# AUTHORITY

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Meeting	Scottish Police Authority – Audit, Risk
	and Assurance Committee
Date and Time	16 September 2021
Location	Scottish Police Authority
	Headquarters
Title of Paper	Police Scotland Audit and
	Improvement Recommendations
	Tracker – Q2 (to end of August 2021)
Presented By	ACC Professionalism and Assurance
	and ACC Criminal Justice (Appendix D
	only)
Recommendation to	For noting
Members	
Appendix Attached:	YES
	Appendix A – Recommendations Tracker
	Appendix B – Summary of Achievements
	Appendix C – Summary of Missed
	Recommendations
	Appendix D – CPT Recommendations

### 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.

#### 1 BACKGROUND

- 1.1 The Audit and Improvement Tracker provides a methodology for recording, managing and updating all recommendations from external bodies.
- 1.2 The Tracker is provided at **Appendix A.** This provides a breakdown of all publications, risk and a summary of progress.
- 1.3 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.

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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 Completed Recommendations

#### 14 closed at this review – 4 High and 10 Medium

The improvements are broadly categorised as follows:

- o Improved service delivery both internally and externally
- o Improved working partnerships
- Improved governance, compliance and assurance processes
- o Improvements to supporting our people

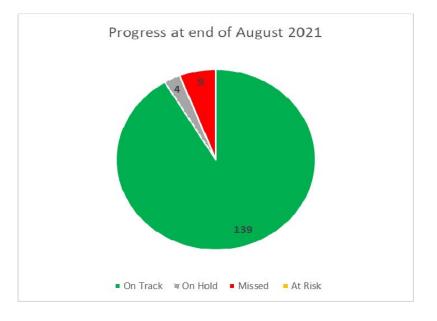
More detailed information on the key highlights as a result of completing these recommendations is provided at **Appendix B**.

#### 2.2 Open Recommendations Summary

There are **152 recommendations open**. The following provides a summary of progress.

- **94%** of recommendations are on track for completion by their original target date.
- 9 recommendations have missed their original timescale for completion. This is an increase of 1 since the last report.
- **4** recommendations are on hold. We have completed the action but the evidence to demonstrate the impact is not satisfactory for HMICS to discharge. Further details is provided at Table 2.
- **12%** of all open recommendations have a very high or high risk status. There is 1 very high risk recommendation open within the Benefits Realisation Internal Audit due December 2021 and is on track.

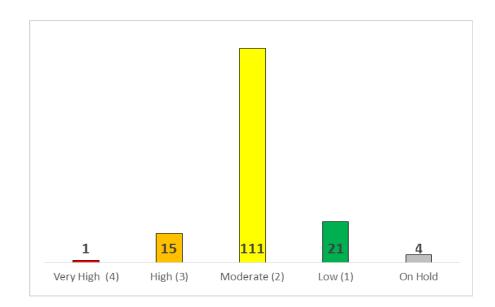
Graph 1 shows the total number of recommendations according to progress



## 2.3 Recommendations by Risk Status

Graph 2 shows the number of open recommendations according to risk. There is **one recommendation** with a very high risk rating. This relates to the Benefits Realisation Audit and is on track for completion end of December 2021. There are **15 recommendations** with a high risk rating. Very and High Risk recommendations represents 10% of all open

#### recommendations.

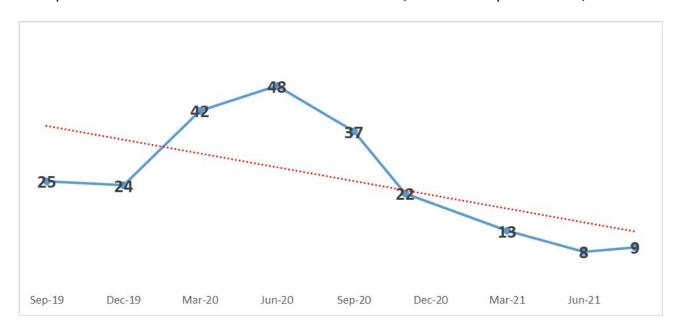


#### 2.4 Recommendations Missed the Original Date of Completion

A total of 9 recommendations have missed their original date of completion. This is an increase of 1 since the last report.

In order to gain a better understanding of progress relating to these missed recommendations, we undertake a deep dive exercise. This helps us understand what has been done and what is still required in order to move towards closure. Those missed are documented within **Appendix C** and there are high levels of assurance that work is at an advanced position but requires more time to complete, go through a governance process or is pending evidence of implementation.

The graph below shows the number of missed recommendations at quarterly intervals over the last two years. The red dotted line shows the trend. We continue to make good progress with addressing large numbers of recommendations on time.



Graph 4 – Trend of Missed Recommendations (Red line depicts trend)

## 2.5 Recommendations on Hold

There are some recommendations which we show as on hold. This means we have completed all or the majority of the action but need to wait to evidence an outcome, sustained improvement or they have a dependency with another piece of work before concluding. They are detailed in the table below.

REPORT / DATE	RECOMMENDATION	RISK	REASON
Undercover Policing 2018	R01 Covert Policing Strategy and Implementation Plan	L	A strategy was developed and approved by ACC. This has been shared with HMICS for feedback. Meeting with business area and HMICS to discuss any further action required.
Undercover Policing 2018	R16 Integrated Records Management System	L	We have procured the system and provided evidence of this along with an implementation plan. HMICS will only discharge when system is live. By end of Summer 2021 roll out will be nearing completion.
Annual Policing Plan Review 2018	R3 Develop Strategic Intelligence Requirement	М	Complete review of development of Strategic Assessment process presented as evidence. National priorities clearly outlined but lacks detailed evidence to show how these translate to local priorities. Further work ongoing as part of the National Intelligence Review.
LP Greater Glasgow 2019	Special Constables - renewed focus regarding the recruitment and retention of special constables.	М	Evidence presented to HMICS re PS strategy for Specials and how this is improving recruitment and retention. HMICS satisfied with progress to date but will review implementation of this during the LTD Phase 2 inspection activity to verify improvement. Review by end of August 2021 when draft findings will be known for next steps.

## Table 1 Summary of recommendations with an on hold status

## 2.6 Themes and Dependencies

Due to the large number of new recommendations newly published there are some themes emerging along with dependencies. We have attempted to summarise these themes according to 4 categories below but will do further work during the action planning phase so that we understand the dependencies and priority actions that can influence the greatest levels of change and improvement.

Diversity, Equality, Inclusion and Ethics and Values

- Improve understanding of both workforce and complainants diversity data to drive service delivery.
- Improve understanding of diversity demographics and demonstrate a more inclusive approach both internally and externally.

## Demand

- Better use of demand and analysis to drive service delivery and organisational/ functional design.
- More consistent use of demand data at local levels to determine capacity and resourcing requirements.

Data

- Quality and overall use.
- Performance and trends building data sets to understand performance and use this together with benchmarking to compare.
- Improve use of trend data to inform decision-making for resourcing, tackling priority areas and tasking.
- Quality Assurance and compliance in a number of areas.
- Improvements in public reporting for greater transparency.

Development

- Organisational alignment, working more holistically and removing silo working,
- Training equipping our staff in respect of core leadership training, mental health and more specialist training in respect of crime recording, hate crime/incidents, equality and key aspects of service delivery.

Key dependencies

- Further development of equalities and diversity data
- Intelligence Review
- Digital Drives Data project
- Demand Framework and Delivery Plan
- Organisational Learning approach
- Crime ICT System
- Middle Office Review

## 2.7 The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT)

2.7.1 The purpose of this update is to provide Members with an update in relation to the NPM Report dated 24 August 2021:

'Scotland's progress in the prevention of ill-treatment in places of detention - An assessment of the implementation of recommendations made by the European Committee for the Prevention of Torture'

A full copy of the report is available here along with an Executive Summary.

2.7.2 The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) was set up under the Council of Europe's 'European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment' which came into force in 1989. The CPT is not an investigative body, but provides a nonjudicial preventative mechanism to protect persons deprived of their liberty against torture and other forms of ill-treatment. Following visits to

places of detention, the CPT sends a detailed report to the State concerned which contains findings, recommendations, comments and requests for information. Police Scotland have engaged fully in this process and provided detailed feedback in respect of draft findings resulting in changes to the final set of recommendations – available here.

- 2.7.3 The CPT have visited Scottish Police custody centres twice in the past decade; in 2012 and 2018. The most recent report on the 2018 visits. The CPT did visit Scotland in 2019 but only visited Scottish Prison Service premises.
- 2.7.4 The UK National Preventive Mechanism (UK NPM) was established in 2009 to strengthen the protection of people in detention through independent monitoring. The Scottish sub-group of UK NPM has recently commissioned an independent review of Scotland's progress in relation to the recommendations made by the CPT following their 2012 and 2018 visits.
- 2.7.5 This provides a summary of recommendations made in the CPT reports from the 2012 and 2018 visits. The only recommendations detailed relate to police custody. It is understood that the CPT will not visit the UK in 2022 however the UK NPM will focus on Scotland's progress with regard to CPT recommendations therefore agreeing a monitoring mechanism is essential.
- 2.7.6 The following outlines the recommendations made in 2012 and 2018:

	Total	Proposed for closure	In progress	Other
2012	4	3	1	-
2018	12	6	3	3*

\* Under the remit of the National Police Care Network

**Appendix D** summarises the recommendation, year made, current status, and proposed closure or estimated date for completion.

#### **3 FINANCIAL IMPLICATIONS**

3.1 There may be financial implications associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 4 PERSONNEL IMPLICATIONS

4.1 There may be personnel implications associated with implementing

Audit, Risk and Assurance Committee Police Scotland Audit and Improvement Recommendations Tracker – Q2 (to end of August 2021) 16 September 2021

recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 5 LEGAL IMPLICATIONS

5.1 There may be legal implications associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 6 **REPUTATIONAL IMPLICATIONS**

6.1 There may be reputational implications associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 7 SOCIAL IMPLICATIONS

7.1 There may be social implications associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 8 COMMUNITY IMPACT

8.1 There may be a community impact associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### 9 EQUALITIES IMPLICATIONS

9.1 There may be equality implications associated with implementing recommendations from Audits/Inspections and these are detailed where relevant within Appendix A – Recommendations Tracker.

#### RECOMMENDATIONS

Members are requested to note the report.

### APPENDIX B – SUMMARY OF ACHIEVEMENTS

### IMPROVED SERVICE DELIVERY BOTH INTERNALLY AND EXTERNALLY

• Online Child Sexual Abuse HMICS Thematic

We have improved our tasking of specialist undercover resources in relation to the management of online child sexual abuse and exploitation (OCSAE). An initial investigative strategy meeting takes place with key internal stakeholders with expertise in undercover investigations, child protection and intelligence management to collaborate more effectively, discuss proposed tactics and mitigate any risk.

### IMPROVED WORKING PARTNERSHIPS

• Online Child Sexual Abuse HMICS Thematic

We have strengthened our partnership working with the National Crime Agency resulting in increased opportunities to tackle OCSAE effectively. The NCA is sighted on our strategic and tactical response to OCSAE and attend our Tactical Boards contributing experience and expertise to discussions. There is now greater alignment at a strategic level with evidence that intelligence is shared in both directions.

## IMPROVED GOVERNANCE, COMPLIANCE AND ASSURANCE PROCESSES

• COP26 Assurance Review

The Assurance Map has been reconstructed to draw out key deliverables and objectives as recommended by Azets. Assurance areas have been clearly articulated in the map and now clearly align with one of the presented workstreams.

Following the reconstruction of the OP URRAM Assurance Map those assurance providers in the Second Line of Defence that are not directed by the Terms of Reference of their forum, e.g. SLB, SOB, ICT Project Board, have been formally commissioned to conduct assurance against bespoke deliverables as well as oversight of First Line of Defence assurance. This reduces the risk that the assurance activity that is eventually undertaken differs in nature or extent to that represented on the assurance map, meaning that the assurance gained is not consistent with the assessment of assurance need, leading to the emergence of unmanaged risks.

#### • SPA Annual Audit 19/20

In response to a recommendation to deliver the Procurement Improvement Plan and enhance the contract register, we can confirm this is now fully embedded as part of business as usual. Enhancements continue to be identified and implemented as required as part of continuous improvement activity and any emerging statutory or internal reporting requirements. An activity tracker tool sits alongside the contract register which tracks work up

until the point of award and there is an automatic link to create the resulting entry in the contract register. The activity tracker also captures any savings generated by the activity across the life of the contract and profiles them into financial years. Procurement benefits are calculated in accordance with the Scottish Government Procurement Benefits Reporting Guidance.

• Online Child Sexual Abuse HMICS Thematic

We have made improvements to the strategic governance framework to support, direct, scrutinise and quality assure the force's response to online child sexual abuse.

#### IMPROVEMENTS TO SUPPORTING OUR PEOPLE

• Wellbeing

Evidence in relation to the final wellbeing action has been presented to allow closure. We have communicated an update in respect of survey actions along with a clear plan setting out the next steps that will be taken to update staff on results and action.

## **APPENDIX C – MISSED RECOMMENDATIONS**

Audit, Risk and Assurance Committee Police Scotland Audit and Improvement Recommendations Tracker – Q2 (to end of August 2021) 16 September 2021

REPORT / DATE	RECOMMENDATION	RISK	DATE	UPDATE	% Complete
Events Thematic 2019	EVENTS: Recommendations have been grouped under 3 main themes as follows:			There was a substantial amount of work to complete here that was dependent on a number of other factors. Therefore it has taken longer to progress these towards closure than we originally expected. The majority of the work is in place but the changes require to be evidence in terms of their outcome and impact. Progress was also impacted by Covid in both terms of staffing and ability to implement procedures on the events industry. We have undertaken a deep dive of all recommendations and provide the following assurances that work to address these findings is well advanced.	
	<b>Resourcing</b> - addressing inconsistencies in event resourcing across the country, improved risk and demand analysis, review resourcing model (impacting 3 recommendations)	М	Comple te pending residual issues		95%
	<b>Cost Recovery</b> - update SOP/Guidance and establish central co-ordination process (impacting 2 recommendations)	М	Comple te pending publicat ion of guidanc e	implementation has been created and is aligned to varying interdependencies. Revised and updated process maps have been consulted on and are being implemented. Confirmation of process review complete and any outcome of audit activity before consideration for closure.	90%
	<b>Training</b> - updated Tactical Plan, Debrief and Training for Event Commanders (2 recommendations)	М	Comple te pending implem entation of agreed training progra mme	<b>Complete Pending Implementation of CPD activity</b> ACC Williams presented a report in respect of the processes which underpin accreditation of Event Commanders in Scotland, outlining a number of proposed recommendations in respect of accreditation and operational competence requirements. Members were advised that the recommendations followed a review of Event Command arrangements, and would improve attainment levels, support mechanisms, continuous professional development opportunities, and governance. Following discussion, the recommendations were approved and are progressing towards implementation which will take place following Op Urram.	95%

Audit, Risk and Assurance Committee Police Scotland Audit and Improvement Recommendations Tracker – Q2 (to end of August 2021) 16 September 2021

REPORT / DATE	RECOMMENDATION	RISK	DATE	UPDATE	% Complete
Greater Glasgow Custody 2019	Management of Queues at Custody Police Scotland should reconsider how it can better manage custody queue levels and provide radios to large custody centres to improve communication inside the centre and with local policing. <i>Risk - Police Officers are non-productive whilst waiting</i> <i>to book in prisoners.</i>	м	<del>020</del>	A pilot of the Custody Co-ordinator has been ongoing for several months which was anecdotally making improvements to waiting times. A formal evaluation was hampered due to Covid restrictions so the pilot was extended. in order to gather more data. The evaluation is now concluding to determine what went well and what has not been effective with a report due for consideration imminently.	80%
SPA Annual Audit 19/20	Long Term Financial Plans - The Scottish Police Authority and Police Scotland must develop revised medium and long-term financial plans which detail how financial balance will be achieved. Both parties must engage with the Scottish Government to determine the route map to financial balance. In the interim, if deficit budgets are anticipated, the support of the Scottish Government must be sought.	М	<del>July</del> <del>2021</del> 30 Sept 2021	<b>Complete pending governance approval</b> The long term Financial Planning paper did not progress through the committees as expected. A revised date of 30 Sept 2021 has been approved by the Financial Controller to allow the paper to be presented at Resources Committee.	95%

## **APPENDIX D – SUMMARY OF CPT RECOMMENDATIONS**

#### Recommendation 1-12:

The CPT highlighted that often notification of custody to a reasonable named person, as per Section 15(1) of the Criminal Procedure (Scotland) Act 1995 may be delayed if it is "necessary in the interest of the investigation, or the prevention of crime or the apprehension of offenders".

The CPT recommends that appropriate measures are adopted to remedy identified deficiencies in the legislation in that the power to delay notification needed to be clearly defined, strictly time-limited, and that safeguards are required in terms of impartial senior officer approval and documented decision making.

#### **Current Status:**

The Criminal Procedure (Scotland) Act 1995 was repealed by The Criminal Justice (Scotland) Act 2016 and the right of detained persons to have a third party notified of their detention, is provided for in Section 38-40 which specifies the age related rights. Intimation under subsection (1) must be sent - (a) as soon as reasonably practicable, or (b) if subsection 5 below applies, with no more delay than is necessary.

Subsection 5 applies where an appropriate constable considers some delay to be necessary in the interests of - (a) the investigation or prevention of crime, (b) the apprehension of offenders, or (c) safeguarding and promoting the wellbeing of the person in custody, where a constable believes that person to be under 18 years of age. In subsection 5, "an appropriate constable" means a constable who - (a) is of the rank of sergeant or above, and (b) has not been involved in the investigation in connection with which the person is in custody.

As can be seen from the legislation, any decision to postpone the provision of this right, must be authorised by a Sergeant or above, unconnected with the investigation. Entitlements for a person in custody are specified in the Letter of Rights and all processes relating to an arrested person, along with all decisions made and rationale, are recorded on the Police National Custody System.

#### **PROPOSE NO FURTHER ACTION**

2012

## Recommendation 2-12 (superseded by 5-18 and 6-18):

The CPT's delegation was satisfied that medical consultations took place in private, out of the hearing and sight of a police officer unless in cases where the doctor deemed the detained person to be aggressive, violent and potentially dangerous. In such cases the doctor could hold the initial medical consultation through the small hatch in the cell door, although out of the hearing of a police officer. Nevertheless, there was still no formal requirement guaranteeing the right of access to a doctor.

The CPT recommends that the right of a detained person to have access to a doctor be expressly provided for in law and in the administrative guidance regulating the deprivation of liberty by the police.

#### Current Status:

This recommendation was subsequently raised again during the 2018 visit by the CPT delegation. The proposed response on that occasion has been detailed in Recommendations 5-18 and 6-18 below.

#### **PROPOSE NO FURTHER ACTION**

#### 2012

2012

#### Recommendation 3-12:

Scottish law provides that any person deprived of his or her liberty must be immediately and clearly informed of the reason for police detention and of their rights. Inspections identified that leaflets explaining detained persons' rights did not exist in all areas visited.

The CPT recommends the Scottish authorities ensure that written information on detained persons' rights is available in all police detention areas and is effectively given to persons detained.

Police Scotland can confirm that a "Letter of Rights" is now available at all custody centres.

The Angiolini Review made a number of suggestions to enhance the accessibility of the Letter of Rights. As identified in the 2021 NPM Report entitled "Scotland's progress in the prevention of ill-treatment in places of detention" it was noted that "with respect to the police, evidence suggests improvements in the overall notification of rights to those in police custody through the work carried out by the Government to the Letter of Rights.

In 2019, the Government undertook to consult on the Letter of Rights, with the outcome published in September 2020. It was concluded that, despite moderate approval of the Letter, there is scope for further improvement, including on where the Letter is perceived as lacking clarity, or containing conflicting information. The Government undertook to establish a working group involving key stakeholders and linguistic experts to take forward reforms of the Letter of Rights, ensuring that the views expressed during the consultation process were properly captured. The researchers for this report were informed that this working group has been established (with the authorities stating that the first meetings took place in April and May 2021 respectively and will meet twice further before submission of recommendations to the minister in the autumn of 2021). They also noted that practical work to improve the Letter of Rights, especially in making it more accessible, is underway.

#### **PROPOSE NO FURTHER ACTION**

2012

#### Recommendation 4-12:

The CPT recommends that all persons detained for longer than 24 hours be offered the possibility of access to outdoor exercise. The CPT also invites the Scottish authorities to enable persons in custody for longer than 24 hours to use the shower facilities.

Within the 2018 CPT report following their subsequent visit, it was again noted that detained persons held for longer than 24 hours were not offered access to outdoor exercise at any of the police stations visited, and many of the custody facilities visited did not have any secure outdoor space available, given their locations in the city centres. On this occasion, the Scottish authorities had responded that, due to the fact that there were not many persons held for longer than 24 hours, and that the numbers would even decrease, the recommendation could not be implemented for old police facilities, but would be considered for new ones.

This was also highlighted in the 2019-2020 ICVS Annual Review and referred to in the subsequent NPM report which stated that ICVS had referred to the lack of exercise as "an 'ongoing issue', especially for those detained over the weekend and during public holidays".

Not all custody centres have exercise and/ or shower facilities and access to exercise and showering is different in comparison to that provided when within Scottish Prison Service Establishments.

There is no legislative requirement for Police Scotland to provide exercise facilities and the custody estate layout and staffing profile preclude these being offered as a standard practice. That being said, where layout and staffing allow, and circumstances dictate that fresh air and exercise would be of benefit to a person in police custody, this would be determined on a case by case basis.

A scoping exercise could be conducted with other forces to ascertain how exercise opportunities are managed/ risk assessed in different areas and if considered a feasible option, a briefing paper could be prepared outlining proposals for the Criminal Justice Senior Leadership Team.

The current Police Scotland policy regarding washing, written into the Standard Operating Procedure advises that "where an arrested person is to be detained in custody for more than a full day, they should be offered facilities to wash and / or shave at least once per day. Any reasonable requests to wash and / or shave more often than this are to be met where possible. Facilities are also to be made available for a person to wash and shave, if they wish, prior to appearing in court." In addition the Care and Welfare SOP states that, "Persons who require showering should, where appropriate, be offered the opportunity to do so. If necessary, female persons should be transferred between custody centres to ensure adequate washing/showering facilities are available".

Custody staff have been reminded to ensure that the National Custody System is updated whenever a person is offered washing/showering facilities.

Monitoring and audit of compliance with regard to affording washing Applie Riskning Strange Complitient Recording will be conducted moving forward. Police Scotland Audit and Improvement Recommendations Tracker – Q2 (to end of August 2021) 16 September 2021 OFFICIAL

#### 30/09/2022 – PROPOSE PUSHBACK ON EXERCISE ELEMENT

2018

#### Recommendation 1-18:

The CPT recommends that police officers be regularly reminded of the basic principles of using no more force than strictly necessary, including through practical training exercises.

The CPT recommends that the Scottish authorities deliver a strong message that the ill-treatment of detained persons is illegal, unprofessional, and will be the subject of appropriate sanctions. Further, the authorities should ensure that injuries are systematically recorded and that an investigation is systematically carried out into every allegation of ill-treatment.

#### **Current Status:**

Every training course provided by CJSD Divisional Training Department is delivered according to ECHR obligations and Police Scotland's Code of Ethics are constantly referred to and highlighted throughout. A specific Module of the Custody Officer Induction course covers the Criminal Justice (Scotland) Act 2016 and how it complies fully with ECHR article rights. Another Module of the Induction course covers Adverse Incidents and Recording mechanisms. This includes the topic of injuries to prisoners and staff, accident reporting and referrals to and the role of the Police Investigations and Review Commissioner (PIRC). On all CJSD Training courses, Trainers make it abundantly clear that Care and Welfare of those detained in police custody is the highest priority and ensure all staff are fully aware of their primary obligations (as per guidance illustrated in the Care and Welfare of Persons in Police Custody Standard Operating Procedure (SOP). Recording of injuries are addressed at the specific related recommendation 8.

The annual refresher Officer Safety Training delivered to all staff involves practical training exercises regarding proportionate use of force.

#### **PROPOSE NO FURTHER ACTION**

2018

#### Recommendation 2-18:

The CPT recommends that a person who is suspected of having ingested or secreted drugs within their body should be subject to a radiography examination and, if positive, placed under observation in a medical setting until the evacuation of the packages.

The CPT also requested confirmation that existing guidelines are being followed in all custody centres in respect of:

- Immediate assessment of persons in police custody suspected of having substances concealed internally,
- Individual roles and responsibilities,
- The process to be followed in custody, and
- The process for discharge from hospital.

#### Current Status:

Update provided by the National Police Care Network – "The current process in Scotland is in line with interim custody healthcare guidance during the Covid-19 pandemic (Interim Guidance - Custody Healthcare Provision During the Novel Coronavirus (COVID-19) Pandemic). The guidance currently states that 'All persons suspected of concealing drugs or other items in any body orifice other than the mouth should be taken to the Emergency Department for assessment. Custody staff should inform the healthcare professional on site (if applicable) in the first instance, when there is either suspicion or confirmation of a person in custody concealing drugs or any other an item, as they may require immediate medical attention'.

Discussions are ongoing between the Network, Royal College of Emergency Medicine and Police Scotland to ascertain if every person suspected of concealing drugs should go to the Emergency Department in the first instance, or if this can be safely managed with a Forensic Physician in police custody, where applicable.

Guidance within the Police Scotland Care and Welfare SOP is also clear in that 'If it is known or suspected that a person has swallowed or packed drugs the person should be taken to hospital'. This is standard procedure at all custody centres, and the person will not be returned to police custody premises until a medical professional has deemed them fit to be discharged. The SOP covers all of the aspects where CPT sought reassurance around guidelines.

## PROPOSE NO FURTHER ACTION 2018

#### Recommendation 3-18:

The CPT recommends that detained persons should be informed when the third party notification has been effected by custody staff; this feedback should be traceable in the police custody records.

A priority change request has been submitted to the National Custody System (NCS) Governance and User Forum regarding an amendment to NCS to ensure that the feedback loop to the arrested person is on a mandatory recording field. This change will prevent the NCS user from exiting the screen without inputting the time/date that the notification has been made to solicitor/RNP and feedback provided to the person. This will provide Police Scotland with actual data to support the level of compliance.

#### 31/03/2022

2018

#### **Recommendation 4-18:**

The CPT has long considered that to be effective as a safeguard against illtreatment, access to a lawyer must be guaranteed as from the very outset of deprivation of liberty. The right of access to a lawyer must include the right to talk to him/her in private.

The CPT recommends that the custody staff be alert to whether a detained person wants to consult with a lawyer directly and ensure that access to a lawyer must be guaranteed as from the very outset of a detained person's deprivation of liberty.

Police Scotland do not have powers to deny solicitor access and the decision to delay solicitor consultation under Section 44(2) of the Criminal Justice (Scotland) Act 2016 is used extremely rarely, with full justification by an officer independent to the investigation and of the rank of Sergeant or above.

The access requests on NCS only have the option for 'pending, granted or denied' with no rationale recorded under this section. Clearly when 'denied' is selected in the event of a delay then this data will be misleading.

The NCS Governance and User Forum review change requests and prioritisation of work to improve the NCS system and items on the existing Change Catalogue are now being actioned following ICT resource being realigned to priority Operation Talla (COVID response) work. New change requests are being considered along with other priorities under the Recovery, Renewal and Transformation agenda (RRT) and ongoing Custody Remodelling programme.

In order to enhance our ability to gather more accurate data in this respect, a change request for NCS to amend these categories to just 'granted or delayed' (with a mandatory drop down option for the reason) has been submitted to the NCS Governance and User Forum as part of the priority change request described in the previous recommendation.

31/03/2022

2018

#### Recommendation 5-18:

The CPT reiterates its previous recommendation that the right of detained persons to have access to a doctor from the very outset of their deprivation of liberty be expressly provided for in law and in the administrative guidance regulating the deprivation of liberty by the police. The relevant provisions should make clear that a request by a detained person to be examined by a doctor should always be granted and it is not for police officers to filter such requests.

The new SOP includes a change in wording where clinical attention is required before a decision can be made about a person's fitness to be held in custody. This is irrespective of whether the person has already received treatment elsewhere. Officers should also be aware that the effects of drink or drugs can illnesses or injuries. Where such a requirement is deemed mask other necessary, the decision will now be made by custody healthcare staff. This has changed from the current SOP which advises that "where such requirement is deemed necessary, contact should be made with the relevant HCP".

Additionally, current practice across custody suites is to consult an HCP in decisions where a person refuses to answer the vulnerability assessment questions and to design the care plan taking all other relevant factors into account, the SOP is not explicit regarding this. The revised version of the SOP will include the following, more specific guidance: 'If the person refuses to answer the vulnerability questions then the custody staff would design the care plan through observations of the prisoner's demeanour, behaviour, history and in consultation with a HCP'

#### **PROPOSE NO FURTHER ACTION**

2018

#### Recommendation 6-18:

The CPT recommends that all medical examinations should be conducted out of the hearing and - unless the doctor or nurse concerned expressly requests otherwise in a given case - out of the sight of police staff.

#### Current Status:

Best practice is two members of staff in attendance whenever any person in custody is taken out of a police cell, including for medical examination should remain, however every action in custody must be risk assessed. Where at all possible and staff and safety permits, the person in custody should be left in a room alone with NHS staff with the door closed, in order to facilitate medical examination, consultation or assessment.

If this is not possible, they will be left alone in a room with the NHS staff with the door open and police staff outside the room to allow them to respond quickly, where required. If this is not possible on safety grounds, then either police staff may be required to be present with the NHS staff or, alternatively, the NHS staff may visit the person in custody in their cell. If the NHS staff have any concern in relation to confidentiality, this should be discussed fully with the custody officer.

#### **PROPOSE NO FURTHER ACTION**

#### **Recommendation 7-18:**

The CPT recommends that the Scottish authorities ensure that Police Scotland and the NHS take measures to standardise the approach to methadone maintenance and detoxification treatment in police custody. The CPT would appreciate information as to whether the type of DHC used in police custody is short-acting DHC, or long-acting DHC.

#### **Current Status:**

<u>NHS OWNERSHIP</u> (Update provided by the National Police Care Network (NPCN):

13 out of 14 NHS Boards have a standardised approach to methadone maintenance in police custody. The one NHS Board which doesn't is currently looking at ways on how this could be incorporated. Methods differ with regard to how DHC is used, with some NHS Boards using long acting (DHC 60MR) and others using short acting DHC according to local Standard Operating Procedures.

### PROPOSE REVIEW NPCN PROGRESS BY 31/03/2022

#### 2018

2018

#### Recommendation 8-18:

The CPT recommends that the Scottish authorities ensure that custody staff are reminded, through regular training, that all injuries should be immediately and properly documented and that such detained persons should be examined by NHS health-care staff; recording of the medical examination in cases of traumatic injuries should be made on a special form provided for this purpose, with body charts for marking traumatic injuries that should be kept in the custody records of the detained person. Also, a special trauma register should be kept.

<u>NHS PART OWNERSHIP</u> (Relevant text regarding special form and trauma register was provided by the National Police Care Network).

A person in custody should be referred to an HCP if there is any reason to believe they are suffering from an injury (depending on severity). All injuries noted or self-declared are recorded on the National Custody System (NCS) and where appropriate, brought to the attention of the Force Custody Inspector. Custody staff will also refer a person to an HCP if there are concerns relating to their demeanour.

If an injury is sustained in custody through an allegation of ill-treatment, processes are in place to ensure that a healthcare professional is involved and robust reporting mechanisms are in place for the prisoner to make a complaint. Dependent upon the circumstances this may involve an Episode Report being recorded on NCS, and it may prompt the commencement of a Procedural Review or notification to (PSD) for evaluation. PIRC are also required to be informed of any serious injury in custody under the Police and Fire Reform Act 2012 and the Police Investigations and Review Commissioner (Investigations Procedure, Serious Incidents and Specified Weapons) Regulations 2013.

Custody records are the subject of ongoing review, through governance processes. The Force Custody Inspector has oversight at any one time, there is accessibility of on-call senior management and discussions of noteworthy incidents/custodies take place during daily senior management meetings. A programme of regular audits are also conducted to scrutinise custody record content.

As previously referred to, a Module within the Custody Officer Induction course covers Adverse Incidents and Recording mechanisms. This is supplemented via regular email briefings from both Divisional and Force Officer Safety Training and the use of force is recorded on relevant reporting systems.

#### PROPOSE REVIEW NPCN PROGRESS BY 31/03/2022

2018

#### Recommendation 9-18:

The CPT recommends that procedures should be put in place to ensure that whenever injuries are recorded which are consistent with allegations of illtreatment made by the detained person concerned (or which, even in the absence of an allegation, are clearly indicative of ill-treatment), the record is systematically brought to the attention of the competent prosecuting authorities, regardless of the wishes of the person concerned. The person should be told of the reporting obligation by the doctor and reminded that he/she can also initiate a complaint, if they so wished. The results of the examination should also be made available to the detained person concerned and his or her lawyer. If necessary, the Scottish Standard Operating Procedure should be amended to reflect these principles.

#### **Current Status:**

<u>NHS OWNERSHIP</u> (Text provided by the National Police Care Network)

Whilst there is not currently a special form or trauma register used to document injuries in these circumstances, the National Police Care Network would be happy to facilitate scope as to whether such a form would be feasible and more beneficial than the current process, along with an amendment of the current SOP to include a protocol informing doctors of their responsibilities of who to distribute their reports (of injuries) to (including the person/their lawyer).

For further context, the National Police Care Network has a role to improve capability and capacity in the forensic medical workforce in Scotland. Through its Education and Workforce facet working group, the Network will look to refresh existing training materials. The Network will ensure that the underpinning international and national legal context, including the Mandela Rules and Istanbul Protocol is included in the revised training materials. The Networks will also work with healthcare professionals working in police custody to ensure that they are aware of processes for the examination of victims of torture and ill treatment.

#### PROPOSE REVIEW NPCN PROGRESS BY 31/03/2022

#### 2018

2018

#### Recommendation 10-18:

The CPT recommends that all police custody cells should have access to natural light.

#### **Current Status:**

A number of cells within Police Scotland Custody Estate have access to natural light via opaque glass blocks if they are exterior to the building. However due to the design of some of the existing custody estate, many of the cells within centres are located within interior corridors and therefore do not have access to this facility. Access to natural light will be considered for any newly planned police custody facilities.

#### **PROPOSE NO FURTHER ACTION**

#### Recommendation 11-18:

The CPT recommends that the authorities move the CCTV monitors covering the special observation cells at St. Leonard's Police Station into a separate room, as is the practice at Govan and Glasgow City Centre Police Stations, and dedicated officers should be made responsible for supervision, duly taking into account the gender of the observed person(s). Further, the cameras should be re-aligned to pixelate the toilet area in all cells.

Although the CPT recommendation is to move the monitors to a separate room, the report does not say why. It doesn't specify if it is to do with people being able to view the screens (although that is inferred).

Following a Short Life Working Group initiated in late 2020 to explore the whole subject of Constant Observations, an Improvement Plan was created and one of the recommendations made by the Group was to pilot the use of "triage monitoring" screens in two custody centres in Glasgow.

Regarding GDPR and privacy concerns, policy in relation to vetting levels of staff who may inadvertently have access to/ sight of monitors and guidance is in the process of being drafted for monitor usage. This will include instruction that these are to be turned off at times when non-police staff/ external contractors are on site.

Police Scotland believe that the benefits of having more focus on selected individuals who meet a certain risk criteria is an effective method to eliminate the need in some cases for constant options. It is effectively an additional tactical option to allow an almost "triage" like facility. Anecdotally, it is known that this works in practice, so that someone who is observed in this manner for the first approximate 2-3 hours of their stay and is suitably calm and compliant, can thereafter be reduced to a lower level of observation. These facilities already exist at three centres - St. Leonards, Dundee and Kittybrewster.

Although more individuals may be watching custodies for a shorter time period, it is likely less intrusive than higher level of observations for the duration of their time in custody – often the entire weekend. This is aimed to lower the amount of people on Constant Observations, therefore increasing compliance with their Rights to Privacy, weighing this up with Police Scotland's inherent core objective to safeguard the care and welfare of that person whilst in custody.

As part of the restructure and building work at St. Leonard's, there is a separate room being created for the CCTV, which is going to be used for Constant Observations. Moving forward, the intention is for people on the screens in the open areas will only be people who are on "triage monitoring", which may well be none.

The pixilation or blackout areas of the cameras at St Leonard's have been sorted and are in the correct places. As a CCTV room is being created and the reason for the monitors being in the open areas has been formalised, it is considered that Police Scotland will be able to fulfil the CPT recommendation in due course.

#### **PROPOSE NO FURTHER ACTION**

### Recommendation 12-18:

The Committee recommends that the Scottish authorities take steps to decrease the high numbers of persons held in police custody facilities for longer than 24 hours (i.e. between Friday and Monday mornings), through, inter alia, the opening of some Saturday courts.

Further, any newly planned police custody facilities should provide for access to sufficient natural light, ventilation and outdoor exercise facilities.

Police Scotland continue to act in accordance with the statutory duty to present accused persons at court on the next 'lawful' day where it is appropriate to do so. Until there is a system of custody court hearings on a 7-day basis, there will always be potential for persons to be held over 24 hours. Each decision is scrutinised at Inspector level and persons are only held for court when arrested on certain warrants or where there can be no mitigating measures implemented to allow an alternative disposal. Police Scotland have implemented a Quality Assurance Inspector role focused on supporting Custody Sergeants with their rationale and identifying alternatives to custody. Since this role was implemented on 25 September 2020, the proportion of people held for court has reduced from 50% to 33% and those released on Police Undertaking has risen from 13% to 26%.

In considering mitigating measures, Police Scotland must take account of the Lord Advocate's Guidelines on Liberation by the Police (LAGs). There are a number of factors to take into account under the LAGs to establish the level of risk in relation to the nature of the crime committed; person's criminal history; potential mitigating undertaking conditions; likelihood of compliance; and views of victims/witnesses.

The LAGs state that, if it is assessed that risks identified cannot appropriately be managed by the imposition of proportionate conditions of undertaking, then the accused should be detained in custody pending appearance at court. There are also clear instructions within the LAGs with regards to persons arrested on warrant. Police are bound by the Lord Advocate's Guidelines and thereafter constrained by the schedule of custody court hearings.

Police Scotland are supportive of 6/7 day custody courts and are working with partners to achieve this. SCTS are now taking the lead on a Virtual Custody Working Group with the aim of developing a national custody model which could operate over 6/7 days.

The rollout of the model for Virtual Custody Courts is considered the most flexible and agile way to deliver a 6/7 day custody court system. Work on this pivotal work-steam continues and the outcomes will dictate future progress in this regard, albeit it is recognised that the introduction of a 6/7 day model would have significant organisational change implications for statutory partners and wider justice stakeholders, including defence agents. With regard to the final point, Police Scotland has no plans to commission any new custody facilities, although should this change in the future, the principles contained in Police Scotland's Custody Estate Strategy and the Custody Estate Investment Plan will be reviewed and implemented.

#### ESTIMATED COMPLETION: 31/03/2026

The UK NPM have made 2 further recommendations in their own independent review report. These are;

- 1. Implement all CPT recommendations and regularly monitor progress on this implementation now and in the future. The Scottish NPM members are available to assist with this and welcome close cooperation on this matter.
- 2. Undertake concerted and coordinated action between the executive, police, prosecution services and the courts to give full effect to the presumption of liberty. This will go some way to addressing the systemic issues at the heart of many CPT recommendations.

Criminal Justice Services Division, Continuous Improvement Unit intend to address the first recommendation in conjunction with HMICS and ICVS which are the NPM members relative to Police custody in Scotland. The second recommendation is already covered under CPT Recommendation 12-18 above and is being addressed under the Recover, Renew and Transform Programme. This requires wider criminal justice sector reform which will take some time to develop and implement.

APPENDIX A

Risk Grading Key 4	Very Hig	h Risk	Exposi	ure				3     High Risk Exposure     2     Moderate Risk Exposure     1     Limited Risk Exposure
Title & Date of Publication	Risk		No	-	n & R/	AG		- Comments Owner(s)
Wellbeing	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track	Ck     This recommendation was closed in July pending the provision of evidence which has now been     DoPD
								supplied.
August 2020	9	9						
11 recommendations	2	1		1				
Fitle & Date of Publication	Risk	Total		. Ope	n & R/	1	L .	Comments Owner(s)
Benefits Realisation	Rating	Closed	On Hold	Aug	Missed	Slippage		ON TRACK  A recommendations progressing with a due date of and of December 2021 (including the Very High Rick  Change / Strategy
October 2020	1						1	4 recommendations progressing with a due date of end of December 2021 (including the Very High Risk Action)
11 recommendations	4	1					3	
	3	3						
	3	3						
		,						
Title & Date of Publication	Risk Rating	Total	<b>No</b> On Hold	Closed	n & R	AG Slippage	On track	Comments Owner(s)
Performance Management	0	Closed		Aug		FP45C		Not yet due (target date set as 31/05/22).     DoSA
January 2021								We have received updates for some recommendations and there is a milestone checkpoint at 31 December 2021 for R1.2 and R2.1
7 recommendations	2						2	
	5						5	
Title & Date of Publication	Risk Rating	Total Closed	<b>No</b> On Hold	Closed	n & R	AG Slippage	On track	Comments Owner(s)
Home Working Security		Closed		Aug				R2.1 Mobile Device Management - this is a long term action and will be delivered as part of a wider project to deliver Office 365 - target date is March 2023.
March 2021								
4 recommendations								
	4	3					1	
	Pick		No	One	n & R			
Title & Date of Publication	Risk Rating	Total Closed	On Hold		n & R	Slippage	On track	
Non-Pay Expenditure Follow Up								The final recommendation relating to updating the authorised signatory list is complete. The newCFOManager Controls for POs approved on behalf of authorised individuals (Proxy Approval) has beendocumented, agreed and communicated to all managers. The new process was rolled out in July,
April 2021								covering the POs approved during June and will be run monthly until such a time that P2P is fully implemented and the e-fin proxy user role is obsolete.
2 recommendations	2	1		1				
		-		_			-	
	Risk Rating	Total	<b>No</b> On Hold	. Ope	n & R	AG Slippage	On track	Comments Owner(s)
Title & Date of Publication		Closed		Aug		Propose		2 recommendations completed following updating and restructuring of the Assurance Maps to draw out key deliverables and objectives and clarify the extent of assurance to improve the management of key
Title & Date of Publication COP26 Assurance Mapping								risks.
				1				
COP26 Assurance Mapping April 2021	1							
COP26 Assurance Mapping	1			1			-	
COP26 Assurance Mapping April 2021	1			1				
COP26 Assurance Mapping April 2021 2 recommendations	1		No	1 . Ope	n & R/	AG		
COP26 Assurance Mapping April 2021 2 recommendations Title & Date of Publication	1	Total Closed			n & R/ Missed	AG Slippage		
COP26 Assurance Mapping April 2021 2 recommendations Title & Date of Publication Environmental Impact	1 Risk	Total Closed			1	1		Comments       Owner(s)         Draft report received August 2021 - awaiting management responses, owner/assignees and target completion dates (deadline for responses - 01/09/2021).       TBC
COP26 Assurance Mapping April 2021 2 recommendations Title & Date of Publication	1 Risk	Total Closed			1	1		Draft report received August 2021 - awaiting management responses, owner/assignees and target       TBC
COP26 Assurance Mapping April 2021 2 recommendations Title & Date of Publication Environmental Impact	1 Risk Rating	Total Closed			1	1		Draft report received August 2021 - awaiting management responses, owner/assignees and target       TBC





Risk Grading Key 4	Very Hig	h Risk Exposure				3   High Risk Exposure   2   Moderate Risk Exposure   1	Limited Risk Exposure
Title 9 Date of Dublication	Risk	No. Op	en & R/	AG		Commonte	Ourper(c)
Title & Date of Publication	Rating	Total On Hold Closed Aug	Missed	Slippage C		Comments	Owner(s)
Legal Claims Handling						Draft report received August 2021 - awaiting management responses, owner/assignees and target completion dates (deadline for responses - 25/09/2021).	ТВС
August 2021 (draft report)							
8 recommendations	2				2		
	5				5		
	1				1		
	Diek	No. Or	on 8 D				
Title & Date of Publication	Risk Rating	Total Closed On Hold Closed		1	On track	Comments	Owner(s)
COP26 Budget and Cost		AUg				R01 completion date - 31 October 2021. R02 and R03 completion date - 31 March 2022.	ACC COP26 / CFO
Allocation Model ~ NEW							
May 2021							
3 recommendations	-						
	2				2		
Audit Scotland Reco	ommen	dations Pro	ogres	s Tra	1 cke	r - August 2021	
	ommen	dations Pro	ogres	s Tra	1 Cke	r - August 2021 3 High Risk Exposure 2 Moderate Risk Exposure 1	Limited Risk Exposure
Risk Grading Key 4	ommen			_	1 cke	3   High Risk Exposure   2   Moderate Risk Exposure   1	
Audit Scotland Reco         Risk Grading Key       4         Title & Date of Publication	ommen Very Hig	h Risk Exposure	en & RA	_			Limited Risk Exposure Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report	Very Hig Risk	h Risk Exposure No. Op	en & RA	AG	Dn track	3   High Risk Exposure   2   Moderate Risk Exposure   1	
Risk Grading Key 4	Very Hig Risk Rating	h Risk Exposure No. Op	en & RA	AG	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020	Very Hig Risk Rating	h Risk Exposure No. Op	en & RA	AG	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020	Very Hig Risk Rating	h Risk Exposure No. Op Total Closed On Hold Closed Aug	en & RA	AG	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020	Very Hig Risk Rating	h Risk Exposure No. Op Total Closed On Hold Closed Aug	en & R/	AG	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020	Very Hig Risk Rating	h Risk Exposure No. Op Total Closed On Hold Closed Aug	en & R/	AG	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020	Very Hig Risk Rating 3 2 1	Risk Exposure   Total Closed   On Hold   Closed   On Hold	en & R/	AG Slippage 0 	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020 10 recommendations (4 SPA, 6 PS)	Very Hig Risk Rating 3 2	No. Op   Total On Hold   Closed On Hold   3 I   1 I   1 I   Total On Hold   1 I   0 I   <	en & R/	AG Slippage 0 	Dn track	3 High Risk Exposure 2 Moderate Risk Exposure 1 Comments Recommendation previously closed but reopened due to further work/evidence requested by Audit	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020 10 recommendations (4 SPA, 6 PS) Title & Date of Publication	Very Hig Risk Rating 3 2 1 Risk	h Risk Exposure No. Op Total On Hold Closed Aug	en & R/	AG Slippage C Slippage C	Dn track	3       High Risk Exposure       2       Moderate Risk Exposure       1         Comments         Recommendation previously closed but reopened due to further work/evidence requested by Audit scotland.	CFO
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020 10 recommendations (4 SPA, 6 PS) Title & Date of Publication SPA Annual Audit Report 2020/21 Interim Report ~	Very Hig Risk Rating 3 2 1 Risk	No. Op   Total On Hold   Closed On Hold   3 I   1 I   1 I	en & R/	AG Slippage C Slippage C	Dn track	3       High Risk Exposure       2       Moderate Risk Exposure       1         Comments         Recommendation previously closed but reopened due to further work/evidence requested by Audit Scotland.         Comments	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report	Very Hig Risk Rating 3 2 1 Risk	No. Op   Total On Hold   Closed On Hold   3 I   1 I   1 I	en & R/	AG Slippage C Slippage C	Dn track	3       High Risk Exposure       2       Moderate Risk Exposure       1         Comments         Recommendation previously closed but reopened due to further work/evidence requested by Audit Scotland.         Comments	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020 10 recommendations (4 SPA, 6 PS) Title & Date of Publication SPA Annual Audit Report 2020/21 Interim Report ~	Very Hig Risk Rating 3 2 1 Risk	No. Op   Total On Hold   Closed On Hold   3 I   1 I   1 I	en & R/	AG Slippage C Slippage C	Dn track	3       High Risk Exposure       2       Moderate Risk Exposure       1         Comments         Recommendation previously closed but reopened due to further work/evidence requested by Audit Scotland.         Comments	Owner(s)
Risk Grading Key 4 Title & Date of Publication SPA Annual Audit Report 2019/2020 10 recommendations (4 SPA, 6 PS) Title & Date of Publication SPA Annual Audit Report 2020/21 Interim Report ~ NEW	Very Hig Risk Rating 3 2 1 Risk	No. Op   Total On Hold   Closed On Hold   3 I   1 I   1 I	en & R/	AG Slippage C Slippage C	Dn track	3       High Risk Exposure       2       Moderate Risk Exposure       1         Comments         Recommendation previously closed but reopened due to further work/evidence requested by Audit Scotland.         Comments	Owner(s)





HMICS Recommend	lations	Pro	gress	s Tr	acke	er - A	lugi	ust 2021	
Risk Grading Key 4	Very Hig	h Risk	: Exposu	re				3     High Risk Exposure     2     Moderate Risk Exposure     1     Limited Risk Exposure	xposure
itle & Date of Publication	Risk Rating	Total Closed	No. On Hold	Ope Closed Aug	n & R/	A <b>G</b> Slippage	On track	Comments Owner(s)	
Jndercover Policing								R16 - Integrated Record Management System - PS requires to purchase an upgrade of the SMAN system ACC OCCT v5.1, this is being set up on the cloud to allow testing to ensure it is fit for purpose first. A full timeline	
ebruary 2018								for implementation has been produced. Update and evidence (project timeline) that this has now been met provided and submitted to HMICS who will not discharge until the system has been tested and	
9 recommendations	6	6						rolled out (Mid-2021). On hold.	
	4	4						R1 - Strategy and Implementation Plan - Plan approved by ACC and was submitted to HMICS on 10 March 2021 for closure. HMICS and business area to meet to discuss way forward.	
	9	7	2						
itle & Date of Publication	Risk Rating	Total Closed	No. On Hold	Ope Closed Aug	n & R	A <b>G</b> Slippage	On track	Comments Owner(s)	
Review of Custody Centres								1 recommendation proposed for closure and being considered by HMICS - R02 inconsistent practices.       ACC Local Poli         Ongoing       801 estate strategy requires the Custody Improvement Plan, in particular the plan for CCTV, previously	cing
August 2018								left open in a tactical bid to secure funding. All actions have been completed but not discharged until evidence of investment plan which is still awaited.	
' recommendations								R05 risk assessments recently returned from HMICS for further work they have requested clarification on the term of the QA role and a copy of QA framework in order to close. This work is at 100%	
	4	2					2	completion but is being held open until the QA framework is in place and evidencing outcomes. R7 Use of Force Data - agreement reached on publication. Awaiting finalisation of context prior to	
	3	1		1			1	Internet publication.	
itle & Date of Publication	Risk Rating	Total	No. On Hold	Closed	n & R	AG Slippage	On track	Comments Owner(s)	
Review of Delivery of the	0	Closed		Aug				Director o	f
Policing Plan								One recommendation removed from report regarding Scottish Policing Model. All action complete and HMICS to maintain a watching brief on impact/progress. Analysis/	
1arch 2019								CDIO	
2 recommendations	12	11	1					ACC OCCT	
	12								
itle & Date of Publication	Risk Rating	Total	No. On Hold	Ope Closed	n & R	A <b>G</b> Slippage	On track	Comments Owner(s)	
P+ Greater Glasgow nspection	Kuting	Closed		Aug		01101020		1 recommendations on hold pending verification of evidence / outcome during other inspection activity (Leadership & Development Phase 2):       ACC Local Politive         West (1) /	-
March 2019								Special Constables - evidence presented to HMICS re how PS has developed a strategy for Specials. Will review implementation of this during the LTD Phase 2 inspection activity.       Director of P         (1)	&D
1 recommendations	6	5	1					1 recommendation is ongoing relating a review of Campus Officers which will be complete in September.	
	5	4					1		
itle & Date of Publication	Risk Rating	Total	No. On Hold	Ope Closed	n & R	AG Slippage	0	Comments Owner(s)	
Greater Glasgow Custody	nating	Closed		Aug	MISSEU	Subbage		R01 custody queues remains ongoing, pilot completed but a formal review now needs to be completed. ACC Local Poli	cing
nspection								R03 analysis of risk assessments linked to R05 2018 (recently returned from HMICS for further work	
une 2019								they have requested clarification on the term of the QA role and a copy of QA framework in order to close) and the SLWG action plan. 100% complete in terms of action taken but being held open due to	
recommendations	1	1						the number of similar recommendations. Will close when QA roles are fully embedded. R05 improving quality of information - This has reliance upon QA Framework and QAI role.	
	4	1			1		2	Development of a Strategic and Operational Self-assessment template and QA Universe document. (75% complete)	
Title & Date of Publication	Risk	Tatal	1		n & R/	I		Comments Owner(s)	
.P+ Events Inspection	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track	Actions are well advanced but evidence of full implementation is needed prior to submitting to HMICS. ACC Operation	
								Support	
Nay 2019									
5 recommendations								-	
	15	7			7		2		





HMICS Recommend	lations	Pro	gres	s Tr	acke	er - A	lugi	ust 2021	
Risk Grading Key 4	Very Hig	h Risk	Exposi	ure				3   High Risk Exposure   2   Moderate Risk Exposure   1	Limited Risk Exposure
Title & Date of Publication	Risk Rating	Total	On Hold	. Ope	n & R	I	On track	Comments	Owner(s)
Strategic Review of Custody	Kating	Closed	On Hold	Aug	WIISSEU	Subbage		In progress R3 – Analytical assistance - There is a dependency here with the force-wide analytical review. An interim	ACC Local Policing
May 2019								measure for a temporary post was not approved so other options to be considered.	& CJS
12 recommendations	3	3						R12 Strategic – ICT roadmap for custody – ICT lead has circulated a draft internally in ICT and once feedback received hopes to circulate further.	ACC Professionalism &
	2	1		1					Assurance
	7	5					2		
Title & Date of Publication	Risk		No	-	n & R/	AG		Comments	Owner(s)
Online Child Sexual Abuse	Rating	Total Closed		Closed Aug	Missed	Slippage	On track	The HMICS Assurance Review published and 3 recommendations discharged relating to governance,	ACC Crime and
February 2020 & August 2021								working relationships with the National Crime Agency and Undercover Capacity.	Public Protection / ACC OCCTI
11 recommendations	5			2			3	All other recommendations recognised as partially complete. Assessment of residual action to be undertaken and action dates reset.	
	6			1			5	Additional recommendation regarding wellbeing of officers (R11) added.	
Title & Date of Publication	Risk Rating	Total Closed	On Hold	Closed	n & R	I	On track	Comments	Owner(s)
Training and Development- Phase 1								There are a number of recommendations that we have updated as substantially complete and will gather all the evidence in support of improvement to send to HMICS.	DoPD
December 2020									ACC Partnerships and Prevention
17 recommendations									
	17	7		1			9		
Title & Date of Publication	Risk Rating	Total	On Hold	Closed	n & R	I	On track	Comments	Owner(s)
Scottish Crime Recording Audit		Closed		Aug				Action Plan finalised and being sent to HMICS for formal tracking	ACC Major Crime and Public
									Protection
March 2021 6 recommendations									
	6						6		
Title & Date of Publication	Risk	Total	т т	-	en & R/	1	I	Comments	Owner(s)
Hate Crime	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track	Action Plan in development. Some presented as proposed for closure but awaiting evidence pack.	ACC Preventions,
June 2021									Partnerships and Community
15 recommendations									Wellbeing
	15						15		
	<b></b>			•					
Title & Date of Publication	Risk Rating	Total Closed	On Hold	Closed Aug	n & RA	AG Slippage	On track		Owner(s)
COP26 Assurance Review ~NEW								Newly published. Action Plan in place and managed by Op Urram Team. The majority of the actions to be taken need to be in place before the event. At event conclusion the residual actions will be incorporated in the closure report and transferred for tracking here.	ACC COP 26
June 2021								incorporated in the closure report and transferred for tracking here.	
1 recommendation									
	1						1		
Title & Date of Publication	Risk Rating	Total	On Hold	. Ope	n & R	r	On track	Comments	Owner(s)
Demand, Analysis and	nating	Closed	Sirriola	Aug	moseu	Subbage		Action plan drafted and requires consultation prior to finalisation and return to HMICS.	DoSA to lead but
Management ~NEW									requires the support of other
July 2021	1						1		Directors
12 recommendation	11						11		





## Other Recommendations Progress Tracker - August 2021

Title & Date of Publication	Risk		No	o. Ope	n & R/	AG	-	Comments	Owner(s)	
The & Date of Fubication	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track		Owner(s)	
Digital Forensics Working Group (DFWG)								Action plan received, 1 discharged as ownership belongs to SPA, 1 proposed with evidence attached. Actions due December 2022	ACC OCCTI	
April 2020										
5 recommendations (1 SPA, 4 PS)	5	2					3			
Title & Date of Publication	Risk		No	o. Ope	n & R/	AG		Comments	Owner(s)	
The & Date of Publication	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track		Owner(s)	
Independent Complaints Handling Review								<ul> <li>15 recommendations in progress for Professional Standards Department (PSD) - all with agreed action to be taken and timescales</li> <li>10 recommendations non PSD areas - some action for the more complext recommendations requires</li> </ul>	ACC Professionalism	
November 2020								finalisation. 5 recommendations require legislation and although impact on Police Scotland cannot be directly influenced so will not be tracked and have been archived until such a time that action is required.	and Assurance	
33 recommendations	33	5		3			25	3 recommendations have had all action taken and will be submitted for formal closure. With a further 6 being assessed and impact measured over the coures of the coming month.		
Title & Date of Publication	Risk		No	o. Ope	n & R/	AG		Comments	Owner(s)	
	Rating	Total Closed	On Hold	Closed Aug	Missed	Slippage	On track		Owner(3)	
Civil Aviation Authority (CAA) Oversight Report 2019 ~ NEW								Awaiting Management Responses and target dates to support further monitoring.	ACC Operational Support	
September 2019 2 recommendations	1						1			
	1						1			
	Diele		No		n & R/					
Title & Date of Publication	Risk Rating	Total Closed	On Hold	Closed Aug		Slippage	On track		Owner(s)	
ICO Mobile Phone Data Extraction by Police in								Awaiting final copy of action plan with ownership and timescales.	SCD	
Scotland ~NEW										
June 2021 6 recommendations	6						6			
								4		



