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Date : 12th September 2023

**To: ALL MEMBERS OF THE JOINT AUDIT COMMITTEE**

- i. David Daw, Zoe Rice, Martin Speller **CHAIR TBC**
- ii. Chief Constable ("CC"), CFO for CC and Relevant Officers
- iii. The Police & Crime Commissioner ("PCC")
- iv. The CFO and CEO for the PCC
- v. External and Internal Auditors

Dear Member

Please find attached the September 2023 Joint Audit Committee papers. As agreed with Joint Audit Committee Members there will **not be a meeting** to discuss these reports. Members will submit comments and questions relating to these reports to the Office of the Police and Crime Commissioner (OPCC) by 20<sup>th</sup> September 2023 which will be sent to relevant officers and auditors for responses. Responses should be sent to the OPCC by 27<sup>th</sup> September 2023 to be circulated to Members. The Questions and Answers will be reported to the next meeting of the Joint Audit Committee scheduled for 20<sup>th</sup> December 2023 along with the Minutes for the meeting held on 21<sup>st</sup> June 2023.

The agenda for the meeting is set out overleaf.

Yours sincerely

**Alaina Davies**  
**Office of the Police and Crime Commissioner**

## **AGENDA**

**20<sup>th</sup> September 2023**

- 1. Office of the Police and Crime Commissioner Strategic Risk Register (Report 1)**
- 2. Constabulary Strategic Risk Register (Report 2)**
- 3. Annual Accounts and Governance Statement – Joint Audit Committee Member Questions and Answers (Report 3)**
- 4. Business from the JAC: Governance and Scrutiny Board Update **JAC Members will receive an update via email with a summary of key items covered at the most recent Governance and Scrutiny Board on 12<sup>th</sup> September 2023****
- 5. Internal Audit (Report 5)**
  - a) Proposed Internal Audit Plan for Quarter 3/4**
  - b) SWAP Quarterly Update**
  - c) Estates – Compliance with Statutory Obligations**
  - d) Accounts Payable**
  - e) Accounts Receivable**
  - f) IT Service Desk Follow Up Report**
- 6. External Audit – Progress Report (Report 6)**
- 7. Internal Audit Progress Review (Report 7)**

### **Part 2**

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**Items for consideration which are not available to the press or public**

- 8. Internal Audit: Cash Handling (Report 8)**

MEETING: <b>Joint Audit Committee</b>	DATE: <b>20<sup>th</sup> September 2023</b>	AGENDA NO: <b>1.1</b>
NAME OF PAPER: <b>OPCC Strategic Risk Management Update</b>	AUTHOR: <b>Ben Valentine</b>	PURPOSE: <b>Information and Discussion</b>

## 1. PURPOSE OF REPORT AND BACKGROUND

This report provides members of the Joint Audit Committee (JAC) with an overview of any significant changes to the Office of the Police and Crime Commissioner (OPCC) Strategic Risk Register (SRR), and other points related to the management of risk, in the period of time since the last JAC meeting held on 21<sup>st</sup> June 2023.

## 2. POINTS OF NOTE

There have been no changes to the risk scores since the SRR was last reviewed by the JAC.

### SR3 – Financial incapability or ineffectiveness

The Constabulary do not need to use reserves to balance the budget for 2023/24.

### SR4 – Failure to engage with the public and other stakeholders

#### SR5 – Lack of public confidence in or awareness of OPCC

'Together We Can' campaign launched August 2023 which involves internal and external engagement related to the Police and Crime Plan and the work of the PCC and OPCC.

The second round of Councillor Forums started in September 2023.

### SR6 – Lack of capacity, capability, or poor wellbeing within the OPCC

All 'new' roles that were created in the OPCC review have been filled but recruitment is ongoing as part of the regular turnover of office staff.

Implementation of Violence Reduction Partnership (formerly VRU) Review will release capacity back into the broader OPCC team, as two core roles had increasingly been focused on VRU work. This work will now be undertaken by roles funded through the VRP.

### SR7 – Failure to deliver commissioned services

The OPCC have provided a specification for the core victim support provision (the 'Lighthouse' element of LSU) and the Constabulary are due to submit a proposal by the end of September 2023.

### SR8 – Failure to deliver effective and efficient collaborations with other forces

SW Chief Constables and PCCs agreed to implement SW Forensics review recommendations and extra investment is being provided.

### SR9 – Failure to deliver effective and efficient collaborations or outcomes with other partners

VRP review complete and improvement plan in place. Changes to governance agreed and in place, currently recruiting a VRP Director.



**Office of the Police and Crime Commissioner for Avon and Somerset**  
**Strategic Risk Register**  
**September 2023**

A Strategic Risk is anything that might impede the delivery of the organisational objectives. Risk management is the process by which these risks are identified, assessed and controlled. This risk register is the document which records these risks and related information.

Risk is assessed by considering the causes of the risk and the consequences if that risk were to happen. The scoring is therefore based on the likelihood multiplied by the impact. The below grids explain the scoring in more detail. Risk is about planning for the future so when considering the assessment it goes beyond current performance.

<b>Impact</b>	5 Extreme	5	10	15	20	25
	4 High	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Low	2	4	6	8	10
	1 Negligible	1	2	3	4	5
		1 Rare	2 Unlikely	3 Possible	4 Likely	5 Almost Certain
<b>Probability</b>						

Probability	
5 Almost Certain	Likely to occur within a twelve-month time period, or about a 75% probability of occurrence
4 Likely	Likely to occur within a two-year time period, or about a 50% probability of occurrence
3 Possible	Likely to occur within a three-year time period, or about a 25% probability of occurrence
2 Unlikely	Likely to occur within a five-year time period, or about a 15% probability of occurrence
1 Rare	Likely to occur in a ten year period, or about a 5% probability of occurrence

Impact	
5 Extreme	<ul style="list-style-type: none"> <li>• Fatality of any individual</li> <li>• Financial impact greater than £1/2 m</li> <li>• Vote of no confidence from Local Authorities - failed</li> <li>• National media attention</li> <li>• Government/ HO intervention</li> <li>• Total disruption to service</li> <li>• Exceptional/long term reputational damage</li> </ul>
4 High	<ul style="list-style-type: none"> <li>• Serious life-threatening injury of any individual</li> <li>• Financial impact greater than £1/4 m</li> <li>• Vote of no confidence from Local Authorities - failed</li> <li>• Regional media attention</li> <li>• Adverse comment by Minister / auditor</li> <li>• Major service disruption/reputational damage</li> </ul>
3 Moderate	<ul style="list-style-type: none"> <li>• Serious non-life-threatening injury of any individual</li> <li>• Financial impact greater than £100k</li> <li>• Criticism from the Police and Crime Panel</li> <li>• Local media attention</li> <li>• Significant service disruption</li> <li>• Significant reputational damage</li> </ul>
2 Low	<ul style="list-style-type: none"> <li>• Minor injury of any individual</li> <li>• Financial impact up to around £100k</li> <li>• Multiple thematic complaints</li> <li>• Some service disruption</li> <li>• Some negative consequences relating to reputation</li> </ul>
1 Negligible	<ul style="list-style-type: none"> <li>• Slight injury of any individual</li> <li>• Low level financial loss</li> <li>• Isolated complaints</li> <li>• Minor service disruption</li> <li>• Minor/contained negative consequences</li> </ul>

The unmitigated scores are the assessment based on the current position with no action taken or controls in place. The mitigated scores are based on the success of the controls (anticipated or actual) in reducing the risk.

It should be noted that the OPCC and the Constabulary are separate organisations and therefore each may assess the same risk as being at a different level. This is most evident in the risk of failure to deliver the Police and Crime Plan. This exists on both Strategic Risk Registers but may score differently. One of the main reasons for this is that the OPCC assess delivery of the plan as a whole which relies on agencies, other than the Constabulary to fully deliver e.g. the CPS and Courts. Whereas when the Constabulary assess this risk they need only consider the parts of the plan they are expected to deliver. A difference may also be caused whether considering the risk in the short, medium or long term.

RISK			ASSESSMENT			
Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk	
Governance Failure	SR1	Chief of Staff	5	4	20	
			Mitigated Probability	Mitigated Impact	Mitigated Risk	
			3	4	<b>12</b>	
			Mitigated Risk change:			↔
Cause		Impact				
<ul style="list-style-type: none"> <li>Joint Governance Framework overdue for review and some areas of uncertainty.</li> <li>New duties and expectations of PCCs arising from the national review. PCCs appear to have extra responsibility but without additional 'levers' to support delivery.</li> <li>Taking on any new responsibilities means there are more likely to be governance failures whilst the team learn.</li> <li>Proposed amendments to the Policing Protocol Order could impact PCC governance.</li> <li>OPCC failure to engage on the design element of the '3 Ds' ways of working.</li> <li>Failure to ensure effective risk management and support the delivery of service.</li> <li>Information governance failure.</li> <li>Ineffective scrutiny and oversight of services and outcomes delivered by the Constabulary including SPR.</li> <li>Ineffective scrutiny and oversight of the OPCC Equality Duty.</li> <li>Failure to ensure adequate transparency of the OPCC and/or the Constabulary.</li> <li>Failure to ensure Chief Constable sets appropriate culture, ethics and values.</li> <li>Lack of control/influence over Criminal Justice agencies or other partners.</li> <li>Lack of governance over initiation of collaborations or performance of collaborations.</li> <li>PCC election taking place in May 2024 – need to ensure OPCC staff adhere to their politically restricted terms and that the OPCC remain neutral but provide suitable information to candidates.</li> </ul>		<ul style="list-style-type: none"> <li>Lack of oversight and scrutiny of the Constabulary.</li> <li>Failure to deliver the Police &amp; Crime Plan (SR2).</li> <li>Financial loss (SR3).</li> <li>Damaged reputation and reduced public confidence (SR5).</li> <li>Failure to deliver OPCC statutory requirements.</li> <li>The Constabulary and/or OPCC will be inefficient/ineffective.</li> <li>Failure to deliver the Beating Crime Plan.</li> <li>Damaged relationship with Constabulary, commissioned services or partners.</li> <li>Government criticism or penalties.</li> <li>Panel criticism.</li> <li>Sub-standard performance results and poor inspection outcomes.</li> <li>Risks not managed.</li> <li>Failure to improve the delivery of the broader Criminal Justice Service.</li> </ul>				
MITIGATION						
Controls	Review date	Owner	Commentary / Controls updates			
<ul style="list-style-type: none"> <li>OPCC Management Board (OMB) - allows greater oversight of performance, risks and issues and provides a formal decision making mechanism for non-Constabulary business.</li> <li>Joint Governance Framework to be kept under review to ensure up-to-date and fit for purpose</li> <li>OPCC policies and procedures being reviewed.</li> <li>OPCC self-assessment of compliance with their Equality Duty.</li> <li>Oversight Boards - Performance &amp; Accountability and Governance &amp; Scrutiny.</li> <li>PCC and Chief Constable 1:1s</li> <li>OPCC attend CMB and other strategic meetings (open invitation from the CC).</li> <li>Joint Audit Committee, External Audit, Internal Audit and annual governance statement.</li> <li>JAC Chair/member recruitment</li> <li>Police and Crime Panel meetings.</li> <li>COG attendance at weekly OPCC SLT.</li> <li>Compliance with statutory reporting requirements.</li> <li>Victim Services appointed and managed by the OPCC Commissioning Team.</li> <li>Independent scrutiny panels for complaints, use of police powers &amp; OOC.</li> <li>Transparency Checklist</li> <li>OPCC Information Governance Group oversees compliance with GDPR and DPA 2018.</li> <li>Management of the OPCC and ASP interaction with the PCC election process and candidates</li> <li>PCC chairs the Local Criminal Justice Board</li> </ul>	Oct-23	Director of P&A	<ul style="list-style-type: none"> <li>Updated framework published and in depth review ongoing.</li> <li>New policies and procedures have now started being published (internally) and will be released in tranches.</li> <li>Legal review of policies and procedures carried out to ensure legal compliance. OPCC has decided to expand this work to include APCC self-assessment on equality and race. Initial assessment circulated to SLT. Prioritisation plan under development to identify areas of highest concern; and any quick wins.</li> <li>Revisions to Oversight Boards in progress to improve strategic governance and oversight functions. Performance monitoring product has been designed and is now in use as of May 23.</li> <li>Formalised OPCC attendance at Strategic Planning Meeting.</li> <li>The internal audit report on governance concluded that the PCC and CC have an adequate and effective framework for risk management, governance and internal control.</li> <li>JAC members agreed to second (3 year) term. Agreed to recruit two new members. Existing members to agree Chair on a rotating basis.</li> <li>Amended Specified Information Order - quarterly performance report published and complaints overview on PCC website.</li> <li>New volunteer panel members being inducted through Q2 and Q3 of 2023/24.</li> <li>CoPaCC transparency award received for many years (not running 2022).</li> <li>Election Board being held every month until after May 24 elections. OPCC Project management staff appointed to support the work. Joint Protocol has been agreed with ASP.</li> <li>Although the governance process is working well the outcomes do not necessarily reflect this.</li> </ul>			
	Dec-23	CoS CFO				
	Dec-23	Head of HR & BS				
	Dec-23	CoS				
	Sept-23	CFO				
	Oct-23	PCC CoS CoS Director of PP&C Director of P&A				
	Oct-23	Head of HR & BS CFO CoS				
		PCC				
	Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
	Failure to deliver the Police and Crime Plan	SR2	Chief of Staff	5	4	20

			Mitigated Probability	Mitigated Impact	Mitigated Risk
			4	4	16
			Mitigated Risk change:		↔

Cause	Impact
<ul style="list-style-type: none"> <li>Plan is broad and ambitious.</li> <li>Lack of oversight of improvement activity and related outcomes.</li> <li>Underpinning the delivery risk of all of this is the financial uncertainty and the increased public expectation from the additional funding that policing has received both through central government grant and local taxpayers' increase in precept funding.</li> <li>Prevention is hard to measure/evidence and needs more than the police to deliver.</li> <li>Internal police culture and leadership at an operational level.</li> <li>Male violence against women and girls (includes the national rape crisis) carries significant volume and harm.</li> <li>Disproportionate outcomes particularly for Black, Asian, mixed and minoritised communities.</li> <li>Workforce not representative of the communities of A&amp;S; insufficient progress has been made.</li> <li>Lack of capacity/capability within the Constabulary - significant vacancies in CID; inexperienced workforce in Patrol concern about demand and capacity and staff turnover in Comms.</li> <li>Lack of oversight and scrutiny of the Constabulary.</li> <li>Positive Outcomes - not seeing the improvements hoped for.</li> <li>Police response to 'neighbourhood crimes' does not meet public expectations.</li> <li>Court backlogs means justice is not being delivered effectively or efficiently.</li> <li>Lack of control/influence over partnership agencies e.g. CJS.</li> <li>More officers will result in more people going through an already overstretched criminal justice system.</li> <li>Constabulary staff survey results show a decline in 2022.</li> </ul>	<ul style="list-style-type: none"> <li>Loss of legitimacy in the OPCC and Constabulary.</li> <li>Loss of public confidence/trust in the OPCC (SR4) and Constabulary.</li> <li>Undermines the Peelian Principle of policing by consent.</li> <li>Failure to keep people safe.</li> <li>Failure to protect and support vulnerable people.</li> <li>Failure to bring offenders to justice.</li> <li>People will feel unsafe.</li> <li>Police and Crime Panel criticism and/or fail to agree precept increase.</li> </ul>

**MITIGATION**

Controls	Review date	Owner	Commentary / Controls updates
<ul style="list-style-type: none"> <li>Police and Crime Plan 2021-25 engagement.</li> </ul>	Oct-23	CoS	<ul style="list-style-type: none"> <li>'Together We Can' campaign launched August 23 which will have internal and external engagement.</li> <li>Revised (monthly) GSB and PAB went live from Mar 23. New quarterly performance dashboard (developed by the OPCC) in place from May 23.</li> <li>New ASP governance and performance structure going live Sept 23.</li> <li>Director of Performance &amp; Accountability working to bring together current OPCC functions to provide more holistic scrutiny.</li> <li>Five strategic aims and key deliverables agreed and published with related workstream tracker.</li> <li>Plan and objectives refreshed for 2023/24.</li> </ul>
<ul style="list-style-type: none"> <li>Governance and scrutiny arrangements being reviewed.</li> </ul>	Sept-23	CFO	
<ul style="list-style-type: none"> <li>OPCC Business Plan now focusses the work of the OPCC on supporting the Police and Crime Plan</li> </ul>		CoS	
<ul style="list-style-type: none"> <li>Governance and Scrutiny Board (GSB) discusses performance, assurance and risk</li> <li>PCC and Chief Constable 1:1s</li> <li>OPCC attend CMB and other strategic meetings (open invitation from the CC).</li> <li>Audits and Inspections (HMICFRS &amp; SWAP) overseen by Joint Audit Committee</li> <li>Internal assurance mechanisms are in place to evaluate delivery of the Plan's objectives</li> <li>Oversight of all strategic constabulary data through Qlik</li> </ul>		CoS PCC CoS CFO CFO	
<ul style="list-style-type: none"> <li>Contacts analysis</li> </ul>		Director of P&A	<ul style="list-style-type: none"> <li>Qlik data now available for PSD as well as wider areas of policing through S&amp;A and P&amp;G. This assessment is now driving PCC GSB commentary.</li> <li>New Contact Management System (iCase) anticipated end of 2023 and work will then commence to draw down data analysis from the system to assist and steer scrutiny activity.</li> </ul>

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Financial incapability or ineffectiveness	SR3	CFO	4	5	20

		Mitigated Probability	Mitigated Impact	Mitigated Risk
		4	4	16
		Mitigated Risk change:		↔
Cause		Impact		
<ul style="list-style-type: none"> <li>• Cost increases due to inflation and interest rates - inflation in 2022 significantly higher than expected; also resulting in higher interest rates which make debt more expensive to service.</li> <li>• Pay awards may exceed central government projections and effectively be unfunded.</li> <li>• Over-reliance on reserves to fund the budget deficit through the medium term is a risk.</li> <li>• 3 year settlement from 2022/23 with additional central funding for Op Uplift only.</li> <li>• May not be able to achieve maximum precept increase from 2023/24 onwards; especially considering 'cost of living' crisis already impacting the public.</li> <li>• Risks around pension funds due to wider economic impact.</li> <li>• Increasing pension costs for officers and staff schemes; although this will probably be funded.</li> <li>• Capital budget not fully funded in 2025/26 – borrowing already at prudent levels and diminishing potential for capital receipts.</li> <li>• National work will require local funding with no control over decision making e.g. ESMCP, NPAS, national IT.</li> <li>• Uncertainty of local costs in high value areas: IT and replacement of SAP.</li> </ul>		<ul style="list-style-type: none"> <li>• As officer numbers are protected it may mean using officers in roles currently undertaken by civilians if other savings do not materialise.</li> <li>• Failure to set a sustainable revenue budget or capital plan across the medium term.</li> <li>• The need for further savings after 10 years of austerity presents further challenges.</li> <li>• Failure to meet heightened expectations of stakeholders.</li> <li>• Loss of public confidence (SR5).</li> <li>• Unable to fund adequate or minimum service.</li> <li>• Unable to fund delivery of PCC priorities (SR2).</li> <li>• Unable to afford change.</li> <li>• Revenue budget underspends may undermine support from PCP for sustainable increases to the precept.</li> <li>• Failure to ensure value for money.</li> </ul>		
MITIGATION				
Controls	Review date	Owner	Commentary / Controls updates	
<ul style="list-style-type: none"> <li>• Joint work on savings plans being progressed through SPM from autumn 2022. Includes consideration of 'spend to save' plans.</li> <li>• Medium and long term financial planning.</li> <li>• Regular oversight of revenue &amp; capital budget.</li> <li>• Maintain adequate risk-assessed reserves.</li> <li>• Subject to external and internal audit both overseen by the Joint Audit Committee.</li> <li>• Treasury Management strategy in place outcomes reviewed by CFOs.</li> <li>• HMICFRS inspection regime.</li> </ul>		CFO CFO CFO CFO CFO CFO CFO	MTFP after planned savings: 2023/24 balanced (without the need for reserves) 2024/25 -£10.0 million 2025/26 -£13.4 million 2026/27 -£16.9 million 2027/28 -£19.0 million  <i>Key assumptions for revenue expenditure:</i> <i>Pay – 3.0% in 2023/24* &amp; 2024/25 and 2.0% p.a. thereafter</i> <i>*total cost in 2023/24 would be 5.4% because of the pay increase from Sept 2022</i> <i>Inflation – 4.0% in 2023/24, decreasing to 2.0% p.a. thereafter</i>	

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Failure to engage with the public and other stakeholders	SR4	Chief of Staff	4	4	16



		Mitigated Probability	Mitigated Impact	Mitigated Risk
		4	4	16
		Mitigated Risk change:		↔
Cause		Impact		
<ul style="list-style-type: none"> <li>Limited resources within the OPCC to support proactive engagement, including on Police and Crime Plan engagement.</li> <li>Engagement methods do not always reach a wide audience or different communities or groups; failure to engage with young people.</li> <li>Lack of awareness from the public.</li> </ul>		<ul style="list-style-type: none"> <li>Reputational damage to both the OPCC and Constabulary.</li> <li>Loss of legitimacy in both the OPCC and Constabulary.</li> <li>Lack of public confidence in or awareness of OPCC (SR5).</li> <li>Partnership relationships damaged.</li> <li>Failure to understand people's priorities and issues re policing and crime and which could be biased by only hearing those individuals already proactive/engaged.</li> <li>Police and Crime Plan and delivery not aligned to public concerns and priorities (SR10 &amp; SR2).</li> </ul>		
MITIGATION				
Controls	Review date	Owner	Commentary / Controls updates	
<ul style="list-style-type: none"> <li>PCC - Councillor forums</li> <li>'Together We Can' campaign promoting the role of the OPCC and the Police &amp; Crime Plan.</li> <li>Annual Precept Survey</li> <li>PCC engagement two days a week.</li> <li>Two new roles created from the OPCC review. External PR agency supporting engagement pending recruitment to these.</li> <li>Creation of an overarching strategic approach to communications to work in a more focused way on strategic priorities and objectives.</li> <li>Creation of tactical communications plans for particular workstreams (including public engagement/events) with ownership and delivery allocated to one person who is accountable.</li> <li>OCC/OPCC Corp Comms joint meetings.</li> <li>Calendar of regular media appearances / communications activities which will also link to national days or weeks where relevant.</li> <li>Oversight of Operation Remedy Communications Plan through ongoing meeting structure.</li> <li>Joint working with the Constabulary on EDI portfolio.</li> <li>Revised stakeholder mapping and management.</li> <li>New contact management system.</li> <li>Tackling Disproportionality supported by the OPCC</li> </ul>	Sept-23	Head of C&E	<ul style="list-style-type: none"> <li>9 forums held between from October 22 - February 23. Second phase started September 23.</li> <li>'Together We Can' campaign launching August 23 which will have internal and external engagement.</li> <li>Survey due to launch end of October 23.</li> <li>New Community Engagement &amp; Stakeholder Manager started June 23. New Comms and Youth Engagement Apprentice started in September 23.</li> <li>Strategy has been developed for new PCC with overarching theme focusing on vulnerable and under-represented communities to build trust and confidence.</li> <li>Engagement &amp; Stakeholder Manager started preparatory work in August 23.</li> <li>New system (iCase) anticipated end of 2023.</li> <li>Delivery of this work involves community engagement including an independent scrutiny panel.</li> </ul>	
	Sept-23	Head of C&E		
	Sept-23	Head of C&E		
		Head of C&E		
		Head of C&E		
		Head of C&E		
	Head of C&E	Head of C&E		
	Sept-23	Head of C&E		
	Oct-23	Head of C&E Director of P&A		

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Lack of public confidence in or awareness of OPCC	SR5	Chief of Staff	4	4	16
			Mitigated Probability	Mitigated Impact	Mitigated Risk

			4	4	16
			Mitigated Risk change:		↔
Cause			Impact		
<ul style="list-style-type: none"> <li>● Failure to deliver the Police &amp; Crime Plan (SR2).</li> <li>● Governance failure likely to damage confidence in PCC (SR1).</li> <li>● Negative media attention about the problems in policing (including the Casey Review) - public confidence in the police is falling. As the office that holds the police to account this could impact on confidence in the PCC.</li> <li>● Failure to deliver outcomes in terms of disproportionality (ethnicity), VAWG or 'green agenda'.</li> <li>● The increased visibility of performance presents both an opportunity and risk to confidence depending on that performance.</li> <li>● Limited resources within the OPCC to support proactive engagement.</li> <li>● PCC engagement will increase contacts and raise expectations which the OPCC are not resourced to deliver.</li> <li>● Policing failures/adverse incidents (even at an operational level) can impact on the perception of the OPCC also.</li> <li>● Protests and police handling of them are a very divisive issue and these are likely to be more frequent.</li> <li>● Failure to engage with the diverse public (especially young people) and other stakeholders (SR4).</li> <li>● Public expectation of the PCC role may not be matched by available funding or powers of the PCC.</li> <li>● Failure of the Constabulary to deliver Op Uplift or failure to improve outcomes.</li> <li>● Court backlogs and national rape crisis reduces confidence in the entire criminal justice system.</li> </ul>			<ul style="list-style-type: none"> <li>● Reputational damage.</li> <li>● Loss of legitimacy.</li> <li>● Failure to demonstrate value for money.</li> <li>● Could undermine the working relationship between the Constabulary and OPCC.</li> <li>● Police and Crime Panel failure to support precept increases.</li> <li>● Low voter turnout in PCC elections.</li> <li>● Loss of political support for the need for PCCs.</li> </ul>		
MITIGATION					
Controls		Review date	Owner	Commentary / Controls updates	
<ul style="list-style-type: none"> <li>● Police and Crime Plan 2021-25 raises profile of work of OPCC.</li> <li>● A&amp;S Police &amp; Crime Survey collects data on public confidence in the PCC.</li> <li>● Engagement activity recorded against SR4 is the primary direct mitigation of this risk.</li> <li>● Discharging good governance (SR1) and delivery of the Police and Crime Plan (SR2) are critical to ensuring confidence in the PCC.</li> <li>● Gold Groups manage critical issues of public confidence in the police.</li> </ul>			Head of C&E Director of P&A Head of C&E PCC / CoS  Head of C&E	<ul style="list-style-type: none"> <li>● 34.2% of all respondents (in the last year) had confidence in the PCC. This is 44.8% of those with an opinion.</li> <li>● The OPCC has a standing invite to all Gold Groups.</li> </ul>	

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Lack of capacity, capability or poor wellbeing within the OPCC	SR6	CoS	5	4	20
			Mitigated Probability	Mitigated Impact	Mitigated Risk
			4	4	16
			Mitigated Risk change:		
Cause			Impact		

<ul style="list-style-type: none"> <li>• Vacancies and absence have a significant impact in the small OPCC team, and can contribute to stress and sick absence.</li> <li>• The Performance and Accountability directorate has also been further affected by sick absence and death in service. Short-term cover arrangements are drawing resource from across the wider OPCC team.</li> <li>• Increased demand on HR while Review recommendations are being implemented.</li> <li>• Increased government legislation and other activity in policing places greater demands on the OPCC, frequently with short notice making it difficult to manage resource.</li> <li>• Loss of skills and experience including senior roles and four maternity leaves and cover in 2021-23.</li> <li>• Disruption caused by change to OPCC structure and roles as a result of the review commissioned by the PCC.</li> </ul>	<ul style="list-style-type: none"> <li>• Increased likelihood of materialisation of all other strategic risks through delivery failure.</li> <li>• Delivery of work is late or not to standards of quality desired.</li> </ul>
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**MITIGATION**

Controls	Review date	Owner	Commentary / Controls updates
<ul style="list-style-type: none"> <li>• Implementation of VRP Review will release capacity back into the broader OPCC team.</li> <li>• Additional HR support is in place to ensure implementation of wider Review recommendations.</li> <li>• PDR process and regular supervisory sessions.</li> <li>• Annual staff survey, supplemented by pulse surveys, to inform internal policy and delivery.</li> <li>• Skills matrix maintained.</li> <li>• Training and development budget maintained</li> <li>• Wellbeing resources and support offered and promoted, including Health and Wellbeing Passports.</li> <li>• Training opportunities and resources developed and promoted</li> <li>• Salary levels set at a reasonable market rate and in line with other OPCCs.</li> <li>• Regular team meetings to share knowledge and resolve issues.</li> <li>• Values and teamwork embedded.</li> </ul>	Oct-23	Director of PP&C  Head of HR & BS CFO Head of HR & BS  Head of HR & BS Head of HR & BS Head of HR & BS	<ul style="list-style-type: none"> <li>• New VRP Director and Senior Partnerships and Engagement Manager roles advertised in September 23.</li> <li>• Full staff survey run in Feb 23. Results discussed with the team and at OMB. Very positive results with 78% staff happy or very happy; the rest were neutral.</li> <li>• Wellbeing and financial support initiatives promoted to the team.</li> <li>• Wellbeing strategy launched.</li> <li>• Skills matrix refreshed as part of the review with organisational and team requirements identified. Training needs analysis exercise carried out in February and fed into recently launched OPCC Learning &amp; Development Plan (September 23).</li> </ul>

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Failure to deliver commissioned services	SR7	Director of PP&C	5	3	15
			Mitigated Probability	Mitigated Impact	Mitigated Risk
			4	3	<b>12</b>
			Mitigated Risk change:		
Cause	Impact				

<ul style="list-style-type: none"> <li>• All MOJ funding for victim services ends March 2025 across core and specialist services (MOJ formula and general grants) which is a risk for local services the closer we get to this without clarity of budgets.</li> <li>• Victims and Prisoners Bill is proposing only modest funding to deliver the Collaborative Commissioning Duty.</li> <li>• Inflationary pressures on these services - some working on the same budget for many years.</li> <li>• Increasing demand.</li> <li>• Backlogs in Lighthouse (the primary commissioned service).</li> <li>• Additional demand on victim support services; particularly DA and SV.</li> <li>• Significant additional reporting requirements for compliance purposes.</li> <li>• Services without sustainable funding and cliff-edge arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>• Failure to support victims particularly vulnerable victims - PCP Priority 1 (SR2).</li> <li>• Loss of public confidence in or awareness of OPCC (SR5).</li> <li>• Relationship with Constabulary and partners.</li> <li>• Reduction or withdrawal of victims grant from Government.</li> <li>• Failure to devolve further funding/commissioning.</li> </ul>
<ul style="list-style-type: none"> <li>• Reduction in rape support fund means less funding for therapeutic services.</li> </ul>	

**MITIGATION**

Controls	Review date	Owner	Commentary / Controls updates
<ul style="list-style-type: none"> <li>• Victim Services recommissioning for 2025/26</li> <li>• Commissioning Strategy</li> <li>• Lighthouse victims' service jointly established with the Constabulary: service under joint review.</li> </ul>	Sept-23	Director of PP&C	<ul style="list-style-type: none"> <li>• Planning work – including needs assessment – has begun.</li> <li>• Commissioning Strategy finalised May 23; awaiting branding and publication.</li> <li>• First phase of the review looked at the Safeguarding aspect of LSU. The increase in these resources may reduce some demand from the commissioned part of the service although this will be further reviewed. OPCC have provided a specification for the 'Lighthouse' element and ASP are submitting a proposal by the end of Sept 23.</li> </ul>
<ul style="list-style-type: none"> <li>• Maintain a sufficiently resourced commissioning team within the OPCC.</li> <li>• Victim Services Provider forum and AWP Partnership Board are regular joint strategic meetings with commissioned services.</li> <li>• Scan and apply for additional funding as available.</li> </ul>	Sept-23	Director of PP&C	
<ul style="list-style-type: none"> <li>• Lobbying to increase funding for Victims and Prisoners Bill. Pursuing funding from MoJ related to Victim's Code of Practice.</li> <li>• Therapeutic services – working with Integrated Care Board to support through one-off funding and remodelling of service offer.</li> <li>• One-off funding for support for services to mitigate inflationary pressure.</li> </ul>	Dec-23	Director of PP&C	

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Failure to deliver effective and efficient collaborations with other forces	SR8	Chief of Staff	4	3	12
			Mitigated Probability	Mitigated Impact	Mitigated Risk
			4	3	<b>12</b>

		Mitigated Risk change:		↔
Cause		Impact		
<ul style="list-style-type: none"> <li>● SWROCU projected to fall short of Uplift target for 31/03/23.</li> <li>● Challenges with staff retention and capacity in South West Forensics.</li> <li>● Ineffective governance and scrutiny over existing collaborations.</li> <li>● Failure to agree effective models for collaboration.</li> <li>● Ineffective governance and ownership of regional projects and programmes.</li> <li>● Tension between local forces and collaborations in terms of competing interests and lack of uniformity of people and processes.</li> <li>● Lack of direct influence/control in order to make changes i.e. everything must be done by (multi-force) committee.</li> <li>● NPAS is particularly challenging.</li> </ul>		<ul style="list-style-type: none"> <li>● Governance failure as a duty of the PCC (SR1).</li> <li>● Failure to deliver value for money.</li> <li>● Failure to deliver specific services provided by existing collaborations.</li> <li>● Inefficient compared to other regions/areas.</li> <li>● Criticism from HMICFRS.</li> <li>● Government scrutiny/intervention.</li> <li>● Lack of resilience otherwise provided by a collaboration.</li> <li>● Forced to accept others' terms from future alliances or mergers.</li> </ul>		
MITIGATION				
Controls	Review date	Owner	Commentary / Controls updates	
<ul style="list-style-type: none"> <li>● External review of SW Forensics was commissioned.</li> <li>● South West Regional PCCs are politically aligned and have agreed to collaborate.</li> <li>● Collaboration Governance.</li> <li>● SWAP appointed as Internal Auditor (from April 2019) - working in partnership with other regional forces.</li> <li>● Regional ACC is in place (in line with HMICFRS recommendations).</li> </ul>		CoS CoS CoS CFO CFO	<ul style="list-style-type: none"> <li>● SW Chief Constables and PCCs agreed to implement review recommendations and extra investment.</li> <li>● SW Regional Away Day PCCs confirmed commitment to existing collaborations.</li> <li>● SW Operational Board split into two to allow greater time for different parts of the collaborations.</li> <li>● Op Scorpion - regional anti-drugs operation – five rounds have taken place since Jan 22 with a further operation planned in autumn 2023.</li> </ul>	

Risk	URN	Owner	Unmitigated Probability	Unmitigated Impact	Unmitigated Risk
Failure to deliver effective and efficient collaborations or outcomes with other partners	SR9	Chief of Staff	4	4	16
			Mitigated Probability	Mitigated Impact	Mitigated Risk
			4	3	12
			Mitigated Risk change:		
Cause		Impact			

<ul style="list-style-type: none"> <li>● Lack of control/influence over other criminal justice agencies.</li> <li>● New duties and expectations of PCCs arising from the national review. PCCs appear to have extra responsibility but without additional 'levers' to support delivery.</li> <li>● Partner funding remains under pressure with financial settlements not keeping pace with inflation and demand. This increases the risk of demand and funding requests moving to the ASC and OPCC.</li> <li>● Macro-economic factors could have a detrimental effect on partners, particularly Local Authorities. This financial position could cause partners to withdraw or reduce levels of service to partnerships.</li> <li>● Failure to put in place effective governance and ownership of partnership working.</li> <li>● Differing priorities and leadership of agencies.</li> <li>● Changing political and economic landscape can make partnership working more challenging.</li> <li>● Lack of meaningful 'live' information sharing.</li> <li>● National review of CSPs</li> <li>● Violence Reduction Partnership (VRP) – uncertainty as to resourcing the current hub and spoke model</li> <li>● Serious Violence Duty – Challenges in working collaboratively to meet the key deliverables of the – due to unclear duty roles for specified authorities, limited capacity across organisations and different priorities in places. This includes setting of the SV definition and consideration to a collaboratively developed SNA and strategy.</li> <li>● Safer Streets 5 (2023) – changed to all bids having to be submitted through OPCCs rather than local authorities being able to bid directly.</li> </ul>	<ul style="list-style-type: none"> <li>● Governance failure as a duty of the PCC (SR1).</li> <li>● Failure to deliver the Police and Crime Plan (SR2).</li> <li>● Failure to deliver a whole systems approach to crime and continue the 'revolving door' of offending and victimisation.</li> <li>● Failure to deliver value for money.</li> </ul>
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**MITIGATION**

Controls	Review date	Owner	Commentary / Controls updates
<ul style="list-style-type: none"> <li>● Governance of Community Safety Plans</li> <li>● Partnership Strategy</li> <li>● Violence Reduction Units (VRPs)</li> <li>● Serious Violence Duty governance</li> <li>● Combatting Drugs Partnerships</li> <li>● Local reducing reoffending strategy</li> <li>● PCC chairs LCJB and OPCC continue to be represented at CSPs, Children's Trusts, Health and Wellbeing Boards.</li> <li>● Meetings (outside of Boards) with LA chairs/CEOs; CSP Chairs.</li> <li>● PP&amp;C team have leads for victims, CJS and reducing re-offending.</li> <li>● Violence Reduction Units.</li> <li>● PCC is a member of the Fire Authorities for Avon and Devon &amp; Somerset.</li> <li>● Information sharing relevant to all partnership working; particularly CJ, reducing reoffending and VRUs.</li> </ul>	Dec-23	Director of PP&C	<ul style="list-style-type: none"> <li>● Need to improve OPCC oversight of these plans but that has to be considered in the context of the national review.</li> <li>● Work delayed due to competing demands but workshop held with SLT Sept 23.</li> <li>● VRP review complete and improvement plan in place. Changes to governance agreed and in place, recruiting a VRP Director.</li> <li>● SV Duty plan in place and team progressing: on target for Home Office deadline.</li> <li>● 5 CDPs (aligned to CSPs) went live in Sept 2022. PCC brought all SROs together at the start of summer and now meeting 1-2-1 with them all.</li> <li>● A&amp;S RR strategy being developed with partners.</li> <li>● HO confirmed A&amp;S increased funding for 2022/23 - 2024/25.</li> </ul>
	Dec-23	Director of PP&C	
	Oct-23	Director of PP&C	
	Nov-23	Director of PP&C	
		Director of PP&C CoS	
		CoS Director of PP&C Director of PP&C CoS Respective Strategic Groups	

<b>MEETING NAME</b>	<b>DATE</b>	<b>AGENDA NO</b>
Joint Audit Committee	11/09/23	n/a <a href="#">Report 2</a>
<b>DIRECTORATE / DEPARTMENT</b>	<b>AUTHOR</b>	<b>COG SPONSOR</b>
Chief of Staff Directorate Portfolio Management Office (PMO)	7975 James DAVIS Delivery Manager - Portfolio	DCC WATSON
<b>NAME OF PAPER</b>	<b>PURPOSE OF THE PAPER</b>	<b>SESSION</b>
Constabulary Corporate Risk Register Report	Information	Open

## 1. PURPOSE OF REPORT

This report provides the Joint Audit Committee (JAC) members with a summary of the latest Avon & Somerset Constabulary Corporate Risk Register. The content of this report was informed through fieldwork reviews of all corporate risks during August 2023. The focus of recent corporate risk reviews have been to understand new mitigating activities in delivery across the Constabulary and their potential impact on mitigated risk values. This report provides the comprehensive detail for JAC members for September noting the meeting for 20/09/23 has been cancelled.

## 2. CORPORATE RISK HEADLINES

The Corporate Risk Headlines for the September Joint Audit Committee Cycle are as follows.

- All 7 Corporate Risks have been reviewed in detail with the relevant Chief Officer Group lead with updated narrative for unmitigated risks and risk mitigations captured.
- The Q2 review of Corporate Risks has concluded there are no proposed changes to any of the mitigated risk values which are summarised in the table below.
- There are some corporate risks whereby mitigations are in the early stages of implementation and that therefore the Constabulary is confident of reduced risk mitigation scores in time.
- The full 7 x Corporate Risk records are attached to this report and include comprehensive updates on mitigating activities.
- The PMO vacancy with lead responsibility for risk management is subject to an assessment process in September / October and therefore there will be additional capacity in support of Constabulary risk management available soon.

Corporate Risk Mitigated Value Assessments		Impact				
		Negligible (1)	Minor (2)	Moderate (3)	Significant (4)	Severe (5)
Likelihood	Very likely (5)					
	Likely (4)			Assets	Information Governance, Data & Digital	Finance
	Possible (3)			Governance	Service	People Confidence & Legitimacy
	Unlikely (2)					
	Very unlikely (1)					

## 3. QUARTERLY ANALYSIS OF THE ORGANISATIONAL RISK REGISTER

The Constabulary Risk Management process sees the identification and mapping of risk at two levels. The Corporate Risks are informed by Organisational Risks with the latter managed by local Directorates and Departments. As of 11/09/23, the Constabulary has identified 7 x Corporate Risks (see Section 2) and 205 x Organisational Risks. Organisational Risks are managed by the Improvement Consultant cohort working alongside the relevant SLTs. The PMO has worked closely with colleagues in the Chief of Staff Directorate during June and July to refresh all Organisational Risk records.

The visibility of the Organisational Risk Register is maintained through our QLIK platform (Portfolio Application) which allows for live time analysis of risk records by the business. The graphics below show the overall number of risks identified by their risk type (essentially the first 6 x Corporate Risks) based on their mitigated assessment of the likelihood and impact of risk materialising.

### Governance

The number of Governance risks has increased from 17 to 18 since the last JAC but all mitigated values remain either amber (managed at Committees) or green (managed by Directorates).

LIKELIHOOD	IMPACT			
	2	3	4	5
4	-	2	-	-
3	-	3	1	-
2	4	2	3	-
1	-	1	1	1

### Financial

There number of Finance risks has increase from 8 to 9 since the last JAC but again all mitigated values remain either amber (managed at Committees) or green (managed by Directorates).

No. of Risks By Impact and Likelihood

LIKELIHOOD	IMPACT			
	1	2	3	4
3	1	2	1	2
2	-	-	1	2

### Service Delivery

The number of Service Delivery risks has increased from 68 to 90 since the last JAC with the number of red RAG risks increasing by from 10 to 11. This increase reflects a proactive exercise to map over risks relating to Violence Against Women & Girls, Vulnerability and Serious Violence as part of the central organisational risk register.

LIKELIHOOD	IMPACT				
	1	2	3	4	5
5	1	-	1	-	1
4	-	3	6	9	-
3	-	8	10	14	-
2	2	7	8	16	1
1	3	-	-	-	-



## People

The number of People risks has increased from 43 to 44 since the last JAC with the number of red RAG risks remaining the same.

LIKELIHOOD	IMPACT		
	2	3	4
5	-	-	1
4	5	5	3
3	2	8	5
2	3	9	3

## Information Governance, Data & Digital

The number of Information Governance, Data & Digital risks has increased from 30 to 32 since the last JAC. There are now 2 risks with a red RAG mitigated assessment.

LIKELIHOOD	IMPACT				
	1	2	3	4	5
4	1	2	4	1	-
3	1	-	7	3	1
2	-	2	6	1	1
1	1	-	-	1	-

## Infrastructure and Assets

The number of Infrastructure and Assets risks remains unchanged at 6 since the last JAC. There is still only 1 red RAG risk based on mitigated risk assessments.

LIKELIHOOD	IMPACT			
	2	3	4	5
4	-	1	1	-
3	1	-	-	-
2	1	1	-	1

Therefore these “heat maps” indicate only small changes to the Organisational Risk landscape since the June Joint Audit Committee. These changes are largely reflective of the proactive review exercise and subsequent refresh of the Organisational Risk Register over the summer period.

#### **4. RECOMMENDATIONS**

There are no specific recommendations to present to the Joint Audit Committee. The report is submitted for information, observations, feedback, and questions.

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 25/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000735	<b>Current Mitigated Score</b>	20
<b>Corporate Risk Title</b>	<b>Inability to deliver a sustainably balanced budget</b>	<b>Mitigated Impact Score</b>	5
<b>Corporate Risk Owner(s)</b>	Nick Adams	<b>Mitigated Likelihood Score</b>	4
		<b>Date of Risk Review</b>	30/11/2023

<b>Corporate Risk Description</b>	Our ability to deliver quality policing services and value for money for residents of Avon and Somerset is dependent of our ability to put the Constabulary on a sustainable financial footing allowing us to invest in the needs of the present without compromising the ability to meet the challenges of the medium to longer term. Prudent financial management and sustainable investment enable the organisation to work towards delivery of its strategic objectives and also those set out in the Police and Crime Plan.
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### Corporate Risk initial assessment - unmitigated risk

<b>Unmitigated Assessment</b>	25
<b>Unmitigated Impact Score</b>	5
<b>Unmitigated Likelihood Score</b>	5

<p>Bundle 5 of 50</p>	<p>The PCC has set a budget of £373.1M for 2023/24, of which £368.5M is delegated to the Chief Constable as the budget for running the Constabulary. This budget requirement includes £3.0M of new savings, as well as incorporating the first full year of our fully uplifted officer numbers, and the inflationary pressures arising from the current economic climate.</p> <p>The funding for this, which totals £369.5M, is insufficient to immediately fund the full budget requirement, resulting in a shortfall of £3.7M in 2023/24. The budget was therefore been set with expectation that the Constabulary will progress plans for further savings.</p> <p>The Medium-Term Financial Plan (MTFP) looks out beyond 2023/24, covering forecasts over a 5-year planning horizon up to 2027/28. These forecasts predict a continued increase in costs, driven by our assumptions around pay awards, pay progression of a relatively inexperienced workforce, non-pay inflationary pressures and challenges around costs of pensions. Our forecasts also predict a continued increase in funding, which in 2024/25 reflect the Autumn 2022 Spending Review (SR) announcements and subsequent notifications (which includes an assumed £10 increase in precept in 2024/25), and thereafter assume smaller increases to both grant funding (+1% p.a.) and council tax funding (+2% p.a. to council tax bills). Despite the forecast increase in funding, it is clear that across the medium term our costs will continue to outgrow our funding. On latest forecasts as set out in the MTFP which predicts a deficit of £3.7M in 2023/24 will have grown to a deficit of £19.0M by 2027/28.</p>
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## Rationale

The cost of policing in Avon & Somerset is not an outlier compared to other forces around the country. We have the median council tax bill (average band D for 2023/24 will be £266.20) for policing of all forces in England and Wales. While our grant funding, when measured per head of population, similarly reflects a median position, the distribution of this has historically underfunded Avon and Somerset when assessed against need.

The current formula for the distribution of grant funding across policing was introduced nearly 20 years ago. This model recognised that grant funding to Avon & Somerset needed to increase by c. £10M-£20M p.a. when policing need was assessed. However, the transitional arrangements which accompanied the introduction of this formula meant that we have never seen the increases that this formula envisaged we should have. When austerity commenced in 2010/11, the formula was disregarded and all adjustments to police grant funding (down or up) since this date have been consistently applied to all PCC's – thereby locking in this historic funding distribution. It is this situation that means of all those forces across England and Wales that have one of the 10 largest cities (which includes Bristol), Avon & Somerset receive significantly less funding per head of population. Grant funding in 2023/24 for those forces with the 10 largest cities will average at £193.60p per head of population, which is £72.41p more than the £121.19p we will receive in Avon & Somerset – the equivalent difference of £126.3m annual funding.

Our Capital Programme continues to reflect a mixture of local and national projects, and similar to our revenue forecasts, predicts increases to costs driven by inflationary pressures. For example we are forecasting an additional £5K in the purchase cost of each replacement police vehicle, thereby increasing the costs of maintaining a fleet of 1,000 vehicles in Avon & Somerset. Over the next 5 years we forecast capital expenditure of £91.3M, of which £40.7M relates to replacement and maintenance of existing assets, and £50.6m relates to capital projects. Our funding of capital relies on a mixture of revenue contributions, capital receipts, borrowing (where prudent to do so) and use of reserves. Currently our forecasts predict a shortfall of £6.5m split across the final two years of our plan, which will require us to continue to review opportunities to reduce these forecasts costs or identify new funding sources.

Our reserve levels are forecast to stand at c. £61.1M at the end of March 2023, which includes £12M in general reserves the value of which is set by a risk assessment completed annually by the PCC CFO in consultation with the Constabulary CFO. Our forecasts predict our reserve levels will reduce over the medium term, in particular reflecting the use of these to fund our Capital Programme. We anticipate our reserves will stand at a recurring level of c. £25m-£26m by March 2026, a position from which we do not expect them to reduce any further.

We therefore recognise the need to identify and bring forward savings to help address both the immediate revenue shortfall in our 2023/24 budget, and the growing deficit which we predict over the medium term. The requirement for savings will continue as long as the growth in funding does not keep pace with the growth in our costs. While we acknowledge that this will be necessary of us, we equally recognise the challenge this will present, particularly in light of:-

- The fact that, as identified above, the cost of policing in Avon & Somerset is not an outlier and is arguably already under-funded compared to both need and forces who similarly have the policing challenges presented by a large city such as Bristol.
- The fact that since 2010/11 we have already released more than £90M (c. 30%) in savings from the Constabulary as a consequence of austerity, meaning there is no part of our organisation that has not already had to reduce in size and cost to varying levels.
- The fact that this challenge is presenting itself at a time when the organisation has been geared towards delivery of growth in police officers to rebuild the strength lost over the last decade. Identification and delivery of savings will require management time and oversight, which is already heavily consumed managing the delivery of our uplift plans, including the growing pains associated with these as we build towards our future target operating model.
- The fact that, having grown officer numbers, there will be government expectation and financial incentive to maintain these officer numbers across the medium term (a position we expect to be true regardless of the outcome of the next general election). As officers costs account for more than half of the Constabulary's costs, the scope from which savings will need to be identified is limited to police staff and non-pay budgets.

We recognise the challenges presented by the current pension Remedy issue affecting all public service pension schemes. 01/10/23 marks the implementation date for the legal judgement of the Supreme Court regarding the McCloud pension challenge. At this point

eligible officers will be returned to their original (legacy) pension scheme for the Remedy period. This means that when they choose to retire they can do so with a remedied pension. At the same time work will commence to transfer already retired officers. Managing this task is a major undertaking and is the number one risk on the South West Region Police Pensions Board risk register. The current challenges relate to pending legislation, software delays, resources and communications.

### Corporate Risk latest assessment - mitigated risk

<b>Mitigated Assessment</b>	20
<b>Mitigated Impact Score</b>	5
<b>Mitigated Likelihood Score</b>	4

#### Producing reliable forecasts to inform decision making

Producing financial forecasts relies upon us making a lot of assumptions about changes to both our funding and our costs. All key, material assumptions within our MTFP, our outlined and discussed with both the PCC and the CC throughout the annual budget setting process. Wherever possible our assumptions are benchmarked against those being made by other forces to ensure we do not appear to be an outlier in what it is that we are assuming. While it will never be possible to provide absolute certainty in our forecasts, by being transparent and through benchmarking we hope to be able to therefore benefit from the collective insight and wisdom of stakeholders and ensure there is shared understanding of the basis on which our forecasts are being built. The process by which the 2024/25 MTFP will be developed has started with the first Assumptions Paper presented at the Constabulary Management Board in August and OPCC Governance & Scrutiny Board in September.

#### Identifying and releasing savings

As reported at the end of Q1 2023/24 financial year, we have successfully identified the savings needed to close the deficit in our revenue budget for that year. This has been achieved through a combination of pay and non-pay savings and has been subject to work undertaken through our strategic planning discussions. The majority of the savings identified in this year are recurring and therefore will reduce the deficit for future years. This means we will not need to utilise general reserves to help balance our budget in the current financial year.

We have commenced our strategic planning for the next five years, incorporating as one of our key planning principles the need to release savings that sustainably enable us to balance our revenue budget. These plans focus on both pay and non-pay in recognition that savings from both will be necessary in the short and medium term. The Strategic Five Year Plan was signed-off at the Strategic Planning Meeting (SPM) in June. The construct of the plan is around 8 Programmes of Work where the theme of Programme 6 is to having a cost-conscious organisation. Activity included as part of this Programme includes the practical realisation of requisite savings for each future financial year further to detailed FTE savings that had been scoped in Q4 2022/23. Our discussions have reinforced the need for the Constabulary to commit to a single portfolio of activity and a singular commissioning route that will help control costs and ensure only the right investment at the right time is authorised.

- Pay savings – We are working up plans that will see the reduction of 250 police staff posts from the Constabulary over the next three years - some of which have already been realised through the reduction in vacancies. By working these plans up in advance, we hope to be able to manage the achievement of these savings as much as possible through natural turnover and attrition thereby reducing the need for use to have to use management of change processes and limit the need for redundancies. The work behind these plans has made good progress. For Year 1 we have released £3.0M to date through a combination of Year 1 pay savings and top slice adjustment. The Core Planning Team continue to co-ordinate this work noting plans are agreed for 2023/24 with activity continuing to identify requirements for 2024/25.

## Rationale

- Non-pay savings – We are reviewing all areas of non-pay to identify the potential for savings. This includes consideration of our non-visible police estate with a view to identifying opportunities for reductions, and in time may also need to start considering options more widely across our estate. It also includes consideration of our IT applications to identify potential for consolidation of these. We continue to unlock savings, some are one-off and some are permanent. We have not set an overall target as we continue to manage a number of variables. We are introducing routine quarterly savings reporting of non-pay savings to retain visibility.

All savings will require us to continue to work hard to release capacity and ensure our processes, systems and ways of working remain as efficient and effective as possible. Our investments into some of our digital capabilities, such as Robotic Process Automation and in Microsoft 365, as well as our project to replace our corporate ERP systems, mean we are starting from a position whereby some of the tools to unlock this capacity are within our organization already.

Because of the need to maintain police officer numbers we acknowledge that as we release savings from police staff posts, it may be necessary (and in some cases beneficial) to consider to what extent our officer establishment needs to flex to ensure we continue to have the right capacity and capability. This therefore means that as we work our way through these plans, we are closely monitoring and tracking our post uplift officer target operating model and assessing to what extent this might need to be adjusted. Our investment into Workforce Planning capacity and capability reflects the importance of this discipline through our annual planning processes. It is critical to our ongoing planning capability to ensure we are building an organisation that is able to flex and continue to meet variable demand.

### **Making the case for more funding**

We recognise the economic challenges the country faces and acknowledge that policing will be one voice amongst many services that will be arguing for more funding. However, it is important that we continue to work with PCC's and Forces up and down the country to make as strong a case for why policing needs continued increases in funding. The Constabulary CFO sits on the National Police Chiefs Council (NPCC) Finance Co-ordination Committee who will be leading on the work to develop the next submission from policing into the Spending Review which we expect to happen shortly after the next parliament commences following a general election. Through our involvement we will work with colleagues to ensure that the submissions from policing are as strong as they can be.

Over recent years it is evident that the government has been willing to support the investment it wants to see into policing through relaxation of the rules around council tax precept. It is a distinct possibility that this will continue to be the case, with further flexibility allowed of the PCC than is currently envisaged within our MTFP forecasts. The continued growth in council tax funding is not something which the Constabulary takes for granted. We recognise the challenges to household budgets that the current economic situation has created, and therefore we would expect any proposals for further increases to the policing part of local council tax bills to be closely scrutinised. We plan to work closely with the OPCC to understand how they want to prepare for and manage the possibility that further precept flexibility might be offered in response to requests for further funding into policing. We are working to the current assumption the precept will increase by £10 in the 2024/25 budget.

### **A fairer funding formula**

The Home Office has continued to acknowledge the need for a review of the formula used to distribute grant funding and has commissioned work to formally do this, with public consultation now expected during 2023 (although this has not formally commenced as of August 2023). While we would be hopeful that the review into the formula goes some way to addressing this position, we recognise the uncertainty of the review and the will to see the outcome fully implemented. We are therefore making no assumption as to whether the review results in an increase or decrease to our grant funding position, but will continue to keep this in view and ensure we are engaged in the consultation when this commences.

Our overall mitigated risk assessment for Q2 remains as Impact 5 x Likelihood 4 = 20. This reflects the early development of our savings work and the transition to our new portfolio of change and Programmes of Work.

### **Legacy Pension - Corporate Project**

We initiated a project (reference PR/62) as part of our Corporate Change Portfolio to manage the Remedy Pension issue with the SWRPPB. This project continues to work through a range of tactical activity noting statutory / legislative timescales.

**Earlier assessments**

Mitigated risk score Q4 2021/22

16

Mitigated risk score Q1 2022/23

20

Mitigated risk score Q2 2022/23

20

Mitigated risk score Q3 2022/23

20

**Corporate Risk - audit trail of risk management**

**Date of update**

22/08/2023

**PMO notes**

Q2 risk review with Nick ADAMS on 21/08/23. Updated narrative for unmitigated risk and risk mitigations provided. No overall change to the mitigated risk assessment score. Q3 review due in November.

31/05/2023

This risk was reviewed by Nick Adams in May 2023.

The narrative accompanying the unmitigated and mitigated risk values has been updated to represent the very latest financial positioning of the organisation and subsequent progress of the development of the Strategic Five Year Plan process.

As part of reviewing and updating the risk, there has been no change to the mitigated risk value which remains at **20 (Impact 5 x Likelihood 4)**.

The next scheduled review of this risk will be held at the end of August 2023.

02/03/2023

This risk was reviewed by Nick Adams on 1st March 2022.

The narrative accompanying the unmitigated and mitigated risk values has been completely overhauled to represent the very latest financial positioning of the organisation. As part of reviewing and updating the risk, the Chief Finance Officer has **increased** the mitigated assessment from the previous score of **16 (Impact 4 x Likelihood 4)** to a new value of **20 (Impact 5 x Likelihood 4)**.

The next scheduled review of this risk will be held at the end of May 2023.

21/11/2022	<p>This risk was reviewed by the Constabulary Chief Finance Officer on 17th November following the Autumn Statement 2022 announcement, on behalf of members of Chief Officer Group.</p> <p>There is no change to the unmitigated score of <b>25</b> or mitigated (residual risk) score of <b>16</b>. However, we have updated the narrative to reflect current understood position.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group in February 2023, however we will remain attentive to the current factors influencing the assessment of this risk and review it, should it be necessary, earlier than the planned date noted above.</p>
05/10/2022	<p>This risk was reviewed by the Constabulary Chief Finance Officer on 4th October 2022 on behalf of members of Chief Officer Group. The content of the risk record was reviewed and agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>25</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>16</b>, reflective of the inherent uncertainties that remain at this stage in our planning cycle against a challenging economic backdrop.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group in November 2022.</p>
28/06/2022	<p>This risk was reviewed by the Constabulary Chief Finance Officer on 28th June 2022 on behalf of members of Chief Officer Group.</p> <p>The content the risk record was reviewed and agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>15</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>12</b>.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 14th September 2022.</p>
16/02/2022	<p>This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>15</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>12</b>.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022.</p>



# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000736	<b>Current Mitigated Score</b>	12
<b>Corporate Risk Title</b>	<b>Failure to meet expectations of improved performance and service delivery</b>	<b>Mitigated Impact Score</b>	4
<b>Corporate Risk Owner(s)</b>	Nikki Watson	<b>Mitigated Likelihood Score</b>	3
		<b>Date of Risk Review</b>	30/11/2023

**Corporate Risk Description**

When we consider the expectations of policing from the public and current government, we recognise they expect improvements to be seen on the back of investment in policing following years of austerity. When we consider that over the last 5 years precept (council tax contribution) has increased 35%, with the backdrop of the 'additional' 20,000 new police officers pledged by the government and the media attention and public opinion of policing in the past few years, scrutiny of what we do has never been as fierce.

The organisation has achieved its Police Officer Uplift numbers, exceeding it in fact, to support the National imperative to achieve 20,000 new officers. Where we have not yet seen the benefit is where our new officers are still in their initial period spent in Response policing, meaning we haven't yet been able to fill new posts created through uplift. We also continue to manage the abstraction of new officers who require to undertake studies for their degree programme.

We are also acutely aware of the requirement for savings that policing will need to deliver in the coming years, which is leading the organisation to review its savings requirements and uplift plans, while at the same time delivering services within the financial envelope, we have available.

The Strategic Policing Requirement (SPR) sets out the Home Secretary's view of what the current national threats are, and the national policing capabilities needed to counter those threats. The 2023 version introduces violence against women and girls as an additional national threat, and reaffirms the validity of the existing threats. The inclusion of violence against women and girls as a national threat sets clear expectations for local and regional police capabilities to tackle violence against women and girls and how local forces work with others, including collaborating with other agencies.

### Corporate Risk initial assessment - unmitigated risk

**Unmitigated Assessment**  
Bundle 11 of 50

20

<b>Unmitigated Impact Score</b>	5
<b>Unmitigated Likelihood Score</b>	4

**Rationale**

Our priorities are set out through various national frameworks and local priorities, which mean we continue to have a large number of expectations placed on us. At present these numerous plans remain complimentary of each other, but in light of organisational growing pains, detailed in Corporate Risk 4, it may become necessary to prioritise and focus on specific areas of improvement.

We continue to manage challenges with non-core demand, 73% call for service relating to non-crime incidents over the last 12 months. Additional data also tells us that 62% of officer time at scene relates to non-crime incidents. We have sent a task force to visit Humberside Police to understand more on their approach called 'Right Person, Right Care', which National Police Chiefs Council supporting the national approach to 'Right Care, Right Person' to help forces reduce the number of deployments in respect of specific types of calls relating to mental health and concern for welfare, and help police staff in control rooms focus, from the outset, on getting the right person and agency, with the right skills, training, and experience to respond to the incident. We have commissioned a local Discovery Project to review Non-Core Demand for reporting into our Design Forum in June 2023 with the potential to commission a new corporate project as part of our Strategic Five-Year Plan. We are aware of the recent national narrative further to the announcement of the Metropolitan Police to stop servicing mental health demand later in 2023.

We recognise the synergy between Corporate Risk 4 and this risk, mainly when scrutiny of the police culture, behaviour and incidents of misconduct in a public office has been well documented. We have seen referrals to our Professional Standards Department increase, aligned with media coverage of conduct in other police forces. The Constabulary currently has its highest level of suspensions due to ongoing investigations. There is an intrinsic link to these factors underpinning the public's trust and confidence in our service delivery. It is reasonable to expect misconduct cases to increase as the organisational culture evolves and we root out attitudes and behaviours that do not align with our values. We have created an additional 7th Corporate Risk (reference PR/1436) to reflect this.

**Corporate Risk latest assessment - mitigated risk**

<b>Mitigated Assessment</b>	12
<b>Mitigated Impact Score</b>	4
<b>Mitigated Likelihood Score</b>	3

Bundle 12 of 50

**Corporate Risk PR/736 reviewed with DCC WATSON on 11/08/23.**

The Constabulary has developed its **Performance Control Strategy**, reported through the Integrated Performance and Quality Report (IPQR) which informs the Management Board (CMB) monthly of our performance. Our Performance Control Strategy has set the force level performance priorities for local focus and delivery, these six areas are:

- **Crime Data Integrity**
- **Rape and Serious Sexual Offences**
- **Investigative Standards**
- **Response Timeliness**
- **Victim Contact and Follow up**

- **Case File Quality**

Performance against each of the Performance Control Strategy areas was provided as part of the IPQR update at the **July Constabulary Management Board**.

For Crime Data Integrity "**moderate improvement**" was reported. For Rape & Serious Sexual Offences, "**strong improvement**" was reported. For the remaining areas of Case File Quality, Investigative Standards, Response Timeliness and Victim Contact & Follow up, "**stable performance**" was reported. This shows no change in position from that reported for Q2. For each area, the Constabulary has developed comprehensive Improvement Plans which are again subject to scrutiny at the Constabulary Management Board.

For **Investigative Standards**, the Improvement Plan updates provided the following information. Supervisor Review dip sampling is now taking place regularly in Neighbourhoods and use of the template continues to improve. Neighbourhoods currently hold 50% of live crime with new template compared with the force average of 15%. (It should be noted that Remedy uses the CID Supervisor template and are therefore not considered when measuring the new template usage). 7 and 28 day review timeliness has continued to decline and this has been raised as a performance issue in DLM where localised staffing issues have been the main factor. The Use of the Supervisor Review template within Response has also seen a marked increase from 34% to 52% of live crimes now having the template linked. There has been a slight decrease in 7 and 28 day review timeliness although this is concurrent with the current increase in summer demand. Investigative Standards continues to be a high priority improvement focus within CID. Current supervisor 7 and 28 day review compliance rates are 98.1% and 64.3% respectively. Recent qualitative assurance work has highlighted strong performance. This work comprised SLT reviews of 174 CID-owned occurrences. Monitoring continues in Operational Support SLT and wider DLT. 7 day reviews continue to be compliant; 28 day reviews have fallen but are currently trending towards compliance. The review template was introduced as an expected standard in the Operational Support Directorate in May. Since introduction there has been increasing use in the teams that carry investigations (primarily TST) and usage continues to be monitored in SLT. The current focus continues to be embedding the template use and reinforcing use of QLIK by teams to deliver sustained compliance with review dates moving forward. Once behaviours are more embedded, teams will be asked to peer review investigations to support greater levels of assurance.

For **Case File Quality**, the Improvement Plan updates provided the following information. Case File Quality continue to be a focus of the monthly performance DLM within Neighbourhoods and the current compliance rate of 36.8% is a slight increase of 3% over the last 3 months. File quality also remains a priority focus in Response DLM, and DGA compliance within the Directorate is stable at around 50%. File quality performance is robustly monitored in the CID monthly Strategic Performance DLMs, supported and informed by operational and tactical level scrutiny in CID North, CID South and SOCIT performance meetings. This area remains a challenge and scrutiny will continue in this area for the foreseeable future, noting the inextricable link to ongoing work in relation to improving investigative standards. The local SLT continue to lead the CID focus on improving file quality. This now includes regular (scenario based) workshops to assist staff navigate the new AG guidance. The workshops are complemented by the roll out of the Criminal Justice app – both aimed at improving our collective file quality. File quality compliance remains high and above the improvement plan target within the Operational Support Directorate. A review to support embedding the Criminal Justice Transformation is underway to identify where improvements to the new operating model can be identified. The Criminal Justice SLT are currently starting work to benchmark performance against other forces to identify good practice and learning, to identify improvements for team working practice.

For **Response Timeliness**, the Improvement Plan noted no significant recent changes with improvement activity continuing noting no detrimental impact of summer demand managed via Operation HIBISCUS (full debrief due at October Constabulary Management Board). The improvement activity that has been underway includes key messaging in Command and Control ahead of the summer demand period stressing the need for immediate timeliness to be a performance priority. Additionally two Discovery Projects were commissioned (First Point of Contact and Non-Core Demand). These have reported back and have now been fully commissioned as formal Change Projects as part of Programme #1 delivery and the Constabulary Single Portfolio of work / Strategic Five Year Plan. The work is critically assessing initial demand into force and identifying what is considered 'non-crime' and how first point of contact is made. Both projects will aim to suggest improvements which could have a positive impact on the amount of initial demand into Force and therefore having a positive impact on this performance priority.

Rationale

For **Victim Contact**, the Improvement Plan updates provided the following information. Victim contact at both 5 and 28 days remains a focus of the monthly performance DLM within Neighbourhoods and figures have remained stable across the Directorate with any outliers highlighted for discussion. Local staffing issues have been linked to ant challenges in this area. Victim contact performance in Response continues to remain stable and as of 18th July had a 94% compliance rate for 5 day victim contact and 81.2% for 28 day contact. Victim contact performance is a key component of CID's Strategic Performance DLM. Improvement in victim contact is supported through ongoing work to accelerate improvement in relation to supervisor review performance which is a key performance improvement priority for the Directorate. Currently, 5 and 28 day compliance rates are 96.9% and 68.9%. Levels of 5 day victim contact remain above the target of 80% in Ops Support; 28 day contact is currently consistently below the target. This was discussed at July SLT and the TST Chief Inspector is exploring the reasons for this with the teams. Nb. a data reporting issues has been identified for the Football Unit whereby performance for this team cannot be monitored. This is currently being investigated by the QLIK Team. Victim Packs are now in the final design and printing phase. The information packs will be made available online and ensure that victims of crime are provided with relevant information, guidance and support when they report a crime.

For **RASSO**, the Improvement Plan updates provided the following information. PND user licenses secured for all 8 x BLUESTONE Teams and one SPOC on each team now trained, enabling BLUESTONE focused PND checks. Disruption Champions and Disruption Panels are being proposed by Pillar 2. The Victim Engagement Survey is now being actively promoted by the Constabulary on our social media sites. This has seen a marked increase in the number of responses and, as of June we were second, behind the MPS. For RISDP, the second course has been held – BLUESTONE staff attended. Two more dates were planned for July and August. A Wellbeing Working Group was held. The focus has been on reviewing VIVA Insight to implement and promote for CID staff. For Suspect Interviews – Pillar 4 to is to upskill Detective Sergeants as Tier 5 Interview advisors. Seven BLUESTONE staff have been identified as suitable to undertake the Tier 3 interview course which is being held in August, September and February. Institutional Racism - Pillar 4 will be reviewing against Race Action Plan and HBA SV SWAY document is being designed. The OEL (an additional NICHE data capture form) is now live and promoted to BLUESTONE staff on 26/06/23. This form will capture a wide range of additional detail around the incident along with protected characteristics. We are also continuing to develop our reporting ability to 1) monitor the above in terms of compliance/completion and 2) to extract the new insights. Finally, the Home Secretary visited the Constabulary as part of the National Operating Model launch on 10/07/23.

For **Crime Data Integrity**, the Improvement Plan updates provided the following information. Data quality issues have increased with the introduction of SDE data quality being recorded in all occurrences, even closed ones. This is a Forcewide issue and it has been confirmed that Operation HOLMES training days are addressing this by requesting officers to complete the data, even in closed occurrences. CID SLT continues to sustain scrutiny in this area which is a permanent component of the Strategic Performance DLM. The Directorate currently has 10,754 outstanding data quality issues with 2,528 new issues created in the last three months. CID will continue to drive completion of crime recording training to ensure staff are upskilled in this area. The volume of higher risk crime outcomes waiting to be validated by the Outcome Review Team is reducing, standing at 807 as of 18/07/23, but this has been partially achieved through the use of overtime. The Team have now returned to established staffing levels following a period of long term sickness that should have a positive impact on the number going forwards.

We retain a focus on priority areas of the Beating Crime Plan through the quarterly **Specified Information Order** presented at the July Constabulary Management Board.

For the priority area, "Reduce Murder and Other Homicide" we are now ranked 8th out of 8 in our MSG and the trend is stable.

For the priority area "Reduce Serious Violence" we are still ranked 3rd in our MSG and the trend is stable.

For the priority area "Tackle Drugs Supply and County Lines" we are still ranked last in our MSG and the trend is now decreasing (for disruptions) and reducing for number of offences.

For the priority area "Reduce Neighbourhood Crime" we are ranked 2nd for record theft, 3rd for recorded residential burglary, 5th for recorded vehicle crime, and 6th for record personal robbery with all trends stable.

For the priority area "Tackling Cyber Crime" there is no MSG benchmark data - local measures are stable (e.g. Action Fraud offences).

For the priority area "Improve Victim Satisfaction with a focus on DA" there is no MSG benchmark data and a moderate trend reduction for overall, hate, violent and burglary victim satisfaction.

For the priority area "Better Criminal Justice Outcomes for Rape Cases" we are still ranked 3rd for RASSO charge rates (stable trend)

noting a large increase in the volume of RASSO referrals to the CPS and charge volumes for RASSO offences.

For each area there is a range of planned improvement activity that underpins service delivery.

The development of the **Strategic Five-Year Plan** has continued. The delivery of the Strategic Five-Year Plan will be via the mechanism of a Single Constabulary Portfolio with 8 x constituent Programmes of Work. This new way of working will go-live iteratively from September with Programme 1 (Right Person, Right Service Right Time) and Programme 6 (Cost Consciousness) the first to be established. This will be complemented by the introduction of the new Performance Management Framework which closely aligns our local performance and assurance activity to PEEL Inspection Questions (lenses) detailing accountability, responsibility and how work will be managed via existing governance mechanisms. Specific elements of the governance framework that will help drive out improvements are the Investigation Standards Forum and the new Operational Improvement Committee (yet to be established). Additionally we will see the impact of the training products for First Line Supervisors with guidance on performance management (implemented from the autumn). We understand that our revised Uplift plans (pause or change in order to meet revenue savings requirements) will delay additional capacity for some parts of the business and this could impact productivity and therefore key performance outcomes. However, the wider review and performance scrutiny focussing on HMICFRS PEEL lenses should counter-balance this.

We recognise the annual challenge of **summer demand** on our service delivery and the risk this brings. Operation HIBISCUS 2023 (ensuring the constabulary effectively manages the increase in demand for our service over the summer) will run from 07/06/23 to the end of September, beginning with two 'reset days' on 05/06/23 and 06/06/23. A further reset will take place on 25/09/23, if required, with regular hybrid resets taking place monthly throughout the operation. The latest Operation HIBISCUS update reported at July CMB stated the following "Operation HIBISCUS has started well, despite the increase in demand there has been minimal to no impact in SLA performance and a collaborative approach could be the reason burglary attendance is increasing. IAU are reviewing and retaining a significant amount of incidents with the support of restricted officers. Whilst the service to the public is currently on track to be upheld, cancelled training days, the implementation of a new resourcing system during the peak period and increase in crime complexity for teams who are not equipped to deal with this type of crime, could lead to a decrease in staff welfare as the summer demand period heightens.". Three emerging risks have been flagged (1) Implementation of new system GRS and the Resources Team low capacity (2) Crime Complexity increasing for NPT and Patrol (3) Cancelled Training Days. A formal debrief of Operation HIBISCUS is scheduled for October Constabulary Management Board on 26/10/23.

The Constabulary received its HMICFRS Police Effectiveness, Efficiency and Legitimacy Inspection (**PEEL**) **assessment** in early 2023 with the following grades awarded.

Providing a service to victims of crime - UNGRADED  
Engaging with and treating the public with fairness and respect - OUTSTANDING  
Preventing crime and anti-social behaviour - ADEQUATE  
Responding to the public - REQUIRES IMPROVEMENT  
Investigating crime - REQUIRES IMPROVEMENT  
Protecting vulnerable people - ADEQUATE  
Managing offenders and suspects - REQUIRES IMPROVEMENT  
Disrupting serious organised crime - UNGRADED  
Building, supporting and protecting the workforce - GOOD  
Strategic planning, organisational management, and value for money - GOOD

The Constabulary has received recommendations for implementation.

Based on the updated assessment of service delivery and key performance metrics / inspections / reporting mechanisms, the Q3 assessment is that there is no significant change to the mitigated value of this risk score which will remain as Impact 4 x Likelihood 3 = Mitigated Risk Value =12.

**Earlier assessments**

Mitigated risk score Q4 2021/22
Mitigated risk score Q1 2022/23
Mitigated risk score Q2 2022/23
Mitigated risk score Q3 2022/23

12
12
12
12

**Corporate Risk - audit trail of risk management**

**Date of update**

15/08/2023

**PMO notes**

Corporate Risk Q3 Review with DCC WATSON on 11/08/23. New mitigating activities captured on VERTO record. No change to overall mitigated risk score.

Archive / audit trail of Mitigating Activity as captured for Q2 Corporate Risk update.

The Constabulary has developed its **Performance Control Strategy**, reported through the Integrated Performance and Quality Report (IPQR) which informs the Management Board (CMB) monthly of our performance. Our Performance Control Strategy has set the force level performance priorities for local focus and delivery, these six areas are:

- Crime Data Integrity
- Rape and Serious Sexual Offences
- Investigative Standards
- Response Timeliness
- Victim Contact and Follow up
- Case File Quality

Performance against each of the Performance Control Strategy areas was provided as part of the IPQR update at the May Constabulary Management Board. For Crime Data Integrity "moderate improvement" was reported. For Rape & Serious Sexual Offences, "strong improvement" was reported. For the remaining areas of Case File Quality, Investigative Standards, Response Timeliness and Victim Contact & Follow up, "stable performance" was reported. For each area, the Constabulary has developed comprehensive Improvement Plans which are again subject to scrutiny at the Constabulary Management Board.

For Investigative Standards, the second round of supervisor review assurance is in progress in CID (approximately 300 crimes) with a final report with findings will be produced in June. Current compliance rates in CID are 97.8% for 7 day reviews and 65.6% for 28 day reviews. Monitoring and scrutiny of use of the supervisor review template in Response continues, with low usage teams held to account. As of 15th May, 7% of Response crimes are overdue a 7 day review and 18% are overdue a 28 day review. Dip sampling of supervisor reviews has begun in Neighbourhood & Partnerships Directorate with 10 to be reviewed each month. The use of the supervisor review template continues to improve, with Neighbourhood currently holding 24.9% of live crime with the new template compared to the force average of 15.40%. We have noted that 7 and 28 day review timeliness has continued to decline since March in Neighbourhoods and has been raised as a performance issue at DLM. The monitoring of 7 and 28 day review compliance rates continues in Operational Support where no obvious cause was found for a recent decline in 28 day review timeliness, however the supervisor review template will be adopted going forwards which is anticipated to lead to improved compliance rates.

For Case File Quality, activity includes the continued drive of Operation HOLMES as a cross-force collaboration to identify tactical improvements to investigative standards, a continued focus on the benefits of the Criminal Justice Transformation Review now that the

15/08/2023

project has closed, the focus of case file quality as a core KPI for some Directorates and delivery of local CPD to help deliver tangible further improvements. File Quality Compliance for the Neighbourhood Directorate has increased 24.8% points over the last 6 months.

For Response Timeliness, key messaging has taken place in Command and Control ahead of the summer demand period stressing the need for immediate timeliness to be a performance priority. Additionally two Discovery Projects have been commissioned (First Point of Contact and Non-Core Demand) which are anticipated to have a positive impact on response timeliness. The work is critically assessing initial demand into force and identifying what is considered 'non-crime' and how first point of contact is made. Both projects will aim to suggest improvements which could have a positive impact on the amount of initial demand into force and therefore having a positive impact on this performance priority.

For Victim Contact, SLT scrutiny continues through regular review at CID Performance DLM. Improvement in victim contact will be supported through ongoing work to accelerate improvement in relation to supervisor review performance which is a key performance improvement priority for the Directorate. Current compliance rates in CID are 97.7% for 5 day contact and 81.5% for 28 day contact. Victim contact compliance rates continue to be monitored in both Response and Neighbourhood DLMS. The rate remains stable in Response at 94% for 5 day contact and 81.3% for 28 day contact. In Neighbourhood, any outliers are highlighted for discussion, with local staffing issues usually contributing to a dip in compliance rates. Compliance levels in Operational Support remain above the target 80% for both 5 and 28 day contact. This continues to be monitored at Operations SLT and wider DLM.

For RASSO, a significant range of improvement activity is underway including the completion and circulation of the Disrupting Offenders Toolkit, development of a Terms of Reference for ISVA co-location, a focus to increase the level of victim satisfaction survey responses, preparations for the SOZE trial scheduled to start in September, feedback on BLUESTONE experience as a pathfinder Force (to be used as a Case Study in the National Operating Model) and the first delivery of RISDP.

For Crime Data Integrity, CID SLT continues to sustain scrutiny in this area which is a permanent component of the monthly performance review meetings. The Directorate currently has 9358 outstanding data quality issues, with 2559 new issues created in the last three months. CID will continue to drive completion of crime recording training to ensure staff are upskilled. Data quality issues have also increased significantly in Neighbourhoods, from 78 to 188 in April. Similar increases were seen in Response. Enquiries are ongoing with the QLIK team to understand if any changes have been made to the data collection metrics before further analysis. Completion of the Crime Recording training package remains well above the 80% threshold in both Response and Neighbourhood; at 90% for Response and 92.4% for Neighbourhood, with REMEDY now included in this figure. There is no significant update from the Operational Support Directorate where the improvement plan objective has been achieved.

We retain a focus on priority areas of the Beating Crime Plan through the quarterly **Specified Information Order** presented at the April Constabulary Management Board.

For the priority area, "Reduce Murder and Other Homicide" we are ranked 6th out of 8 in our MSG and the trend is stable.

For the priority area "Reduce Serious Violence" we are ranked 3rd in our MSG and the trend is stable.

For the priority area "Tackle Drugs Supply and County Lines" we are ranked last in our MSG and the trend is increasing (for disruptions) and reducing for number of offences.

For the priority area "Reduce Neighbourhood Crime" we are ranked 3rd for record theft, 4th for recorded residential burglary, 5th for recorded vehicle crime, and 6th for record personal robbery with all trends stable.

For the priority area "Tackling Cyber Crime" there is no MSG benchmark data - local measures are stable (e.g. Action Fraud offences).

For the priority area "Improve Victim Satisfaction with a focus on DA" there is no MSG benchmark data and a moderate trend reduction for overall, hate, violent and burglary victim satisfaction.

For the priority area "Better Criminal Justice Outcomes for Rape Cases" we are ranked 3rd for RASSO charge rates (stable trend) noting a large increase in the volume of RASSO referral to the CPS and charge volumes for RASSO offences.

For each area there is a range of planned improvement activity that underpins service delivery.

The development of the **Strategic Five-Year Plan** to consolidate our single portfolio structured around 8 Programmes of work should

deliver tangible benefits in relation to capacity planning ensuring we can prioritise competing demands correctly and not over commit to the detriment of operational delivery. We are also reviewing the framework and governance arrangements for performance accountability. This activity, led by ACC WHITE, will look to simplify our reporting landscape by integrating a number of existing reporting frameworks and their management complementing the existing governance arrangements. Linked to this activity is the commissioning of Discovery Projects which act as pilots / pathfinders supported by Business Analysis to understand the potential for future Corporate Change Projects. The impact of non-crime demand on organisational capacity and capability challenges has been referenced for some time with the Discovery Projects used to quantify and offer potential solutions for delivery. Initial findings will be presented at the Design Forum in June.

We recognise the annual challenge of **summer demand** on our service delivery and the risk this brings. Operation HIBISCUS 2023 (ensuring the constabulary effectively manages the increase in demand for our service over the summer) will run from 07/06/23 to the end of September, beginning with two 'reset days' on 05/06/23 and 06/06/23. A further reset will take place on 25/09/23, if required, with regular hybrid resets taking place monthly throughout the operation. As with the 'resets' that took place last autumn, these will be true whole team efforts, drawing in every single available resource for a single day to focus on servicing our demand to prevent backlogs and delays growing. Operation HIBISCUS will help us managed an expected 20% to 30% increase in demand and the consolidated support from all parts of the business will see every Directorate from working alongside Response (Neighbourhood, REMEDY, Learning), assisting Command & Control (Intelligence, Staff Office, Ops Planning). The approach is evidenced based so we know our expected demand the numbers of staff required to deal.

The Constabulary received its HMICFRS Police Effectiveness, Efficiency and Legitimacy Inspection (**PEEL**) **assessment** in early 2023 with the following grades awarded.

Providing a service to victims of crime - UNGRADED  
Engaging with and treating the public with fairness and respect - OUTSTANDING  
Preventing crime and anti-social behaviour - ADEQUATE  
Responding to the public - REQUIRES IMPROVEMENT  
Investigating crime - REQUIRES IMPROVEMENT  
Protecting vulnerable people - ADEQUATE  
Managing offenders and suspects - REQUIRES IMPROVEMENT  
Disrupting serious organised crime - UNGRADED  
Building, supporting and protecting the workforce - GOOD  
Strategic planning, organisational management, and value for money - GOOD

The Constabulary has received recommendations for implementation.

This risk was reviewed with DCC WATSON and Nick ADAMS in May 2023.

The corporate risk description has been updated to reflect some important new context around the SPR and achieving the Police Officer uplift targets.

The mitigating activities section was updated to reflect the latest Performance Control Strategy, Specified Information Order and PEEL assessments. The work of the Strategic Five Year Plan (Discovery Projects) and Operation HIBISCUS preparations for summer demand was also referenced.

Our position for Quarter 1 2023/24 remains unchanged, with the unmitigated risk value of **20** and the mitigated (residual risk) value of **12** recorded.

This risk is next due for review in August 2023.

01/06/2023



01/03/2023	<p>The Risk Management Advisory Group reviewed this risk on 28th February 2022.</p> <p>The corporate risk description has been updated to reflect some important new context around the SPR and achieving the Police Officer uplift targets.</p> <p>The performance measurements across the 6 areas of the Control Strategy have been updated, along with the most recent Specified Information Order data around performance against the Beating Crime Plan. We have also reflected the work we are embarking on to reduce non crime demand on our officers, following a visit to Humberside Police in February 2023.</p> <p>Our position for Quarter 4 2022/23 remains unchanged, with the unmitigated risk value of <b>20</b> and the mitigated (residual risk) value of <b>12</b> remaining unchanged from Quarter 3 report in December 2022.</p>
29/11/2022	<p>The Risk Management Advisory Group reviewed this risk on 22nd November 2022.</p> <p>We have reviewed the most recent performance data available, as noted above, and given the relatively short period of time between the last risk review and this review, there is little to no change in the key performance areas. Therefore, the position for Quarter 3 2022/23 remains unchanged, with the unmitigated risk value of <b>20</b> and the mitigated (residual risk) value of <b>12</b> remaining unchanged from Quarter 2.</p> <p>Prior to the next scheduled review in February 2023, there will be 3 months' worth of performance and quality framework reporting, public confidence survey reporting and another round of reporting in the Specified Information Order too, which will inform our continual assessment of this risk.</p>
28/09/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 5th October 2022.</p> <p>Taking into consideration the performance information available, the decision was made to retain the risk score at its current score of <b>12</b>.</p> <p>We also reflected on the growing pains of the organisation and our limitations in terms of resources coming through recruitment, training and gathering the skills and experience in role to contribute towards effective service delivery. The interconnectivity between this risk and Corporate Risk 4 (People), is crucially important to reflect on when assessing this risk.</p>
28/06/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 28th June 2022.</p> <p>After assessing the risk information available through our organisation risk register analysis and considering our latest performance data (June CMB), which shows strong improvement in our force performance priorities of Crime Data Integrity and Rape and Serious Sexual Offences, as well moderate improvement across Victim follow up and Investigative Standards and a stable position in our Case File Quality and Response timeliness, we have taken the decision not change the risk score, with remaining at a mitigated assessment of <b>12</b>.</p> <p>We also noted the fluctuating nature of the last two Public Confidence data sets, which saw a decrease before a recent upturn. These are influenced by national affairs and not always representative of the views of our communities, but none the less provide a baseline measure. The Deputy Chief Constable wishes to review the next set of data before factoring its insight into the decision making on this particular risk.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 14th September 2022.</p>
23/02/2022	<p>This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>20</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>12</b>.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022.</p>

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000737	<b>Current Mitigated Score</b>	15
<b>Corporate Risk Title</b>	<b>Failure to grow, develop and then maintain the workforce and leadership culture, capacity and capability</b>	<b>Mitigated Impact Score</b>	5
<b>Corporate Risk Owner(s)</b>	Louise Hutchison	<b>Mitigated Likelihood Score</b>	3
		<b>Date of Risk Review</b>	01/11/2023
<b>Corporate Risk Description</b>	If we fail to, properly and at sufficient pace, institutionalise inclusion by embedding the right leadership and culture throughout the organisation while effectively managing unprecedented workforce growth, development and change, trust and confidence of the public, our partners and colleagues will drop, performance will falter and our legitimacy to protect and serve will be eroded.		

### Corporate Risk initial assessment - unmitigated risk

<b>Unmitigated Assessment</b>	20
<b>Unmitigated Impact Score</b>	5
<b>Unmitigated Likelihood Score</b>	4
<b>Unmitigated Risk Description</b>	<p>There are 3 headline areas where our risks assessment is focused, these are:</p> <p><b>Unprecedented growth and a changing workforce composition:</b></p> <ul style="list-style-type: none"> <li>The huge logistical exercise of attracting, vetting, conducting medicals, inducting and on-boarding, training, tutoring, posting and supporting the huge numbers of new and inexperienced officers places record demands on our enabling services such as Recruitment and HR, Training and Tutors, Vetting, Occupational Health and others and entails significant collaboration and coordination between operational and enabling services and our HEI partner to deliver the numbers on time and effectively.</li> <li>The level of abstraction of PCDA and DHEP officers while undertaking their studies alongside performing their police officer roles. Recruiting to target officer numbers does not immediately translate to a fully deployable officers on the front line and as a result our response timeliness rates are impacted. A more experienced, deployable workforce will happen, but it will take time to achieve.</li> <li>The growth in officer numbers does not immediately translate to the growth in specialist areas we want to grow. This is true across all specialist areas, and is particularly the case as we build our investigative capacity and capability. We have plans in</li> </ul>

## Rationale

place to realise this specialist growth, but again they will take time to fully realise. As a result our overall positive outcome rate remains too low at 12%, reflecting the continued efforts we need to make in improving investigative standards as we build capability.

- The changes introduced this year through the Attorney General guidelines for disclosure and the Director General guidelines for charging have created additional pressures on front line officers and staff. Un-addressed this has the potential to significantly impact on officer and staff capacity, undermining the benefits of officer Uplift. We are working with other forces to highlight these concerns and seek pragmatic solutions.

### **Attraction and retention in an increasingly challenging marketplace:**

- We are seeing locally and nationally increases against the projected leaver rates for police officers
- A number of roles have become 'harder to fill' as the pay rates in the market have risen quite rapidly and a lot in some areas, particularly where there are shortages for in-demand technical skills
- Many have talked about the impact of the pandemic on 'the great resignation' linked to employees re-evaluating what they want from their work and work/life balance
- Public sector pay has been relatively stagnant for some time with it be argued that police officers especially have fallen behind compared to cost of living increases and pay in other roles that are less complex, risky and demanding
- The attractiveness of policing as an 'employer' has taken a hit alongside wider trust and confidence following the widely publicised incidents of serious misconduct and concerns about sub-cultures in policing. This has a suppressive effect on our ability to recruit, especially from under-represented communities in whom there is already a trust deficit, and it also potentially dents morale and the ability to retain.

### **Institutionalising inclusion, investing in leadership and culture:**

- Serious questions have arisen about policing culture and leadership against the backdrop of declining public confidence in wake of a series of misconduct cases nationally and stubborn inequalities in the police workforce and service delivery
- Increase in volume and seriousness misconduct referrals/reporting and misconduct cases locally
- Stubborn disparities in workforce experience and service delivery adversely affecting under-represented communities especially and adding to a trust and confidence deficit; understandable concerns about the relative glacial pace of change in some areas/aspects of our work
- Growing levels of consciousness, internal and external activism, on the issues and impacts associated with inequality and discrimination, diversity and inclusion deficits
- Concerns from some that there is too much negative focus on the "<1%" and that this will dent morale of the majority
- A lack of understanding and acceptance in some quarters that there are deep systemic and institutional roots that also need confronting in a systemic way
- High levels of scrutiny and media attention to these issues
- Some reluctance and challenges in engaging all parts of the workforce in learning the knowledge and competencies we expect them to have in order to be able to promote an inclusive culture
- Impacts of wellbeing and procedural justice on behaviour
- Questions about the effectiveness and rigour of our recruitment/selection processes in identifying, predicting and addressing those who do not demonstrate the right values and behaviours joining policing
- Questions about the capacity of our internal professional standards, counter corruption, complaints and grievance management capabilities to meet need and demand
- Questions about the maturity and extent of our ability to use our data effectively to identify patterns or early warning signals to enable targeted and tailored intervention

Mitigated Assessment
Mitigated Impact Score
Mitigated Likelihood Score

15
5
3

The Q3 review of this corporate risk was undertaken on 03/08/23 with new mitigating activities captured.

The mitigations captured below are framed around three themes.

- (1) Unprecedented growth and a changing workforce composition
- (2) Attraction and retention in an increasingly challenging marketplace
- (3) Institutionalising inclusion, investing in leadership and culture

- The Constabulary remains on track to achieve its target for **Uplift** in 2024. The activity has moved from the term Uplift to maintenance. Growth in numbers is steady and subject to regular monitoring. There is recognition that the organisation continues to feel the growing pains associated with the growth. However, as we move out of the high intake of 2020 and graduations, the proportion of student officers within the organisation will lessen which will alleviate the pressure. Several Uplift cohorts are now bringing increased experience into the organisation.
- The implementation of the **Workforce Planning** service offer continues with the introduction of new roles and processes.
- Previously, we had flagged the challenges caused by market pay and the impact on our **vacancy levels**. However, we have seen a reduction in vacancy levels for more challenging areas of the business including Communications where we are now fully resourced. We recognise the continued challenges represented by the recruitment market place. The latest vacancy figures reports a decrease from 8.05% to 6.86% (June 2023 versus June 2022) representing an encouraging direction of travel.
- **Hybrid Working** remains embedded across the organisation. Colleagues in Chief of Staff are preparing an additional pulse survey for Line Managers for September to understand any specific difficulties in terms of day to day management responsibilities. This survey was tasked from the Workforce Resetting Post Implementation Review. In general, there have been no negative performance issues identified associated with hybrid working.
- The **Outreach Team** report that the recent Chief Constable statement on institutional racism has helped improve engagement with communities - particularly support from the Muslim communities - who welcome the announcement.
- The **Vacancy Control Panel** continues to meet regularly challenging permissions to fill vacancies role by role. This approach recognises our continued financial challenges as an organisation and will support the delivery of Programme #6 (Cost Consciousness) as part of the Strategic Five Year Plan.
- The review of the **Job Evaluation** Process is also planned as part of future Strategic Five Year Plan activity on Programme #4 (Building the foundations for an effective and skilled workforce). The regional implication and possibilities are being explored with an initial meeting with Gloucestershire Constabulary in August.
- The review of **Occupational Health** is being managed as an existing corporate change project (including Psychological Support Review). We have developed an Outline Business Case for presentation at the Design Forum on 09/08/23. This will look to strengthen and restructure the current provision including more proactive support to manage the mental health risk. Different options will be presented including a local counselling service based on covering mental health challenges not covered by existing Employee Assured Programme support.
- We have initiated a **Discovery Project** to help understand our **culture** in relation to behaviours present in the organisation looking to capture what current initiatives are in place. This is a collaborative exercise between PSD and People & Organisational Development to understand how our behavioural norms are impacting our people, standards of policing, reputation and public confidence, demand on enabling functions and the subsequent financial impact on the organisation. The

## Rationale

Discovery Project will capture the "as is" behavioural insights and focus on positive and negative behavioural norms. It has been recognised that we have a significant number of staff demonstrating an outstanding commitment to policing demonstrating the core values of Caring, Courageous, Learning and Inclusive. There were 200 nominations for the 11 award categories at the Outstanding Policing Awards in 2023.

- The Discovery Project has a clear TOR to review the reality of now and have a clear "as is" position based on the collation of data and information sources from across the organisation. This will allow the Discovery Project Team to understand what the current data is telling us and to draw insights from this mapping current initiatives and anticipated outcomes. The Project will also look to identify barriers in challenging and reporting inappropriate behaviour and opportunities to address key gaps and concerns identified including preventative activity along with the reduced duplication of culture initiatives.
- Work continued with our **Leadership Programme**. The Front Line Manager Programme pilots start September. A detailed implementation timeline is in place and Project Manager resource aligned as this activity is being managed as part of the corporate change portfolio. The Two Day Acting Ready course will launch on 04/10/23. The Five Day Core Offering will launch on 22/01/24 and the Three Day Catch Up Programme will launch on 20/02/24. For each course, pilots are scheduled.
- Our commitment to the Chief Officer Group **Talk Times** continues. These effective listening posts are an extremely helpful way to understand key issues and concerns across the geography of the organisation. Recent discussion areas (233 viewpoints captured) have reflected Operation HIBISCUS, Uplift and PCDA cohorts, Estates, Culture, Institutional Racism, I.T, issues, Welfare, Fleet and driver training.
- The work of our **Race Matters Programme** continues. Following the statement from Chief Constable Sarah Crew on institutional racism, we have facilitated interviews with key local media partners. We have also published blogs internally and facilitated web chats for the workforce to aid understanding. We are currently gathering insight on the impact of the statement both from the public and from colleagues, to support our next steps. We continue to develop and implement a clear communication and engagement strategy for our Race Matters work. As part of this, a letter has been sent to community leaders and influencers across Avon & Somerset for onward cascade to their networks. The letter invites people to register with us if they would like to be actively involved or informed of the work taking place. A Race Matters web page has been published and serves as an anchor for our ongoing work as well as a place to signpost people who are interested in being involved (they can sign up via the page). A proposal for a community consultation event to talk about stop and search has been drafted inviting people to come and influence the direction of Stop & Search policy moving forward. The first Professional Standards Department Community Insights event was held in Bristol with 14 Black heritage community members attending aimed at demystifying the police complaints process. Learning from the first event has been collated and the next events are being planned, aimed at different communities (e.g. women and young people). A local community confidence survey has been running in Bristol via a local community interest company and the results of this are due to be analysed shortly.
- We continued to encourage and support the work of our **Staff Associations**. The Gender Network is now established. The National LGBT+ conference in July was attended by our Network. REACH have recently held their election processes and have appointed onto their Executive Group. We will consider how to strengthen and support our Staff Associations going forward.
- Activity relating to our **Trauma Informed** approach is central to our Programme 7 (Building Trust & Confidence). We are developing a Concept Report to outline our approach which will be presented at our new Portfolio Steering Board on 13/09/23. We have a Steering Group mechanism in place that will meet every two months.

After the Q3 review, it was decided that the mitigated risk value would remain as 15. Although a large range of activity has been documented, it is noted that for a significant amount, it remains relatively early in its development and implementation. Therefore, it could be one or two years before we can confidently expect to see a reduction in the likelihood score.

The next risk review date has been set as 01/11/23 ahead of the December JAC reporting period.

## Earlier assessments

Mitigated risk score Q4 2021/22	15
Mitigated risk score Q1 2022/23	15
Mitigated risk score Q2 2022/23	15
Mitigated risk score Q3 2022/23	15

### Corporate Risk - audit trail of risk management

Date of update	PMO notes
07/08/2023	<p>Q3 Corporate Risk update - 03/08/23.</p> <p>Risk reviewed with Lou HUTCHISON on 03/08/23. New mitigating activity captured. No change to the overall mitigated risk values.</p> <p>Archiving of previous mitigating activity for PR/737.</p>
<p>Bundle 24 of 50</p>	<p><b><u>Unprecedented growth and a changing workforce composition:</u></b></p> <ul style="list-style-type: none"> <li>• A tightly managed uplift programme with high-levels of collaborative and coordinated action across operations and enabling services which has so far met the targets largely thanks to good governance, forward planning, disciplined delivery controls, and pump-primed capacity increased to key delivery functions; careful tracking and monitoring of the data; lots of local, regional and national reporting and scrutiny</li> <li>• We have achieved our March 2023 Uplift target and have replaced the fortnightly reporting of progress with new monthly scrutiny as we move into the maintenance stage. With the investment in workforce planning we are better placed for the controlled monitoring and management of number of staff on courses, our recruitment levels and the number of expected leavers. We are better prepared to manage potentially difficult capacity issues such as those that might be caused by the pensions remedy situation risk.</li> <li>• Introduction of a wider range of entry routes and mechanisms</li> <li>• Influencing national and local curriculum delivery to balance abstraction against the need to get the investment in learning right for now and the future</li> <li>• Targeted focus on addressing the shortfall in detectives/investigations capability with a multi-faceted strategy</li> <li>• Concerted efforts to minimise growing pains and implementation dip with a strategic approach alongside investments in leadership and culture development</li> <li>• Focused programme of work to release productive capacity and minimise bureaucracy so that more time can be focused on what matters most</li> <li>• Proactively continuing to work on internal engagement, narrative and communication through staff survey to avoid hazard fixation and to build hope, optimising and future focus</li> <li>• Establishment of Workforce Planning Function enabling greater capacity and professionalism with regards to the management of the movement and planning of officers and staff looking to better meet demand for services by having the right people in the right place at the right time at the right cost, support the TAS (Talent Acquisition) team with recruitment activities, identify to Learning the essential skills gaps that need to be filled across the organisation and support strategic decision making particularly around resource planning. The Workforce Planning Function is almost fully established with only Senior Forecasting and Data roles left to recruit. This new investment will take a little time to embed but we should be in a better position by the autumn.</li> <li>• Increased focus on retention including 'career aspiration surveys' and action associated.</li> </ul>

### **Attraction and retention in an increasingly challenging marketplace**

- We are focused on a range of actions and activity to better understand what is driving attrition and retention and we have established a multi-pronged retention strategy.
- We are exploring interventions to address market pay challenges including market pay supplements and we are also considering where alternative means of meeting our resourcing requirements needs to be used, for example commercial arrangements with suppliers.
- Through our leadership and culture work and the action on the People Survey we are working to create an environment in which people want to stay and are positive about working with us. The People Survey shows agreement with 'I am happy at work' remaining high at 70% and high levels of people saying that they would recommend working for here to others.
- We have wherever possible introduced through the post pandemic resetting work measures to enable staff to benefit from hybrid/blended working which we know many value as it supports flexibility. A Post Implementation Review of Workforce Resetting (April 2023) clarified the benefits delivered from the introduction of hybrid working.
- We are working on the culture, trust and confidence issues as above and continue to present the many positive aspects of our organisation through our employer brand and through proactive positive communications.
- We continue to invest in a proactive outreach capability to shape and influence sentiment towards us as an employer and to support and encourage people to work for us, especially those from underrepresented communities.
- We're providing leadership to make clear the kind of behaviours and standards we expect and to promote a culture of Institutional Inclusion.
- We've gained a raft of industry awards for our work that set us out as a progressive, modern, and highly regarded employer within our sector and beyond.
- Focused prioritisation and activity for Police Staff recruitment, the Discovery phase conducted through November to January included process mapping, voice of the customer workshops, establishing what our recruitment data is telling us, completion of output document, and Phase One is almost completed - defining roles and responsibilities, data collation needs and baseline of where we are, agree SLAs, refining "to be" future state talent acquisition service options, agree action plan for delivery ready to move to implementation.
- Recognition of increased tension and urgency around the balance of recruitment to vacancies to support service delivery and managing workload, whilst working in an environment cognisant of impending savings challenges. As a result, new Police Staff Recruitment Controls have been put in place to more closely scrutinise the vacancy and recruitment position.
- We are committed to a proactivity to review our Job Evaluation processes. We recognise the need to address the way in which we pay and grade our Police Staff. We are progressing a tender for expert advice regarding how we can proceed. Timescales may be influenced by regional interest noting the potential benefits of a standard job evaluation methodology to create equitable terms and conditions across our collaborative teams. The Job Evaluation work is a key deliverable of one of our new Programmes of Work on the Strategic Five Year Plan.
- We recognise the importance of supporting the long term health of our workforce and therefore have commissioned a review of our Occupational Health Service provision to ensure its fit for the future. An Outline Business Case will be tabled at the Design Forum in August.

### **Institutionalising inclusion, investing in leadership and culture:**

- We are in the process of strengthening independent confidential reporting systems
- We're accelerating a piece of work to enable us to exploit our data to provide early warnings and insight into patterns of behaviour to enable targeted preventative intervention
- We're investing further in our counter corruption capacity and capability
- We are going to make some considered investments to expand our internal communications and engagement capacity and

07/08/2023

capability so that we can influence and inform cultural change, including courageous conversations (which have started in earnest) and move the passive and disengaged

- We have used recognised industry standards and independent assessment to drive systemic improvement (e.g. NES, Workforce Equality Index Top 100 Employer, Disability Confident Leader, ENEI, CIPD People Awards); we continue to strive for further improvement achieve these to enhance our inclusive practices. We've drawn learning from our Recruit for Difference Pilot and we're tackling alignment through our selection processes.
- We have recently reaccredited for the National Equality Standard (NES). A new report has been receive with insight recommendations for implementation. This was received in May and will be briefed into senior leaders in June for action.
- We have built a range of mechanisms for listening to employee engagement and measuring inclusion sentiment including our award winning People Survey and our response to it.
- We have invested in multi-layered training for leaders and practitioners to build confidence and capability, influence and inform including Inclusive Policing with Confidence in Partnership with local providers and Cultural Intelligence Training. We're investing in equipping leaders with tools, language and guidance to role model and lead for inclusion effectively.
- We engage in a number of positive action and developmental schemes designed to support progression of those from underrepresented backgrounds including Stepping Up.
- We are working systematically on the findings of the Desmond Brown report into disparities and have a rigorous governance and project discipline to oversee this. We have senior governance oversight of diversity and inclusion activity and results through both the Confidence and Legitimacy Committee and the People Committee.
- 60.4% agreement with Learning and Development theme in People Survey, representing a 5.9% increase on 2020 at a time when other themes saw reductions on last year; 11.2% increase agreement in 'there are opportunities for me to develop my career' since 2019;
- Leadership Academy offers clear pathways or leadership journeys to support development and progress - to support this work, we have commissioned an external consultancy (Leapwise) A Target Leadership Model has been developed mapping to the College of Policing first line leaders curriculum and our own force values. A business case is being developed with a view to delivery from Sept 2023. A Business Case has been signed off working towards the launch of a new first Line Manager Leadership Programme from the autumn 2023.
- Segmented development options from first line to senior leaders aligned to a national framework; substantial investment in leadership development for the whole workforce.
- Our outreach work is building relationships and breaking down barriers to joining policing but also helping to influence and develop our culture through constructive challenge and engagement.
- We have an active programme of engagement and strong communication and consultation channels with our staff associations and staff networks.
- We have just launched a new Gender Equality staff network which will include a lead for culture and standards and provide an advocacy route for concerns in relation to gender equality
- DA matters training has been conducted across the force over nearly 2500 operational staff and officers.
- Avon & Somerset Police are following guidance being issued from the NPCC and College of Policing in relation to steps that need to be taken to further improve our standards, this has included collation of a data submission for National Police Database checks for all service police staff and officers which has been completed. We await the results back and will take action accordingly and as part of that we are reviewing our guidance on management of officers and staff where vetting is withdrawn.
- The force are uplifting resources and support into our Professional Standards Department to further support investigation of internal complaints.
- We are exploring a concept called Speak Up Guardians / Champions based on an approach deployed by the NHS. This will involve a trained cohort of people feeling confident of speaking up and challenging behaviour, culture and practice.
- We are moving towards becoming a Trauma Informed organisation. A Trauma Informed Steering Group is in place managing five workstreams including Estates, Policy, Practice, Training and Wellbeing.



01/06/2023	<p>This risk was reviewed with Lou HUTCHISON on 01/06/23.</p> <p>Mitigating activities were updated. Updates covered the move to Uplift Maintenance, the continued progress with Workforce Planning investment, the Job Evaluation tender for expert advice, the Occupational Health Review, the move towards being a Trauma Informed organisation, the reaccreditation of the National Equality Standard and the approval of the Business Case for the new Leadership Academy Line Management Leadership Programme.</p> <p>The mitigated risk score was received and will remain as Impact 5 x Likelihood 3 = 15.</p> <p>This risk is next due for review in August 2023.</p>
09/03/2023	<p>The Risk Management Advisory Group discussed this risk on 28th February 2023.</p> <p>The principal owner is the Chief Officer for People and OD, a vacant position following the previous incumbents' departure. Due to conflicting priorities and an administrative error, the acting Chief Officer could not attend the meeting.</p> <p>We have updated some of the tactical mitigation activity underway, reflecting this with additional comments in the mitigating activity section.</p> <p>We have reflected on the content and need to undertake a review and provide significant updates regarding our progress and continued challenges across this risk area. There needs to be more time between this meeting and the due date for submitting this report to undertake this extent of work.</p> <p>Therefore, we intend to thoroughly review the content and presentation of this risk ahead of the Quarter 1 reporting in 2023/24 (July 2023). In the meantime, we have <b>maintained</b> our previous position from Quarter 3 2022/23, with an unmitigated score of <b>20</b> and a mitigated score of <b>15</b>.</p>
01/12/2022	<p>The Risk Management Advisory Group reviewed this risk on 22nd November 2022.</p> <p>The position for Quarter 3 2022/23 remains unchanged, with the unmitigated risk value of <b>20</b> and the mitigated (residual risk) value of <b>15</b> remaining unchanged from Quarter 2. There are several reasons behind the decision retain the risk value such as the current high level of vacancies that the organisations are carrying, challenges in the recruitment market and our police officer Uplift programme have not fully completed yet (due by March 2023).</p> <p>The Constabulary Management Board continues to govern progress on the 6 'steppingstone' work strands (Leadership, Growing Pains, Culture, Rebuilding the CID capability, Uplift and Creating Capacity, which will support the delivery of our ambitions over the next 18 months.</p> <p>Finally, to address an action (minute 22) set in October 2022 Joint Audit Committee, our Professional Standards Department have provided some narrative on the data behind increased police misconduct cases. (This information has also been reported to the OPCC's Governance and Scrutiny Board). Overall, the total volume of complaints remains high with September, October and November 2022 are higher than average. The last period resulting in high numbers of complaints was after the conviction of Wayne Couzens on the 30th Sept 21, likely to be linked to trust and confidence in the police service being undermined. PSD have provided complaint data to our Performance and Insight team to ascertain if there are any themes to inform organisational learning and to help reduce referrals.</p>

05/10/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 5th October 2022.</p> <p>The Director of People was unfortunately unable to attend the meeting, therefore the remaining members reflected on the current mitigation activity and concluded that the risk score will remain unchanged at <b>15</b>.</p>
12/07/2022	<p>This risk was reviewed by the Chief Officer for People and Organisational Development on 8th July 2022.</p> <p>There is no change to the mitigated risk value, which remains as <b>15</b>. While there are variations in the nature of how the risk is playing out, it is a broad and multifaceted risk and overall given the mitigations in place, I do not think on balance that it is any more likely to materialize at the at the present time than since it was last reported.</p>
16/02/2022	<p>This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>20</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>15</b>.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022.</p>

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000738	<b>Current Mitigated Score</b>	12
<b>Corporate Risk Title</b>	<b>Failure to maintain, invest in or optimise our infrastructure and assets</b>	<b>Mitigated Impact Score</b>	3
<b>Corporate Risk Owner(s)</b>	Nick Adams	<b>Mitigated Likelihood Score</b>	4
		<b>Date of Risk Review</b>	30/11/2023

<b>Corporate Risk Description</b>	<p>Our infrastructure should enable the delivery of our vision to deliver outstanding policing for everyone. It is therefore important that our infrastructure, assets, and services achieve this and are developed sustainably, in a way that is mindful of our financial, political, social and environmental landscape and, in a way that offers value for money. For clarity, this risk focuses on infrastructure, which includes our physical assets (buildings, fleet, equipment, uniform) and facilities, as well as the specialist services that provide and maintain those assets. It also encompasses a range of professional services that support our operational directorates. Our IT infrastructure is also a critical enabler of our success, but it is outside the scope of this risk as it is reflected within Corporate Risk - Digital and Data.</p>
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### Corporate Risk initial assessment - unmitigated risk

<b>Unmitigated Assessment</b>	16
<b>Unmitigated Impact Score</b>	4
<b>Unmitigated Likelihood Score</b>	4

**Rationale**

Officers, staff and volunteers need to be able to count on having the working environment, tools, equipment and information available to them do their jobs effectively. Geopolitical issues are affecting the global marketplace and supply chains, causing challenges for us in securing the infrastructure we need to function as a police service.

**Estate**

Since the pandemic we have moved a significant proportion of our staff (c. 1600) to blended working, with a hybrid of home and office working. This change in our ways of working impacts on our estates usage, providing some opportunities while also requiring us to think about what our people need from their office environment. These considerations continue to inform our estate plans. The cost of our buildings has increased significantly, driven by inflationary pressures on the costs of utilities and in the cost of business rates following the changes which were implemented with effect from April 2023. We have some specific challenges within our estate which are informing our forward plans. In particular we are progressing decisions in relation to our estate in South Somerset (Yeovil and Chard) after a period of indecision. We know this is important both in terms of providing reassurance to our communities about our presence in this area, as well as to provide positive progression for the morale of our officers and staff based here. Our estate will also need to support the infrastructure required to charge electric vehicles as we gradually transition to these over the coming years.

**Vehicles**

The market for vehicles is undergoing substantial change, coinciding with global and more local supply chain challenges. Prior to the conflict in Ukraine, we were already seeing some challenges presented from the shortage of semi-conductors, and the early stages of manufacturers plans to end production of internal combustion engine (ICE) powered vehicles. The conflict in Ukraine has only added to these challenges, which means lead time for new vehicles is many months and for parts is also proving to be a challenge. We have seen improvement in manufacturing of vehicles but reliable delivery still remains a challenge. As a result of incidents concerning BMW police vehicles with certain engines, we removed a number of these vehicles from operational use in Spring 2022. This has presented acute challenges in relation to specialist operations roles. These challenges remain but should become less acute as replacement vehicles are brought into the fleet.

**Uniform and equipment**

There continue to be supply chain challenges requiring ongoing management in relation to the provision of uniform and equipment. This does not necessarily present consistently, with some items being more readily available and others less so from time to time.

**Corporate Risk latest assessment - mitigated risk**

<b>Mitigated Assessment</b>	12
<b>Mitigated Impact Score</b>	3
<b>Mitigated Likelihood Score</b>	4

**Sustainability**

The Constabulary approved its third Sustainability Plan at the end of 2021, establishing new, stretching targets for the organisation by 2026/7, although contrary to some other public sector organisations, the plan did not go so far as to commit to a net zero target. The Constabulary's Sustainability Plan focusses on four over-arching themes: 1. Climate Action 2. Responsible Consumption 3. Sustainable Communities 4. Internal and external partnerships to deliver change. Governance and accountability continue to be notable areas for development, and this was reiterated in the recommendations from an internal audit in 2021/22. For context, an overt commitment to

**Rationale**

Sustainability is included in the Police and Crime Plan, while many continue to speculate that the inclusion of Sustainability in the PEEL inspection framework is only a matter of time. This is the second annual Constabulary Sustainability Report on our progress against the plan, part of a new cadence of annual and half-yearly reporting to Constabulary Management Board. The long-term intention is that this will be further supported by additional reporting to Estates Asset Management Board and Finance and Assets Committee although this remains constrained by current capacity.

The Annual Constabulary Sustainability Report was presented at the May Constabulary Management Board. Understanding and addressing the negative environmental impacts of our operations and working towards positive, long-lasting outcomes for the planet, our people, and the communities we serve is critical. The Constabulary should recognise its potential to affect the local and global environment, society and the wider economy, never more so, than because climate change will lead to local and global trends which will directly impact the services we provide, from migration to extreme weather events like heat waves and flooding. Research suggests a strong link between organisations that place high importance on their corporate reputation and environmental and social impact, including its part in their employer brand, and the organisation's ability to be resilient in a crisis. Two main recommendations were presented and approved.

- (1) Recognise that achieving ambitious targets will need continued commitment in terms resources, particularly around data analysis.
- (2) Recognise that better understanding sustainability data and cause/effect will require further data analysis, and appropriate resourcing.

**Estates**

A Strategic Estates Plan is being presented at the August Constabulary Management Board. This will map out or intention for estates activity across different tiers and locations for the next few years (i.e. the Programme Plan for Programme 8). The Plan will also document principles for estates projects in the Constabulary. At a tactical level, we continue to progress a number of builds as part of our existing corporate change portfolio. The option for the Yeovil & South Somerset Project was agreed through March/April governance and the Project Team are now engaging Design and Cost Consultants ahead of a procurement exercise that will deliver a fully costed Final Business Case for investment approval towards the end of 2023. A design decision was made at the April Constabulary Management Board in relation to Bristol Broadbury Road. Here, a Final Business Case for investment decision is expected in September. Work continues to progress with Bristol Trinity Road (section 106 signed) with land purchase completion expected in September. We have agreed an acquisition in Minehead and are currently agreeing Heads of Terms. This activity will help realise a large capital receipt. We have completed the purchase of Bath Plymouth House. Finally, in Frome, we are focussing on the development of a co-located Enquiry Office (with Neighbourhood) and the closure of the current library Enquiry Office function.

At a more strategic level, we continue to review our estate more widely, particularly focusing on our non-visible estate, with a view to identifying opportunities to consolidate this where possible thereby unlocking savings which will help to offset the increased costs of running our buildings. We work with an outsourced partner in the service and maintenance of our estate, including the discharge of many of our statutory obligations. We also have a facilities management structure in place which oversees the ongoing upkeep and maintenance of our estate.

We are progressing the roll out of Electric Vehicle charging infrastructure and have commissioned joint work across all South West Forces to inform our forward plans for this, which will include consideration of grid capacity and plans to develop this mapped to all our police stations thereby helping to inform the type of charging capability we will be able to plan for.

**Fleet**

We are actively managing the procurement of police vehicles, and have taken the decision in some circumstances to step outside of national police frameworks and utilise other procurement methods to secure available fleet. We have also brought forward our ordering of future fleet replacement plans so as to ensure we are doing all we can to mitigate the long-lead times for delivery. Through our regional procurement function, we have now secured a parts contract with two separate suppliers, one covering more of the north of our area and one covering more of the south of the area. Having access to these two contracts provides a means of mitigating the supply

challenges in relation to parts. Summer 2023 has seen deliveries of large volumes of vehicles that have been on order for up to two years. We have raised 85% of our orders for this financial year, the final orders were agreed with the Neighbourhood Directorate w/c 14/08/23. Our procurement approach remains aligned to the intent of reducing risk with us purchasing from those manufacturers who have capacity if both manufacturing and dealerships. We are working with Regional Fleet through our CFO to develop a regional plan to leverage volume purchasing opportunities in core roles (i.e. response cars / neighbourhood vehicles).

**Uniform and equipment**

Through our bi-monthly South West Procurement Boards we are receiving regular updates from Blue Light Commercial on their insight into supply chain issues and challenges, informing our plans and work to mitigate where we can. This includes active management on a daily basis, particularly within our uniform/stores function, and where appropriate regional co-ordination to support one another in ensuring all South West forces are managing this risk collectively. The challenge around supply chains for assets and infrastructure remains a very real daily risk, however we have been living and coping with this risk for some time now. The day-to-day actions we are taking to actively manage this risk, combined with the insight we have through working with partners regionally and with Blue Light commercial means that we are as well sighted as we can be on what future volatility and uncertainty we're facing into.

Based on the updated mitigations, the Q2 assessment of this risk remains unchanged as Impact 3 x Likelihood 4 = 12.

**Earlier assessments**

Mitigated risk score Q4 2021/22

12

Mitigated risk score Q1 2022/23

12

Mitigated risk score Q2 2022/23

12

Mitigated risk score Q3 2022/23

12

**Corporate Risk - audit trail of risk management**

**Date of update**

22/08/2023

01/06/2023

**PMO notes**

Q2 review of this risk was completed with Nick ADAMS on 21/08/23. Updated narrative for unmitigated risk and risk mitigations captured. The Q2 assessment was for no change to the mitigated risk value. Q3 assessment of this risk is due November.

This risk was reviewed by Nick ADAMS in May 2023.

Brief updates for the mitigated assessment rationale were captured in relation to the Annual Sustainability Report and the updated position for key Estate Corporate Change Projects.

The overall mitigated score of the risk remains **unchanged** at an overall score of **12** (Likelihood 4 x Impact 3).

This risk is next due for review in August 2023.

06/03/2023	<p>This risk was reviewed by the Chief Finance Officer on 2nd March 2023.</p> <p>The risk description has been updated to reflect the breadth and influencing factors in assessing the risk. We have made significant updates to the unmitigated risk assessment rationale, increasing the unmitigated score of the risk to <b>16</b> (Likelihood 4 x Impact 4) and adding more detail around the challenges across our Estates, Vehicles, and Uniform and equipment.</p> <p>The mitigated assessment rationale has also been updated. However, the overall mitigated score of the risk remains <b>unchanged</b> at an overall score of <b>12</b> (Likelihood 4 x Impact 3).</p>
29/11/2022	<p>The Risk Management Advisory Group reviewed this risk on 22nd November 2022.</p> <p>The mitigated score of this risk was increased to its current level in October 2022, linked to the geopolitical and financial challenges which underpinned the decision to increase Corporate Risk 2 at the same time. Given the short period of time between that decision in October and this review, there has not been any significant change in the positioning of this risk. Therefore, the position for Quarter 3 2022/23 remains unchanged, with the unmitigated risk value of <b>15</b> and the mitigated (residual risk) value of <b>12</b> remaining unchanged from Quarter 2.</p>
29/09/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 5th October 2022.</p> <p>Reflecting on the continuing geopolitical and economic backdrop, and the current mitigation activity for this risk the decision was made to increase the mitigated risk score from <b>10</b> to <b>12</b>.</p>
28/06/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 28th June 2022.</p> <p>Following the review of our associated organisational risks in this area and considering our strategic position currently, the group made the decision that the risk would remain <b>unchanged</b> at a mitigated level of <b>10</b>. There are several areas where we continue learn and develop our understanding of what is required as an organisation to achieve the goals we have set ourselves in our strategy, will our annual sustainability report in June 2022 providing opportunity for reflection on our currently trajectory to achieving our objectives.</p> <p>The Leapwise governance review, see Corporate Risk 1, has recommended some addition control and assurance needed for Corporate Change activity and these will help support and strengthen our estate and asset management governance in the future.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 14th September 2022.</p>
23/02/2022	<p>This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>15</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>10</b>.</p> <p>Our rationale for the risk being reduced is we recently refreshed court infrastructure strategy, and the sustainability plan within it. We have also strengthened our governance of our delivery by establishing to boards that sit under the Finance and Asset Committee, these being Fleet Asset Management Board and Estate Asset Management Board, which led by senior leaders are overseeing service delivery and change projects.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022.</p>

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000739	<b>Current Mitigated Score</b>	16
<b>Corporate Risk Title</b>	<b>Information Governance practices, data and digital assets are not governed and controlled or used legitimately, ethically, appropriately or effectively for policing purposes</b>	<b>Mitigated Impact Score</b>	4
<b>Corporate Risk Owner(s)</b>	Nick Adams	<b>Mitigated Likelihood Score</b>	4
		<b>Date of Risk Review</b>	30/11/2023

<b>Corporate Risk Description</b>	Data is a critical asset for the constabulary and significant investment has been made to facilitate operational use of data. Effective and innovative use of data will be critical for the force to deliver its vision of outstanding policing for everyone, and show sustained improvement against the four priorities in the Police and Crime Plan 2021-25. In order to fully realise the ambition to be a data-driven organisation, officers and staff need easily accessible, trusted data and analytics with clear purpose to help make evidence-based decisions to drive internal and public-focused outcomes. The recent Data Strategy and Roadmap for change, co-developed with an external partner, outlined the recommended steps for the force to continue on this trajectory of pushing boundaries and innovating with data. However, the Strategy also recognised the increasing demand on Information Governance & Data Ethics, and related functions, to ensure innovation is secure, ethical and compliant.
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### Corporate Risk initial assessment - unmitigated risk

<b>Unmitigated Assessment</b>	20
<b>Unmitigated Impact Score</b>	5
<b>Unmitigated Likelihood Score</b>	4



**Rationale**

There is a complex data architecture with a lack of interoperability between systems and data. We hold data in multiple systems and across personal files and hard drives, which compromise the ability to build a single view of the data to inform making, planning and activity. MOPI and CPIA compliance are a key focus for the constabulary and we recognised that both statutory/legislative compliance and Crime Data Integrity require improvement. Data literacy is improving, however it should remain a focus in order to keep pace with the organisational appetite to be more data driven. There has been strong investment in future technologies such as advanced analytics, robotics and automation. However, the aforementioned foundational issues may pose challenges to the success of innovative techniques. We have developed a Data Strategy Roadmap which includes Information Governance and have carried a further review of our Information Governance and Data Ethics.

**Corporate Risk latest assessment - mitigated risk**

<b>Mitigated Assessment</b>	<b>16</b>
<b>Mitigated Impact Score</b>	4
<b>Mitigated Likelihood Score</b>	4

**Rationale**

The **Data Strategy and Roadmap** was presented and approved at our Strategic Planning Meeting (SPM) in January 2022, having been developed following extensive engagement with key stakeholders and a commercial partner (Agilysis). The aim of the Data Strategy is "to understand and safely unlock the power of data across the Constabulary and our partners to best support outstanding policing, whilst building staff, partner and public trust and confidence in its use". It recognised the need for investment and areas of work to progress as part of Programme #5 within our wider single Constabulary portfolio.

- Modern data platform
- Data entry solution
- Data quality and review retention and deletion solution
- Information governance and data governance demand and capacity review.

While the Data Strategy and Roadmap represent a step in the right direction, we are yet to agree how we will deliver on the direction set in these documents and consequently we cannot at this stage rely on these to reduce the risk. We recognise that plans for implementation of the Data Strategy and Roadmap need to be more visible in order to understand deliverables and timescales. Providing clarity on this work is an important part of our Strategic Five-Year Plan and will directly inform the construct of Programme 5 (Data & Digital) as part of our wider Constabulary portfolio.

We are in the final stages of the implementation of the recommended **Information Governance** structure and capacity that was signed off via a Business Case at October 2022 Constabulary Management Board. Whilst we work towards this implementation we have had support from external consultants including in respect of our DPO and we have leant on the expertise of these consultants to develop our Information Governance framework but recognise that we have further work to do. The new Head of Information Governance started on 07/08/23 and is currently in the process of a one month handover with the consultant DPO. Once this handover is completed the Head of Information Governance will work with the consultant DPO in order to then implement the remaining part of the Information Governance business case around the Information Governance framework and to complete the risk appetite activity. This is currently in the process of being scoped and it is anticipated this work would be delivered by end of Q4. The Constabulary has already begun conversations about risk appetite. The implementation of the new Information Governance framework will allow discussions of risk appetite to extend across other areas and as we do so the Constabulary will look to involve the OPCC in these discussions.

We continue to invest in areas where we can create capacity to enable us to be as efficient as we can be with **technology enabling agile ways of working** and exploiting opportunities to automate processes. We have implemented 38 automated processes, covering areas including procure to pay, crime recording, vetting, victim care, data quality, intel, and the IT Service Desk. This has resulted in over 2.6 million processed cases, freeing staff from mandatory tasks and enabling them to focus on frontline duties. This is estimated to have gained £4M in efficiencies. Where feasible, we will consider the future alignment of digital capabilities across the South West region.

Further to the Q2 of this risk, the unmitigated risk assessment remains unchanged as Impact 4 x Likelihood 4 = 16. We will expect to see a future decrease in the likelihood value assessment as the Information Governance framework further embeds.

**Earlier assessments**

Mitigated risk score Q4 2021/22	16
Mitigated risk score Q1 2022/23	16
Mitigated risk score Q2 2022/23	16
Mitigated risk score Q3 2022/23	16

## Corporate Risk - audit trail of risk management

Date of update	PMO notes
22/08/2023	<p>Q2 review of this Corporate Risk was completed with Nick ADAMS on 21/08/22. Additionally, information was also provided by Ellena TALBOT on 18/08/23. The mitigated risk assessment score remains unchanged for Q2. The Q3 assessment of this risk is due in November.</p>
01/06/2023	<p>This risk was reviewed by Nick ADAMS and Ellena TALBOT in May 2023.</p> <p>The mitigating activities section was updated with the latest progress on the implementation of the Information Governance Business Case. No update on the Data Strategy and Roadmap was received but it was noted that a Core Planning Team Meeting with ITD is scheduled for 14/06/23 to review content for Programme #5 (Data &amp; Digital) as part of the Strategic Five-Year Plan and this in essence should replace any local Roadmap product.</p> <p>We will continue to focus / present this risk using the following three lenses.</p> <ul style="list-style-type: none"> <li>• <b>Information Governance</b> - Focusing on the lawful, ethical and legitimate processing and retention of police data for a policing purpose.</li> <li>• <b>Data</b> - Focusing on the quality of police data, how it is used and what steps we are taking to improve the data literacy of the organisation and workforce to be a data-driven organisation</li> <li>• <b>Digital</b> - Focusing on the delivery of our digital roadmap and risks associated with our investment in future technologies, such as advanced analytics, robotics and automation.</li> </ul> <p>The mitigated value for the risk remains '<b>unchanged</b>', with an unmitigated score of <b>20</b> and a mitigated score of <b>16</b>.</p> <p>This risk is next due for review in August 2023.</p>
08/03/2023	<p>This risk was discussed at the Risk Management Advisory Group on 28th February.</p> <p>The group agreed that this risk requires a refresh and overhaul of its presentation. We recognised that we have stabilised our position regarding the organisation's risk exposure by bringing in external subject matter experts to fill critical vacant posts in short to medium term. This solution has also given us some residual benefits of having new insights and expertise to help us inform and shape information governance processes.</p> <p>We plan to look at this presenting this risk through three lenses:</p> <ul style="list-style-type: none"> <li>• <b>Information Governance</b> - focusing on the lawful, ethical and legitimate processing and retention of police data for a policing purpose.</li> <li>• <b>Data</b> - focusing on the quality of police data, how it is used and what steps we are taking to improve the data literacy of the organisation and workforce to be a data-driven organisation</li> <li>• <b>Digital</b> - focusing on the delivery of our digital roadmap and risks associated with our investment in future technologies, such as advanced analytics, robotics and automation.</li> </ul> <p>Due to the lack of availability of key stakeholders, we have been unable to review and repurpose this risk to report by the end of Quarter 4 2022/23</p> <p>Therefore, we have taken the decision to report the risk as '<b>unchanged</b>', with an unmitigated score of <b>20</b> and a mitigated score of <b>16</b>.</p>

29/11/2022	<p>The Risk Management Advisory Group reviewed this risk on 22nd November 2022. As referred to in the previous update from October 2022, there is a longer-term element to implementing the effective mitigation to this risk. The Constabulary has been carrying vacancies in critical management functions across the Information Governance area for some time and is currently recruiting for these posts.</p> <p>There is very little by way of updates and progress, given the short 6-week gap between reporting.</p> <p>The position for Quarter 3 2022/23 remains unchanged, with the unmitigated risk value of <b>20</b> and the mitigated (residual risk) value of <b>16</b> remaining unchanged from Quarter 2.</p>
05/10/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 5th October 2022.</p> <p>After discussion by the advisory group, the mitigated risk score will be retained at a score of <b>16</b>. We recognise that the investment decision to support the Information Governance business case is a critical enabler to mitigating this risk successfully. Our expectation is that once this new model of operations becomes embedded into the fabric of the organisation, the risk exposure should begin to reduce. However, we acknowledge that this will take significant time to yield results, given the recruitment challenges and scope of change to be delivered across the information governance team.</p>
28/06/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 28th June 2022.</p> <p>We discussed the risk mitigation score and reflected that while we have yet to make investment decisions on the interventions required to enable the Data Strategy delivery, we continue to undertake other activity which is mitigating the risk materialising. Our commercial partners have continued to support us on the journey, delivering critical work to understand requirements around Information Governance and Data Ethics, which will form the building blocks of the proposed future state outlined in the Data Strategy.</p> <p>Additionally, we have seen the innovation such as Robotic Process Automation (RPA) yield significant gains in the management of our live and legacy data sets. The continual reduction in overall data quality errors is encouraging and shows the signs of cultural understanding on the importance of data being understood.</p> <p>The investment needed will ultimately be the intervention that moves the needle and enables us to greatly reduce the risk, but as we plan and consider what our next step might be, we recognise there are some positive outcomes to reflect upon. With this in mind, the risk has been reviewed and the unmitigated risk assessment remains <b>20</b>, while the mitigated risk assessment has reduced to <b>16</b>.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 14th September 2022.</p>
16/02/2022	<p>This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is <b>20</b>, and based on the internal controls and mitigating activities, we assess the mitigated score to be <b>20</b>.</p> <p>We recognise the inherent risk, however, as yet no decisions have been made on the investment needed and business cases are being developed to scope the level of investment options available to us. As reflected in the mitigating assessment, as we develop our delivery plans more clearly we would expect this risk to begin to reduce.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022.</p>

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>	PR000740	<b>Current Mitigated Score</b>	9
<b>Corporate Risk Title</b>	<b>Governance arrangements need to be understood, appropriately applied and effective.</b>	<b>Mitigated Impact Score</b>	3
<b>Corporate Risk Owner(s)</b>	Nick Adams	<b>Mitigated Likelihood Score</b>	3
		<b>Date of Risk Review</b>	30/11/2023

<b>Corporate Risk Description</b>	We are very clear on our vision to provide outstanding policing. Within a professional environment as large and complex as Policing, effective and well-understood governance arrangements are critical to keeping us on track. A robust governance framework will help us ensure we are fulfilling our mission to Serve, Protect and Respect Avon and Somerset's communities. Furthermore, it will enable the delivery of our vision for outstanding policing. The starting point for good governance is having absolute clarity on the rules within which we choose to, and indeed must, operate to ensure consistent, transparent, evidence-based and ethical decision making.
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### Corporate Risk initial assessment - unmitigated risk

<b>Unmitigated Assessment</b>	12
<b>Unmitigated Impact Score</b>	4
<b>Unmitigated Likelihood Score</b>	3

**Rationale**

The constabulary adheres to the CIPFA\*: Delivering Good Governance in Local Government (2016) framework, which sets the standard for local authority governance in the UK. Furthermore, the publication of the International Framework: Good Governance in the Public Sector (CIPFA/IFAC\*\*, 2014), contains seven principles for good governance applicable to local government, which the constabulary has adopted and built its own governance framework around. The principal statutory framework within which the corporations sole (ASC and OPCC) operate includes the following:

- Police Reform and Social Responsibility Act 2011
- Policing Protocol Order 2011
- Financial Management Code of Practice (Home Office, 2013)
- Strategic Policing Requirement (Home Office, 2015)

Without a framework in place to adhere and comply with the requirements outlined in these frameworks, we would be vulnerable to scrutiny from several sources, and exposed to reputation damages undermining confidence in policing. We also recognise that the scheme of governance between the Constabulary and Police and Crime Commissioners Office is yet to be refreshed since the change of PCC. We will need to reflect and respond accordingly to any changes in an update version of the scheme, introducing controls into our governance framework. The capacity at Chief Officer level to oversee planning and performance management has been challenging to manage, with limited capacity to lead the breadth of organisational activity across the Chief Officer portfolio. This is especially prevalent with Strategic Performance and the requirement for leadership capacity to drive the improvements we aspire to deliver. A new ACC Strategic Planning & Performance has been introduced to address this.

Across the South West region and collaborative partnerships there is a recognition that the governance arrangements require refining to provide clarity in the support and enabling of performance and strategic objectives.

**Corporate Risk latest assessment - mitigated risk**

<b>Mitigated Assessment</b>	9
<b>Mitigated Impact Score</b>	3
<b>Mitigated Likelihood Score</b>	3

## Rationale

A **Joint Scheme of Governance** is established between the Constabulary and Office on the PCC, as required under statutory frameworks noted above. The primary purpose of the Scheme of Governance is to:

- Set out the respective roles of the PCC and Chief Constable
- Set out the common understanding and agreed ways in which certain functions will be governed and managed to enable proper and effective management of the Constabulary
- Set out the delegations by the PCC and the CC to give effect to that common understanding
- Incorporate Financial Regulations and Standing Orders relating to contracts.

There has been a relatively cosmetic recent refresh of this Scheme of Governance with a more fundamental review being undertaken by the OPCC linked to a National Programme of a review of schemes of governance in policing. The Constabulary will need to respond and reflect any findings from this national work as part of local governance arrangements as and when such requirements are clear.

The OPCC has refreshed its structure of both the Performance and Accountability Board (PAB) (broadcast for the public to view live providing transparency) and its Governance & Scrutiny Board (GSB). The PAB has now moved to a monthly 30 minute session, while GSB retains its original cadence, but has split itself into two sessions to distinctly focus on Governance, where the PCC makes formal decisions related to the Constabulary and the Chief Constable's delegated budget, and Scrutiny, where the PCC will scrutinise the performance of the Constabulary to ensure it is delivering against the Police and Crime Plan and providing an efficient, effective and legitimate service. Arrangements continue to embed with the Constabulary (PMO) working closely with the OPCC on meeting processes and logistics.

The revised **Governance Framework** was fully implemented from October 2022. The recent development of the Strategic Five-Year Plan and revised Constabulary Performance Framework has meant overlap with governance arrangements and the opportunities for further refinements. This activity, being developed in Q3, is focussing on the alignment of HMICFRS PEEL Questions into the Constabulary Management Board and Outcome KPI / Programme Reporting into Committees. A new Portfolio Steering Board will provide the mechanism for the management of the single portfolio of change. A new single commissioning gateway will ensure more robust governance of initiatives to ensure the portfolio remains manageable. Referrals into the OPCC GSB will remain via the Constabulary Management Board based on existing financial thresholds / estates. The annual cadence of the 4 x Strategic Planning Meetings is being mapped in support of the new strategic planning cycle ensuring clear definition and purpose for each SPM. A new Operational Improvement Committee is to be introduced in Q3 and will complete the "To Be" formal Governance Framework arrangements.

The Constabulary makes use of the Annual Scheme of Governance Assessment (Q4) to critically self-reflect on its governance arrangements. Our governance framework aligns to the seven **CIPFA principles** of good governance, and as part of the CIPFA framework compliance, this Annual Governance Statement (AGS) is written each year to accompany the annual statements of accounts, providing an annual checkpoint for an internal self-assessment of our governance, risk management and internal controls. The 2023 AGS was finalised by the PMO in June. The 2024 AGS will be produced by March 2024 to run concurrently with our Force Management Statement process.

Governance logistics and support remains strong. Each meeting in our governance framework has a defined Terms of Reference (ToR) which are undergoing their annual Q3 review. The introduction of the new ACC Strategic Planning & Performance role has provided additional capacity, scrutiny and insight to help ensure governance arrangements, managed by the PMO, match senior leader expectations. There is recognition that we need to identify and drive performance accountability through a tailoring of our existing governance framework to continually mature our approach. This growth in our **strategic capacity** will help develop and lead our strategic planning and performance accountability and delivery frameworks.

Based on the updated mitigations, there is no Q2 change to this corporate risk with the mitigated values remaining Impact 3 x Likelihood 3 = 9. It is expected that the likelihood mitigated risk assessment score may reduce in time as the revised Governance Framework arrangements continue to embed during 2024.

**Earlier assessments**

**Mitigated risk score Q4 2021/22**

9

**Mitigated risk score Q1 2022/23**

9

**Mitigated risk score Q2 2022/23**

9

**Mitigated risk score Q3 2022/23**

9

**Corporate Risk - audit trail of risk management**

**Date of update**

22/08/2023

**PMO notes**

Q2 corporate risk review was completed with Nick ADAMS on 21/08/23. Based on the updated mitigations, there is no change to the overall mitigated risk assessment score. The Q3 review of the risk is due November.

01/06/2023

This risk was reviewed with Nick ADAMS in May 2023.

The mitigating activities were updated to better reflect the context, timing and continued development of the Governance Framework post Leapwise Review. An updated position on the Annual Governance Statement was reflected. The introduction of the new ACC Performance role was captured reflecting how developments linked to the Strategic Five-Year Plan and Performance Framework might shape the overall governance framework in the future.

The PMO Service Offer for Governance will be defined within a new PMO Service Catalogue in Q3.

The unmitigated risk value of 12 and the mitigated (residual risk) value of 9 remains **unchanged**.

This risk is next subject to review in August 2023.

01/03/2023

The Risk Management Advisory Group reviewed this risk on 28th February 2023.

The risk context has been updated to reflect the strategic capacity concerning stewardship of the organisation achieving its strategic objectives. Over the coming months, adding an extra Assistant Chief Constable to the executive team will support strategic governance and accountability. The group have also added some emerging narrative around the future need to review ASC Partnership Governance arrangements, which will be a piece of work that develops over the coming months.

Delivery of the Leapwise Governance review recommendations is broadly complete following implementing of the required technical changes by our Portfolio Management Office. The ongoing challenge is ensuring governance arrangements remain effective and reviewed alongside the organisation's change needs.

Our position for Quarter 4 2022/23 remains unchanged, with the unmitigated risk value of 12 and the mitigated (residual risk) value of 9 remaining **unchanged** from quarters 2 and 3.



28/11/2022	<p>The Risk Management Advisory Group reviewed this risk on 22nd November 2022. We acknowledge the progress being made with the implementation of the final recommendations from the Leapwise Governance review.</p> <p>We are now in the final stages of design and implementation of the technical changes to the governance framework, the wider understanding of which are underpinned by the Governance Handbook product. However, we need to consider what cultural barriers might undermine the effectiveness of the changes and work with our senior leaders to ensure we have the right behaviours being modelled.</p> <p>The position for Quarter 3 2022/23 remains unchanged, with the unmitigated risk value of <b>12</b> and the mitigated (residual risk) value of <b>9</b> remaining unchanged from Quarter 2.</p> <p>The next planned review of this risk will take place in February 2023.</p>
05/10/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 5th October 2022.</p> <p>Good progress is being made with the planned changes to the governance framework, but as these are not yet fully implemented, we took the decision to <b>retain</b> the current level of risk score (<b>9</b>), and intend to review this position again in December.</p> <p>By the time we review this risk again in December, we are optimistic that all recommendations will be complete and we can assess the risk with a view to reducing the mitigated score.</p>
28/06/2022	<p>The risk was reviewed by the Risk Management Advisory Group on 28th June 2022.</p> <p>While we have been fairly stable through Q1 of 2022/23, we know that in Q2 and beyond, we will make changes to the governance arrangements following the Leapwise review recommendations. There is a considerable amount of planning, coordination and communication to ensure that the changes being made to our governance structure are understood and appropriately executed by internal stakeholders. In addition, there is a requirement to refresh several documents such as Terms of Reference(s) and the Governance Handbook, which the review cited as 'exceptional documentation'.</p> <p>Effective risk management is forward looking, and we know the challenge ahead of us is to successfully implement the recommended improvements and without clear communication and execution of the change, the understanding and application of governance may be affected.</p> <p>It is for these reasons, we have <b>increased</b> to the <b>unmitigated score to 12</b> and the <b>mitigated score to 9</b>, to be reviewed again in September 2022 when the implementation is under way / complete in respect of changes to the governance framework.</p> <p>Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 14th September 2022.</p>

16/02/2022

This risk was reviewed at the Risk Management Advisory Group on 15th February by members of Chief Officer Group. The content the risk record was agreed and an assessment of the risk score was made. As reported above, our unmitigated assessment of this risk is 10, and based on the internal controls and mitigating activities, we assess the mitigated score to be 8.

Our rationale for the risk being reduced is that we believe that we have implemented the processes, structures and guidance to support the discharge of effective governance across the organisation. The restructuring of the organisation enabling services in 2021 created the Portfolio Management Office, whose remit is to provide enterprise level support across our corporate change projects, governance, risk management and strategic planning cycle.

Our new governance framework has bedded down into the organisation over the last 12 months and the focus is now shifting to optimising our leadership and culture to make our decision-making even more effective, through the work with Leapwise.

Our next review of this risk is scheduled for the next meeting of the Risk Management Advisory Group on 28th June 2022. At this time, we will have received conclusions from Leapwise in their assessment of our governance arrangements.

# AVON & SOMERSET CONSTABULARY

## Corporate Risk Register



Date of register 22/08/2023

### Corporate Risk - overview information

<b>Corporate Risk URN</b>
<b>Corporate Risk Title</b>
<b>Corporate Risk Owner(s)</b>

PR001436
<b>Decreasing public confidence and legitimacy impacts negatively on service delivery.</b>
Nikki Watson

<b>Current Mitigated Score</b>
<b>Mitigated Impact Score</b>
<b>Mitigated Likelihood Score</b>
<b>Date of Risk Review</b>

15
5
3
30/11/2023

**Corporate Risk Description**

The latest public confidence survey indicates the lower levels of public confidence with a figure of 66.5% for the last 12 months compared with a figure of 77.7 % for the previous 12 months (based on the question "Taking everything into account I have confidence in the Police in this areas").

This latest result is delivered against a national narrative from the Casey Review. The review discussed whether leadership, recruitment, vetting, training, culture, and communications support the standards the public should expect. It made recommendations for how high standards can be routinely met so that levels of public trust and confidence can be restored and maintained. We are clear that the report is potentially one of the most important moments for UK Policing in a generation. The wider coverage of the report described widespread racism, sexism and homophobia throughout the Metropolitan Police systems and culture. The report dealt with much more than discrimination and Baroness CASEY has provide a succinct diagnosis of her report.

1. Services to women and children are not good enough.
2. Policing is at its most threadbare closest to the frontline – closest to the public.
3. There is institutional racism, sexism, and homophobia.
4. The Metropolitan Police needs to clean itself up and must root out the bad.

The report was not written about Avon & Somerset Police but under the same test criteria we need to understand how we would measure up. We reflect that many parts resonate, and we acknowledge elements that are true for us. We are committed to confronting and addressing them. The inclusion of this Corporate Risk reflects the various mitigations we have identified and work outstanding to deliver.

Aside from CASEY, the scope of Police delivery remains at the forefront of national debate with the recent focus on the Humberside Right Care Right Person model and announcement from the Metropolitan Police Service to move back from supporting incidents of mental health later in 2023 with wider interpretations how this is out of kilter with founding PEEL principles of wider community wellbeing.

There remains continued media interest in local disciplinary hearings managed by Professional Standards with outcomes published via local media outlets. We recognise how some local cases would have caused concern with the public. We understand that our own culture will directly impact on how the public feels about us. We are also aware of the impact of complaints and the impact on complainants and their levels of confidence.

**Corporate Risk initial assessment - unmitigated risk**

<b>Unmitigated Assessment</b>
<b>Unmitigated Impact Score</b>
<b>Unmitigated Likelihood Score</b>

20
5
4

<b>Rationale</b>
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The unmitigated assessment score of 20 is based on the combination of a number of considerations that are interlinked. These include the latest declining public confidence figures, the publication of the CASEY Review and the wider implications for UK policing and the recognition of local misconduct and cultural issues within Avon & Somerset. The aggregation of these creates a high unmitigated risk assessment whereby the continued legitimacy of the Constabulary could be subject to public debate.

**Corporate Risk latest assessment - mitigated risk**

Mitigated Assessment
Mitigated Impact Score
Mitigated Likelihood Score

15
5
3

The initial Q2 review of mitigations covered a range of activity. The Q3 review has focussed on the review and update of these areas.

**VAWG / Vulnerability activity**

VAWG and Vulnerability Organisational level risks now captured on the Organisational Risk Register for visibility and effective management via either Committee Meetings or local Directorate Leadership Meetings. EXTRA INFO FROM PATRICK BRIMMER. Programme #2 as part of our single Constabulary Portfolio will provide a focus for our improvement activity. Programme #2 is called "Protecting the Vulnerable and Putting Victims First" and consolidates several constituent projects for delivery over the next few years. Additionally, nationally a performance framework is being developed to measure progress and allow comparisons with other Forces.

**Race Matters Project**

The Race Matters Team have published a detailed Progress Report (June 2023). The What's New section provides a detailed update as below. "Following the statement from Chief Constable Sarah CREW on institutional racism, we facilitated interviews with key local media partners. We also published blogs internally and facilitated web chats for the workforce to aid understanding. We are currently gathering insight on the impact of the statement both from the public and from colleagues, to support our next steps. We continue to develop and implement a clear communication and engagement strategy for our Race Matters work. As part of this, a letter has been sent to community leaders and influencers across Avon and Somerset for onward cascade to their networks. The letter invites people to register with us if they would like to be actively involved or informed of the work taking place. A Race Matters web page has been published and serves as an anchor for our ongoing work as well as a place to signpost people who are interested in being involved (they can sign up via the page). A proposal for a community consultation event to talk about stop and search has been drafted inviting people to come and influence the direction of Stop & Search policy moving forward. The first Professional Standards Department Community Insights event was held in Bristol with 14 Black Heritage community members attending, aimed at demystifying the police complaints process. Learning from the first event has been collated and the next events are being planned, aimed at different communities (e.g. women and young people). A local community confidence survey has been running in Bristol via a local community interest company and the results of this are due to be analysed shortly. Additional detail was provided for all pillars of the Project (1) Represented (2) Not Over Policed (3) Involved (4) Not Under Protected (Out of Court Disposals) (Data Insights) (Culture and Communication).

**BLUESTONE**

The progress of BLUESTONE has been reported under the Service Delivery Corporate Risk as part of the Improvement Plan updates. mention improvement plan updates as part of Service Delivery Corporate Risk (PR/736).

**Chief Officer Group Talk Times & Discovery Projects**

These have continued over the summer and have identified a number of themes. The Talk Time Sessions have afforded the opportunity to engage with Staff and discuss how they feel about the Institutional Racism declaration. Further to the declaration, we have seen strong and positive feedback from parts of the community previously reluctant to engage with the Constabulary. We are also monitoring key performance indicators to check for possible impact of the statement but have not seen either an increase on assaults against Officers or an increase in complaints. The Talk Time sessions feedback, combined with the feedback from the 2022/23 Leadership Days are helping to inform our Culture Discovery Project with initial findings being presented at our Strategic Planning Meeting in September. This will help define what we want our organisational culture to be.

## Rationale

### **Lime Culture**

We have now provided Business Case authority to proceed with specialist training for up to 20 Sexual Misconduct Advocates (SMA) consisting of two modules over a total of 4 days. This approach will assume and require sufficient baseline awareness around safeguarding, codes of conduct and criminal justice systems / processes within the proposed SMA cadre. Interviews for the co-ordinator role are w/c 21/08/23 and once in post the move to recruit the Sexual Misconduct Advocates can begin. Training to the advocates is likely to commence in February / March 2024.

### **Outreach Team**

The Outreach Team continue to hold "safe spaces" sessions with staff affording the opportunity to ask questions increasing our internal legitimacy with our staff.

### **Programme 7 - Building Trust & Confidence**

The construct of the Constabulary portfolio of change includes Programme #7 - "Building Trust & Confidence". This Programme has a number of constituent elements (projects) and an operational programme lead has been identified. The Programme will be stood up this autumn and will provide consolidation and co-ordination for a range of activity that will directly impact on public confidence and legitimacy. This includes the Race Matters work which is planning a week of activity in the autumn. We continue to manage our Trauma Informed Policing Work through existing governance mechanisms. The work is being driven by a Trauma Informed Delivery Group with a formal request for change being initially submitted as a Concept Report into our new Portfolio Steering Board on 13/09/23.

### **Operation HOLDEN**

We have completed Operation HOLDEN two months early with every employee checked via PND. A number of lines of enquiry were identified. Noting significant has been identified noting there is a prompt for 22 vetting reviews.

### **Story Films (Channel 4)**

Corporate Communications are working with Story Films (Channel 4) on a three part documentary following the work of PSD and Counter Corruption Unit looking at race, mental health and sexual misconduct in Policing. This will be complemented by social media engagement strategy to explain our processes for managing misconduct. Engagement with the internal workforce will be a key part of this to address any local concerns. An additional internal campaign work will also help mitigate potential reputational risk. This open and transparent approach of our self reflective practice should help with both public confidence and legitimacy through the demonstration of our robust internal processes. The Programme should be aired from October.

### **Organisational Learning**

Our central approach to Organisational Learning, managed by our Portfolio Management Office, continues to evolve. The process of record management is robust but we recognise the need to ensure regular feeds from all parts of the business.

Based on the recent assessment of mitigating activities, it is felt that the mitigated risk value of 5 x Impact 3 x Likelihood (15) is still accurate at this time and is unlikely to change for a period time as the activities described above, some in their early stages, continue to develop.

<b>Mitigated risk score Q4 2021/22</b>
<b>Mitigated risk score Q1 2022/23</b>
<b>Mitigated risk score Q2 2022/23</b>
<b>Mitigated risk score Q3 2022/23</b>

15
15

**Corporate Risk - audit trail of risk management**

<b>Date of update</b>
17/08/2023

<b>PMO notes</b>
Q3 review of Corporate Risk PR/1436 completed with DCC WATSON on 11/08/23.

### Corporate Risk audit trail / archive of Q2 mitigating activity.

We are able to demonstrate a comprehensive range of mitigating activities in relation to this corporate risk. A number of these activities are relatively new in their development and this is reflected in the mitigated risk assessment score. The aggregation of this collective work should provide the opportunity for reduced mitigation values over the next six months as work continues to embed.

- VAWG / Vulnerability Management - Here our work is managed in line with our Force Strategy that reflects the National approach. We have identified operational leads as Champions to manage three pillars of work. We have aligned our Governance Framework accordingly managing activity through the quarterly Confidence & Legitimacy Committee. We have developed a Problem Profile which supports the reporting of vulnerability through the annual Strategic Policing Requirement submission. We continue to capture relevant performance data in relation to vulnerability outcomes and have mapped vulnerability risk onto the Organisational Risk Register for management and visibility.
- Our Race Matters Programme of Work encompasses our response to the Police Race Action Plan combined with wider work on Disproportionality. This activity sees us working with communities and partners. We have our governance arrangements in place and are managing activity as defined corporate change as part of our Constabulary portfolio.
- We have maintained our Investment in our Neighbourhood & Partnerships Directorate noting the impact this has on both visibility and confidence. We recognise the importance of the Independent Advisory Groups and have reviewed our support to ensure volunteers feel they can be effective. Our national work with BLUESTONE / SOTERIA demonstrates our continued perpetrator and victim focus.
- The CASEY Review was reviewed extensively by the Chief Officer Group to identify proactivity required by Avon & Somerset.
- Lime Culture Advocates are supporting our workforce through the development of a network of Sexual Violence Liaison Officers (SVLO). Workshops have been held to understand the culture of our organisation. Train the Trainer sessions have been held to upskill volunteers across the organisation to perform a SVLO role. This network will ensure members of staff will have someone, aside from their Line Manager, to provide guidance and support if needed.
- We continue to invest in our local Professional Standards Department recognising the increased level of demand summarised in a paper for the Constabulary Management Board in 2023. This recognised increase demands from local referrals, national work (Operation HOLDEN PND database checks for areas of concern) and the HMICFRS recommendation that is requiring Forces to review three years of cases where the Prejudicial and Improper Behaviour definition is found. We are following new vetting guidance to ensure we complete regular employee vetting more frequently. Misconduct Regulations are under review with a bill submitted looking to enable the ability of the Chief Constable to judicially review the decisions of legally qualified Misconduct Chairs. Professional Standards are also engaging in proactive community work whereby sessions are held with the public to explain the complaints process and the support in place - an initial event in Bristol East was well received.
- We have delivered proactive internal communication campaigns such as "This Is Not Who We Are" which has helped generate a large amount of intelligence about our organisation and prompted an uptick in the number of PSD referrals. Internal communications will be complemented by a new Public Engagement Strategy under development now that the new Director of Corporate Communications is in place.
- We have revisited our Line Management / Leadership offering which will now include the ability to understand the culture of a Team and spot opportunities for early intervention enabling our managers to become more proactive and effective in support of their colleagues.
- Finally, we continue to embed and evolve our Organisational Learning process managed through our central Portfolio Office which now has an increasing number of source records for review.

15/08/2023

31/05/2023

New Corporate Risk captured and defined at Risk Advisory Group Meeting on 31/05/23.



## Report 3

### JAC Questions on Statement of Accounts 2022/23

Received from	Group or CC Accounts	Page Ref	Question	Response
ZR	CC	4	7% of police officers are part time. What is the direction of travel with this? I am aware there is various work underway linked to representativeness of workforce, staff retention etc. Is part time working a specific focus area in relation to this work?	We have a Service Delivery Plan for Workforce Planning which is current in draft form. Firstly, it will look at the capability of operational areas to support flexible/part time working. Secondly it will form part of the attrition (and therefore) retention whereby we consider any anomalies or outliers. So, whilst not specific in that area it will be considered alongside other metrics
ZR	CC	6	'Our response timeliness for immediate ad priority incidents remains below where we would want it to be.' What is the current timeliness?	Response timeliness focus is on attending 'Immediate' calls for service within 15/20 mins (urban/rural) and attending 'Priority' calls for service within 60 minutes. Currently: <ul style="list-style-type: none"> <li>• Our Immediate incident response rate within SLA is 75% - with a median response time of 10.2 minutes</li> <li>• Our Priority incident response rate within SLA is 54% - with a median response time of 48 minutes</li> </ul>

Received from	Group or CC Accounts	Page Ref	Question	Response
ZR	CC	7	<p>Officer overtime – area of overspend.</p> <p>What arrangements are in place to consider the impact of this on officer wellbeing?</p>	<p>We work with each Directorate HR Business Partner, Heath &amp; Wellbeing SPOC and Mental Health First aiders. We look at our data i.e.. Absence management, types of sickness, staff survey, etc. From this we work with Directorate Action Plans and prioritise the wellbeing needs</p> <p>I.e. If Mental Health absence is the highest figure we would promote Mental Health First-aiders, Personal Resilience, Managing Stress –</p> <ul style="list-style-type: none"> <li>• If there was considerable overtime in one area and individuals were struggling with finances we would sign post all of the above plus signposting</li> <li>• to cost of living,</li> <li>• managing a budget</li> <li>• Gambling</li> <li>• Alcohol</li> <li>• General debts management – PMAS?</li> <li>• Financial planning</li> <li>• Stress management</li> </ul> <p>The specific wellbeing support is ‘needs driven’ We also offer to the whole organisation as part of the ‘Wellbeing journey’.</p>

Received from	Group or CC Accounts	Page Ref	Question	Response
ZR	CC	16	<p>'The OCC governance framework has been reviewed and redesigned during this reporting period...'</p> <p>What benefits/impact have been seen so far from this review/redesign?</p>	<p>We did implement a new Governance Framework by October 2022 and suggested a formal review 12 months later (i.e. October 2023) as you would normally wait 12 months for a review.</p> <p>However, due to the new Constabulary Portfolio approach and 8 x Programmes of Work combined with the new Performance Management Framework (both being implemented from September) we are having to make small amendments to the governance framework again.</p> <p>Therefore, until these are made, and a period of time passes, we are unable to commit to a formal review which is where benefits / impact would be assessed.</p>
ZR	CC	20	<p>Tackling disproportionality Programme Team. Great to hear about the resource allocated to support this area of work. What is the sustainability of this resource?</p>	<p>The Steering Committee have committed to the Tackling Disproportionality Programme for an initial twelve-month period, following which a review will take place to evaluate progress and ascertain the next phase of the programme. The current Programme Team resources are committed for the duration of the twelve-months with requirements to be reviewed and determined as part of the second phase of the programme. The work to implement the recommendations will have "achieving effective implementation and sustainability" factored into the delivery.</p>
ZR	CC	22	<p>'...under Section 136 MHA'.</p> <p>Suggest use full version – Mental Health Act</p>	Updated

Received from	Group or CC Accounts	Page Ref	Question	Response						
ZR	CC	22	'The diagnostic shadowing work' What is this?	<p>Diagnostic Overshadowing is a medical term for when someone's historic or apparently present mental health condition plays an incorrect role in the decision making by a medic. For example – someone with a history of mental illness may report to their GP with physical symptoms and the GP may attribute it to their mental health, therefore not undertaking proper tests and missing the cause of what are real physical symptoms.</p> <p>We have used the same term for policing as we do the same thing. Someone may commit an offence but the officer is aware that they have a mental illness (or be in a hospital) and prematurely attributes the behaviour to that illness – writes the crime off – when in fact, the illness had nothing to do with it. Or we might disbelieve a victim who reports something because they have a history of mental illness. Training is ongoing with our mental health coordinator to deal with this issue.</p>						
ZR	CC	45	The number of staff to whom we pay more than £50,000 per annum. In 21/22, 278 staff were paid in the £50-54 pay range. For 22/23 this increased to 404 staff. What are the factors behind this increase?	The Pay award in September has increased the Sergeant salaries close to the £50k that with the additional overtime has increased pay to the £50k band. There has also been market factor added to certain staff salaries which has increased the banding compared to last year						
ZR	Group	15	'During 2022/23 the OPCC dealt with 167 complaint reviews of which 20% were upheld'. Has this rate changed in recent years?	<table border="1"> <thead> <tr> <th>2020/21</th> <th>2021/22</th> <th>2022/23</th> </tr> </thead> <tbody> <tr> <td>19%</td> <td>22%</td> <td>20%</td> </tr> </tbody> </table>	2020/21	2021/22	2022/23	19%	22%	20%
2020/21	2021/22	2022/23								
19%	22%	20%								

Received from	Group or CC Accounts	Page Ref	Question	Response
ZR	Group	19	<p>2.5. 'When the permanent Chief of Staff started in January 2022 one of her first tasks was to conduct a review of the OPCC. This continued through the first three quarters of 2022/23 and there was a phased delivery of the new structure and practices through September and October 2023'.</p> <p>Should this read 'September and October 2022'?</p>	Updated
ZR	Group	19	<p>'These highlight the fragile nature of the resource model and lack of resilience'.</p> <p>What are the longer term plans for making the model more resilient?</p>	<p>The question highlighted the need to revise the wording within the governance statement to appropriately reflect the impact of the OPCC review, including the revision of job descriptions for the two managers reporting into the Senior Scrutiny and Assurance Manager, in order to provide greater resilience in support for ICVs and scrutiny panels.</p> <p>Despite the increased resilience delivered by the new structure and roles, there were a number of challenges with staffing, including the length of time it took to fill one of the new vacancies, and some prolonged sickness absence. A long standing member of the office sadly passed away. The incidence of these events will always provide a degree of organisational challenge. The size of the OPCC team (below 30 FTE) makes such a combination of factors particularly challenging to manage. However arrangements were put in place to mitigate the impact and ensure delivery of core business.</p> <p>During quarter four of 2022/23 the OPCC ran a training needs analysis which all staff were asked to complete. The findings from this process will be considered by the SLT in the coming year and will form a new development plan for the office</p>

Received from	Group or CC Accounts	Page Ref	Question	Response
ZR	Group	53	Remuneration of senior officers. I think one name included (D Bulpitt) when should be post title only?	It is regulation that we need to include name for those above £150k earnings
ZR	Group	55	As above for N Watson and D Bulpitt	See above
ZR	General		A shorter, accessible version of accounts. I recognise there are issues with timeliness of audited accounts. I still think it would be worth considering publishing a shorter more accessible version. NA worked on a great example of what this could look like last year.	Will prepare for December JAC meeting
MS	CC	46	<p><b>OBSERVATION.</b> I NOTE THAT THERE IS A SIGNIFICANT SURGE IN THE NUMBERS OF SALARIED STAFF IN THE PAY BANDS FROM FY21-22 TO FY22-23 AS FOLLOWS: £50 - 54.9K BAND 278 TO 404, £55 - £59.9K BAND 210 TO 250, £60 - 64.9K 67 TO 116.</p> <p><b>COMMENTARY.</b> THIS IS SOMETHING I HAVE RAISED BEFORE IN THE PREVIOUS ACCOUNTS. WHY SUCH A SURGE? GIVEN THAT IT IS NOT NEW DOES THIS SAY SOMETHING ABOUT AN AGEING POLICE FORCE, OR IS IT WE HAVE MORE LONGER SERVING OFFICERS AND THEIR ENTITLEMENT REFLECTS LENGTH OF SERVICE? WHICHEVER THIS REPRESENTS A COST COMPONENT WHICH COULD INCREASINGLY REPRESENT A RESOURCE CHALLENGE. EQUALLY THERE COULD BE ANOTHER EXPLANATION AND THIS OBSERVATION HAS BEEN RECOGNISED AND IS BEING MANAGED? THANK YOU.</p>	The Pay award in September has increased the Sergeant salaries close to the £50k that with the additional overtime has increased pay to the £50k band. There has also been market factor added to certain staff salaries which has increased the banding compared to last year

Received from	Group or CC Accounts	Page Ref	Question	Response
DD	Group	40	Reference is made to the General Fund being risk assessed annually. What risk factors are considered in this assessment. I note the fund has not increased yet it feels like certain risks are increasing.	The General Fund recognises the key risks facing the organisation and it is correct to say that some of these increased over the year, particularly financial risks arising out of the overall economic position. However, there were compensating reductions, most notably the need to provide against pension risk following the government indicating that this would be covered centrally. The attached schedule details the general fund assessment against the previous year
DD	Group	65	There is significant reduction in the staff pension scheme liabilities this year which seems to be due to a positive change in financial assumptions. What were the changes to these assumptions?	The discount rate has improved from 2.6% to 4.8% and the CPI from 3.15% to 2.9% for staff and for Officers CPI decreased 3.3% to 2.9%
DD	Group	72	The overtime liability provision is being increased yet there doesn't appear to be any drawdown on it. Why has it not been used during the year and what is the likelihood of it being required in future years.	This provision relates to the legal claims for undercover overtime, these cases are being worked on and this is the latest estimate of costing, it will be drawn down on once these claims have been completed



Report 5a

# Avon & Somerset Constabulary and Office of the Police and Crime Commissioner Joint Audit Committee (JAC)

## Proposed 2023-24 Internal Audit Plan Q3-4

Internal Audit ■ Risk ■ Special Investigations ■ Consultancy



# The Internal Audit Plan: Summary

The internal audit plan represents a summary of the proposed audit coverage that the internal audit team will deliver in the second six months of the 2023/24 financial year.

Delivery of an internal audit programme of work that provides sufficient and appropriate coverage, will enable us to provide a well-informed and comprehensive year-end annual internal audit opinion.



## Introduction & Objective of the Internal Audit Plan

Internal audit provides an independent and objective opinion on the Force and OPCC's risk management, governance, and control environment, by evaluating its effectiveness.

The outcomes of each of the audits in our planned programme of work, will provide senior management and Members with assurance that the current risks faced by the Force and OPCC in these areas are adequately controlled and managed.

It should be noted that internal audit is only one source of assurance, and the outcomes of internal audit reviews should be considered alongside other sources, as part of the 'three lines' assurance model. Key findings from our internal audit work should also be considered in conjunction with completion of the Annual Governance Statement for the Force and OPCC.

**It is the responsibility of the Force and OPCC Leadership Teams, and the Joint Audit Committee (JAC), to determine that the audit coverage contained within the proposed audit plan is sufficient and appropriate in providing independent assurance against the key risks faced by the organisation.**

When reviewing the proposed internal audit plan (as set out in Appendix 1), key questions to consider include:

- Are the areas selected for coverage this coming year appropriate?
- Does the internal audit plan cover the organisation's key risks as they are recognised by the Leadership Teams and Audit Committee?
- Is sufficient assurance being received within our annual plan to monitor the organisation's risk profile effectively?

*Internal audit coverage can never be absolute and responsibility for risk management, governance and internal control arrangements will always remain fully with management. As such, internal audit cannot provide complete assurance over any area, and equally cannot provide any guarantee against material errors, loss or fraud.*

## The Internal Audit Plan: Approach

The work of internal audit should align strategically with the aims and objectives of the organisation, taking into account key risks, operations and changes.

In order to do this Internal Audit needs to be flexible in adapting audit plans to handle rapidly changing risks, priorities and challenges.



### Approach to Internal Audit Planning 2023/24

Our approach to internal audit planning throughout 2023/24 will be a continuous risk assessment and rolling plan approach. Rather than present a proposed annual plan at the start of the year, which is subject to a high level of uncertainty and change, we will build our plan in conjunction with management as the year progresses, presenting a six-month rolling plan with a list of potential areas for consideration for future audit plans. This is then reviewed each quarter to ensure that the six-month rolling plan is relevant. This rolling planning process will provide the same assurances as an annual plan but will better reflect the changing risk landscape.

Quarterly audit planning meetings will be held with the Chief Officer – Finance, Resources and Innovation and the OPCC's Chief Finance Officer (S.151 Officers) prior to presenting a proposed plan to this Committee for formal approval. In addition, we will also aim to meet regularly with the Deputy Chief Constable and the Chief Executive Officer (CEO) to ensure the plan remains relevant.

These meetings will lead to a 12 month 'rolling wave plan' place-marking key areas of coverage to support the annual opinion. This is then underpinned by quarterly risk-based work plans which draw from meetings with management and the 'rolling plan' throughout the financial year to ensure we are auditing the right areas, with the correct scope, at the right time and reported through our quarterly progress updates.

The resulting programme will be a combination of requested audit work aligned to service priorities, combined with audit work recommended by SWAP driven by our continuous risk assessment. This risk assessment will be based on the live status of both the Force's and OPCC's strategic risk registers. Overlaid onto this assessment will be the Police and Crime Plan, the Force Management Statement (FMS) and SWAP's sector-wide top 10 risk areas. The results of our risk assessments will be shared with senior management to obtain their view on the value of internal audit involvement. In developing risk assessments, we will also take account of other sources of assurance, where relevant.



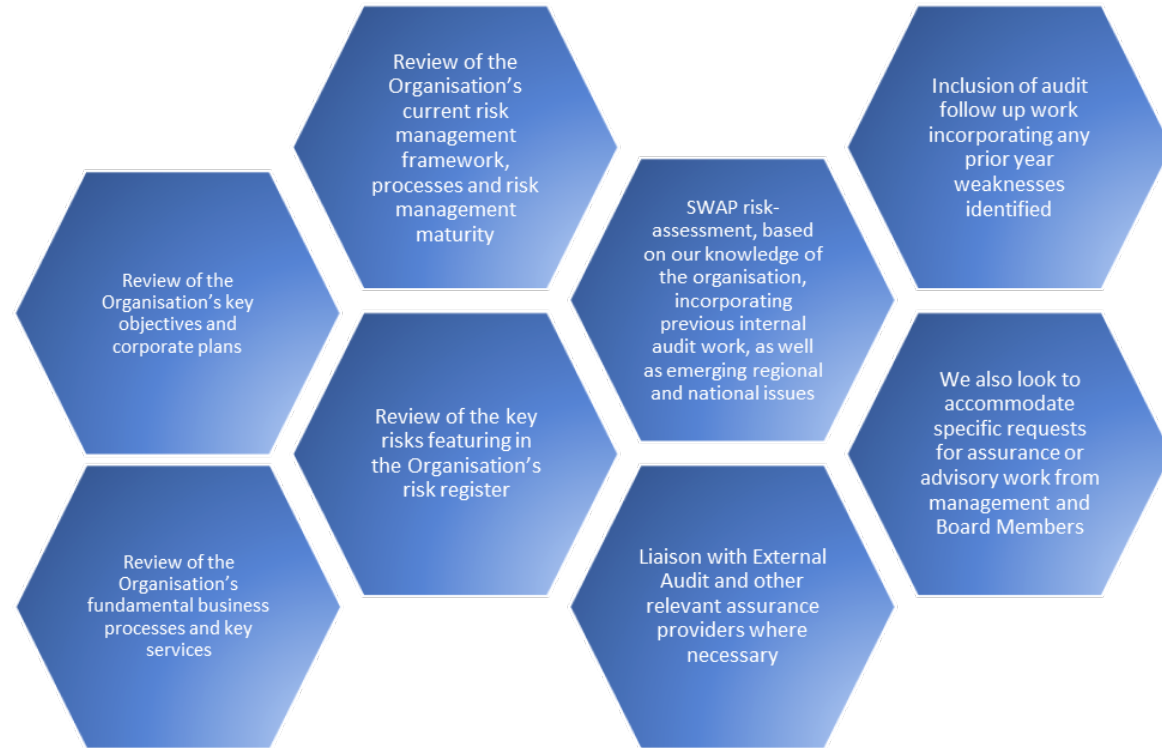
# The Internal Audit Plan: Approach

To develop an appropriate risk-based audit plan, SWAP have consulted with senior management, as well as reviewing key documentation, in order to obtain an understanding of the organisation's strategies, key business objectives, associated risks, and risk management processes.



## Approach to Internal Audit Planning 2023/24

The factors considered in putting together the 2023/24 internal audit plan have been set out below:



Due to the pace of change within the policing sector and now the impact of social economic factors, it is becoming increasingly difficult to accurately predict longer-term key organisational risks. Our approach to internal audit planning therefore reflects this. The risk-assessed work plan contains key areas of coverage, to ensure that we are auditing the right areas at the right time. The precise scope of each audit will be determined at the start of the review, in line with local risk factors at that time.

# The Internal Audit Plan: Risk Assessment

A documented risk assessment prior to developing an internal audit plan, ensures that sufficient and appropriate areas are identified for consideration.

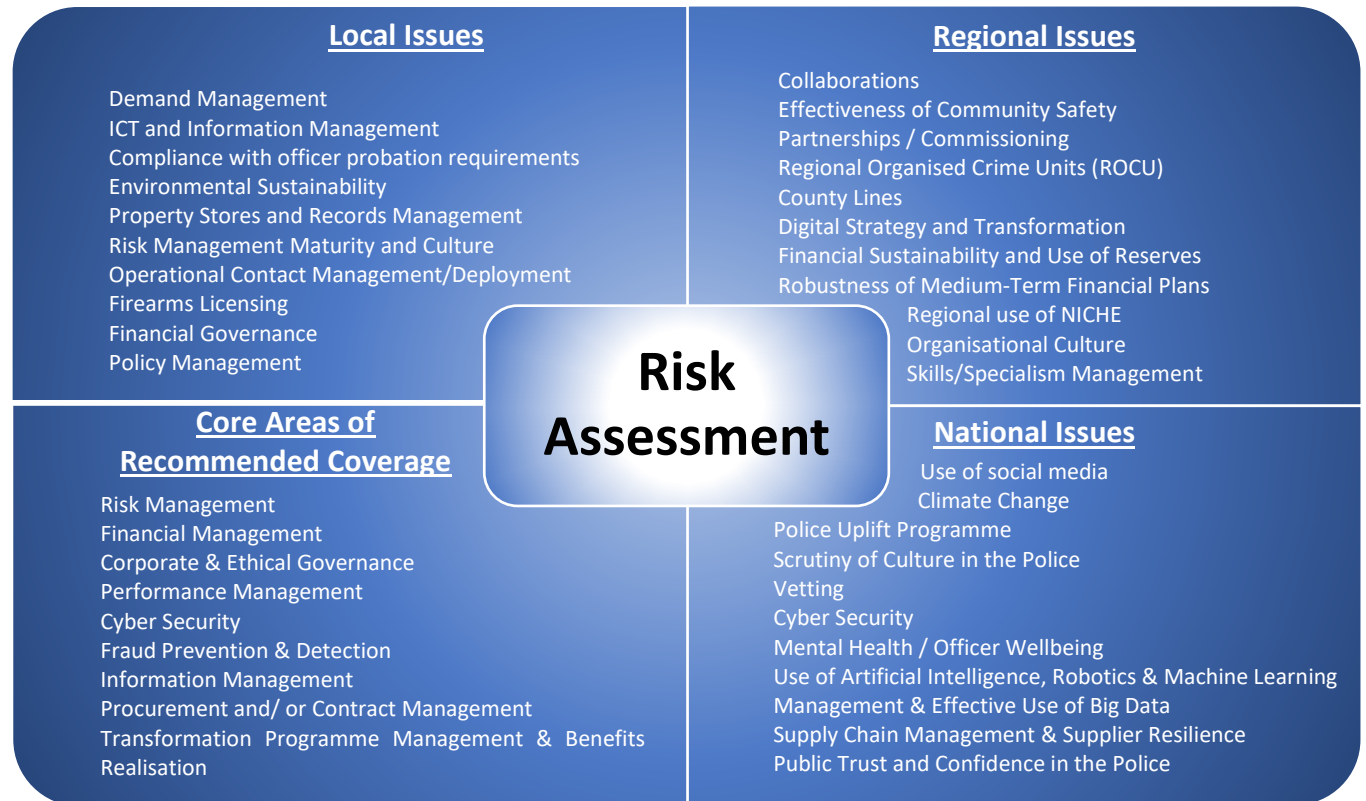
As above, it is the responsibility of the leadership teams for the Force and OPCC and the JAC to ensure that, following our risk assessment, the proposed plan contains sufficient and appropriate coverage.



## Internal Audit Annual Risk Assessment

Our 2023/24 internal audit programme of work is based on a documented risk assessment, which SWAP will revisit regularly, but at least annually. The input of senior management as well as a review of the organisations' risk register will be considered in this process.

Below we have set out a summary of the outcomes of the risk assessment for Avon and Somerset Police and OPCC:



# The Internal Audit Plan: Coverage

Following our SWAP Risk Assessment above, we have set out how the proposed plan presented in Appendix 1 provides coverage of the key components set out in the Force Management Statement (FMS), against which we have aligned our audit universe, as well as the areas within the Police and Crime Plan.

Internal audit is only one source of assurance; therefore, where we have highlighted gaps in our coverage, assurance should be sought from other sources where possible, such as HMICFRS, in order to ensure sufficient and appropriate assurances are received.

For 2023/24, the Internal Audit Plan does not afford coverage to the areas highlighted as red. Assurance should either be sought from alternative sources or considered for inclusion in future Internal Audit Plans.



## Internal Audit Coverage in 2023/24

Following our SWAP risk assessment, we have set out below the extent to which the proposed Q3-4 plan presented in Appendix 1, as well as the previously approved Q1-2 plan, provides coverage of Avon and Somerset Police's key corporate objectives and risks, as well as our core areas of recommended audit coverage:



*Internal audit coverage can never be absolute and responsibility for risk management, governance and internal control arrangements will always remain fully with management. As such, internal audit cannot provide complete assurance over any area, and equally cannot provide any guarantee against material errors, loss or fraud.*

# The Internal Audit Plan: SWAP

SWAP Internal Audit Services is a public sector, not-for-profit partnership, owned by the public sector partners that it serves. The SWAP Partnership now includes 26 public sector partners, crossing nine counties, but also providing services throughout the UK.

As a company, SWAP has adopted the following values, which we ask our clients/partners to assess us against following every piece of work that we do:

- Candid
- Relevant
- Inclusive
- Innovative
- Dedicated



## Your Internal Audit Service

### Audit Resources

The 2023/24 internal audit programme of work will be equivalent to £69,525. The current internal audit resources available represent a sufficient and appropriate mix of seniority and skill to be effectively deployed to deliver the planned work. The key contacts in respect of your internal audit service for Avon and Somerset Police and OPCC are:

Charlotte Wilson, Assistant Director – [charlotte.wilson@swapaudit.co.uk](mailto:charlotte.wilson@swapaudit.co.uk), 020 8142 5030

Juber Rahman, Principal Auditor – [juber.rahman@swapaudit.co.uk](mailto:juber.rahman@swapaudit.co.uk), 020 8142 5030

### External Quality Assurance

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors (IPPF).

Every five years, SWAP is subject to an External Quality Assessment of Internal Audit Activity. The last of these was carried out in February 2020 which confirmed general conformance with the IPPF.

### Conflicts of Interest

We are not aware of any conflicts of interest within Avon and Somerset Police and OPCC that would present an impairment to our independence or objectivity. Furthermore, we are satisfied that we will conform with our IIA Code of Ethics in relation to Integrity, Objectivity, Confidentiality, & Competency.

### Consultancy Engagements

As part of our internal audit service, we may accept proposed consultancy engagements, based on the engagement's potential to improve management of risk, add value and improve the organisation's operations. Consultancy work that is accepted, will contribute to our annual opinion and will be included in our plan of work.

### Approach to Fraud

Internal audit may assess the adequacy of the arrangements to prevent and detect irregularities, fraud and corruption. We have dedicated counter-fraud resources available to undertake specific investigations if required. However, the primary responsibility for preventing and detecting corruption, fraud and irregularities rests with management who should institute adequate systems of internal control, including clear objectives, segregation of duties and proper authorisation procedures.

## The Internal Audit Plan: SWAP

Over and above our internal audit service delivery, SWAP will look to add value throughout the year wherever possible. This will include:

- Benchmarking and sharing of best practice between our public-sector Partners.
- Regular newsletters and bulletins containing emerging issues and significant risks identified across the SWAP partnership.
- Communication of fraud alerts received both regionally and nationally.
- Annual Member training sessions.

### Our Reporting

A summary of internal audit activity will be reported quarterly to senior management and the Audit Committee. This reporting will include any significant risk and control issues (including fraud risks), governance issues and other matters that require the attention of senior management and/or the Audit Committee. We will also report any response from management to a risk we have highlighted that, in our view, may be unacceptable to the organisation.

### Internal Audit Performance:

As part of our regular reporting to senior management and the Audit Committee, we will report on internal audit performance. The following performance targets will be used to measure the performance of our audit activity:

Performance Measure	Performance Target
<p style="text-align: center;"><b><u>Delivery of Annual Internal Audit Plan</u></b> Completed at year end</p>	>90%
<p style="text-align: center;"><b><u>Quality of Audit Work</u></b> Overall Client Satisfaction <i>(did our audit work meet or exceed expectations, when looking at our Communication, Auditor Professionalism and Competence, and Value to the Organisation)</i></p>	>95%
<p style="text-align: center;"><b><u>Outcomes from Audit Work</u></b> Value to the Organisation <i>(client view of whether our audit work met or exceeded expectations, in terms of value to their area)</i></p>	>95%

*It should be noted that the audit titles and high-level scopes included below are only indicative at this stage. At the start of each audit, an initial discussion will be held to agree the specific audit brief for the piece of work, which will include the objective and scope for the review.*

Audit Title	Areas of Coverage	Estimated Cost	Proposed Quarter
<p><b>Proceeds of Crime (POCA) and Crypto Currency Seizure Processes</b></p>	<p>The Proceeds of Crime Act (POCA) allows for the confiscation of assets that have been obtained through criminal activity, as well as the confiscation of money and assets even if they have been acquired through legitimate means, if it can be shown that they are indirectly derived from criminal activity.</p> <p>The Avon and Somerset Police Proceeds of Crime Reserve is used to hold funding received as a result of work the Force has undertaken in the seizure and confiscation of assets believed to have been gained through criminal activities. The balance of this reserve as of 31<sup>st</sup> March 2023 was £818,000.</p> <p>This review will provide assurance over the controls in place for the receipt and management of this money, including crypto currency seizures, as well as how the Force uses this funding to support continued work in this area. Benchmarking will also be undertaken against our other Partner Forces.</p> <p><u>Links to Risk Registers:</u>  <b>Corporate Risk Register: Risk 1</b> – Failure to deliver a sustainably balanced budget.  <b>Police and Crime Plan: Priority 1</b> – Preventing and fighting crime.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Force Management Statement: Section 1</b> – Finance</p>	<p>£4,635.00</p>	<p>Q3</p>
<p><b>Personal Development Unit - Tutoring</b></p>	<p>Tutors (including Tutor Constables) provide mentoring, instruction, and guidance to student officers. The role of a tutor is to take student officers out for their first shifts after they have completed their initial training. They aim to ensure the students attend a wide variety of jobs and are competent in the role before being allowed to patrol independently and therefore, tutors play a crucial role in socialising and developing new recruits.</p> <p>This audit will look to provide assurance over the effectiveness of controls in place to ensure student recruits achieve competency to patrol independently, particularly in respect of those controls related to tutoring under the Policing Education Qualifications Framework (PEQF).</p> <p><u>Links to Risk Registers:</u>  <b>Corporate Risk Register: Risk 2</b> – Failure to meet expectations of improved performance and service delivery.  <b>Corporate Risk Register: Risk 3</b> – Failure to grow, develop and then maintain the workforce and leadership culture, capacity and capability.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Force Management Statement: Section 11</b> – Force-wide Functions</p>	<p>£4,635.00</p>	<p>Q3</p>



Audit Title	Areas of Coverage	Estimated Cost	Proposed Quarter
<p><b>Management of Evidential Property</b></p>	<p>A light touch follow up review to provide assurance that actions to mitigate against the risks identified in this recent limited assurance audit have been implemented.</p>	<p>£965.62</p>	<p>Q3</p>
<p><b>Information Governance</b></p>	<p>The Force is responsible for holding a significant amount of data in a wide range of systems and applications, governed by frameworks and legislation, for example General Data Protection Regulations (GDPR) and Information Commissioner’s Office (ICO) guidelines, as well as the Force’s own internal policies and procedures.</p> <p>In addition, Information Governance, Digital and Data features on Avon and Somerset Police’s corporate risk report, with several (currently 15) medium to high scoring risks. There are several areas that make up the overall assessment of the risk, but the organisation has recently invested in its Information Governance capability through increased funding and growth to meet demand.</p> <p>This audit will aim to review the internal controls over recording, retention and disposal of data, and records of processing data, which can lead to unfavourable findings by regulators.</p> <p><u>Links to Core Areas of Recommended Coverage:</u>  <b>Corporate Risk Register: Risk 5</b> – Information Governance Practices, data and digital assets are not governed and controlled or used legitimately, ethically, appropriately or effectively for policing purposes.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Force Management Statement: Section 10</b> – Knowledge Management and ICT  <b>Force Management Statement: Section 11</b> – Force-wide Functions</p>	<p>£4,635.00</p>	<p>Q4</p>
<p><b>Victim Support Services</b></p>	<p>Victim support services provide support for victims of crime and traumatic incidences. These services are important because they provide specialist help to support people to cope and recover to the point where they feel they are back on track with their lives.</p> <p>We undertook an audit of this area as part of the 2021/22 Internal Audit Plan, providing assurance that the Force is providing victims of crime with appropriate support to help them cope, recover, and be protected from re-victimisation. This audit received a Limited Assurance opinion.</p> <p>This review will aim to focus specifically on compliance with the Victim Code of Practice, as well as a review of learning from ASC Operation Soteria, including Operation Bluestone Pillar 3 (Engagement with Victims).</p> <p><u>Links to Risk Registers:</u>  <b>Corporate Risk Register: Risk 2</b> – Inability to deliver a sustainably balanced budget.  <b>Police and Crime Plan: Priority 2</b> – Engaging, Supporting &amp; Working with Communities, Victims &amp; Partner Org’s.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Force Management Statement: Section 6</b> – Protecting the Vulnerable</p>	<p>£4,635.00</p>	<p>Q4</p>

Audit Title	Areas of Coverage	Estimated Cost	Proposed Quarter
<b>Criminal Justice</b>	<p>The Crown Prosecution Service (CPS) prosecutes criminal cases that have been investigated by the police and other investigative organisations in England and Wales. The CPS is independent, and decisions to prosecute are taken independently of the police and government.</p> <p>We undertook an audit of this area as part of the 2021/22 Internal Audit Plan, providing assurance on the processes in place for responding to Action Plans/ No Further Action (NFA) responses to cases from the Crown Prosecution Service (CPS). This audit received a Limited Assurance opinion. In the time since this audit was finalised, the area has undergone transformation. This audit will re-review the controls in place and assess the outcomes following the transformation.</p> <p><u>Links to Risk Registers:</u>  <b>Corporate Risk Register: Risk 2</b> – Failure to meet expectations of improved performance and service delivery.  <b>Corporate Risk Register: Risk 7</b> – Decreasing public confidence and legitimacy impacts negatively on service delivery.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Police and Crime Plan: Priority 4</b> – Increasing the legitimacy of, and public confidence in, the Police and Criminal Justice System.  <b>Force Management Statement: Section 5</b> – Investigations</p>	£4,635.00	Q4
<b>Strategic Approach to ICT</b>	<p>Any strategic approach to ICT at the Force must link closely with their obligations, both nationally and regionally, for the push towards national initiatives such as the replacement of the PNC (Police National Computer) and Identity Access Control (already highlighted by other police partners).</p> <p>We will seek to provide end-to-end assurance that the strategy translates through into defining how ICT is executed across the wider infrastructure and defines how resources/talent are utilised. The risks regarding this are articulated around ICT not being aligned around the wider strategies both locally to the force and wider regionally and nationally. This will prevent the force from exploiting the latent opportunities around the digital programmes both regionally and nationally.</p> <p><u>Links to Risk Registers:</u>  <b>Corporate Risk Register: Risk 5</b> – Information Governance practices, data and digital assets are not governed and controlled or used legitimately, ethically, appropriately or effectively for policing purposes.  <b>Police and Crime Plan: Priority 3</b> – Leading the police to be efficient and effective.  <b>Force Management Statement: Section 10</b> – Knowledge Management and ICT</p>	£5,021.25	Q4
<b>TOTAL estimated cost of delivery of above proposed audits</b>		<b>£29,162</b>	

<b>Support Activities and Follow Up Work - 2023-24 Annual Allocation</b>			
<b>Contribution to Regional Work</b>	As agreed, across all South West Police Forces, an allocation has been allotted to take forward audits of common interest, enabling benchmarking of approach and position across the region as a whole. The scope of these reviews is to be determined by the Directors of Finance from each of the South West Police Forces.	£3,862	Throughout Year
<b>Planning, Reporting &amp; Advice</b>	Agreed attendance at quarterly audit committees, undertaking audit planning and any corporate advice.	£7,725	Throughout Year
<b>TOTAL estimated cost of delivery of support activities and follow up work for 2023/24</b>		<b>£11,587</b>	
<b>TOTAL cost of delivery for Q1-2 Audits</b>		<b>£28,776</b>	
<b>TOTAL estimated cost of delivery of above proposed Internal Audit Plan for 2023/24</b>		<b>£69,525</b>	
<b>TOTAL agreed cost of delivery for the Wiltshire Internal Audit Plan for 2023/24</b>		<b>£69,525</b>	

<p><b>Pipeline Audits</b>  <i>These audits are potential areas for inclusion as part of future Internal Audit Plans</i></p>	<ul style="list-style-type: none"> <li>Homeworking</li> <li>Business Continuity – Compliance with Civil Contingencies Act</li> <li>Chief Officer and OPCC Expenses</li> <li>Ammunition and Armoury Management</li> <li>H&amp;S of Front-Line Officers and Staff - TRiM</li> <li>Leasehold Management</li> <li>Culture</li> <li>Vetting – Follow Up of HMICFRS Inspection</li> <li>Crime Allocation</li> <li>ERP Programme – Post Implementation Review</li> </ul>
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Report 5b

# Avon & Somerset Constabulary and Office of the Police and Crime Commissioner Joint Audit Committee (JAC)

## Report of Internal Audit Activity – September 2023

Internal Audit ■ Risk ■ Special Investigations ■ Consultancy

# Executive Summary

SWAP is required to provide an annual opinion to support the Annual Governance Statement.

As part of our plan progress reports, we will look to provide an ongoing opinion to support the end of year annual opinion.

We will also provide details of any significant risks that we have identified in our work. A reminder of our assurance opinions and risk assessment is on our [website](#).

The Chief Executive for SWAP reports company performance on a regular basis to the SWAP Directors and Owners Boards.



## Audit Opinion and Summary of Significant Risks

### Progress of the 2023/24 Internal Audit Plan

Since the last committee in June 2023, the following audits have been completed:

- Estates – Compliance with Statutory Obligations
- Cash Handling
- Key Financial Controls (Accounts Payable and Accounts Receivable)
- IT Service Desk Follow Up

These audit reports are submitted with this update. Further detail is provided on the status of each audit in Appendix A and performance against the annual budget is summarised in the table below:

Performance Measure	Performance
<u>Delivery of Annual Audit Plan</u>	
Completed	33%
Reporting	6%
In Progress	13%
Ready to Start	0%
Not Yet Due (Q3-4)	49%

### Audit Opinion:

We are able to provide a **Reasonable** assurance opinion based on work completed to date.

### Significant Risks:

One significant risk has been identified as part of our Estates – Compliance with Statutory Obligations review which is detailed below:

*‘Gas, electrical and fire safety, as well as legionella and asbestos management is not effectively managed, potentially leading to incidents affecting the health and safety of employees and the public, with the potential of loss of life.’*

13 actions have been agreed with management to help mitigate this risk. These actions are due to be implemented by the 31<sup>st</sup> of December 2023 or earlier.

### **Regional Audit Work**

Two regional audits of Digital Forensics Outsourcing and Regional Organised Crime Unit (ROCU) from 2022/23 are currently ongoing. The audit of Digital Forensics Outsourcing is at report stage and the fieldwork for the ROCU review has commenced. A regional review of Recruitment and Retention for 2023/24 has also been requested for advancement in Q3.

### **Follow Up**

Our follow up audit of IT Service Desk has been completed and the report has been presented as part of this update. The follow up audit of Reasonable Adjustments is currently in progress. The follow up audit of Victim Support Services will now be merged with the wider review of this area proposed as part of the Q3-4 audit plan. A further follow up of Management of Evidential Property is planned for completion in Q3/Q4.

# Internal Audit Plan Progress 2022/23

# Appendix A

Link(s) to FMS Area(s)	Audit Area	Period	Estimated Cost	Status	Opinion	No of Recs	1 = Major	↔	3 = Minor
							Recommendations		
							1	2	3
Wellbeing Force-Wide Functions	<b>Wellbeing</b>	Q1	£4,635	Completed	Reasonable	0	-	-	-
Force-Wide Functions	<b>Estates – Compliance with Statutory Obligations</b>	Q1	£4,635	Completed	Limited	13	2	5	6
Finance Force-Wide Functions	<b>Cash Handling</b>	Q2	£3,862	Completed	Reasonable	5	-	-	5
Finance Force-Wide Functions	<b>Accounts Payable (Key Financial Controls)</b>	Q2	£3,476	Completed	Reasonable	2	-	2	-
Finance Force-Wide Functions	<b>Accounts Receivable (Key Financial Controls)</b>	Q2	£3,476	Completed	Reasonable	1	-	-	1
Force-Wide Functions	<b>Corporate Performance Management</b>	Q1	£3,862	Reporting	-	-	-	-	-
Knowledge Management and ICT	<b>Technology and Digital Audit Provision</b>	Q2	£4,635	Not Yet Due (Deferred until Q4)	-	-	-	-	-
-	<b>Contribution to Regional Police Audits</b>	Q1-4	£3,862	Not Yet Due	-	-	-	-	-
Responding to the Public Investigations Protecting Vulnerable People Knowledge Management and ICT	<b>Follow up audits of IT Service Desk, Reasonable Adjustments, Victim Support Services and Management of Evidential Property</b>	Q1-4	£1,931	In Progress (1/4 Follow Up Audits Completed)	N/A	-	-	-	-
Force-Wide Functions	<b>Planning, Reporting &amp; Advice</b>	Q1-4	£7,725	Ongoing	N/A	-	-	-	-



## Audit Objective

To ensure the organisation effectively manages risks relevant to gas, electrical and fire safety and the possible presence of legionella and asbestos in its buildings.

## Link to CRR

**Risk 6** – Failure to maintain, invest in or optimise our infrastructure and assets.

Report 5c

Assurance Opinion	Number of Actions		Audit Assessment of Agreed Themes		Risk Reviewed	Assessment
	Priority	Number	Theme			
	Priority 1	2	Leadership & Culture		Gas, electrical and fire safety, as well as legionella and asbestos management is not effectively managed, potentially leading to incidents affecting the health and safety of employees and the public, with the potential of loss of life.	High
	Priority 2	5	Learning			
	Priority 3	6	Diversity & Inclusion	N/A		
	Total	13	Please see Appendix 1 for more details.		Risk Management Awareness	Unsatisfactory

## Key Findings



We reviewed an example of weekly fire alarm testing records completed at one of the Force's properties. We found that the weekly fire alarm tests were not being completed consistently and large gaps were evident between completion. Only four recorded weekly tests were completed in 2022, and only five recorded tests have been completed between January and May 2023. This may not represent testing performance across the entire estate; however, an internal review of all fire alarm testing should be completed.



The Regulatory Reform (Fire Safety) Order 2005 states that "the responsible person must make a suitable and sufficient assessment of the risks". Although the legislation does not define a timescale for reviews of assessments, it also states that "Any such assessment must be reviewed by the responsible person regularly so as to keep it up to date". We reviewed the most recent five-yearly fire risk assessments (FRAs) for five buildings and found that these had not been completed at five-year intervals, however, work is currently ongoing to ensure overdue assessments are completed. The most recent FRA completed in our sample, Headquarters, was in April 2016, with the oldest being Broadbury Road Police Station, last completed in May 2007.

Annual premises risk assessments (PRAs) are completed which include a fire safety element, however, only 4/5 were provided for the buildings in our sample. They were the most recent versions; however, we did not receive a second example for 3/5 buildings to confirm these were happening consistently. Yearly PRAs are not full FRAs but act as high-level assessments of fire risk.



We accessed the Force's online asbestos register, used to view asbestos inspection reports completed by G&L Consultancy Ltd (contracted to carry out inspections across the Force's estate) but we could not see any inspections completed after 2021. Reinspections were scheduled from 2021 onwards, however. One of the five buildings we selected to review received 57 actions following its inspection in September 2020, yet there was no evidence of reinspection. There are no other physical or electronic copies of the asbestos register held by the Force.



Procedural guidance reviewed was up to date and contained key information. Observations regarding the Legionellosis section of the Infectious Diseases procedure, Asbestos procedure, and Fire Safety procedure require follow-up to expand and further strengthen these documents. There is currently no Gas Safety procedure in place, an action has been raised to implement one.

## Audit Scope

We considered the following areas as part of the audit:

- Policies and procedures in relation to electrical safety, gas safety, legionella, asbestos, and fire management safety, and how these conform to relevant legislation and regulations.
- Annual gas safety checks.
- Electrical and Portable Appliance Testing (PAT).
- Annual legionella risk assessments, flushing and temperature monitoring. Asbestos registers and status monitoring.
- Fire safety management and equipment testing.

## Conclusion

Our 'limited' assurance opinion reflects significant gaps in controls and performance management which is currently preventing the Force from being fully aware of non-compliance regarding its statutory obligations. Gaps in fire alarm testing, potentially overdue asbestos inspections, and overdue five-yearly fire risk assessments should be addressed as a priority to significantly improve controls and oversight of these areas. Good practice is seen in portable appliance testing and gas safety servicing with only minor findings raised below in Appendix 1. Please note that due to the number of areas in the scope and the budget allocated for the review, we completed a high-level assessment of the controls and completed sample testing for areas we thought would be most beneficial. This meant we did not fully test all areas of scope.





<p><b>1.1 Finding: Procedure documents</b></p>	<p><b>1.1a Agreed Action</b></p>																								
<p>We requested and reviewed the electrical safety, asbestos management, infectious diseases and fire safety policies and procedure documents. All of these had been reviewed recently and contained the expected information.</p>	<p>The Delivery Manager for Safety to ensure that a procedure document is written outlining key gas safety processes; this should include expectations of staff if they notice gas leaks. The procedure should also include the use of Liquefied Petroleum Gas (LPG) and the transportation, storage, and disposal of gas cylinders.</p>																								
<p>We also requested the Force’s gas safety procedure; however, it was confirmed that there is no policy or procedure document in place. We advise that a procedure document is developed which outlines key information such as, but not limited to, the planned frequency of servicing, the contracted entity completing the servicing, how servicing information is recorded and monitored, and what employees should do if they were to notice a gas leak. The use of Liquefied Petroleum Gas (LPG) and the transportation, storage, and disposal of gas cylinders should also be considered in the procedure. This would provide assurance to Force stakeholders that gas safety is compliant with legislation and is being managed effectively.</p>	<table border="1"> <tr> <td><b>Priority</b></td> <td><b>3</b></td> <td><b>SWAP Ref.</b></td> <td>2513</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Safety</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> December 2023</td> </tr> </table>	<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2513	<b>Responsible Officer</b>	Delivery Manager for Safety			<b>Timescale</b>	31 <sup>st</sup> December 2023														
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<b>Timescale</b>	31 <sup>st</sup> December 2023																								
<p>The Legionellosis procedure forms part of the Infectious Diseases Procedural Guidance. The procedure forms a good basis but could be expanded upon and use more specific wording. Examples where the procedure could be more specific include: <i>“Showers, toilets and saunas will be kept clean at all times. They will be regularly inspected and disinfected. Showerheads will be disinfected regularly”</i>. The wording should be updated by quantifying the frequency of activities. The procedure could also expand on who carries out testing in this area. Currently, Integral are contracted to carry out monthly tap temperature checks whilst handypersons complete visual checks also, but this is not stated in procedures.</p>	<p><b>1.1b Agreed Action</b></p> <p>The Delivery Manager for Safety to expand upon the Legionellosis procedure and updates the frequency of testing with more focused wording.</p>																								
<p>The asbestos procedural guidance states that <i>“the [asbestos] register should be readily available and located at the enquiry office/front desk/main reception or other similar readily available location within the building”</i>. Discussions with the Delivery Manager for Safety (DMS) and the Delivery Manager for Estates and Facilities (DMEF) confirmed that the only version of the asbestos risk register is held on the online portal. The procedure document should be updated to reflect current ways of working and access to the portal should be ensured for all relevant parties.</p>	<table border="1"> <tr> <td><b>Priority</b></td> <td><b>3</b></td> <td><b>SWAP Ref.</b></td> <td>2609</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Safety</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> December 2023</td> </tr> </table>	<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2609	<b>Responsible Officer</b>	Delivery Manager for Safety			<b>Timescale</b>	31 <sup>st</sup> December 2023														
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<b>Timescale</b>	31 <sup>st</sup> December 2023																								
<p>The Fire Safety procedure includes the process and frequency for fire and emergency evacuation plans. We found the wording in the procedure document for the frequency of these planned evacuations was inconsistent. The main body of text confirmed “fire and emergency evacuation plans will be practiced at least once annually”, whereas the wording in the appendix states “a fire evacuation drill will be organised at regular intervals at least twice yearly”. We raised this with the DMS, and they confirmed that they would update the wording to reflect the work being completed by the Facilities Teams, to define the appropriate evacuation frequency for each premises based on its risk rating, level of occupancy, delayed evacuation systems, and other local risk factors. Based on this assessment, evacuations will take place annually or biannually.</p>	<p><b>1.1c Agreed Action</b></p> <p>The Delivery Manager for Safety to update the Asbestos procedural guidance to reflect that the asbestos risk register is now held online, and copies of the register are not held in Force buildings. A review to ensure all appropriate staff have access to the portal should also be completed, in liaison with the Delivery Manager for Estates and Facilities.</p>																								
	<table border="1"> <tr> <td><b>Priority</b></td> <td><b>3</b></td> <td><b>SWAP Ref.</b></td> <td>2519</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Safety</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> December 2023</td> </tr> </table> <p><b>1.1d Agreed Action</b></p> <p>The Delivery Manager for Safety to update the Fire Safety procedure to reflect the new proposed frequency of completing fire evacuation drills across the Force estate.</p> <table border="1"> <tr> <td><b>Priority</b></td> <td><b>3</b></td> <td><b>SWAP Ref.</b></td> <td>2610</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Safety</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> December 2023</td> </tr> </table>	<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2519	<b>Responsible Officer</b>	Delivery Manager for Safety			<b>Timescale</b>	31 <sup>st</sup> December 2023			<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2610	<b>Responsible Officer</b>	Delivery Manager for Safety			<b>Timescale</b>	31 <sup>st</sup> December 2023		
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<b>Timescale</b>	31 <sup>st</sup> December 2023																								



## 1.2 Finding: Data Analysis Matching

We were provided with several monitoring spreadsheets used by the Force to track the schedule of planned maintenance of different statutory obligations in its buildings. Our Data Analytics Team attempted to match buildings seen on the Force asset register to the monitoring spreadsheets, using common identifiers, to build a report which showed which buildings have certain work completed. However, there were no common identifiers in these spreadsheets as naming conventions were slightly different in each spreadsheet. We asked the DMEF whether they had a record which they could view which provided them with assurance that there were no buildings which fell through the gaps and missed important statutory obligation testing. They confirmed there is no such document or system.

The DMEF did confirm, however, that work is in progress to use the ArcGIS system to map all building information into one software provider which will allow the Buildings and Estates Department to better track the work being completed across the Force estate and identify any unsatisfactory work completed by contractors. The timescale for this to become usable is early 2024. This is a positive move to gain full oversight of the work being completed in each building, however, it is important that controls are in place in the meantime to ensure all work is being completed as expected and that non-compliance is identified and addressed promptly.

## 1.3 Finding: Gas Safety

We completed sample testing for gas safety servicing, portable appliance testing (PAT), tap temperature checks for legionella, asbestos management and inspections, and fire risk assessments (FRA). Excluding asbestos, we tested the above for Broadbury Road Police Station, Fishponds Police Station, Headquarters (HQ), Radstock Police Station, and Concorde House. Asbestos checks were reviewed for Dulverton Police Station, Radstock Police Station, Almondsbury Police Station, Staple Hill Police Station, and Trinity Road.

Results from sample testing will be discussed separately, however, gas safety sample testing is summarised below. Note that HQ was sometimes split into multiple areas across the sample testing hence why more than 5 'areas' were tested in some cases. No testing was completed at Concorde House as there is no gas onsite.

- 10/10 areas had gas safety checks completed within the last 12 months; and
- 8/10 gas safety checks were verified as completed by a gas safe engineer employed by Integral, who are contracted to undertake the checks at the Force. We received only the name of the engineer who completed the other two buildings and therefore could not verify their Gas Safe status; however, they were also employed by Integral.

## 1.4 Finding: Portable Appliance Testing (PAT)

### Portable Appliance Testing (PAT)

- All (5/5) buildings had PAT completed in 2023. The next tests are all scheduled for 2024.
- Sixteen failed PAT items were repaired at HQ. The remaining failed PAT items across the remaining sample were assumed to have been disposed of.

We discussed with the Buildings Services Assistant how the Force is assured that failed PAT items are disposed of and removed from Force buildings. They confirmed that, currently, failed PAT items identified for disposal are not recorded. We have raised an action for this to happen to ensure there is a full audit trail and to close the loop. Handypersons responsible for disposal of failed PAT items should confirm via email, or another method, that this has happened.

## 1.4a Agreed Action

The Delivery Manager for Estates and Facilities to ensure that a process is developed whereby written confirmation is received from the persons responsible for disposing of a failed PAT item that they have appropriately disposed of the item.

<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2514
<b>Responsible Officer</b>	Delivery Manager for Estates and Facilities		
<b>Timescale</b>	31 <sup>st</sup> October 2023		



<p><b>1.5 Finding: Legionella</b></p> <p>We requested monthly tap temperature monitoring checks from Integral for the last five months (Feb-23 to Jul-23).</p> <p><b>Legionella – monthly tap temperature monitoring by Integral</b></p> <ul style="list-style-type: none"> <li>All 7/7 areas had five monthly checks completed. HQ Operations did not have a monthly check in April 2023, but had two checks completed in March 2023 by two separate engineers.</li> <li>5/7 areas evidenced inconsistency with the outlets tested. This was often the case with showers where some monthly reports did not have their reading included. Other outlets were also identified as not being tested monthly. We confirmed if all outlets should be tested monthly by Integral and we received the following response from an Integral engineer, which they confirmed that <i>“all outlets are tested monthly”</i>. This was not recorded as being the case.</li> <li>Additionally, two showers at Radstock Police Station had a Thermostatic Mixer Valve temperature outside the Integral quoted threshold of between 39C-43C. This was evident in the April and July 2023 monthly reports. An Integral engineer responded with the following: <i>“The shower at Radstock has a mixer tap, when the hot and cold are mixed to test it lowers the temperature, hence the only option is to say it needs remedial actions, however if you only ran the hot water through the shower, it would not fail”</i>.</li> </ul> <p>The above findings should be raised at the next performance meeting with Integral to understand why compliance has not been fully achieved in these areas.</p> <p>We discussed with the DMEF what controls they have in place to identify non-compliance. They confirmed that this should be picked up by the Facilities Officers and that the installation of ArcGIS will help tighten up oversight in this area once it is fully operational.</p> <p>Premises Risk Assessments (PRA) are completed on an annual basis by the Facilities Officers. This includes many hazards affecting buildings, such as fire safety, electrical hazards, asbestos etc. however, legionella is not included within this assessment. I discussed this the DMS and they confirmed that they have <i>“outside this audit been working with the facilities teams to upgrade the handy person checks [to] include running seldom used water systems to flush and prevent legionella risks along with water temperature checks undertaken by our contractors”</i>.</p> <p>We highlighted that legionella checks should also be included within the PRA as another check to confirm regular testing for legionella is being completed within Force buildings.</p>	<p><b>1.5a Agreed Action</b></p> <p>The Delivery Manager for Estates and Facilities to discuss the tap temperature monitoring audit results with Integral at the next contract performance meeting to ensure compliance is being achieved.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><b>Priority</b></td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%;"><b>SWAP Ref.</b></td> <td style="width: 25%; text-align: center;">2517</td> </tr> <tr> <td colspan="2"><b>Responsible Officer</b></td> <td colspan="2">Delivery Manager for Estates and Facilities</td> </tr> <tr> <td colspan="2"><b>Timescale</b></td> <td colspan="2" style="text-align: center;">31<sup>st</sup> October 2023</td> </tr> </table> <p><b>1.5b Agreed Action</b></p> <p>The Delivery Manager for Estates and Facilities to remind Facilities Officers to ensure they review any testing results which are carried out in buildings under their control to ensure non-compliance is identified and can be fed back to the contractor at the next performance meeting.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><b>Priority</b></td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%;"><b>SWAP Ref.</b></td> <td style="width: 25%; text-align: center;">2611</td> </tr> <tr> <td colspan="2"><b>Responsible Officer</b></td> <td colspan="2">Delivery Manager for Estates and Facilities</td> </tr> <tr> <td colspan="2"><b>Timescale</b></td> <td colspan="2" style="text-align: center;">31<sup>st</sup> October 2023</td> </tr> </table> <p><b>1.5c Agreed Action</b></p> <p>The Delivery Manager for Estates and Facilities to ensure that Legionellosis is included within the annual Premises Risk Assessment and any actions raised by handypersons or Integral are also captured.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><b>Priority</b></td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%;"><b>SWAP Ref.</b></td> <td style="width: 25%; text-align: center;">2522</td> </tr> <tr> <td colspan="2"><b>Responsible Officer</b></td> <td colspan="2">Delivery Manager for Estates and Facilities</td> </tr> <tr> <td colspan="2"><b>Timescale</b></td> <td colspan="2" style="text-align: center;">31<sup>st</sup> October 2023</td> </tr> </table>	<b>Priority</b>	2	<b>SWAP Ref.</b>	2517	<b>Responsible Officer</b>		Delivery Manager for Estates and Facilities		<b>Timescale</b>		31 <sup>st</sup> October 2023		<b>Priority</b>	2	<b>SWAP Ref.</b>	2611	<b>Responsible Officer</b>		Delivery Manager for Estates and Facilities		<b>Timescale</b>		31 <sup>st</sup> October 2023		<b>Priority</b>	2	<b>SWAP Ref.</b>	2522	<b>Responsible Officer</b>		Delivery Manager for Estates and Facilities		<b>Timescale</b>		31 <sup>st</sup> October 2023	
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<p><b>1.6 Finding: Asbestos</b></p>	<p><b>1.6a Agreed Action</b></p>																								
<p>We requested access to the online asbestos register which is supported and managed by G&amp;L Contractors Ltd (G&amp;L), who complete inspections of all Force buildings containing asbestos.</p> <p>All five buildings tested had not had inspections/re-inspections since November 2021. All buildings had actions raised from their last inspection, with Trinity Road receiving 57 actions (September 2020). There is no evidence on the online asbestos register that more recent inspections have occurred.</p> <p>Additionally, from a high-level review of the complete register, there did not seem to be any inspections from 2022 onwards. We were provided with a contact for G&amp;L, however, we did not receive a response from them. The Estates Department should raise this issue promptly with G&amp;L or discuss this at their next contract performance meeting.</p> <p>Performance Management controls would have identified this issue much sooner and discussions could have been held with G&amp;L to confirm whether inspections had taken place but not been available to view on the register.</p> <p>The DMS commented that they would prefer to have copies of the asbestos registers attached to the annual PRAs if the premises is known or suspected to contain asbestos containing materials (ACMs). As the only version of the asbestos register is held online, a low priority action has been added for the DMS and DMEF to discuss whether this is possible.</p>	<p>The Delivery Manager for Estates and Facilities to discuss the asbestos audit findings with G&amp;L Contractors Ltd as soon as possible to determine whether recent asbestos inspections have been completed. Inspections which are overdue should be scheduled as soon as possible to ensure buildings containing asbestos are safe and are being maintained effectively.</p> <table border="1" data-bbox="1160 351 2143 534"> <tr> <td><b>Priority</b></td> <td style="background-color: #FFD700;">2</td> <td><b>SWAP Ref.</b></td> <td>2612</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Estates and Facilities</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> October 2023</td> </tr> </table> <p><b>1.6b Agreed Action</b></p> <p>The Delivery Manager for Estates and Facilities to review the current controls in place to identify non-compliance regarding asbestos inspections. Controls should be implemented and strengthened to identify non-compliance in the period between now and the implementation of ArcGIS.</p> <table border="1" data-bbox="1160 726 2143 893"> <tr> <td><b>Priority</b></td> <td style="background-color: #FFD700;">2</td> <td><b>SWAP Ref.</b></td> <td>2518</td> </tr> <tr> <td><b>Responsible Officer</b></td> <td colspan="3">Delivery Manager for Estates and Facilities</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> October 2023</td> </tr> </table>	<b>Priority</b>	2	<b>SWAP Ref.</b>	2612	<b>Responsible Officer</b>	Delivery Manager for Estates and Facilities			<b>Timescale</b>	31 <sup>st</sup> October 2023			<b>Priority</b>	2	<b>SWAP Ref.</b>	2518	<b>Responsible Officer</b>	Delivery Manager for Estates and Facilities			<b>Timescale</b>	31 <sup>st</sup> October 2023		
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<b>Responsible Officer</b>	Delivery Manager for Estates and Facilities																								
<b>Timescale</b>	31 <sup>st</sup> October 2023																								
	<p><b>1.6c Agreed Action</b></p> <p>The Delivery Manager for Safety and the Delivery Manager for Estates and Facilities to discuss the possibility of including a version of the asbestos register in the Premises Risks Assessments for buildings known to, or are thought to, contain asbestos containing materials.</p> <table border="1" data-bbox="1160 1093 2143 1276"> <tr> <td><b>Priority</b></td> <td style="background-color: #000080; color: white;">3</td> <td><b>SWAP Ref.</b></td> <td>2701</td> </tr> <tr> <td><b>Responsible Officers</b></td> <td colspan="3">Delivery Manager for Safety &amp; Delivery Manager for Estates and Facilities</td> </tr> <tr> <td><b>Timescale</b></td> <td colspan="3">31<sup>st</sup> October 2023</td> </tr> </table>	<b>Priority</b>	3	<b>SWAP Ref.</b>	2701	<b>Responsible Officers</b>	Delivery Manager for Safety & Delivery Manager for Estates and Facilities			<b>Timescale</b>	31 <sup>st</sup> October 2023														
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<b>Responsible Officers</b>	Delivery Manager for Safety & Delivery Manager for Estates and Facilities																								
<b>Timescale</b>	31 <sup>st</sup> October 2023																								



1.7 Finding: Fire Risk Assessments	1.7a Agreed Action												
<p>The Regulatory Reform (Fire Safety) Order 2005 states that <i>“the responsible person must make a suitable and sufficient assessment of the risks...Any such assessment must be reviewed by the responsible person regularly so as to keep it up to date”</i>. We requested the most recent Fire Risk Assessments (FRAs) for the five buildings sampled. We received the most recent five-yearly FRAs and noted the following:</p> <ul style="list-style-type: none"> <li>All five five-yearly FRAs were long overdue, the most recent was completed in April 2016 and the oldest was completed in May 2007.</li> <li>Annual PRAs have been completed for buildings, which does include a fire safety element that identifies the hazard, staff at risk, risk level, and actions. However, this is a more basic assessment which should be supported by the more thorough five-yearly assessments. We were only provided the most recent example for 3/5 buildings and therefore cannot confirm if these are completed consistently on a yearly basis for all buildings.</li> <li>A discussion with the Safety Officer and DMS confirmed that a new five-yearly FRA template has been created (which we have seen) and that it is intended that all overdue FRAs will be prioritised for completion this year.</li> </ul> <p>We advise that all overdue FRAs are completed as a matter of urgency in addition to the annual PRAs. Any actions raised in the annual PRAs should also feed into the five-yearly FRAs to ensure all actions are monitored through to completion. Completed actions should also be recorded to ensure an audit trail of decision making. The DMS confirmed that work has already started in this area by the Health &amp; Safety team and is ongoing to provide all 5-yearly reviews. This work is due to be completed by the end of September 2023. The action raised is to ensure this is seen through to completion, in addition to the other areas raised.</p> <p>A spreadsheet is in place which acts as a schedule for the five-yearly FRAs, this should be fully utilised to incorporate any actions arising from both PRA and FRA and should be used to complete all assessments on time.</p> <p>We received the most recent PRA for 4/5 buildings in our sample. We are happy these were completed recently, and one assessment is completed annually, however, could not confirm consistency of completion as we were not provided previous examples for all buildings in our sample. There were no assessments undertaken for some buildings in 2020-21 due to the lockdowns.</p>	<p>The Delivery Manager for Safety and Safety Officer to ensure that all buildings with an overdue 5-yearly fire risk assessment are completed immediately, prioritising those which are most overdue. These should all be completed using the most recent template and any actions and observations raised in annual premises risk assessment should feed into this review. A review of all annual assessments should also be completed to ensure all buildings are receiving their risk assessments on time.</p> <table border="1" data-bbox="1160 1117 2141 1329"> <tr> <td data-bbox="1160 1117 1406 1184"><b>Priority</b></td> <td data-bbox="1406 1117 1653 1184" style="background-color: red; color: white; text-align: center;"><b>1</b></td> <td data-bbox="1653 1117 1899 1184"><b>SWAP Ref.</b></td> <td data-bbox="1899 1117 2141 1184">2520</td> </tr> <tr> <td data-bbox="1160 1184 1653 1267"><b>Responsible Officer</b></td> <td colspan="3" data-bbox="1653 1184 2141 1267">Delivery Manager for Safety and Safety Officer</td> </tr> <tr> <td data-bbox="1160 1267 1653 1329"><b>Timescale</b></td> <td colspan="3" data-bbox="1653 1267 2141 1329">30<sup>th</sup> September 2023</td> </tr> </table>	<b>Priority</b>	<b>1</b>	<b>SWAP Ref.</b>	2520	<b>Responsible Officer</b>	Delivery Manager for Safety and Safety Officer			<b>Timescale</b>	30 <sup>th</sup> September 2023		
<b>Priority</b>	<b>1</b>	<b>SWAP Ref.</b>	2520										
<b>Responsible Officer</b>	Delivery Manager for Safety and Safety Officer												
<b>Timescale</b>	30 <sup>th</sup> September 2023												



1.8 Finding: Fire alarm testing	1.8a Agreed Action		
<p>We did not complete any sample testing of fire safety equipment; however, we did request an example of the monitoring documents used to keep track of equipment testing. We were provided with records of weekly fire alarm testing completed by handypersons. Excluding gaps seen between 2020 and 2021 during covid lockdowns, there have also been large gaps between recorded tests. The example we were provided with, only evidenced five weekly fire alarm tests completed between January and May 2023. There were also only four recorded weekly fire alarm tests completed in 2022 for that same building.</p> <p>Due to the allocated audit budget, we were unable to complete sample testing for all areas of the scope. We only reviewed one example of fire alarm testing, and therefore, the above finding may not reflect fire alarm testing at other force sites.</p> <p>However, fire alarm testing is crucial as any faults need to be identified as soon as possible. Audit testing indicated that fire alarm testing in that building was not satisfactory. Therefore, an action has been raised for this to be addressed as soon as possible, and for weekly testing records to be reviewed for all buildings to identify other buildings not being tested frequently.</p>	<p>The Delivery Manager for Safety to liaise with the Estates Department to review and ensure that all weekly fire alarm testing is completed as expected and is recorded in writing, or electronically, using testing records provided.</p>		
<b>Priority</b>	<b>1</b>	<b>SWAP Ref.</b>	2613
<b>Responsible Officer</b>	Delivery Manager for Safety		
<b>Timescale</b>	31 <sup>st</sup> December 2023		



Audit Assessment of Agreed Themes		
Theme	RAG Rating	Rationale
Leadership & Culture		The above findings show that monitoring and oversight of the Force's statutory obligations could be improved. Although there are some good examples of compliance, there is also evidence that handyperson checks are not being recorded, and that reports from work undertaken by contractors are not being reviewed effectively to identify and raise non-compliance. We have been assured this will be improved once ArcGIS is fully operational, however, controls should be strengthened in the meantime to ensure full compliance with statutory obligations.
Learning		Handypersons and staff responsible for monitoring statutory obligations as part of Force policy, are trained to undertake their duties. We did, however, notice the recording of some weekly checks to be inconsistent. Therefore, further training and/or communication may be required.
Diversity & Inclusion		Not tested.



**Audit Objective**

To provide assurance that the Force has effective key control frameworks in place for accounts payable processes.

**Link to CRR**

Risk 1: Inability to deliver a sustainably balanced budget.

Assurance Opinion	Number of Actions		Audit Assessment of Agreed Themes		Risk Reviewed	Assessment
	Priority	Number	Theme		Key accounts payable controls are not implemented leading to late, inaccurate or fraudulent payments resulting in contract/ supplies disruption and financial loss.	Medium
	Priority 1	0	Leadership & Culture			
	Priority 2	2	Learning			
	Priority 3	0	Diversity & Inclusion	Not Assessed		
	Total	2	<i>Please see Appendix 1 for more details.</i>			
						Risk Management Awareness

**Key Findings**



Our invoice payment sample testing identified issues with late payments, and the need for tightened controls within the uniform purchasing authorisation processes. Those making electronic payment requests should also be reminded of the need to have a complete electronic payment request (EPR) form before processing the payment.



Our supplier creation and changes sample testing identified that process notes to support supplier changes were not always clear and the request for the setup of one occupational health supplier was not appropriately authorised. We also found there is not a formally approved list of suppliers which do not require additional verification checks when they are set up or changes are made. Whilst the majority of requests are now submitted through the Assyst portal, requests for Special Constables were still being received via email.

**Audit Scope**

We considered the following areas as part of the audit:

- Segregation of duties in payment processes.
- Creation and amendment to creditor data.
- BACs processes.
- Follow up of internal audit actions from our review of Accounts Payable in 2022/23.
- Plans in place to ensure effective controls over accounts payable processes are maintained in the new system (Oracle Fusion) which is due to go live in April 2024.

**Conclusion**

Generally, there is a sound system of control in place surrounding accounts payable processes. Two actions have been raised to help strengthen current processes. These actions, together with the detailed findings are noted at Appendix 1 below.





Appendix 1

Findings & Action Plan

**1.1 Finding: - Invoice Processing**

We reviewed a sample of 25 supplier invoices that had been three-way matched with a purchase order (PO) and delivery note and found the following issues:

- Three invoices were paid late because the accounts team were waiting for queries to be answered by the service team.
- One invoice was paid late as a PO had not been raised before the invoice was received.
- We could not give assurance that one invoice had been appropriately approved as the approver had left the force and it was not possible to see what their approval level was at the time the invoice was approved.

As part of this testing, we also spoke to the Stores Supervisor who is responsible for placing uniform purchases for the Force. We were advised that the Stores Supervisor can place orders up to the value of £5,000, if the order is above this value, they must get approval from the Store Manager. However, there is nothing in the ordering system to prevent the Stores Supervisor from placing orders over £5,000 and they advised us they sometimes split the order into chunks to avoid needing to get approval. The Store Manager does not do any checks to identify any anomalies.

Finally, we reviewed a sample of 15 invoices that were exempt from needing a PO and found the following issues:

- Two invoices were via an electronic payment request, but the EPR form was not saved on the file.
- One invoice was recalled due to queries and sent to the Accounts Payable team to review. The Accounts Payable team then reposted the invoice for payment but did not get approval from the authoriser first.
- There is a list of payment types that are exempt from requiring a PO to be raised. We were informed that there is not a formal process which should be followed when adding to this list, and there is no requirement for approval to be sought from senior management.

**1.1a Agreed Action**

Service areas should be reminded of the process that should be followed when purchasing goods and services and the importance of responding to invoice queries quickly to avoid late payments.

The Stores Supervisor's authority threshold for making uniform purchases should be reviewed to determine if it remains accurate or should be increased. Controls should be introduced to ensure the agreed threshold is adhered to.

Those making electronic payment requests should be reminded of the need to have a complete EPR form before processing the payment.

The Accounts Payable team should be reminded of the need to get approval from the relevant authoriser before reposting invoices that come to them for queries. The Force should consider introducing an additional control to prevent this in the new accounts payable system (Oracle) that is due to go live in April 2024.

The PO exemption list should be reviewed by senior management and any future additions should be formally approved.

<b>Priority</b>	2	<b>SWAP Ref.</b>	AP 2950
<b>Responsible Officer</b>	Head of Finance		
<b>Timescale</b>	31 <sup>st</sup> December 2023		



1.2 Finding: - New suppliers and Supplier Changes	1.2a Agreed Action
<p>The set up of new suppliers and changes to supplier details should be raised through the Force’s portal called Assyst. We reviewed a sample of 11 supplier changes and 19 new supplier set ups and noted the following issues:</p> <ul style="list-style-type: none"> <li>• The Assyst file notes were not clear for three supplier changes that were made.</li> <li>• A new occupational health supplier was set up without an authorised signature from the occupational health team.</li> <li>• Special Constable new supplier requests were being made via email rather than using the Assyst portal.</li> </ul> <p>During the testing we were advised that some new suppliers and supplier changes can be processed based on the information provided in Assyst and no further verification checks to confirm bank details, VAT numbers and addresses are required. However, we were advised that this was based on informal agreements in the team, there isn't a list of approved exceptions.</p>	<p>Those processing new supplier set ups and changes to supplier details should be reminded of the need to keep clear file notes in Assyst.</p> <p>Those processing new occupational health suppliers should be reminded that an authorised signature should be obtained from a member of the occupational health team before processing.</p> <p>Those making special constable new supplier requests should be reminded to make any requests via the Assyst portal.</p> <p>The Head of Finance should approve a list of supplier types that do not require bank details, VAT number and addresses to be verified before the supplier is set up or details are changed.</p>
<p><b>Priority</b></p>	<p><b>2</b></p>
<p><b>Responsible Officer</b></p>	<p>Head of Finance</p>
<p><b>Timescale</b></p>	<p>31<sup>st</sup> December 2023</p>



Audit Assessment of Agreed Themes		
Theme	RAG Rating	Rationale
Leadership & Culture		The Force recognises the need to improve accounts payable processes which it plans to do through the implementation of Oracle Fusion in April 2024. The new system will introduce additional PO and invoice approval controls and tighten the set up and changes to creditor data.
Learning		The RAG rating we have applied here links to the Force's ambition to improve financial processes including accounts payable processes through its new system (Oracle Fusion). The improvements noted above are built from learning and the limitations of the current system (SAP).
Diversity & Inclusion	Not Assessed	We have been unable to provide an opinion on diversity and inclusion specific to the accounts payable processes we have reviewed.



**Audit Objective**

To provide assurance that the Force has effective key control frameworks in place for accounts receivable processes.

**Link to CRR**

Risk 2: Inability to deliver a sustainably balanced budget.

Assurance Opinion	Number of Actions		Audit Assessment of Agreed Themes	
	Priority	Number	Theme	
	Priority 1	0	Leadership & Culture	
	Priority 2	0	Learning	
	Priority 3	1	Diversity & Inclusion	Not Assessed
	<b>Total</b>	<b>1</b>	<i>Please see Appendix 1 for more details.</i>	

Risk Reviewed	Assessment
Key accounts receivable processes are not in place leading to delayed / incomplete invoicing resulting in increased recovery action / loss of income.	Medium
<b>Risk Management Awareness</b>	Satisfactory

**Key Findings**

	At the time of writing, the Force has around £1.4m in customer debt. Of which, around £500k was due. A sample of 20 debts (c.10% of the total customer invoices) of an age where recovery action should have been instigated was reviewed against the Force's debt recovery procedures. We found instances where invoices had not been raised and dispatched in a timely manner or chased in accordance with agreed process. Of the 20 debts selected for review, 16 were paid by the time we concluded our testing.
	In 2022/23, the Force raised just over 70 credit notes. A sample of 10 (c.13%) were reviewed to ensure there was sufficient evidence to support why the credit note was raised, that the credit note was raised for the correct amount and approved by an appropriate individual. In one instance, we found that a credit note for £3,120 had been approved by a Finance Assistant and not a Senior Accountant as required. Upon investigation by Finance, it was found that this individual had permissions within SAP to raise and approve credit notes. It was confirmed by the Head of Finance that permission for the individual to approve a credit note has now been removed. Therefore, no formal action has been raised.
	SAP system controls were reviewed to ensure customer invoices or accounts could not be deleted or suspended where there was an outstanding debt. SAP will allow an invoice to be deleted if it has not already been sent out to the customer. However, there will be an audit trail on the system to show this. A customer themselves with an outstanding debt can be deleted however, this access is restricted to IT only. A customer can also be suspended with an outstanding debt if an individual has the correct permissions to do so. Data analysis was performed on all outstanding debt against suspended customers. We found no instances of suspended customers with an outstanding debt. The findings are noted for management consideration only.
	The Force are currently in the process of implementing a new finance system (Oracle Fusion) which should go live in April 2024. The new system hopes to improve (amongst other things) accounts receivable processes. These improvements are noted at Appendix 1 below.

**Audit Scope**

We considered the following areas as part of the audit:

- Debtor account creation and amendments.
- Invoice raising and dispatch.
- Aged debt recovery processes.
- Write off procedures.
- Credit note procedures.
- Plans in place to ensure effective controls over accounts receivable processes are maintained in the new system (Oracle Fusion) which is due to go live in April 2024.

**Conclusion**

Generally, there is a sound system of control in place surrounding accounts receivable processes. An action has been agreed to help strengthen current processes. This action, together with the detailed findings are noted at Appendix 1 below.



## Appendix 1

## Findings & Action Plan

### 1.1 Finding: - Invoice raising, dispatched and debt recovery.

A sample of 20 debts that were of an age where recovery action should have been instigated was reviewed against the Force's debt recovery procedures in order to ensure that they were raised and dispatched in a timely manner and chased in accordance with agreed policy. The findings from our testing are summarised below:

- The Force aims to raise an invoice within 5 working days of a request being received. In 7/20 cases, this was exceeded. The maximum time one invoice took to be raised was 8 working days. Finance explained that these delays were likely as a result of year end commitments and pressures as all seven of these invoices were requested to be raised in March 2023.
- 30 days after an invoice is raised, a reminder is automatically generated by the SAP which is emailed to Finance by IT. The reminder is checked by Finance and then sent onto the customer. On average, it took around 12 calendar days to issue these reminders out to the customer as a result of delays from receiving these from IT. The Force are currently in the process of implementing a new finance system (Oracle Fusion). One improvement the system will bring is more efficient automated reminders that reduce the need for manual processing. These should therefore remove IT's involvement in the process thereby, reducing the time it takes to issue a reminder out to the customer. An action has been agreed in the interim to ensure reminders are sent out quicker.
- According to the Force's debt recovery procedures, the customer should be contacted for payment on day 14, 28, 30, 45 and at 5-day intervals where appropriate. In 12/20 cases reviewed, we found debts had not been chased in accordance with these requirements. In 4/12 of these cases, the debt had not been paid at the time of concluding our sample testing. In 16/20 cases reviewed, the debt had been paid by conclusion of our sample testing. The Force hopes that Oracle Fusion will improve debt recovery processes by automating recovery action and by clearly assigning individuals to the recovery of specific types or debt or customers which will be underpinned by system generated notifications that prompt Finance to chase payment at certain intervals. An action has been agreed in the interim to ensure debts are chased at agreed intervals.
- After 90 days of a debt becoming due, the Force should pass on recovery action to Legal Services. However, this does not occur in reality because the customer is usually another Force, OPCC or other government agency and the Force will not seek legal action against these entities. Also, the debt may not be financially viable to pursue when costs for legal proceedings are factored in. We identified five instances in our sample where recovery action should have been referred to legal services (according to the Force's procedures) but were not due to the above reasons. The Force does however have procedures in place to stop services for customers who are not public sector organisations (e.g., security alarm providers) and evidence to support this was occurring was seen as part of our review.

### 1.1a Agreed Action

The Head of Finance to remind staff responsible for invoice raising and debt recovery to do so in a timely manner and in accordance with agreed process.

<b>Priority</b>	<b>3</b>	<b>SWAP Ref.</b>	2857
<b>Responsible Officer</b>	Head of Finance		
<b>Timescale</b>	31/10/2023		



## 1.2 Finding: - Credit note authorisation.

Just over 70 credit notes were raised in 2022/23. A sample of 10 (c.13%) were reviewed to ensure there was sufficient evidence to support why the credit note was raised, that the credit note was raised for the correct amount and approved by an appropriate individual. All credit notes should be approved by a Senior Accountant which is managed through workflows in SAP. In one case reviewed, the system showed that a Finance Assistant had approved a credit note for £3,120. Upon investigation by Finance, it was found that this individual had permissions within SAP to raise and approve credit notes. It was confirmed by the Head of Finance that permission for the individual to approve a credit note has now been removed. As such, no formal action has been raised but the findings highlighted for management.

### Audit Assessment of Agreed Themes

Theme	RAG Rating	Rationale
Leadership & Culture		The Force recognises the need to improve accounts receivable processes which it plans to do through the implementation of Oracle Fusion in April 2024. The new system will bring together invoice request and raising into one system (which currently sits in two systems – SAP and Assyst); include capabilities to ensure more accurate accounting of VAT which should reduce the number of incorrect invoices being raised; have the ability to risk manage types of customers in order to apply more effective debt recovery solutions; improve automation and system generated reminders that are customised to the type of customer or debt; and provide notifications to prompt individuals responsible for debt recovery to chase payments at certain intervals and milestones.
Learning		The RAG rating we have applied here links to the 'Leadership & Culture' section above that highlights the Force's ambition to improve financial processes including accounts receivable processes through its new system (Oracle Fusion). The improvements noted above are built from learning and the limitations of the current system (SAP).
Diversity & Inclusion	Not Assessed	We have been unable to provide an opinion on diversity and inclusion specific to the accounts receivable processes we have reviewed.

## Follow Up Audit Objective

To provide assurance that the agreed actions to mitigate against the risk exposure identified within the 2022/23 Limited opinion audit of the IT Service Desk have been implemented.

Report 5f

### Follow Up Progress Summary

Priority	Complete	In Progress	Not Started	Summary
Priority 1	0	0	0	0
Priority 2	4	0	0	4
Priority 3	3	1	0	4
<b>Total</b>	<b>7</b>	<b>1</b>	<b>0</b>	<b>8</b>

### Follow Up Assessment

The original audit of the Service Desk was completed in July 2022 and received a Limited assurance opinion. The objective of the original audit was to provide assurance that the Force's Service Desk function effectively and efficiently assists the 'customer' (i.e. officer and staff) in their use of the Force's technology and thereby helps the Force realise its digital policing ambitions.

Key findings from the audit follow up have been summarised below.

### Key Findings



The ICT Portal Link on the Pocketbook homepage cannot currently be moved as this has been rejected by product owners for Pocketbook. This has been rejected on the basis that they feel the current location is sufficient. We have been advised that a review of the homepage of Pocketbook will take place within the next 6 months and the move will be considered as part of that review.



Effective changes have been made to the IT portal, knowledge base resources, and escalation & follow-up processes. The IT portal now has common issues, such as frequently used forms, applications, and password resets, positioned prominently for users to access. The knowledge base articles have also been reviewed and greater communication channels established to ensure this stays up to date. Additionally, the escalations & follow up processes have been updated, with weekly catch-ups for the service desk team to monitor these, as well as improvements in the reporting of those calls that have been escalated or require follow-up.



Additional Robotic Process Automation (RPA) processes have been implemented to reduce the time users spend waiting for password resets, as well as reduce the number of manual password resets being undertaken by the service desk. This has led to the time users need to wait for automated password resets being reduced by half. At this time, this is unable to be reduced further due to the limited number of RPA machines available to the service.

### Conclusion

Testing has been performed in relation to all priority 1 and 2 actions and supporting evidence obtained to support implementation of actions. Follow-up of the priority 3 actions is based on self-assessment by the responsible manager. Whilst one of the recommendations is yet to be completed, good progress has been made in other areas. Please see Appendix 1 below for further information in relation to the progress made towards the implementation of agreed actions.



## Appendix 1

## Agreed Actions & Follow Up Assessment

### 1.1 Recommendation

We recommend that management review the current process for access and maintenance to the FAQ/Self Help element for IT support. This content should be reviewed regularly with clear lines of ownership with regards to the update and maintenance.

Agreed Action	Follow Up Assessment	Complete
Agreed as above.	The Service Desk Manager has ensured that a full set of FAQs are now available to customers within the self-service portal. These FAQs are linked to knowledge articles contained within SharePoint and regular reviews have been set up for these articles. More than 450 FAQs have been created and published in August, with another 1000 estimated. Evidence was provided in the form of screenshots of the published FAQs within the self-service portal.	
<b>Priority</b> 2 <b>Timescale</b> 31/01/2023 <b>SWAP Ref:</b> AP#1782		

### 1.2 Recommendation

We recommend that management ensure that there is a review of the wider customer experience (UX/UI) of the IT Portal including exploring opportunity for greater self-service and a review of the current effectiveness of the online forms

Agreed Action	Follow Up Assessment	Complete
Agreed as above.	The IT portal has been redesigned with support from the Force's cohort of Digital Points of Contact, which are nominated individuals within each team/business area and act as a middle ground between the IT Directorate and the customer. Evidence was provided in the form of screenshots of the new homepage portal that has been established, as well as evidence of the user use of the IT portal.	
<b>Priority</b> 2 <b>Timescale</b> 31/01/2023 <b>SWAP Ref:</b> AP#1783		

### 1.3 Recommendation

We recommend that management revise the current approach to knowledge bases across each level of support teams. Whilst we appreciate that some information within knowledge bases (such as IP networking) will want to be retained by that individual support team, we would set the objective of identifying those elements within knowledge bases that could further facilitate first line call resolution, a resolution via the IT portal and a self-service FAQ.

Agreed Action	Follow Up Assessment	Complete
It may not be feasible to review all knowledge bases across the Directorate at this stage, however it will be ensured that there will be review with Teams of any information that the Service Desk requires to undertake their role, and ensure that this is included on the Service Desk knowledge base.	The Service Desk are now advised of any process changes, these are updated on the knowledge base by the Service Desk Manager who ensures that the team are aware of the changes. Evidence was provided of the Service Desk completing review of the knowledge base items and identifying and performing amendments to the knowledge base.	
<b>Priority</b> 2 <b>Timescale</b> 31/01/2023 <b>SWAP Ref:</b> AP#1786		





1.4 Recommendation					
<p>We recommend that management undertake a review of the end-to-end resolution journey for a service desk call when it is handed off the second and third-line support. This should include clarification on responsibilities regarding recording of activity on the call and how to maintain customer contact before the call is resolved. We would also advise management to engage with ASSYST into how multiple follow ups for a specific call can be reported. This may form the business case into how issues with current controls in relation to the second and third-line resolution can be addressed pro-actively.</p>					
Agreed Action		Follow Up Assessment			Complete
Agreed as above.		<p>The following changes have been made to the resolution journey for service desk calls.</p> <ul style="list-style-type: none"> <li>Customer chase ups and escalations are being flagged straight away, monitored daily - direct contact by Service Desk/Service Management and Resolver Teams.</li> <li>Additionally, Service Management are reporting monthly on calls over 30 days to ensure follow up, working closely with Resolver Teams.</li> </ul> <p>Service Desk &amp; EUS have:</p> <ul style="list-style-type: none"> <li>Successfully Implemented a joint teams channel which is improving communication &amp; knowledge sharing.</li> <li>A weekly catchup meeting to discuss any significant change, issues or improvements required.</li> <li>Created a feedback document to improve Incident quality which can improve knowledge base and reduce call bounce backs.</li> </ul> <p>Evidence was provided of monitoring reports for calls over 30 days, and calls over 90 days, and examples of the collaborative teams channel was provided.</p>			
Priority	2	Timescale	01/05/2023	SWAP Ref:	AP#1788

1.5 Recommendation					
<p>We recommend that management review the ease of accessibility to the IT portal direct from the Pocketbook home page. This should include more prominence of the IT portal link and a direct link on first click to the support ticket submission on the IT portal.</p>					
Agreed Action		Follow Up Assessment			In Progress
Agreed as above, however this will require discussion with the Digital 7 projects team, and this may affect the action undertaken.		<p>The recommendation was assessed and rejected by Digital and Projects who are the product owners for Pocketbook. The basis being that they feel that the current location of the portal link is sufficient. We cannot move this currently. We have been advised that a review of the homepage of Pocketbook will take place within the next 6 months and the move will be considered as part of that review.</p>			
Priority	3	Timescale	31/01/2023	SWAP Ref:	AP#1781
				Revised Timescale	29/02/2024



## 1.6 Recommendation

We recommend that management review the communication channels as to how the contact number for the Service Desk are available when a device is not working, or internet access is down. However, we appreciate that this should be balanced against the continued aim of customers using the IT portal as standard to access Service Desk resources if access to the internet is available.

### Agreed Action

Agreed as above, however this will require review with the Digispoc community and this may affect the action undertaken.

### Follow Up Assessment

The Force has undertaken an investigation that has revealed that there are currently no issues (or historically) of customers being unable to contact the Service Desk. All new joiners are provided with contact details as part of induction.

Complete

Priority **3** Timescale 31/01/2023 SWAP Ref: AP#1784

## 1.7 Recommendation

We recommend that management examine the current configuration for the automated SAP password reset with the aim of ensuring that the time for a completed reset matches that of a customer calling the service desk. This will require a pro-active approach to ensure the improvement of confidence in the online SAP password reset process to ensure that the current percentage of calls to the service desk do not increase in the interim

### Agreed Action

Agreed as above.

### Follow Up Assessment

The RPA Team have given more runtime across more machines to improve the time taken to get a SAP password reset. Wait time has reduced by half for users. The Service has determined that they will not be able, at this time, to improve this any further using RPA due to the restriction in the number of RPA machines available. This may change when Assyst is upgraded, however this is not certain.

Complete

Priority **3** Timescale 31/01/2023 SWAP Ref: AP#1785

## 1.8 Recommendation

We recommend that management revise the process for the reopening of support tickets to provide clarity for the customer and consistent management information to address future issues and trends relating to support desk resolution. We would advise referring to current ITIL best practice that suggests that a new support ticket is raised each time with a specific reference back to the original support ticket to maintain the audit trail. This way, new elements to the support ticket can be raised such as changes to the categorisation and the priority.

### Agreed Action

Agreed as above, however this will require further investigation before making changes to the current process, once this is completed feedback and justification will be provided if this exact action is not undertaken

### Follow Up Assessment

A review of need to re-open calls is being used to inform training, and the permissions to re-open calls are being more tightly controlled through management only.

Complete

Priority **3** Timescale 31/01/2023 SWAP Ref: AP#1787

# Avon and Somerset Police Audit Progress Report

Year ending 31 March 2023

September 2023



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# Key Grant Thornton team members



Jackson Murray

Engagement Lead

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Jackson will have ultimate responsibility for the delivery of your audit service. Specifics of the role include:

- leading our relationship with the Police and Crime Commissioner and Chief Constable, ensuring you have access to Grant Thornton's full service offering;
- being a key contact for the Chief Finance Officers and the Joint Audit Committee (JAC) meeting frequently with key members of management;
- taking overall responsibility for delivering high quality audits which meet professional standards;
- agreeing with you the annual joint audit plan, and a timetable for delivering the work;
- reviewing the audit file, giving particular focus to any key areas of risk or critical judgements exercised during the audits;
- reviewing and signing off all audit reports;
- attending JAC to discuss key issues arising from our work and any recommendations;
- acting as a 'sounding board' on key decisions relevant to our responsibilities as your auditors; and
- sharing good practice identified at other organisations.



Roz Apperley

Manager

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Gail will ensure that all work allocated is carried out on a timely basis in accordance with the firm's professional standards and to the satisfaction of clients and engagement lead.

As the key contact Gail will be responsible for building and maintaining good working relationships with all colleagues and clients.

To support delivery of the testing strategy she will:

- assist the engagement lead in establishing audit objectives and overall scope;
- ensure key matters which arise during the audits which were not identified at the planning stage are properly assessed and dealt with;
- review the work of in-charge auditor and the wider fieldwork team;
- finalise our draft reports to management;
- manage, motivate and coach team members; and
- control the audits in relation to timescales, budgets and risk management procedures.



Vanilla Shi

Audit In-Charge

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Vanilla will work as part of the team, leading the on site audit team, providing a service which meets or exceeds client expectations and supports the engagement lead / manager team. Specifics of the role include:

- taking an active part in the audit planning discussions to identify audit risks and appropriate audit strategy;
- communicating any issues relating to the audit with the engagement manager or engagement lead;
- overseeing all aspects of audit fieldwork and completion;
- addressing and discussing queries in respect of technical and audit issues identified during the course of the audit;
- maintaining good working relationships with client staff; and
- delegating work to other members of the audit team, ensuring they understand their responsibilities and have received appropriate on-the-job training / coaching.

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# Introduction & headlines

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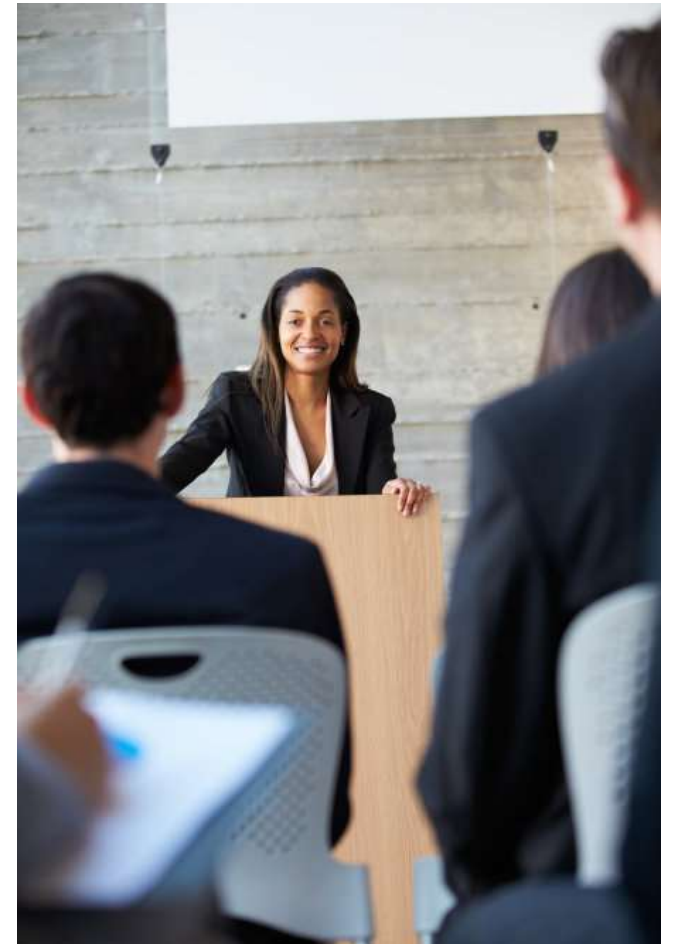
This paper provides the Joint Audit Committee with a report on progress in delivering our responsibilities as your external auditors

Members of the Joint Audit Committee can find further useful material on our website where we have a section dedicated to our work in the public sector. Here you can download copies of our publications.

If you would like further information on any items in this briefing or would like to register with Grant Thornton to receive regular email updates on issues that are of interest to you, please contact either your Engagement Lead or Engagement Manager.

We continue to bring specialists to our update conversations where appropriate to share any learning from our position as a leading audit supplier to the police sector.

You will also have access to our annual Chief Accountant Workshops and any other networking opportunities we create for the various stakeholders.



# The auditor's statutory responsibilities

## Opinion on the audited body's financial statements

Our work enables us to give an opinion as to whether the financial statements:

- give a true and fair view of the financial position of the audited body and its expenditure and income; and
- have been prepared properly in accordance with the relevant accounting and reporting framework as set out in legislation, applicable accounting standards and other directions.

Our planning documented our understanding of your key risks, your control environment and informed our testing strategy. This allowed us to issue our Joint Audit Plan.

Since we last reported we have:

- begun our final accounts audit work, completing all of our work on system reports and the testing of the completeness and accuracy of these;
- received the majority of the working papers that support the financial statements and will be used as part of the audit;
- shared our week-by-week plan of proposed audit work with the finance team to allow them to plan around system implementation work and business as usual tasks.

We will continue to progress our final accounts audit testing and the current proposal is that we report our findings to the December 2023 JAC.

Roz will be supporting the 2022/23 audit team as manager due to Gail's sickness absence.

## Work on value-for-money arrangements

Under the 2020 Audit Code of Practice, we are required to undertake sufficient work to satisfy ourselves that the Police and Crime Commissioner and Chief Constable "has made proper arrangements for securing economy, efficiency and effectiveness in their use of resources."

Our initial risk assessment will build on our understanding of your arrangements, taking into account any findings from previous work on value for money. We report against the following criteria:

- Financial sustainability: how the body plans and manages its resources to ensure it can continue to deliver its services;
- Governance: how the body ensures that it makes informed decisions and properly manages its risks; and
- Improving economy, efficiency and effectiveness: how the body uses information about its costs and performance to improve the way it manages and delivers its services.

We did not report any risks of significant weakness in our Joint Audit Plan.

Colleagues from our specialist Value for Money team will undertake our work this year and we are making arrangements for them to begin this work shortly, with the intention that our Auditors Annual Report will be presented to the December 2023 JAC.

# The auditor's statutory responsibilities

## Other responsibilities

We are required to give an opinion on whether:

- other information published together with the financial statements is consistent with the financial statements.

We are also required to:

- consider whether the Annual Governance Statements comply with relevant disclosure requirements and whether they are consistent with the information we are aware of from our audit; and
- examine and report on the consistency of 'Whole of Government Accounts' consolidation schedules with the financial statements.

We will complete this work as part of our financial statements visit.

## Other statutory duties

The Local Audit and Accountability Act 2014 ('the Act') also requires us to:

- report to you if we have applied any of the additional powers and duties ascribed to us under the Act; and
- to certify the closure of the audits.

Our work to date has not required us to report any such matters to you.

## Added value

Grant Thornton has a large Public Sector practice and is a key supplier to the market. As a valued audit client, you will receive:

- the opportunity to access support from experienced technical colleagues. This means you will be at the forefront of accounting developments. Through this relationship we also ensure that communication works both ways and feed issues back from our clients;
- insight from our regular meetings within the sector where we discuss emerging developments. We will also raise any areas of concern that you have over policy, procedure, or regulation with your regulators; and
- technical and sector updates for the Joint Audit Committee.





# 2022/23 deliverables

2022/23 Deliverables	Planned Date	Status
<p><b>Accounts Joint Audit Plan</b></p> <p>We are required to issue a detailed accounts joint audit plan to the Joint Audit Committee setting out our proposed approach in order to give our opinions on the 2022/23 financial statements.</p>	June 2023	Complete
<p><b>Joint Audit Findings (ISA260) Report</b></p> <p>We currently plan to report the Joint Audit Findings Report at the December Joint Audit Committee meeting.</p>	December 2023	Not due yet
<p><b>Auditors Reports</b></p> <p>These are the opinions on your financial statements and annual governance statements.</p>	December 2023	Not due yet
<p><b>Auditor's Annual Report</b></p> <p>The key output from local audit work on arrangements to secure VFM is an annual commentary on arrangements, which will be published as part of the Auditor's Annual Report (AAR). We currently propose that a draft of the AAR will be taken to the December Joint Audit Committee.</p>	December 2023	Not due yet



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<b>MEETING NAME</b>	<b>DATE</b>	<b>AGENDA NO</b>
Finance and Assets Committee	September 2023	Report 7
<b>DIRECTORATE / DEPARTMENT</b>	<b>AUTHOR</b>	<b>COG SPONSOR</b>
Directorate of the Chief of Staff	Abby Rollings	Nick Adams
<b>NAME OF PAPER</b>	<b>PURPOSE OF THE PAPER</b>	<b>SESSION</b>
Audit Progress Review	Information/Decision	

## INTRODUCTION

This report is from the Inspection and Evidence Based Policing Team and provides an update on the following points:

- Overall numbers of open recommendations
- Number outstanding and late for action
- Total for sign off by Chief Finance Officer Nick Adams
- Any issues for escalation to CMB

## OVERVIEW

### Internal Audit Recommendations

Total	Total Number of Recommendations	Total Open	Total Overdue	Total Complete
<b>Internal Audit Recommendations</b>	<b>190</b>	<b>51</b>	<b>7</b>	<b>139</b>

Internal audit recommendations are tracked and closed once the internal auditors agree the action is complete. Governance is provided via the Joint Audit Committee. SWAP undertake follow up audits throughout the year to review progress. IEPT meet with SWAP every month to review progress.

The Auditors review all recommendations where the overall audit opinion is limited or below, however, this is only performed through the follow-up report once the last date for completion has been reached; the I&EBPT track all recommendations that fall due in the meantime. The I&EBPT track all recommendations that result from an audit with an overall opinion of 'reasonable' and above. The business lead confirms when a recommendation is considered closed or where a revised date for completion is required; the auditors are advised where a follow-up is due but has not been completed.

### Open Recommendations

- **2018/19**  
No open recommendations
- **2019/20**  
2 open recommendations  
2x IT Cyber Security open recommendations have deadlines of 30<sup>th</sup> June (overdue -awaiting update from Business Lead – Nick Lilley, contacted 11<sup>th</sup> July) and 30<sup>th</sup> September 2023
- **2020/21**  
3 open recommendations  
2x Health and Safety of Frontline Officers & Staff, deadlines 31<sup>st</sup> December 2023 and 31<sup>st</sup> March 2024  
1x Delivering the Digital Strategy deadline 30<sup>th</sup> June 2023 (overdue -awaiting update from Business Lead – Nick Lilley, contacted 11<sup>th</sup> July)

- **2021/22**

4 open recommendations

2x Victim Support Services, deadlines 31<sup>st</sup> August (overdue - awaiting update from Business Lead – Victoria Caple – contacted 5<sup>th</sup> Sept) and 31<sup>st</sup> October 2023

1x Remote working, deadline 30<sup>th</sup> June (overdue -awaiting update from Business Lead – Nick Lilley, contacted 11<sup>th</sup> July)

1x Key Financial controls awaiting sign off by Nick Adams

- **2022/2023**

27 open recommendations due September 2023 – April 2024

2 recommendations overdue as awaiting referral for sign off by Nick Adams Sept 15<sup>th</sup>

(2x IT Service Desk recommendations were closed during the Follow up audit carried out in Q2)

- **2023/2024**

13x Estates – Compliance with Statutory Obligations new open recommendations relating to the audit final report just published.

Final reports and associated recommendations are pending on Key Financial Controls, Cash Handling and Corporate Performance Management audits. The Wellbeing audit completed in Q1 produced no recommendations.

	Total Recommendations	Open	Open Out of Timescale	Completed
<b>RSM 2018/2019</b>				
Follow Up - Volunteers	1	0	0	1
Key Financial Controls	1	0	0	1
<b>Total</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>2</b>
<b>SWAP 2019/2020</b>				
Workforce Plan	3	0	0	3
Payroll and Expenses	5	0	0	5
Overtime Payments	3	0	0	3
Personal Issue of Assets	9	0	0	9
IT Cyber Security	3	1	1	1
Data Quality	5	0	0	5
Fleet Management	8	0	0	8
IT Business Continuity	4	0	0	4
Strategic Framework	8	0	0	8
Accounts Payable	6	0	0	6
<b>Total</b>	<b>54</b>	<b>1</b>	<b>1</b>	<b>52</b>
<b>SWAP 2020/2021</b>				
Data Protection - Incident Reporting	2	0	0	2
Health & Safety Management of Frontline Officers and Staff	4	2	0	2
Records Retention	5	0	0	5
Key Financial Controls	3	0	0	3
Delivering the Digital Strategy	2	0	1	1
Payments to Staff - Absence Management	2	0	0	2

Police Officer and Police Staff Training	2	0	0	2
Performance Management	4	0	0	4
Follow up Fleet	2	0	0	2
Follow up Data Quality	2	0	0	2
Recruitment and Vetting	1	0	0	1
Partnership Arrangements	2	0	0	2
<b>Total</b>	<b>31</b>	<b>2</b>	<b>1</b>	<b>28</b>
<b>SWAP 2021/2022</b>				
Complaints Handling	7	0	0	7
Organisational Learning from COVID-19	3	0	0	3
Remote Working	3	0	1	2
Key Financial Controls	5	0	1	4
Environmental Sustainability	2	0	0	2
Victim Support Services	6	1	1	4
Risk Management	4	0	0	4
Criminal Justice	3	0	0	3
Clinical Governance in Custody	5	0	0	5
Use of Force	3	0	0	3
<b>Total</b>	<b>41</b>	<b>1</b>	<b>2</b>	<b>38</b>
<b>SWAP 2022/2023</b>				
Evidential Property Management	6	5	0	1
Regional Digital Forensics	12	9	0	3
Firearms Licencing	3	0	0	3
IT Service Desk	8	1	0	7
Representative Workforce	3	0	0	3
Reasonable Adjustments	2	2	0	0
Key Financial Controls	5	3	1	1
Policy & Procedure Management	7	5	1	1
Regional Pensions Administration	1	0	0	1
Assurance Mapping	2	2	0	0
<b>Total</b>	<b>49</b>	<b>29</b>	<b>2</b>	<b>18</b>
<b>SWAP 2023/2024</b>				
Estates: Compliance with Statutory Obligations	13	13	0	0
<b>Total</b>	<b>13</b>	<b>13</b>	<b>0</b>	<b>0</b>