023/24



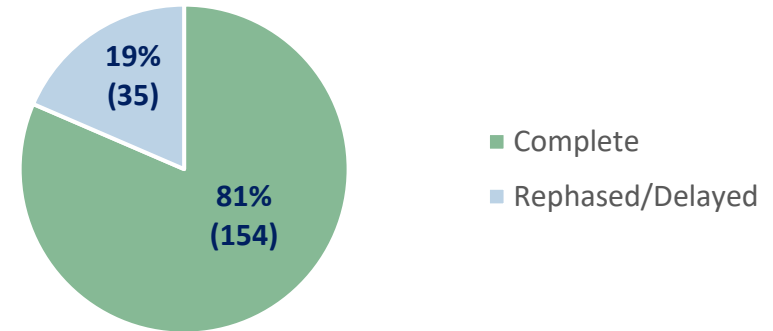
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SPA Corporate Strategy – progress summary

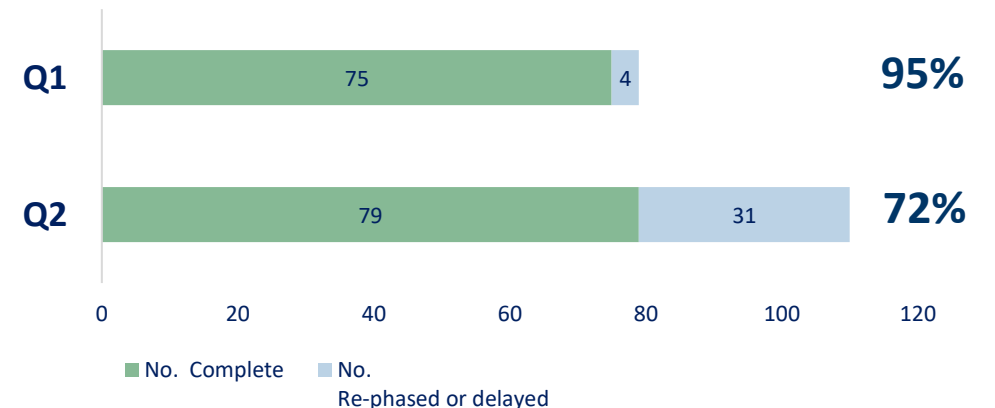
- The [Corporate Strategy for 2023-26](#) sets out the role and responsibilities of the Scottish Police Authority, the five outcomes we seek to achieve and high-level activities designed to achieve them.
- An Implementation Plan underpins the Strategy with **33 activities** tracked to support performance reporting.
- Specific milestones and measures are continually developed and monitored by the corporate team and SLT.
- This update reflects progress against the **quarter two** reporting period.
- **110 milestones** were due to be completed by Q2 2023/24 – breakdown as shown below.
- During the quarter, an exercise to review the deliverability of year one of the Implementation Plan was undertaken due to resource pressures.

Outcome	No. of activities	Milestones due	
		Q1 23/24	Q2 23/24
1. Communities	9	31	33
2. Collaboration	4	5	12
3. Resourcing	6	9	15
4. Workforce	5	19	20
5. Learning	9	15	30
	33	79	110

Overall progress to date in 2023/24



Quarterly breakdown of progress and % complete



Progress summary: movement in Q2 milestones

Re-phased = **13** milestones proactively re-profiled (e.g. due to re-phase of interdependent activity or external timelines)

Delayed = **18** milestones not delivered by original target date (e.g. due to resource challenge, delay in relevant feedback, absence)

Outcome 1 – Communities (24% re-phased/delayed, 8 of 33)

Establish core script on the Authority's roles and responsibilities -

- **3 milestones** to draft script, identify key stakeholders, and communicate script.
Delayed to Q3 due to resource pressure.

Promote our online and social media presence -

- **1 milestone** to consult on a Social Media policy.
Delayed to Q3 due to resource pressure.

Launch the new, accessible, website -

- **1 milestone** to secure Scot Gov. digital assurance of new website.
Delayed to Q3 as 1 criteria requires evidence to be provided by PS Digital Division.

Develop and implement accessibility guidance -

- **1 milestone** to draft guidance and consult.
Delayed to Q3 due to resource pressure.

Ensure delivery of the corporate parenting plan -

- **1 milestone** to recruit/induct care experience Modern Apprentice.
Re-phased to Q4 due to delay in paper being considered by JNCC.

Monitor progress of the UNCRC Bill and provide advice on implications for the Authority -

- **1 milestone**
Re-phased to Q4 due to dependency on Bill being brought back to Parliament.

Outcome 2 – Collaboration (33% re-phased/delayed, 4 of 12)

Undertake stakeholder mapping across civic and civil society to identify key partners and build networks -

- **1 milestone** to report stakeholder mapping analysis to Heads of Service and SLT.
Delayed to Q3 due to resource pressure.

Develop and increase our social media engagement with civic and civil society organisations -

- **1 milestone** to identify key organisations and enhance our interactions on key issues.
Delayed to Q3 due to resource pressure.

Establish and maintain a central point of contact for key stakeholders

- **1 milestone** to establish contacts database.
Delayed to Q3 due to resource pressure.
- **1 milestone** to research contact management software options.
Re-phased to 2024/25 due to resource pressure.



Progress summary: movement in Q2 milestones continued

Outcome 3 – Resourcing (20% re-phased/delayed, 3 of 15)

Continue to develop budget holder knowledge and confidence in financial planning and management -

- **1 milestone** to survey budget holders.
Delayed to Q4 due to changes in Forensic Services staffing, therefore awaiting stability in budget holders.
- **1 milestone** to produce guidance for budget holders
Carried over to 2024/25 due to resource pressure.

Review of new financial regulations one year on from implementation -

- **1 milestone** to report to CEO and Resources Committee following assessment
Re-phased to Q3 due to timing of committee meetings.

Outcome 4 – Workforce (30% re-phased/delayed, 6 of 20)

Consider approaches that seek to maximise fairness and affordability in pay negotiations -

- **1 milestone** to document approval route in relation to staff pay
Re-phased to Q4 due to focus to date on pay agreement for 23/24.

Support development of key workforce strategies and plans -

- **2 milestones** to provide oversight and support to development of the People Strategy and Strategic Workforce Plan.
Re-phased to Q3 due to delay in the respective Strategy and Plan.

Undertake continuous improvement activity in respect of senior officer - recruitment, development & progression responsibilities

- **1 milestone** to ensure EqHRIA carried out.
Delayed to Q3 due to capacity issues.

Embed, and evaluate, My Career within the SPA Corporate appraisal process -

- **1 milestone** to undertake or supplement PS evaluation.
Re-phased to Q3 as PS work currently ongoing.

Explore OD approaches for SPA Corporate & Forensics

- **1 milestone** revised to develop a session on vision, mission, values and behaviour based on staff feedback.
Re-phased to Q3 to align with related work.

Progress summary: movement in Q2 milestones continued

Outcome 5 – Learning (33% re-phased/delayed, 10 of 30)

Identify and address gaps in the evidence base which underpins and supports scrutiny -

- **1 milestone** to work with key audit & inspection bodies to understand & assess existing culture across policing system

Re-phased to Q3 due to delay in original planned publication schedule.

Develop a Policy Schedule to include timescales for policy reviews -

- **1 milestone** to present recommended action in relation to policy schedule work

Re-phased to Q3 for further work following a first draft being presented to senior leaders.

Complete a self-assessment against public body duties, identifying gaps and required improvement actions -

- **1 milestone** to deliver information management roadshows across Forensic Services.

Delayed to Q4 to allow for launch of new protective marking scheme.

Develop How To guides for key tasks across all teams to document processes and ensure consistency -

- **1 milestones** to review existing guidance

Re-phased to Q3 to allow input from SPOCs.

1 milestone to identify gaps across processes.

Re-phased to 2024/25 with a focus on prioritising processes.

Build networks with other public bodies to understand best practice in other organisations -

- **4 milestones** to review existing network contacts, identify gaps, begin programme of contact, and reflect progress in the continuous improvement database.

Delayed to Q3 due to resource pressure.

Establish a peer review of board effectiveness -

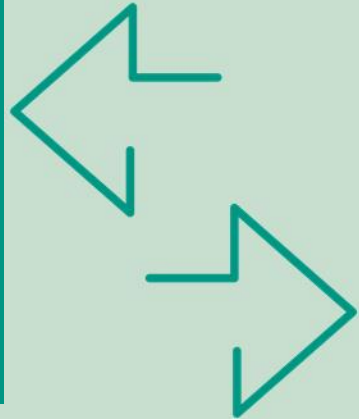
- **1 milestone** to develop options of peer review for consideration.

Re-phased to Q3 to align with HMICS self-inspection with further milestones to be added once options agreed.

Appendix B

SPA audit and inspection recommendations update

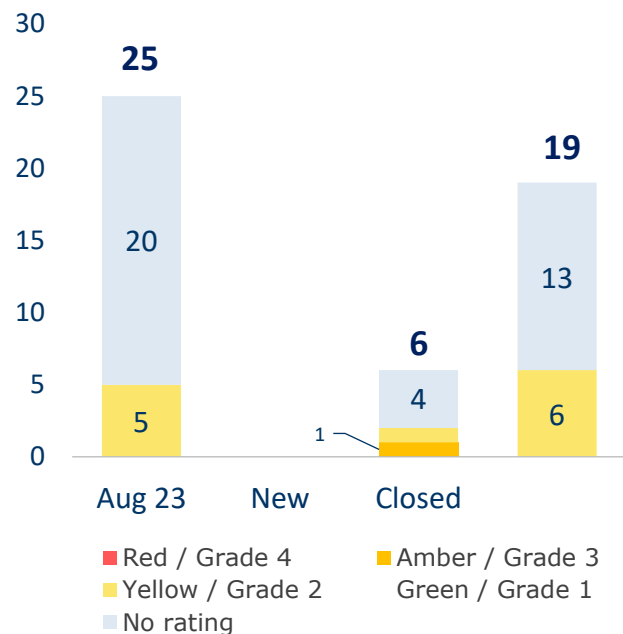
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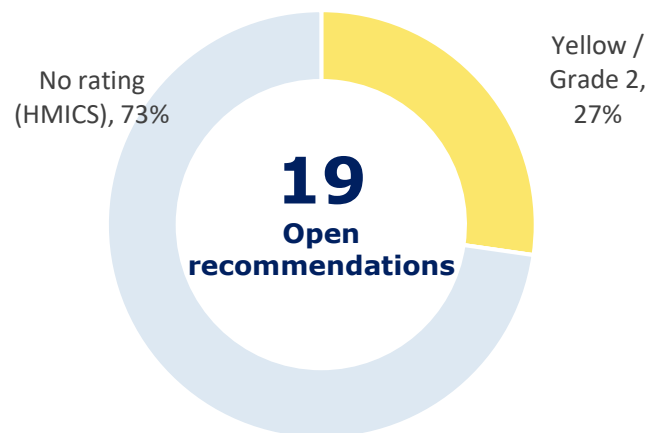
SPA audit and inspection dashboard

Progress update (no of recommendations)



- No new recommendations have been added since the last report to ARAC.
- The next page provides further detail of the SPA's tracking of actions against their agreed completion date.

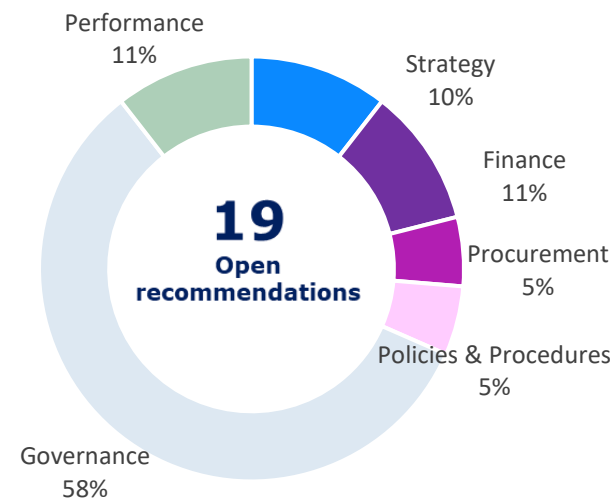
RAG analysis



Note: the recommendations without a rating are HMICS and one from Audit Scotland. HMICS and Audit Scotland do not rate their recommendations.

- The biggest proportion of recommendations are actions are from HMICS
- There are four open ICO recommendations which are all graded as a yellow, reasonable level of assurance

Identified theme



- All audit and inspection recommendations are recorded on **4Action**.
- This allows SPA to review and identify themes across reports and inspection bodies which may help our analysis and continuous improvement.
- Governance accounts for the largest proportion of improvement actions (58%). Current open recommendations have primarily arisen from HMICS reports and ICO.

Further detail on progress

Movement since previous ARAC report

	Aug 2023	New	Complete	Nov 2023
Internal Audit	1	-	-	1
Audit Scotland	1	-	1	-
HMICS	19	-	5	14
ICO	4	-	-	4
Total	25	-	6	19

Actions completed and outstanding

	Actions completed (since Aug 23)	Actions outstanding (Nov 23)	Actions outstanding:	
			On target	Overdue
Internal Audit	-	1	1	-
Audit Scotland	1	-	-	-
HMICS	5	14	14	-
ICO	-	4	1	3
Total	6	19	16	3

New actions

- There have been no new recommendations added since last report to ARAC in June.

Complete actions

- The one Audit Scotland recommendation, arising from the Audit Scotland Annual Report 2021/22, has been discharged by Grant Thornton.
- There are 5 HMICS recommendations proposed for closure
 - Recommendation 5 HMICS - Assurance review of Police Scotland demand analysis and management – **Lead Inspector agrees with closure awaiting HMCI confirmation.**
 - Recommendation 6 HMICS Assurance Review of Police Scotland Contact Assessment Model – **Awaiting view of Lead Inspector.**
 - Recommendation 3 HMICS Assurance Review of Police Scotland Contact Assessment Model - **Awaiting view of Lead Inspector.**
 - Recommendation 2 HMICS Assurance Review of the Scottish Police Authority Forensic Toxicology Provision - **Awaiting view of Lead Inspector.**
 - Recommendation 17 HMICS Assurance Review of the Scottish Police Authority Forensic Toxicology Provision - **Awaiting view of Lead Inspector.**
- There is one recommendation that we have proposed that HMICS **set aside** - Recommendation 6 HMICS Assurance Review of the Scottish Police Authority Forensic Toxicology Provision

Overdue actions

- Ongoing engagement has been undertaken with Police Scotland Digital Division. This issue has also been escalated to the CDIO. At this point there is no update on action to resolve the recommendation or a revised target date.