SCOTTISH POLICE
AUTHORITY

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Agenda Item 2c

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Meeting	**Audit, Risk and Assurance Committee**
Date and Time	**28 January 2021**
Location	**Video Conference**
Title of Paper	**Police Scotland Audit and Improvement Recommendations Tracker – Q3 December 2020**
Presented By	**ACC Professionalism and Assurance**
Recommendation to Members	**For Discussion**
Appendix Attached:	**YES** Appendix A – Recommendations Tracker Appendix B – Summary of Achievements Appendix C – Summary of Missed 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.

Members are invited to discuss the contents of this paper.

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1   BACKGROUND

The Audit and Improvement Tracker provides a methodology for recording, managing and updating all recommendations from external bodies.

The Tracker is provided at **Appendix A.** This provides a breakdown of all publications, risk and a summary of progress.

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

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2   FURTHER DETAIL ON THE REPORT

Completed Recommendations and Achievements

62 closed at this review – 9 High Risk, 43 Medium Risk and 10 Low Risk. The improvements are broadly categorised as follows:

Improvements to Service Delivery	Improved Partnership Working
• Addressing inconsistencies in practice for Custody. • Documenting policies and procedures for Custody, Events Management, Data Protection and Firearms Licensing. • Improving our approach to demand management. • Driving consistency in the management of football related events.	• Working with our partners to improve services particularly around forensic examinations of victims of sexual crime. • Working with Local Authorities to strengthen approaches to protecting adults. • Fostering improved relations for event management specifically relating to football matches.

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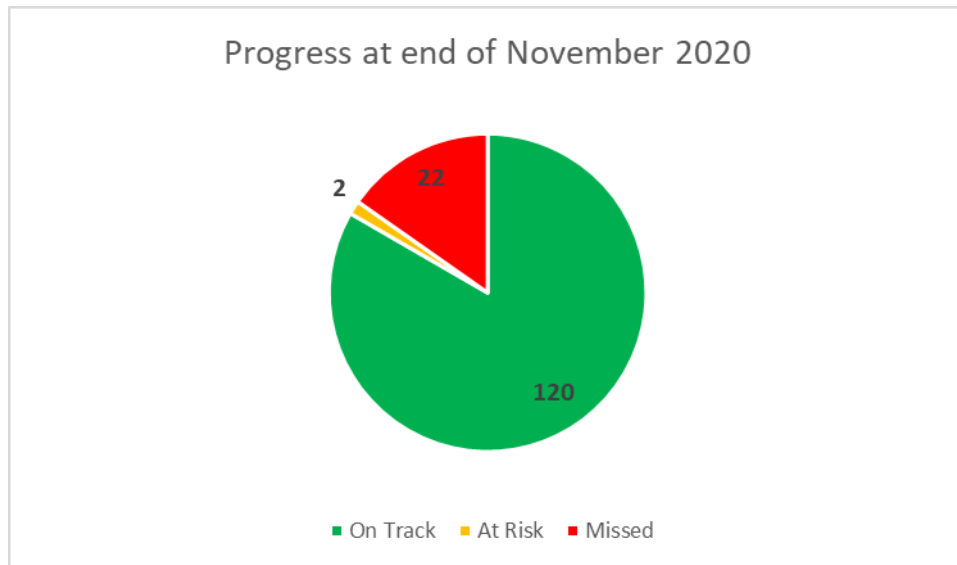| **Improving Governance, Compliance and Assurance Processes**	**Supporting our People**
• Introducing audit checks and assurance processes to policies, practices and systems. • Testing Business Continuity arrangements for specific systems. • Reviewing and updating approaches to data protection and protecting our information assets. • Reviewing and enhancing our approach to Mental Health. • Strengthening our approaches to project and programme management. • Strengthening our approaches to data quality relating to the management of demand.	• Developing policies and practice for staff undertaking event command roles. • Revising staff appraisal processes. • Documenting processes and procedures for duty rostering to promote consistency and fairness. • Processes reviewed and updated in relation to the improved management of re-rostered rest days. • Training and briefing undertaken in respect of Firearms Licensing updated procedures.

More detailed information on what has been achieved as a result of completing these recommendations is provided at **Appendix B**.

Open Recommendations Summary

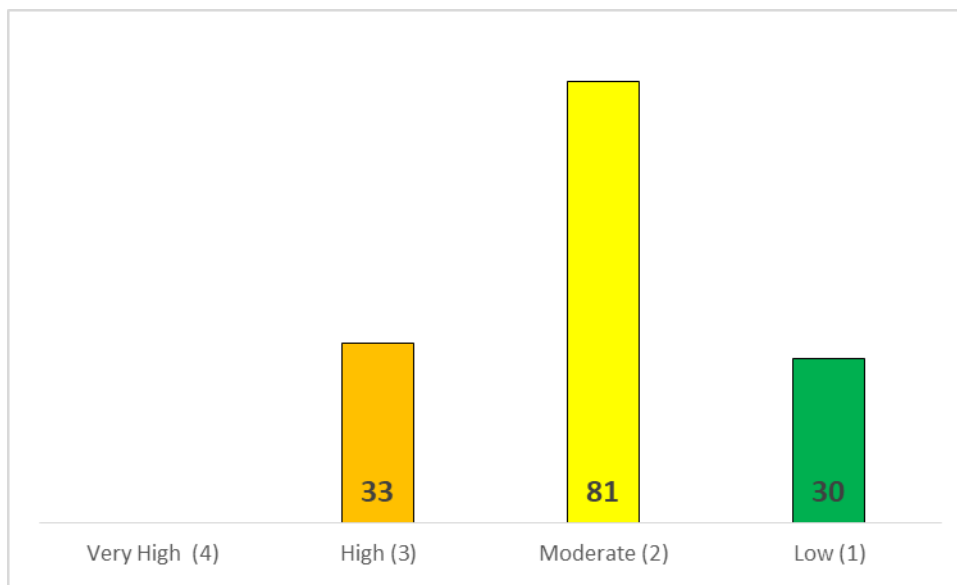There are **144 recommendations open**. The following provides a summary of progress.

• **85%** of recommendations are on track for completion by their original target date compared to 72% at the last review. There are a number of recommendations at an advanced stage.

• **22** recommendations have missed their original timescale for completion. This is a reduction of 15 since the last report. There are no missed recommendations with a high risk status.

• **23%** of all open recommendations have a high risk status.

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Graph 1 shows the total number of recommendations according to progress

Recommendations by Risk Status

Graph 2 shows the number of open recommendations according to risk. **There are no recommendations** with a very high risk rating. **33 recommendations** have a high risk rating. This represents 23% of all open recommendations.

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Recommendations Due End of December – Still to be Assessed and Verified by Internal Audit

There were some recommendations falling due at the end of December that have not had all of their evidence verified at the review with the Internal Auditor at the start of December 2020. They relate to the following:

Report Title	Summary	Assessment of Completion
Demand and Productivity 2 High Risk recommendations	The recommendations relate to the review of the Resource Allocation Model (RAM) and implementation plan for both Local Policing and National Divisions.	**Pending Implementation** The Review of the RAM is complete but identified further remedial work before implementation. Once remedial work on the data is complete, then implementation will take place.
Cyber Risk and Resilience 4 High Risk recommendations	The Cyber Strategy is in place but is awaiting formal approval through the governance structure which will not take place until February. Further supporting evidence has been made available to Internal Audit and a further review will take place of key documents in early January. An initial review of the evidence has taken place and we understand the evidence that is required to close.	**90% - pending governance approval.** It is hoped that 3 of the recommendations will be closed and the final recommendation will remain open until SPA Board approval in February.

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Non-Pay Expenditure 4 High Risk 1 Medium Risk	Purchase to Pay System not yet operational to allow Internal Audit to verify actions have been addressed. A demonstration is planned towards the end of January. An internal review of the system functionality has been undertaken to confirm recommendations are addressed.	Pending implementation of Purchase to Pay System.
E-financials 1 High Risk Accounts Payable – System Authorisations	Dependency with Purchase to Pay as above. A demonstration is planned January.	Pending implementation of Purchase to Pay System.

**Recommendations Missed the Original Date of Completion**

A total of 22 recommendations are showing as having missed their original date of completion (15% of the total number open). This is a reduction of 15 since the last report. 0 are High Risk, 19 are Medium Risk and 3 are Low Risk.

Missed recommendations with a High Risk status are normally summarised within this section but there are none to report at this review. Due to the increasing number of missed recommendations reported at the last two review periods we have undertaken deep dive exercises to gain a better understanding of progress. This has had a positive impact on focussing attention on those missed and has allowed us to summarise clearly what action remains outstanding. This is documented within **Appendix C**.

The graph below shows the number of missed recommendations at quarterly intervals over the last two years. The red dotted line shows the downward trend. Considerable progress had been achieved up to

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March 2020 when Covid-19 impacted and delayed progress with some recommendations. Over the course of the last quarter, there has been significant progress towards reducing those previously missed. There are a number that are dependent on IT systems and partners which are not easy to implement.

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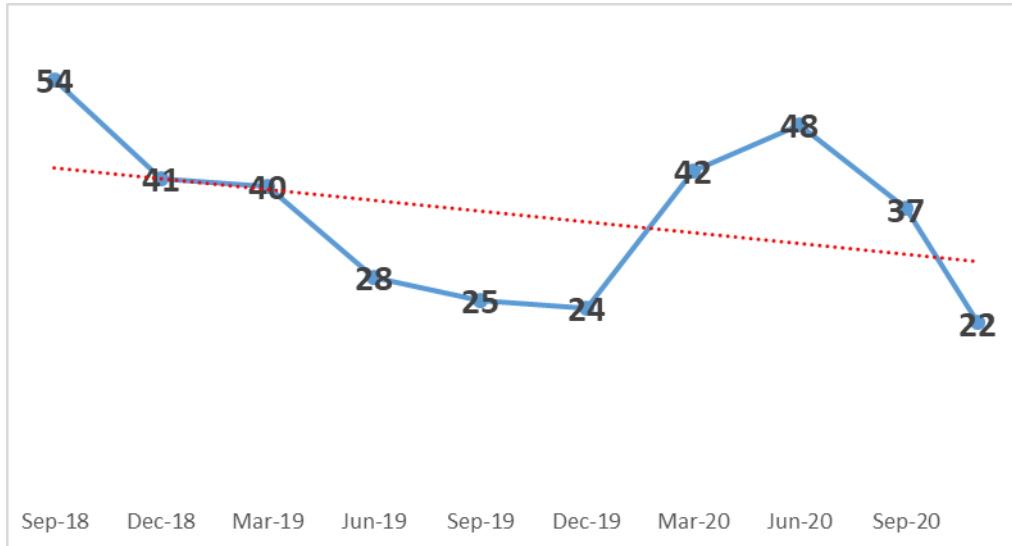
3   FINANCIAL IMPLICATIONS

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 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.

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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 invited to discuss the contents of this paper.

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APPENDIX B – SUMMARY OF COMPLETED RECOMMENDATIONS

HR Workforce Management
A single process for rostering, including authority levels, has been documented. National processes are in pace for the approval of shift pattern implementation with the submission of a Business Case, Demand Analysis and EqHRIA. The Resource Deployment Group have oversight of national practices and report to the Working Practices Review Board. This ensures the rostering of officers and staff is consistent and auditable.

Staff Performance Management
"MyCareer" is Police Scotland's new appraisal system launching as a Proof of Concept to C3, Forth Valley Division and SPA Forensic Services on 1st October 2020 until June 2021. MyCareer is underpinned by the Competency and Values Framework (CVF) and will support continuous development for officers and staff, while providing the gateway for future development and promotion.

Having an effective appraisal system is extremely important to any organisation. MyCareer is designed to recognise that everyone is different with different motivations and long term career goals. We know that some people are happy to continue working in their current role and that others may want to get promoted or look for new challenges or additional responsibilities. MyCareer recognises and takes account of these differences.

IT Application Review – Efinancials
We have introduced monitoring and audit arrangements to the use and access to the Efinancials system to strengthen security controls.

Strategic Workforce Planning – Project
We recruited staff to address single points of failure within the Strategic Workforce Planning Project.

Transformation Change Programme
We have addressed inconsistencies in the management of project documentation and strengthened our overall approach.

Demand and Productivity
We have reviewed the Resource Allocation Model and have also consulted with Stakeholders via a Crime Survey to understand the true picture of demand. We have strengthened the completeness of data by introducing data transfer checks on a daily basis. We have introduced and trained staff on the Active Life Management tool which will be used to provide greater visibility of data quality issues.

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Data Protection and Retention

We have continued to strengthen our approach to data protection and retention through the review of policies and procedures, training, reporting commitments and compliance activities.

Custody Thematic – All HMICS Publications

Following a recommendation from HMICS regarding the **high turnover of senior officers** within Criminal Justice Services Division (CJSD) and the potential risk of a high number of retirees in the near future, we have reviewed leadership to ensure continuity and worked with our People and Development colleagues in relation to succession planning for retirements. There is a commitment that all positions from Chief Inspector to Assistant Chief Constable within the Division are filled with officers in permanent positions. Where possible, attempts are made to identify potential officers with a background in CJSD as well as officers successful in the promotion process.

HMICS indicated in their 2018 Custody Centres Inspection that there did not appear to be a consistent approach to the **strip searching of young people** in police custody with different practices and understanding throughout Scotland. We have examined the practices across the different legacy areas as well as looking to practice under PACE in England and Wales and introduced a new standardised policy and implemented it through training, e-brief and audit processes.

HMICS recommended that a **site induction protocol** be devised for each custody centre to allow staff to access information quickly and easily as it was recognised there were variations to the operating practices/ features in each particular custody centre. A Short Life Working Group examined the suitability of Site Specific Risk Assessments (RA's) and currency of briefing materials/ available guidance to assist staff. All were subsequently reviewed and a dedicated intranet page for Health and Safety under Criminal Justice Services Division was created which details the Fire Evacuation Plan and Site Specific RA's for each facility. Collation of existing guidance and documentation within different suites was reviewed and extensive consultation was initiated with custody centres across Scotland. This process obtained ideas from staff with regard to suggested content for inclusion in a familiarisation document, which would act as a point of reference to any new staff and/or those providing cover or remote supervision at an unfamiliar custody centre.

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This ensures that those providing cover or remote supervision can quickly and easily learn about the centre, any risks and how they should be managed.

We have reviewed and updated our policy in respect of **_single cell occupancy_**. Although this is our goal within Police Scotland, limitations with the estate and resourcing can make this a challenge. The policy has been updated to take account of the challenges and highlight the risk assessments to be undertaken if not achieved. The Standard Operating Procedure has been amended and published.

Review of the Development of the Annual Policing Plan (HMICS)

In response to a recommendation to review the SCD tasking process and deployment of resources, a full governance review has been undertaken and new structure implemented.

SCD Tasking (which is renamed SCD Operational Delivery Board (ODB)) and Multi-agency Tasking and Delivery Board formed part of the SCD/OSD Governance Review. The recommendations from the Governance review make the tasking process within SCD ODP and Multi-agency tasking more effective and efficient, maximising the support available to local policing and across SCD. In addition to establishing new processes and auditory control, performance plays an integral part, in particular capturing the performance across SCD and to that provided by SCD and our partners to local policing.

Events Thematic (HMICS)
We have addressed inconsistencies in the way we use the Duty Management system for resourcing events to achieve greater efficiency and effectiveness.

We have worked alongside the Scottish Police Federation to clarify guidance in respect of deployment. This has provided officers with clear guidance and addressed inconsistencies referring back to legacy arrangements and improving officer wellbeing.

We have reviewed our approach to deployment of resources at events to widen the pool of available officers. This is reducing the impact on local officers repeatedly being used.

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Firearms Licensing Thematic (HMICS)

We have updated procedures on firearms licensing to comply with best practice and current processes. We have put in place mechanisms to communicate and disseminate this to staff.

Football Review

All remaining recommendations within this Independent Review are now addressed. We have developed a media plan which sets out the roles and responsibilities of police and partners and sets out engagement commitments for supporters in a more effective way.

Scottish Government will now chair two short life working groups which will aim to re-draft national guidance on traffic regulation at all events, to replace a previous document and also will form a further group to consider and assess options for broader legislative change, which may improve traffic regulation in line with similar modernisation seen elsewhere in the UK.

We have reviewed the training and accreditation for football commanders and other roles.

We have reviewed the role of Dedicated Football Officers to ensure the model is fit for purpose and to ensure the role is at the centre of the engagement strategy to allow for strong relationships with clubs, supporters and communities to be enhanced.

We have reviewed the structure of the charging model to ensure consistency across Scotland.

Mental Health Commission Recommendation

A robust and thorough overview of the process used for completing Place of Safety forms has been undertaken to address variances in use of this legislation across Police Scotland. Place of Safety orders can be used by the police under section 297 of the Mental Health (Care and Treatment) (Scotland) Act 2003 when they find someone in a public place who they believe may have a mental disorder and be in immediate need of care and treatment.

A new process is in place with forms now being added to the Interim Vulnerable Persons Database which then link to the PS/Mental Welfare Commission Sharepoint site. This reduces duplication for officers having to record in more than one place and provides a way of monitoring divisional compliance allowing immediate action to be taken if variances occur.

Forensic Services to Victims of Sexual Crime Thematic (HMICS)

Forensic Examinations in Police Premises - Representatives from Public Protection, Specialist Crime Division have supported SLWGs both internally and externally with partners in Scottish Government, NHS Scotland and other key stakeholders to support health boards in the

planning and implementation of Sexual Assault Referral Centres (SARCs) out with the police estate throughout Scotland.

The implementation and progress towards fully functioning and operational SARCs has aligned to the progress of the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill that will put in place the legislation and framework to allow NHS Scotland to provide forensic medical services independently from the criminal justice system where the focus is on a person centred trauma informed approach where the care and welfare of the individual takes precedence over a police report, including the option to self-refer. Police Scotland fully supports the legislation and the removal of FMS from police buildings.

During the most recent parliamentary debate, Cabinet Secretary for Health and Sport, Jeane Freeman confirmed that all NHS Boards were now providing forensic medical services out with police buildings, which accurately reflects the position of Police Scotland. Albeit, it is acknowledged that not all SARCs are fully functional at present, but have provisions in place to provide forensic medical services within their health board localities by early 2021.

Undercover Policing Assurance Review (HMICS)

At the Covert Compliance Group an options paper was discussed in relation to proceeding with this recommendation to introduce a welfare based policy for substance misuse within our undercover community. The Legal viewpoint is that there is currently no legislative framework which would enable the Chief Constable to introduce a substance testing policy, whether by consent or otherwise, to be undertaken by role specific officers, or the service as a whole. Such a policy would require representation to be made to Scottish Ministers seeking the introduction of new Regulations.

A robust process has been in operation since January 2019 where undercover officers self-declare themselves either fit, or otherwise, for duty prior to commencing an operation/deployment. This process includes self-disclosure around alcohol/drugs use and welfare/mental health issues. Operatives are thereafter asked to sign a similar form at the conclusion of operational deployments to state if they continue to be fit or if events during the operation have affected them and may require welfare assistance/support.

APPENDIX C – MISSED RECOMMENDATIONS BY POLICE SCOTLAND MANAGEMENT BOARD

CORPORATE MANAGEMENT BOARD

Summary – 4

The actions missed in this area tend to have shorter delays than other business areas.

REPORT / DATE	RECOMMENDATION	RISK	DATE	REASON	COMPLETION RATE
E-Financials Internal Audit March 2019	Business Continuity Testing of E-financials	M	~~March 2020~~ January 2021	A revised approach to testing is being planned and will be in place for revised date.	95%
Non Pay Expenditure Internal Audit June 2020 ~NEW~	Documenting Roles and Responsibilities	M	Dec 2020 TBC		Not assessed
Payroll x 2 ~NEW~	Documenting policies and procedures and communication and training on these	M	~~Jan 21~~ Feb 21	"Enable Now" is an integrated documentation and training system that drives the quality of the documentation to high standards and facilitates the review and maintenance processes. The adoption and roll out of "Enable Now" for the documentation of processes has taken longer than anticipated, but the decision to invest time in this approach has clear benefits which outweigh the costs. The ultimate product will be of significant higher quality, greater value and is more sustainable. The application has now been rolled out and the team has been trained on the Enable Now system. A detail plan has been developed that estimates that all process will be documented by the end of February 2021.	75%

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PEOPLE AND PROFESSIONALISM MANAGEMENT BOARD

Summary - 1 recommendation remains outstanding and has been delayed due to the complexity of implementing this work.

REPORT / DATE	RECOMMENDATION	RISK	DATE	REASON	COMPLETION RATE
ICO Audit December 2017	Staff Access Controls Management	M	March 2018 Jan 2021	Delayed due to complexity Incurred a further delay to full completion due to other priorities. Everything is in place to implement. This requires the process to be documented in a guidance pack and is approximately 2 days' worth of work.	90%

LP MANAGEMENT BOARD

Summary – All of the actions that had previously been missed in this portfolio related to Custody. They have the second highest number of recommendation made. They currently have 14 open and we have undertaken a deep dive of these to assess progress and understand how much work is still required. Following that deep dive, which we have also shared with HMICS, it was determined that 6 recommendations had all action taken but are pending an outcome or check at a follow up inspection. We have agreed with HMICS that providing a robust improvement plan and quality assurance framework is in place these can be submitted for discharge along with some others. 5 are 75-80% complete and 3 of these are ready for closure under the same conditions as the 6 that are complete. We are working with Custody to support them with the completion of the Improvement Plan and submission of the Evidence Submission Forms.

REPORT / DATE	RECOMMENDATION	RISK	DATE	REASON	COMPLETION RATE
Greater Glasgow Custody 2019	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.	M	May 2020	A pilot is in place to test out new processes and resources to support more effective management of demand. The start of pilot was delayed due to Covid. The pilot will run into the New Year.	60%

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CRIME AND OPERATIONS MANAGEMENT BOARD

Summary – 16 recommendations are past their original target date. 4 improvement actions relating to the Joint Inspection are pending closure once confirmation has been received that the findings have been accepted. 1 recommendation is not able to be implemented by PS alone. 1 has a dependency on the introduction of new technology. 9 have been delayed due to staff being redeployed to Op Talla and dependency on completion of other work and changing circumstances.

REPORT / DATE	RECOMMENDATION	RISK	DATE	REASON	COMPLETION RATE
Forensic Services to Victims of Sexual Crime 2017	R10 Treatment of Child Suspects	M	March 2018	**Dependency with Partners – Not for Police Scotland to implement** This requires a decision to be made regarding carrying out forensic exams of child suspects in custody. Priority to date has been services for victims. Police Scotland do not have the power to get NHS to set up facilities. Opportunity to raise through Police Care Network - Forensic Medical Examinations for under 16s in Police Custody SLWG to task. Action assigned to raise at the group and irrespective of their decision we then can close.	95%
Undercover Policing 2018	R01 Covert Policing Strategy and Implementation Plan	L	August 2018 No other date provided	**Management Decision** A draft strategy is with management for consideration. Delays were due to decision making around the content of the strategy.	80%
Undercover Policing 2018	R16 Integrated Records Management System	L	August 2018 No revised date available	**ICT System Availability** A decision to progress with a module from an existing ABM application. Some testing ongoing to make sure our processes can fit. Thereafter it will be deployed in PS. Discussed with HMICS who will consider closure based on evidence of approval for the system.	70%
Joint Adult Support and Protection	4 recommendations	M	March 2020 October	**PENDING CLOSURE** This work is complete and a report submitted to SCD Management. We are just awaiting confirmation that SCD	85%

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REPORT / DATE	RECOMMENDATION	RISK	DATE	REASON	COMPLETION RATE
2018			2020	Management accept the findings before a final summary report and any implementation plan before closing.	
Events Thematic 2019	9 recommendations with the following 3 themes • Resourcing • Cost recovery • Training	M	~~December 2019~~ April 2021	**OP TALLA / RESOURCING** These were impacted by OP Talla as the resource updating the recommendations was redeployed. Additional resources have been appointed to update on this work. We have undertaken a deep dive of all recommendations. This resulted in 3 being proposed for closure and they are with HMICS for verification of discharge. There are three main actions for this work. 1. The RDU redesign will support improvements to the management of resourcing for events (will address 3 actions). 2. A working group has been established to review the training required for event command (will address 4 actions). 3. The actions relating to cost recovery were put on hold due to the current fragility of the events sector (impacting on 2 actions) and are pending a management decision on the way forward. At our Audit and Risk Board in December, it was agreed to re-set the timescales for these 2 actions. Therefore these will be removed from the missed category due to the delays having been outwith Police Scotland control.	70-90%

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