SCOTTISH POLICE AUTHORITY
ÙGHDARRAS POILIS NA H-ALBA

Agenda Item 2.2

Meeting	SPA Audit, Risk and Assurance Committee
Date	9 May 2024
Location	Video Conference
Title of Paper	Police Scotland Audit and Improvement Recommendation Tracker Q4 - January–March 2024
Presented By	Assistant Chief Constable, Professionalism and Assurance
Recommendation to Members	**For Discussion**
Appendix Attached	Yes **Appendix A: Audit and Improvement Dashboard Q4**

PURPOSE

The purpose of this paper is to provide the Audit, Risk and Assurance Committee with an update of current open recommendations from all audit and improvement activity.

Members are invited to discuss the progress detailed within the report.

1   BACKGROUND

1.1   A report on Police Scotland's management of recommendations made by external scrutiny bodies. The report is produced on a quarterly basis for Members review. A copy of the Dashboard is available at **Appendix A**.

1.2   All recommendations are assessed in terms of the risk they present to Police Scotland so that we can prioritise activity. Internal Audit use the following risk grading structure and this has been applied to all recommendations within Police Scotland, regardless of whether they have been made by Internal Audit. This ensures a consistent approach is taken, allows for prioritisation and enables comparisons to be made.

■	Very high risk exposure - major concerns requiring immediate senior attention that create fundamental risks within the organisation
■	High risk exposure - absence / failure of key controls that create significant risks within the organisation.
■	Moderate risk exposure - controls are not working effectively and efficiently and may create moderate risk within the organisanisation
■	Low risk exposure - controls are working effectively, but could be strengthened to prevent the creation of minor risks or address general house-keeping issues

2   FURTHER DETAIL ON THE REPORT

2.1   Refer to **Appendix A** – Audit and Inspection Recommendations Dashboard.

3.   FINANCIAL IMPLICATIONS

3.1   There <u>are no</u> financial implications in this report.

4.   PERSONNEL IMPLICATIONS

4.1   There <u>are no</u> personnel implications in this report.

5.   LEGAL IMPLICATIONS

5.1   There <u>are no</u> legal implications in this report.

6.   REPUTATIONAL IMPLICATIONS

6.1   There <u>are no</u> reputational implications in this report.

7.   SOCIAL IMPLICATIONS

7.1   There <u>are no</u> social implications in this report.

8.   COMMUNITY IMPACT

8.1   There <u>are no</u> community implications in this report.

9.   EQUALITIES IMPLICATIONS

9.1   There <u>are no</u> equality implications in this report.

10.   ENVIRONMENT IMPLICATIONS

10.1   There <u>are no</u> environmental implications in this report.

RECOMMENDATIONS

Members are invited to discuss the progress detailed within the report.

Audit and Inspection Recommendations Dashboard

Reporting Period: Q4 January – March 2024

Police Scotland Recommendations Dashboard

Total	On Track	Change of Date	Very High Risk	Closed to date
333	213	120	2	51

Recommendations Management – Highlights

- 53 new recommendations added for tracking
  - 38 Internal Audit, 9 HMICS and 6 Independent Review.
  - 11 High Risk, 26 Medium, 14 Low, 2 Advisory

- 101 recommendations were due for closure up to the end of March 2024.
  - 44 recommendations due in the quarter are complete. 7 more recommendations also closed from previous periods
  - 10 closure packs and evidence gathering ongoing
  - 1 timescale allocated in error and corrected
  - 46 confirmed as delayed
  - 44% achieved on time within the quarter

- 10% (34) of recommendations have a Very/High Risk status. 3 recommendations are classified as Very High Risk. They relate to Compliance PAVA/Airwave.

- Overall 64% of ongoing recommendations are on track.

Open by Auditor/Inspectorate

Internal Audit: 11, 47, 8, 3
HMICS: 11, 10, 96, 18
Independent Reviews: 1, 3, 120, 5

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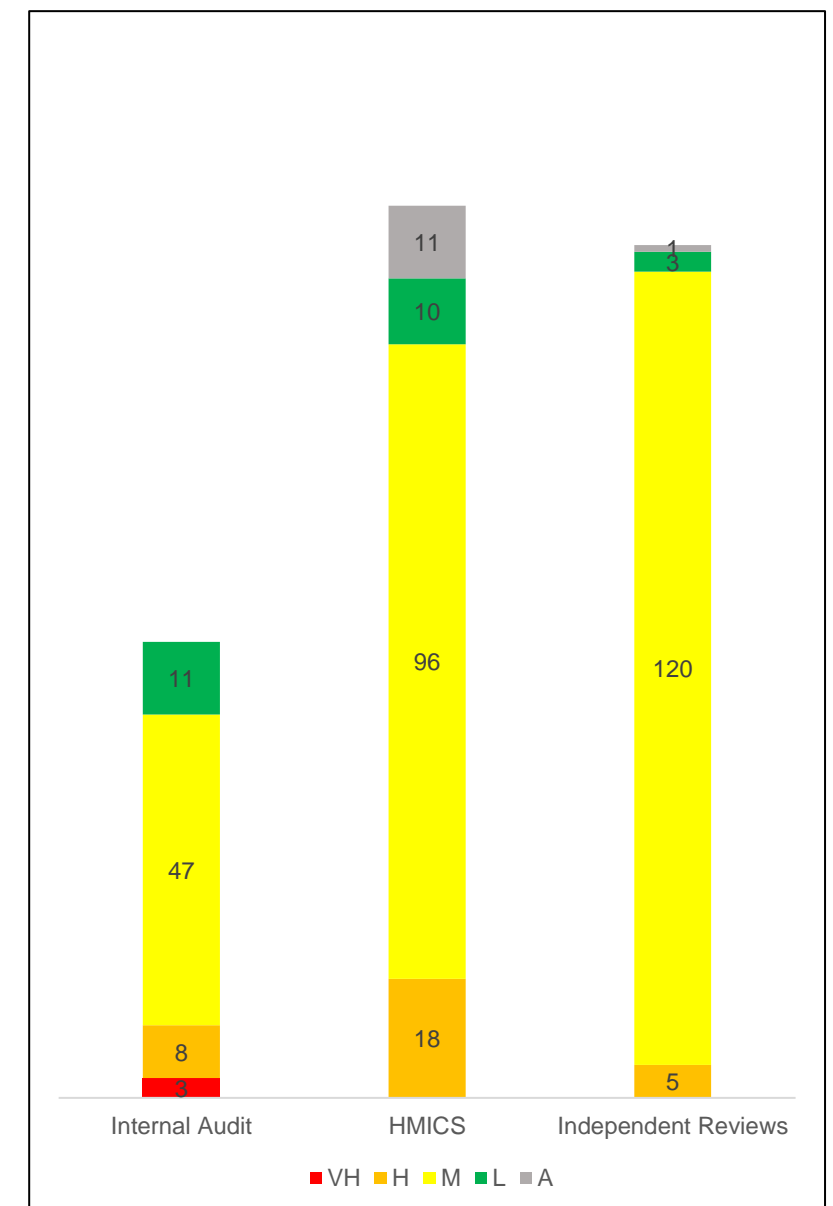
Date Changes – Overview

Overview

- 120 recommendations have had date changes. This is an increase since the last report. 46 new recommendations were reported as delayed this quarter and had date changes.

- 8% of all date changes have a Very High/High Risk status.

- Complexity, re-prioritisation, decision-making linked to budget, dependencies with other work and the movement of staff are some of the main reasons why recommendations are delayed.

- We scrutinise the work undertaken to understand the barriers to completion and report these through our Management Board structures for additional governance.

- We have undertaken an assessment of all recommendations subject to changes in timescales. In most cases work is well underway but it is taking longer due to the complexity or the number of other priorities that are being worked on.

Risk Profile of Date Changes by Audit Body

% of Date Changes by Audit Body

3
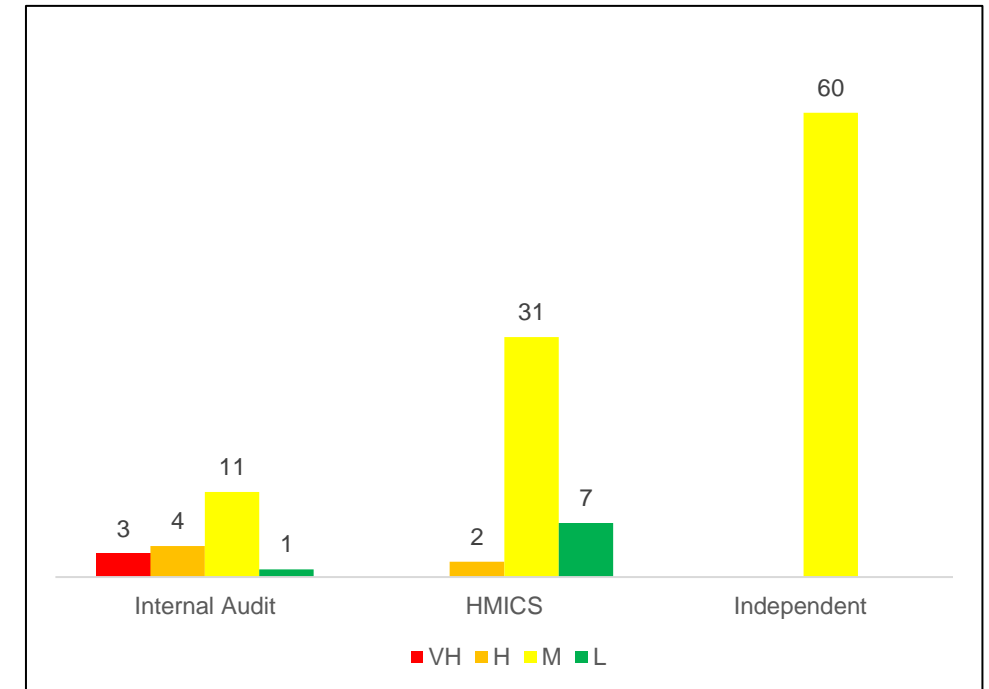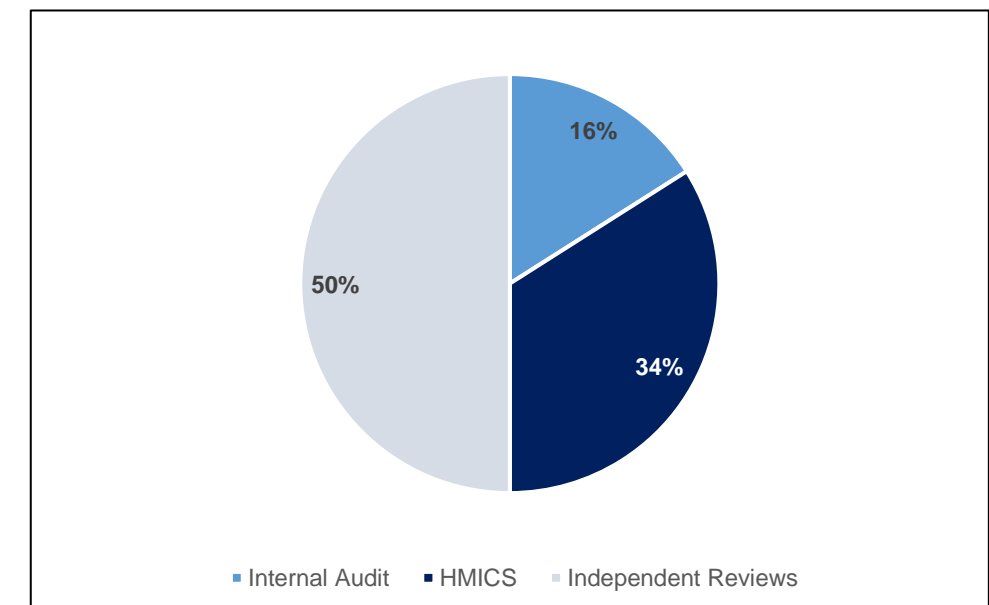
High Risk Recommendations – Date Changes

Very High Risk Delays

3 recommendations within the **Compliance Internal Audit** relating to PAVA are delayed due to the SOP taking longer to finalise.

✓ We communicated responsibilities in relation to PAVA at a local level to ensure compliance with existing procedures. All controls in local divisions for stock tracking have been identified to allow for a national record, by PSI, to be created for the first time detailing the serial number, location and allocation and expiry date.

✓ An electronic tracking system has been developed and is being tested which will provide full visibility of the location and allocation of PAVA resources along with a full audit capability. This will be rolled out to Divisions incrementally over the coming months.

✓ Ownership has been reviewed and agreed with interim ownership in place until the new procedures are finalised and the formal transfer of ownership can take place. A governance and escalation framework has been drafted by our Business Assurance Team and will be a critical component of the SOP going forward.

High Risk Delays

1 recommendation within the **Compliance Internal Audit** relating to PAVA is delayed due to the SOP taking longer to finalise.

✓ A review of storage has taken place, incorporating seeking guidance from College of Policing and Legal Services as well as benchmarking with other forces nationwide. Storage arrangements and safe handling guidelines have been incorporated within the SOP but this is not yet finalised to allow us to present this for closure.

2 recommendations within the **Custody Lanarkshire Inspection** relating to Cleaning standards are delayed.

✓ Engagement is ongoing with the cleaning provider and compliance checking is in place to monitor arrangements to ensure continued improvement.

High Risk Delays Continued

1 recommendation relating to **ICT Service Delivery** to create clear definitions on what represents a standard request. This is to improve resource planning and customer satisfaction.

✓ The changes to IT Connect are complete and demand is being captured by category, priority and driver for each service request by the Service Delivery team. This will enable an accurate view of current and live demand. Before we go live with the categorisation and prioritisation with the operational teams, there is a requirement to develop documentation to support a prioritisation guide and coordinated activity guidelines. These are being drafted. Additionally, we need to monitor the accuracy of the categories and prioritisation and review the stats we have to allow us to refine the data capture and the categories/process.

1 recommendation relating to Vetting (Designated Post List) remains in progress.

✓ In October 2023, all divisions were sent a list of all posts in their division and were asked to review each, using guidance from the current Vetting Manual of Guidance, to ensure that they have the correct levels of vetting based on the requirements of the role. This first phase includes all posts to ensure the force has a comprehensive list of every post. Phase 1 is complete where we have a list of all posts in the force.

✓ The second phase is to take those posts which require MV clearance and create a new Designated Posts list. This list will be reviewed annually. We are now working with divisions to review the vetting requirements for all of the posts. This is an extensive task and the target date is currently revised to be substantially achieved by July 2024.

Historic and Delayed Recommendations

Historic Recommendations

We held an Extraordinary Police Scotland Audit and Risk Board in March 2024 with the focus on recommendations that met the following escalation criteria:
- open for more than 3 years;
- no further action possible;
- no evidence available to demonstrate;
- dependency; and
- multiple date changes.

43 recommendations were reviewed as a result and ACC/Director SROs were in attendance to discuss further action and next steps.

It was noted that substantial progress had been made in all areas. Opportunities to address the residual action was tasked to expedite the closure where possible in the next quarter.

A small number were escalated for discussion with the Audit/Inspection body and meetings have taken place to discuss how we might close and/or document closure based on partial completion.

This work is still progressing. It was accepted there remained a number of recommendations that were important to progress and assurance was given that action was being taken albeit implementation will take time due to complexities and dependencies.

The HMICS recommendations in this category are reported to SPA Committees every six months. A full update on progress is given for each publication along with a summary of the outcomes and improvements achieved. This also provides an opportunity to highlight key issues and challenges in addressing the recommendations and explains in more detail any delays.

We have realigned resourcing within the wider Professionalism and Assurance portfolio to provide a dedicated resource to progressing HMICS recommendations.

Historic – HMICS Summary

Training and Development Phase 1
- ✓ One recommendation remains open from the 17 recommendations made. The remaining recommendation relates to maximising the use of resources to work on force-wide priorities.

Online Child Sexual Abuse
- ✓ These actions are concluding and are being reviewed for closure in the next quarter.

Events Policing
- ✓ 3 recommendations remain outstanding relating to risk assessing the resourcing, learning from events and understanding the impact of events on wider resourcing.

It was accepted that good progress was being made in the following areas / publications but work could not be accelerated any further.
- ✓ SCRS Crime Audit
- ✓ Strategic Workforce Planning

Historic – Internal Audit Summary

Recommendations from the previous Internal Audit provider
- ✓ Our focus remains on concluding the 24 recommendations from the previous Internal Audit provider. 9 of the 24 relate to Organisational Learning and requires new structures to be established as well as resourcing to be identified. The Extraordinary Audit and Risk Board accepted that the earliest implementation will be achieved is April 2025. Existing structures will continue to exist until an overarching Framework is in place.

- ✓ Cyber Security – these recommendations are tracking to their original target date but the dates are within the 2025 period. They have dependencies with other work and progress is reviewed at regular intervals to ensure they remain on track.

Review Priorities

Review Priorities - HMICS

Strategic Workforce Planning
- ✓ Following the finalisation of the Strategic Workforce Plan and associated Implementation Plan, we are preparing evidence submissions for HMICS to review. This work is ongoing and will be a priority in the next quarter.

Domestic Abuse
- ✓ We have undertaken a review of progress and have collated updates and final closing statements for a number of areas. We are in the process of collating the supporting evidence before submitting to HMICS for closure.

CAM
- ✓ These actions are concluding and are being reviewed for closure in the next few months.

Hate Crime
- ✓ 5 recommendations remain open from the 15 made. Some of these are dependent on working collaboratively with Scottish Government and others required the Hate Crime Act to be in place before finalising our operating procedures. A concentrated effort is underway to bring these to a close.

New Improvement Plans
- ✓ Developing Improvement Actions to address the Organisational Culture and Wellbeing Front Line Focus Review remain a priority. These are complex areas that require careful consideration to ensure action robustly addresses the root causes of the issues identified.

Review Priorities – Internal Audit

ICT Service Delivery
- ✓ 3 recommendations outstanding from this Audit which are being progressed for finalisation in the next quarter. They include finalising the Digital Newsletter as a way of communicating performance and further categorisation of service requests to manage resource and customer expectations more effectively. All of these actions are well advanced.

Ill Health Retirement
- ✓ 5 out of the 7 remaining recommendations will conclude within the quarter and good progress is being made with these.

## Review Priorities – Independent Reviews

ICO Data Protection Review
- ✓ A review with ICO was undertaken where we presented 25 recommendations for closure with 11 accepted for discharge. The remaining action requires more evidence which is being progressed but ICO reported their satisfaction with the progress made in tackling the important and urgent findings.

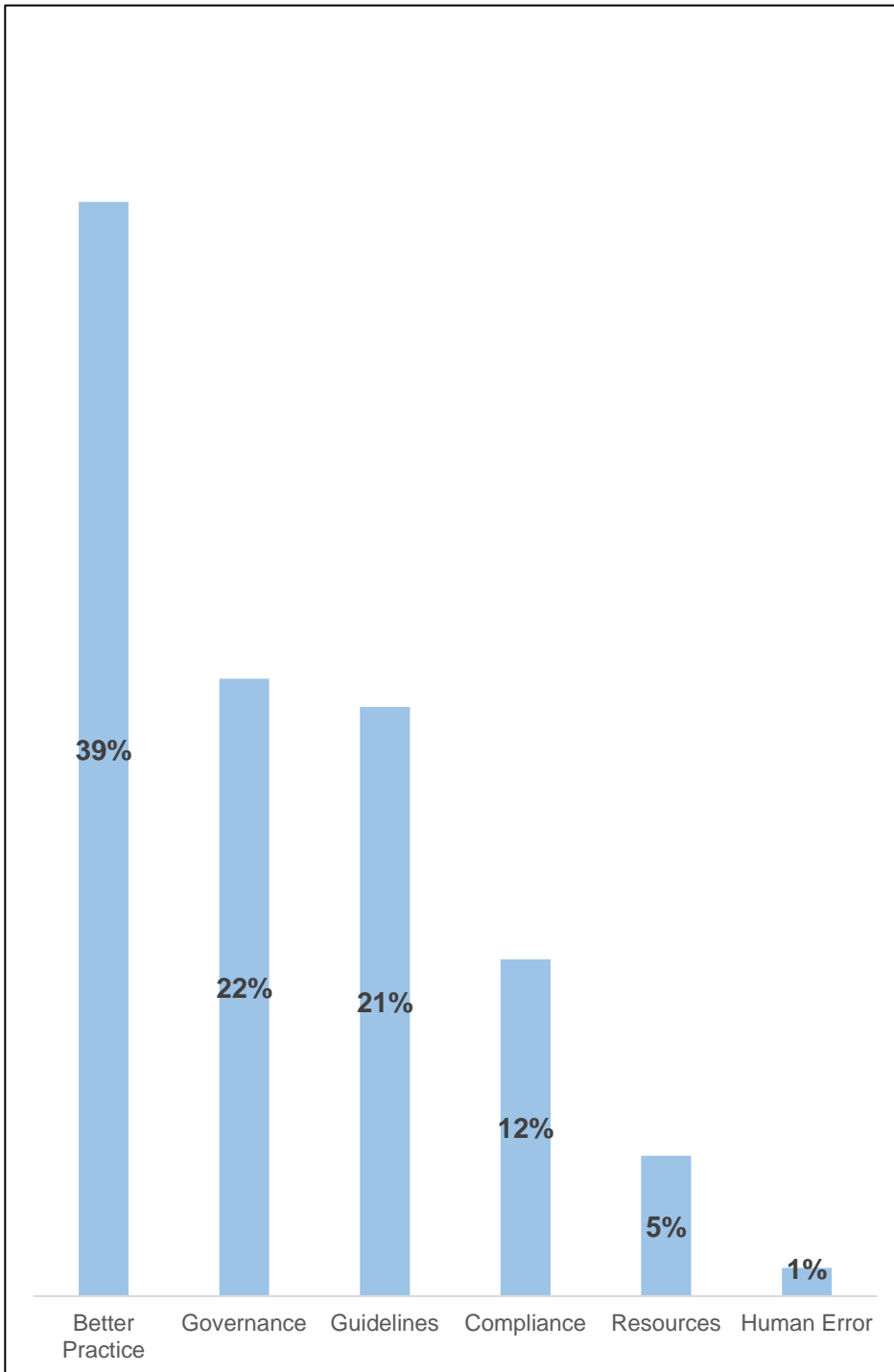We will continue our focus on these recommendations in the coming quarter.

Date Changes – By Audit Body
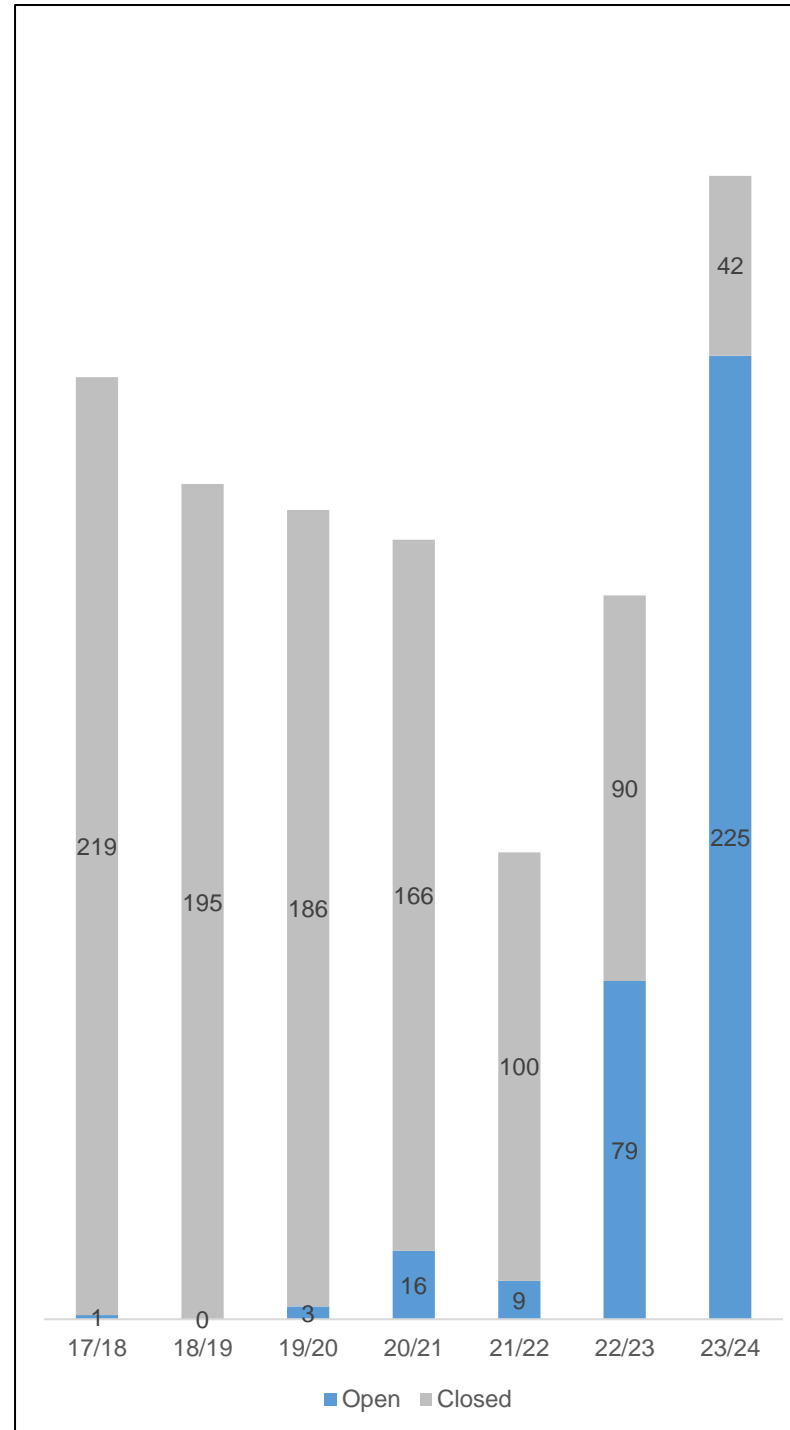
Summary of Delays by Publication
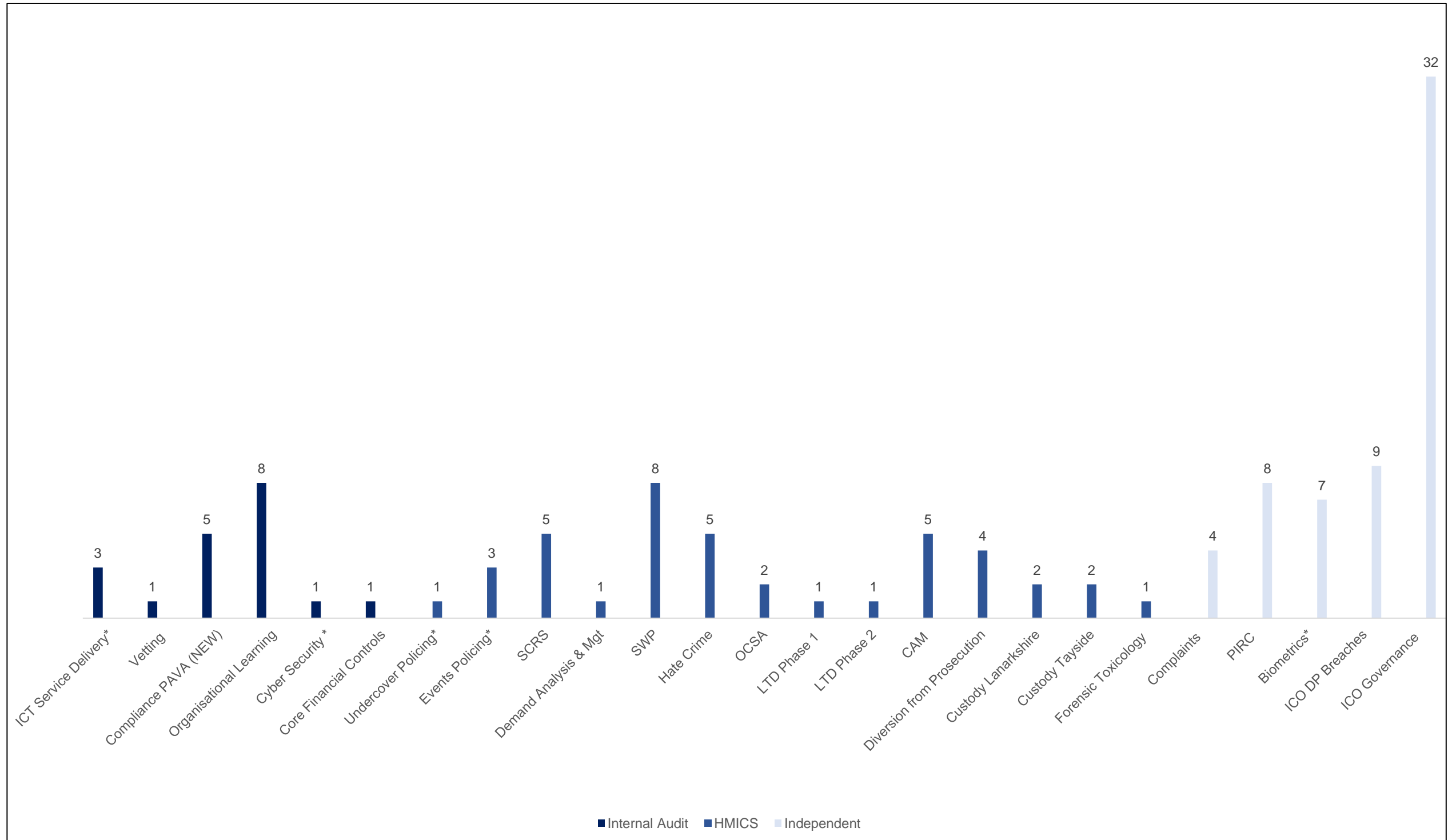
Police Scotland Recommendations Trends

Recommendations by Theme (%)

Better Practice	Governance	Guidelines	Compliance	Resources	Human Error
39%	22%	21%	12%	5%	1%

Recommendations by Age

	17/18	18/19	19/20	20/21	21/22	22/23	23/24
Closed	219	195	186	166	100	90	42
Open	1	0	3	16	9	79	225

■ Open ■ Closed

Summary

- **Themes** – The largest proportion of recommendations relate to Better Practice meaning these are opportunities for continuous improvement rather than relating to non-compliance. There remain high numbers of recommendations in the Guidelines category which relates to policies, procedures to govern what, why and how activities are progressed.

- **Age** – There has been positive movement with 6 closures in the 2020/21 and 2021/22 age categories. We continue to focus on reducing the number of recommendations in the oldest age category and have undertaken a deep dive of progress and action still required in order to complete.

  59% of the recommendations being tracked were added within the last 6 months.

Recommendations Closure Process