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Agenda Item 2.3

Meeting	Audit, Risk and Assurance Committee
Date	6 February 2024
Location	By video-conference
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 Progress
	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 for 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

- 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

Corporate strategy progress (Appendix A)

- 2.1 In Q3 2023/24 **103** corporate strategy milestones were due to be achieved; **65** of these milestones were achieved (**63%**). Deliverability of the remainder of the year one implementation plan continues to be reviewed and assessed taking cognisance of available resources.
- 2.2 Overall, **75%** of milestones due to complete in Q1-Q3 were completed by the scheduled target date (**219 of 292**). This represents good progress given resource pressures.
- 2.3 As reported to the previous ARAC, 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.

Audit & inspections recommendations progress (Appendix B)

2.4 Since the last report to ARAC there has been five new audit recommendations identified for SPA Corporate and two recommendations that were proposed for closure to HMICS that have been re-opened.

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- 2.5 In October 2023 HMICS published their Thematic review of policing Mental Health in Scotland with a total of 14 recommendations. Three are for SPA and Police Scotland to address jointly.
- 2.6 In December 2023 HMICS published their Thematic Inspection of Organisational Culture in Police Scotland with a total of 11 recommendations. Two are for SPA and Police Scotland to address jointly.

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.

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SPA Corporate Strategy 2023-2026 Progress summary Q3 2023/24











SPA Corporate Strategy – progress summary

- The <u>Corporate Strategy for 2023-26</u> 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 three** reporting period.
 - 103 milestones were due to be completed by Q3 2023/24 breakdown as shown below.
- Deliverability of the remainder of year one of the Implementation Plan continues to be reviewed due to resource, staff pressures.

Outcome	No. of	Milestones due			
Outcome	activities	Q1 23/24	Q2 23/24	Q3 23/24	
1. Communities	9	31	33	37	
2. Collaboration	4	5	12	6	
3. Resourcing	6	9	15	21	
4. Workforce	5	19	20	15	
5. Learning	9	15	30	24	
	33	79	110	103	

Quarterly breakdown of progress:



Overall progress to date:

- 75% of milestones due to complete in Q1-Q3 were completed by the scheduled target date (219 of 292). This represents good progress given resource pressures.
- Key work completed in Q3 was launch of the new, accessible website; preparation and launch of Deputy Chief Constable recruitment campaign; publication of our Children's Rights and Corporate Parenting Report 2020-23 and the Policing Together Oversight Group was stood up.
- Whilst movement in milestones has increased over Q1-Q3, 66% of those milestones re-phased / delayed are predicted to complete in-year (25 of 38). Further detail is provided below.

Our Vision: Policing in the Public Interest **Our Values:** Respect, Integrity, Public Service



Progress summary: movement in Q3 milestones

- Re-phased = 15 milestones proactively re-profiled (e.g. due to re-phase of interdependent activity or external timelines)
- Delayed = 10 milestones not delivered by original target date (e.g. due to resource challenge, delay in relevant feedback, absence)
- Carried over to 2024/25 = **13** milestones proactively re-profiled or delayed to Year 2 of the Implementation Plan.

Outcome 1 – Communities (51% re-phased/delayed, 19 of 37)	Outcome 1 cont'd – Communities			
 1.3 Establish core script on the Authority's roles and responsibilities - 3 milestones to draft script, identify key stakeholders, and communicate script. Remain delayed, now to Q4, due to resource pressure. 1.5 Create a public facing Authority newsletter - 	 3.3 Review accessibility of board and committee business 1 milestones to research best practice in other public bodies to inform annual review of governance. Delayed to Q4 as only partially complete. 			
 2 milestones to develop proposal and develop process/procedures in establishing a newsletter. Carried over to 2024/25 due to resource pressure. 	 3.5 Provide plain English training for all staff 1 milestone to deliver and evaluate training. Re-phased to Q4 due to timing of interdependent work/training re facilitation and consistent approach to future internal sessions. 			
 1 milestone to produce a public briefing on Local Policing. Re-phased to Q4 to align with related Local Policing communications. 	 3.6 Develop and implement accessibility guidance - 2 milestones to draft guidance and consult, then finalise guidance, 			
 1.6 Promote our online and social media presence - 1 milestone to produce content on Local Policing. 	Delayed to Q4 due to resource pressure.			
Re-phased to Q4 to align with related Local Policing communications.	 4.3 Support use of the Scrutiny framework for Local Authorities – 1 milestone to finalise complementary guidance for corporate documents 			
2.2 Work with other organisations to gain additional insights into the public's views -	and communications. Re-phased to Q4 due to dependency on linked delayed milestones.			
 5 milestones to review question set, identify relevant data, develop timeline, identify user requirements and product development/testing. Re-phased to Q4 to allow involvement of wider stakeholders. 	 8.1 Ensure delivery of the corporate parenting plan - 1 milestone to complete lessons learned exercise. Re-phased to Q4 due to dependency on linked re-phased milestone. 			
 1 milestone to engage with PIRC on enhanced reporting. Carried over to 2024/25 due to resource pressure. 	3			



Progress summary: movement in Q3 milestones (cont')

outreach work has commenced and training on ABC costing to be undertaken.

Outcome 2 – Collaboration (20% re-phased/delayed, 1 of 6)	Outcome 3 cont'd – Resourcing
 1.3 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. Carried over to 2024/25 due to resource pressure. 	 1.5 Collaborate with Police Scotland on the development of a framework for prioritisation of change projects aligned to the strategic police plan. 1 milestone to advise and inform Members of prioritisation proposed including through the budget scrutiny group. Re-phased to Q4 due to timing of budget scrutiny group which will sit in Jan 24.
Outcome 3 – Resourcing (43% re-phased/delayed, 9 of 21) 1.1 Undertake benchmarking to identify good practice in relation to long term sustainable financial planning • 3 milestones to identify meaningful comparators, perform	 3.1 Delivery on our equality outcomes and commitment to mainstreaming equality. 1 milestone to Create SPA Corporate specific activities and measures for delivery of EOs Delayed to Q4 to be taken forward by new Equalities and Duties Working Group.
 assessment/benchmarking, and report with recommendations to CEO/Members. Carried over to 2024/25 as a timetable for delivery is still under discussion and will hopefully come clear during Q4. 1.2 Continue to develop budget holder knowledge and confidence in financial 	 3.2 Enhance metrics and reporting in relation to equality outcomes. 1 milestone to engage with NCHDG partners to agree question set to establish complainer/CHR requestor profile, complainer satisfaction profile etc. Carried over to 2024/25 due to timing of NCHDG reconvening.
 planning and management - 1 milestone to review and update suite of internally available materials and courses for budget holders. Delayed to Q4 due to resource pressure. 	 3.4 Ensure accessible publication of all impact assessments. 1 milestone to Apply relevant accessibility criteria and format of IA in collaboration with authors. Re-phased to Q4 as requires agreement of refreshed draft accessibility
 1.3 Undertake an exercise to determine unit cost of key activities in Forensics to improve financial forecasting based on operational drivers including demand and demand trends. 1 milestone to perform initial analysis to capture relevant costs by key activities. Carried over to 2024/25 to allow new Lead to build knowledge base. Initial 	guidance in Jan 24.



Progress summary: movement in Q3 milestones (cont')

Outcome 4 – Workforce (27% re-phased/delayed, 4 of 15)	Outcome 5 – Learning (20% re-phased/delayed, 5 of 24)
 3.3 Undertake continuous improvement activity in respect of senior officer - recruitment, development & progression responsibilities . 1 milestone to ensure EqHRIA carried out. Remains delayed, now to Q4 due to capacity issues. 	 1.1 Identify and address gaps in the evidence base which underpins and supports scrutiny. 1 milestone to support progress in relation to assurance on wellbeing approach to report into Criminal Justice Committee. Carried over to 2024/25 to be delivered for summer polling.
 1 milestone to develop best practice Senior Officer Communications plan to support recruitment processes. Delayed to Q4 due to dependency on linked milestone. Early proposals for a future approach have been considered. 	 2.1 Develop approach to, and use of, routine public polling. 1 milestone to enhance spotlight question sets. Re-phased to Q3 for further work following a first draft being presented to senior leaders.
 3.6 Seek learning insights in respect of complaints, conduct, grievance and whistleblowing. 1 milestone to consider appropriate committee reporting routes for learning insights. Carried over to 2024/25 as work ongoing. 	 3.4 Develop How To guides for key tasks across all teams to document processes and ensure consistency. 1 milestones to develop 'How To' guide for wider colleagues who receive contact re potential complaints/conduct matters Carried over to 2024/25 due to resource pressure.
 5.5 Explore OD approaches for SPA Corporate & Forensics. 1 milestone revised to develop a session on vision, mission, values and behaviour based on staff feedback. Remains re-phased, now to Q4, to be incorporated into work on a Staff Conference that will take place in Q4 23/24. 	 7.2 Establish a peer review of board effectiveness 1 milestone to develop options for CEO consideration of peer review. Carried over to 2024/25 to complete a substantive peer review. Early thinking is in place as to possible approaches.
Conference that will take place in Q4 23/24.	 9.1 Develop a corporate process for recording and reporting improvement activity. 1 milestone to commence project and report on progress to project sponsor/SMT Re-phased to Q4 to allow for further lesson learned work to inform report.

Appendix B SPA audit and inspection recommendations update February 2024









SPA audit and inspection dashboard



- Five 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 Yellow / Grade 2, 9% No rating (HMICS), 91% 23 Open recommendations

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

- The biggest proportion of recommendations are actions are from HMICS
- There is one open ICO recommendations and one Internal Audit recommendation both 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.



Further detail on progress

Movement since previous ARAC report

	Nov 2023	New	Complete	Superseded	Re-opened	Jan 2024
Internal Audit	1	-	-	-	-	1
Audit Scotland	-	-	-	-	-	-
HMICS	14	5	-	-	2	21
ICO	4	-	-	-3	-	1
Total	19	+5	0	-3	+2	23

Actions completed and outstanding

	Actions	Actions	Actions outstanding:	
	completed (since Jan 24)	outstanding (Jan 24)	On target	Overdue
Internal Audit	-	1	-	1
Audit Scotland	_	-	-	-
HMICS	_	21	21	-
ICO	3	1	1	
Total	3	23	22	1

New actions

- There have been five new HMICS recommendation added since last report to ARAC in November:
 - three from the mental health inspection; and
 - two from the culture inspection.

Superseded actions

- Three ICO actions for SPA have been superseded by the actions allocated to Police Scotland by ICO.
- Police Scotland received three similar recommendations as the previous SPA ICO report. PS Digital division provides the ICT service to the SPA and their response and actions will also resolve the existing SPA recommendation. As such we have closed the SPA recommendation.

Re-opened actions

 At the ARAC in November, it was reported that five HMICS recommendations had been proposed for closure to HMICS. Two of these recommendations (recommendation 6 and 17 from the toxicology inspection) were not closed and are shown, in this update, as re-opened. This reflects feedback from HMICS that further evidence is required to close both these recommendations.

Overdue action

 The internal audit overdue action relates to the review and update of SPA Corporate policies. Engagement is ongoing with internal audit to ensure the appropriate evidence is provided to close this recommendation