

Agenda Item 2.1

Meeting	Audit, Risk and Assurance
	Committee
Date	14 August 2025
Location	Online
Title of Paper	Internal audit update
Presented By	John McNellis
-	Head of Finance, Audit and Risk
	Claire Robertson, BDO
Recommendation to Members	For discussion
Appendix Attached	Yes -
	Appendix A
	Internal audit progress update
	Appendix B - Q1 Management
	action follow-up

PURPOSE

To provide the Audit, Risk and Assurance Committee (ARAC) with BDO's Internal Audit Progress report. This includes Q1 Follow Up review results.

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. This Internal Audit progress report provides an update on the conclusions on audit work completed between April 2025 and July 2025.
- 1.2. The Q1 Follow-up results are also presented in this ARAC to cover the implementation status of all recommendations raised from the work carried out by Internal Audit which were due to be implemented by 30th June 2025 (Q1).

2 FURTHER DETAIL

Appendix A Internal audit progress update

- 2.1. The report provides an update on the status of each of the 13 scheduled audits within the 2025/26 plan.
 - Four audits are "scheduled" with details provided about the timeline of when they will commence.
 - Three audits are "in progress" as fieldwork has commenced.
 - Three audits are in the "planning" stage with scoping sessions held.
 - Two audits are 'final' and are being reported to ARAC at agenda item 3.1.
 - One audit (Overtime) is 'reporting' which means the draft report has been issued and management responses are expected. This was scheduled to be reported to the August ARAC meeting but will now be reported to ARAC in November.
- 2.2. Eleven internal audit KPI's are outlined in the report.
 - Ten KPI's are 'on track' / "green".
 - One KPI is "grey" which indicates these are 'not yet started', which is appropriate as this is linked to the production of the annual internal audit report/ opinion which is not due till May 26 ARAC.

Appendix B - Q1 Management action follow-up

2.3. Appendix B summarises the progress made by Police Scotland, Forensic Services and SPA in implementing previously agreed internal audit actions. Internal audit validate the closure of actions with targeted timeline in Q1 2025/2026.

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- 2.4. Total 74 recommendations followed up in June 2025:
 - 17 (23%) are fully implemented
 - 53 (71%) remain in the process of being implemented
 - 2 (3%) were not yet implemented
 - 2 (3%) were superseded
- 2.5 A PowerBI report giving full details of recommendations has been provided to ARAC members. This change supplements the summary being reported to the committee while also ensuring BDO comply with Global Internal Audit Standards in the UK Public Sector.

3 FINANCIAL IMPLICATIONS

3.1 The cost of providing the internal audit service is included in the 2025/26 budget.

4 PERSONNEL IMPLICATIONS

- 4.1 There are no specific personnel implications associated with this paper, however, reviews may have considered this aspect.
- 4.2 The internal audit service is provided by an external provider, BDO.

5 LEGAL IMPLICATIONS

5.1 There are no specific legal implications associated with this paper. Reviews will consider applicable legal implications.

6 REPUTATIONAL IMPLICATIONS

6.1 There are no specific reputational implications associated with this paper. The objective of the internal audit service is to provide an independent opinion on the organisation and the effectiveness of its operations. Its reviews aim to help the organisation promote improved standards of governance, better management, decision making and more effective use of funds. This aids transparency and contributes toward confidence in the Authority.

7 SOCIAL IMPLICATIONS

7.1. There are no specific social implications associated with this paper, however, reviews may have considered this aspect.

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8 COMMUNITY IMPACT

8.1 There are no specific community impact implications associated with this paper, however, reviews may have considered this aspect.

9 **EQUALITIES IMPLICATIONS**

9.1. There are no specific equalities implications associated with this paper, however, reviews may have considered this aspect.

10 ENVIRONMENT IMPLICATIONS

10.1. There are no specific environmental implications associated with this paper, however, reviews may have considered this aspect.

RECOMMENDATIONS

Members are requested to note the internal audit progress report.



CONTENTS

EXECUTIVE SUMMARY
INTERNAL AUDIT STATUS UPDATE
INTERNAL AUDIT PERFORMANCE

Restrictions of use

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ROLE OF INTERNAL AUDIT

Internal audit is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Responsibility for these arrangements remains fully with management, who should recognise that internal audit can only provide a reasonable level of assurance and cannot provide any guarantee against material errors, loss or fraud. Internal audit also plays a valuable role in helping management improve risk management control and governance, so reducing the effects of any significant risks faced by the organisation.

PURPOSE OF THIS DOCUMENT

The purpose of this document is to provide the SPA's Audit & Risk Assurance Committee (ARAC) with an update as to the status of internal audit activity against the 2025/26 Annual Internal Audit plan.

PROGRESSION UPDATE

Since the last ARAC in May 2025, please see below an update of internal audit activity against our 2025/26 plan:

- ➤ 2 reviews have been finalised 'Management of Recommendations' and 'Health & Safety'
- 1 review is in the reporting stage, awaiting management responses -'Overtime'.
- > 3 reviews are in progress.
- ▶ 3 reviews are in the planning phase.

See page 4 for further detail on the progression made to date against the internal audit plan. At the time of writing, we expect to deliver all audits within the Internal Audit plan by the end of 2025/26.

AMENDMENTS TO THE APPROVED INTERNAL AUDIT PLAN

BDO's Forensics team have been supporting Police Scotland managing Inventory across the PS Estate. There have been no other amendments to the Internal Audit plan since the last meeting of the ARAC.

WORK OUTSIDE OF THE APPROVED INTERNAL AUDIT PLAN

An additional 'advisory' style Complaints Management review was requested from SPA/PS. Fieldwork is in progress.

INTERNAL AUDIT STATUS UPDATE

SUMMARY OF WORK PERFORMED TO DATE

Internal Audit has made the following progress in delivering the agreed audits from the approved 2025/26 internal audit plan.

AUDIT ACTIVITY	STATUS	COMMENTARY
Management of Recommendations	FINAL	Report finalised. To be presented during August ARAC.
Health & Safety	FINAL	Report finalised. To be presented during August ARAC.
Overtime	REPORTING	> Draft report issued. Awaiting management responses.
Complaints Management	IN PROGRESS	> Additional 'advisory' style review requested from SPA/PS. Fieldwork in progress.
Environment and Sustainability	IN PROGRESS	> Fieldwork in progress
Change	IN PROGRESS	> Fieldwork in progress. Review focussing on Enabling Policing for Future Programme.
Commonwealth Games	PLANNING	 Scoping sessions held. Review scheduled for July 2025.
Duty Modifications / Scenario Planning	PLANNING	> Scoping sessions held. Review scheduled for August 2025.
Implementation of Estates Plan	PLANNING	> Scoping sessions held. Review scheduled for September 2025.
Communications and Engagement	SCHEDULED	> Review scheduled for October/November 2025.
Recruitment and Retention	SCHEDULED	> Review scheduled for November/December 2025.
IT System	SCHEDULED	> Review scheduled for January 2026.
Productions (Forensic type)	SCHEDULED	> Review scheduled for January/February 2026.

INTERNAL AUDIT PERFORMANCE KPI'S

Performance KPI	Status	Comments
Internal Audit Efficiency		
In-scope audits are completed to their planned ARACs.	On-Track	
All in-scope audits for FY 2025/2026 are completed by 31 March 2026.	On-Track	
Annual Internal Audit report/opinion is presented to the May 2026 ARAC.	Not yet started	
Internal Audit Quality		
All recommendations made to each audit are discussed with the management. Agreed recommendations are logged into the system for following up.	On-Track	
All audits are led and reviewed by qualified staff, with audits required to be involved with SMEs from other teams.	On-Track	
Customer Satisfaction survey results	On-Track	Surveys will be issued for all finalised 2025/26 reports.
Internal Audit Engagement		
Regular liaison meetings with SPA/PS Audit & Risk teams; with PS management; and with HMICS and external auditor.	On-Track	
Initial Term of Reference of the audit is issued 4 to 6 weeks ahead of fieldwork starting date.	On-Track	
Internal audit issues draft audit report within 10 working days of closing meeting.	On-Track	
Finalised audit report issued to stakeholders within 3 working days of final management responses being received and agreed.	On-Track	
Internal Audit Quality		
Actual vs Budgeted days of audits are provided to ARAC.	On-Track	

FOR MORE INFORMATION:

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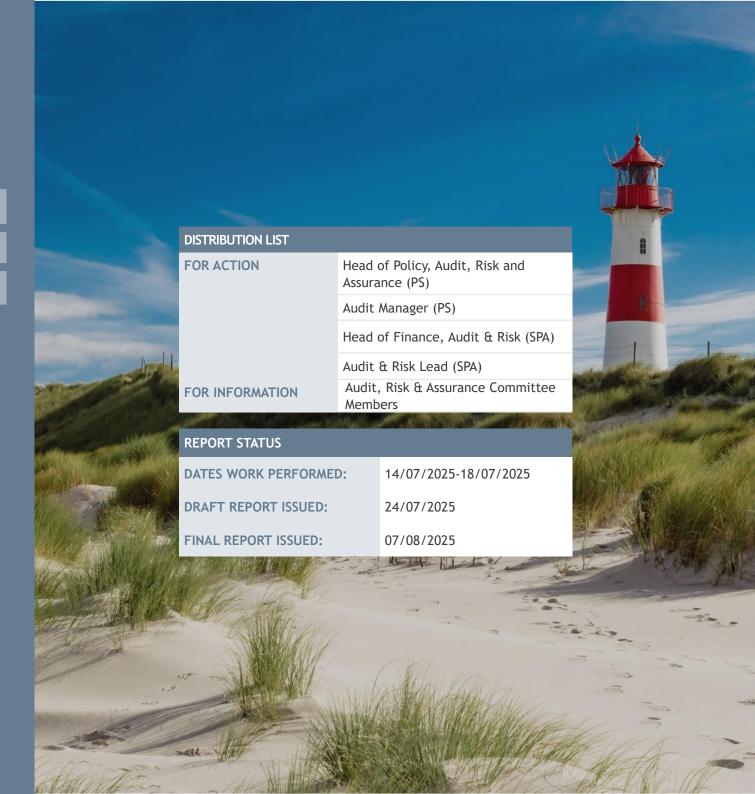


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RESTRICTIONS OF USE

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BACKGROUND

As part of the provision of continual assurance over the design, effectiveness of controls and closure on control gaps, we have undertaken a review to assess the degree of implementation of the recommendations made in prior years in accordance with the Annual Internal Audit Plan.

STATUS OF RECOMMENDATIONS

If recommendations are not implemented on a timely basis, weaknesses identified through internal audits in control, risk management and governance activities will remain in place. Furthermore, a reluctance or inability to implement recommendations reflects poorly on management's commitment towards maintaining a robust internal control and governance environment. Therefore, confirmation of the implementation status of recommendations is a key determinant of our annual opinion over your governance, risk, and internal control framework.

SCOPE

In accordance with the 2024-25 Internal Audit Plan, we have considered the implementation status of all recommendations raised from the work carried out by Internal Audit which were due to be implemented by 30^{th} June 2025 (Q1). This resulted in a

total of 74 recommendations to be followed up. The recommendations relate to 20 audit areas, as shown in the tables below and overleaf.

METHODOLOGY

During our testing we followed up on all recommendations which had a target completion date of on or before 30th June 2025 (Q1).

Management's Internal Audit recommendation progress was reviewed to establish the degree of implementation achieved. Where it was confirmed that the recommendation had been implemented, evidence was sought, and testing was undertaken to verify the ongoing operation of the recommended controls. Where Management's response in the Internal Audit report differed from the original recommendation, we tested the agreed management actions.

We noted that the previous Internal Auditor for the Scottish Police Authority rated their recommendations on a grading 1-4, Police Scotland equated this to their risk levels of low-very high whilst SPA Forensic Services retained the 1-4 grading; we have therefore used both labels in the table below.

STATUS OF RECOMMENDATIONS AT JUNE 2025

The table below outlines the implementation status of the recommendations followed up:

				STATUS AT .	JUNE 2025		
Audit Area	Action Significance Rating	Fully implemented	Being implemented	Not implemented	Superseded	Not due for implementation this quarter	Total
Recommendations from 2020/21 - 202	Recommendations from 2020/21 - 2025/26						
Legal Claims Handling 2021/22	Medium	-	1	-	-	-	1
ICT Service Delivery 2021/22	High	-	2	-	-	-	2
Organisational Learning 2022/23	Medium	-	8	-	-	-	8
Cyber Security 2022/23	High	-	1	-	-	-	1



EXECUTIVE SUMMARY

		Continued from pre	evious slide				
Audit Area	Action Significance Rating	Fully implemented	Being implemented	Not implemented	Superseded	Not due for implementation this quarter	Total
Cyber Security 2022/23	Medium	1	1	-	-	2	4
Vetting 2022/23	High	-	1	-	-	-	1
Compliance PAVA Airwave 2022/23	High	-	4	-	-	-	4
Compliance PAVA Airwave 2022/23	Medium		1	-	-	-	1
Business Continuity Planning - Forensic Services 2022/23	Medium	-	1	-	-	-	1
Ill Health Retirements & Injury 2023/24	Medium	2	1	-	-	-	3
Core Financial Systems 2023/24	Low	-	-	-	-	1	1
IT General Controls 2023/24	Medium	-	1	-	-	2	3
IT General Controls 2023/24	Low	1	2	-	-	2	5
Grievance Process 2023/24	High	-	1	-	-	-	1
Grievance Process 2023/24	Medium	1	-	-	-	-	1
Electronic Data Retention plus iVPD Focus 2023/24	Medium	-	5	-	-	-	5
Electronic Data Retention plus iVPD Focus 2023/24	Low	-	1	-	-	-	1
Biometrics (Police Scotland) 2023/24	Medium	-	1	1	-	6	8
Biometrics (Police Scotland) 2023/24	Low	-	1	-	-	1	2



STATUS OF RECOMMENDATIONS

EXECUTIVE SUMMARY

		Continued from pre	evious slide				
Audit Area	Action Significance Rating	Fully implemented	Being implemented	Not implemented	Superseded	Not due for implementation this quarter	Total
Biometrics (Forensic Services) 2023/24	Medium	-	3	-	-	-	3
Investment Prioritisation 2023/24	Medium	-	1	-	-	-	1
Your Leadership Matters 2024/25	Medium	1	3	-	-	-	4
Equality and Human Rights Impact Assessment (EqHRIA) 2024/25	High	2	-	-	-	4	6
Equality and Human Rights Impact Assessment (EqHRIA) 2024/25	Medium	1	2	-	1	6	10
Equality and Human Rights Impact Assessment (EqHRIA) 2024/25	Low	2	-	-	-	-	2
Implementation of Change Projects 2024/25	High	1	1	-	-	3	5
Implementation of Change Projects 2024/25	Medium	3	3	-	-	3	9
Implementation of Change Projects 2024/25	Low	-	-	-	-	1	1
Cos - Core Operating Solutions 2024/25	Medium	1	2	-	1	-	4
Cos - Core Operating Solutions 2024/25	Low	1	1	-	-	-	2
Forensic Performance Management & Reporting 2024/25	Medium	-	3	1	-	-	4
Cash and Drugs Productions and High- Value Stores 2024/25	High	-	-	-	-	8	8



EXECUTIVE SUMMARY

		Continued from pre	evious slide				
Audit Area	Action Significance Rating	Fully implemented	Being implemented	Not implemented	Superseded	Not due for implementation this quarter	Total
Cash and Drugs Productions and High- Value Stores 2024/25	Medium	-	-	-	-	13	13
Estates and Asset Management 2024/25	Medium	-	1	-	-	2	3
Estates and Asset Management 2024/25	Low	-	-	-	-	2	2
Grant Management 2024/25	High	-	-	-	-	3	3
Grant Management 2024/25	Medium	-	-	-	-	5	5
Grant Management 2024/25	Low	-	-	-	-	1	1
Health and Safety - Transportation of Dangerous Goods 2024/25	High	-	-	-	-	8	8
Health and Safety - Transportation of Dangerous Goods 2024/25	Medium	-	-	-	-	11	11
Totals		17	53	2	2	84	158

CONCLUSION

We found that of the 74 recommendations due for implementation and followed up in June 2025:

- 17 (23%) are fully implemented
- 53 (71%) remain in the process of being implemented
- 2 (3%) were not yet implemented
- 2 (3%) were superseded

We noted a 10% drop in the full implementation of recommendations in Q1 compared to Q4 of 2024/25. Additionally, the number of high-rated recommendations yet to be implemented increased from 22 in Q4 to 36 in Q1 (64% increase). We also noted that there are 3 recommendations which were issued in 2021/22 which are yet to be implemented, and fifteen from 2022/23 which are yet to be implemented; in the coming quarter, it is intended that BDO and PS will complete a review of aged recommendations.



APPENDIX I: DEFINITIONS

STATUS OF RECOMMENDATIONS

RECO	OMMENDATION STATUS	MEANING
	•	Fully Implemented
		Being Implemented
	A	Not Implemented
	V	Could not be tested at the time of the audit
		Superseded

BDO RECOMMENDATION	ON SIGNIFICANCE
HIGH	A weakness where there is substantial risk of loss, fraud, impropriety, poor value for money, or failure to achieve organisational objectives. Such risk could lead to an adverse impact on the business. Remedial action must be taken urgently.
MEDIUM	A weakness in control which, although not fundamental, relates to shortcomings which expose individual business systems to a less immediate level of threatening risk or poor value for money. Such a risk could impact on operational objectives and should be of concern to senior management and requires prompt specific action.
LOW	Areas that individually have no significant impact, but where management would benefit from improved controls and/or have the opportunity to achieve greater effectiveness and/or efficiency.
ADVISORY	A weakness that does not have a risk impact or consequence but has been raised to highlight areas of inefficiencies or potential best practice improvements.

DEFINITIONS



APPENDIX I: DEFINITIONS

PREVIOUS INTERNAL	AUDITOR FORENSICS RECOMMENDATION SIGNIFICANCE
4	Very high risk exposure - major concerns requiring immediate senior attention that create fundamental risks within the organisation.
3	High risk exposure - absence/failure of key controls that create significant risks within the organisation.
2	Moderate risk exposure - controls are not working effectively and efficiently and may create moderate risks within the organisation.
1	Limited risk exposure - controls are working effectively, but could be strengthened to prevent the creation of minor risks or address general house-keeping issues



APPENDIX II: COLLEAGUES INTERVIEWED

COLLEAGUES INTERVIEWED

BDO LLP APPRECIATES THE TIME PROVIDED BY ALL THE INDIVIDUALS INVOLVED IN THIS REVIEW AND WOULD LIKE TO THANK THEM FOR THEIR ASSISTANCE AND COOPERATION.

STATUS OF RECOMMENDATIONS

Audit Manager

Audit Management Officer

FOR MORE INFORMATION:

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