JOINT AUDIT COMMITTEE

1pm – 28 September 2023
Face-to-Face in Conference Room 1 & Online by Microsoft Teams

AGENDA

Attendees:

JOINT AUDIT COMMITTEE:	
Rachel Barber - Chair John Cunliffe Allan Rainford	Julie Perkins Sarah Davies
FORCE OFFICERS:	
Seb Phillips – Director of Finance & Resources Guto Edwards - Head of Finance Helen Williams - Financial Control Accountant Anne Matthews – Finance & Budgets Officer T/Chief Superintendent Simon Williams – Corporate Services	James Sutton – Head of Business Intelligence/Chair of Assurance Board Dewi Williams, Management Accountant
OFFICE OF THE POLICE AND CRIME COMMISSIONER:	
Stephen Hughes – Chief Executive Officer Kate Jackson – Chief Finance Officer	Angharad Jones – PA to the Chief Executive
OTHER ATTENDEES	
Helen Cargill, TIAA	Sabel Williams, Audit Wales

	Standing Items		Purpose	Page	Time
1	**Apologies & Declaration of Interest**	Chair			
2	**Minutes of the last meeting** The Chair shall propose that the minutes of the meeting held on 27 July 2023.	Chair		3	5 Mins
3	**Actions Log**	Chair		11	5 Mins
	Standing Items				
4	**Organisational Update**	Chief Executive Officer & Director Finance and Resources	Information	26	5 Mins

		Verbal update only, questions to be submitted in advance and answered outside of meeting.					
5	**HMICFRS Update & Action Tracker**		Chief Superintendent Corporate Services	Assurance	33	10 Mins

6	**Internal Audit**
	   a. Internal Audit SICA 2023/24
	   b. Annual Report 2022/23
	   c. Management Report
			a. Internal Audit
			b. Director Finance & Resources / Budget Officer
				Assurance	42
					51
					56
						10 Mins

7	**Risk Update**
	  - Risk Process Development & Current Risk Register
	  - Assurance Mapping
	  - OPCC Risk Register
			Head of Business Intelligence
			
			Chief Executive Officer/Chief Finance Officer
				Assurance	71	10 Mins

8	**Work Programme for 2023/24**		Director Finance and Resources and Chief Finance Officer	Decision	79	5 Mins
	Substantive Items					
9	**Final Risk Strategy & Risk Appetite Statement**		Head of Business Intelligence	Information	84	15 Mins
10	**Governance Update**		Chief Finance Officer/ Head of Corporate Services	Assurance	122	20 Mins
11	**Audit Enquiries Letter**		Chief Finance Officer	Information	135	5 mins
12	**Sustainability Update**		Environment/Energy Conservation Manager	Assurance	164	5 mins
13	**JAC Briefing:** - **Collaboration governance arrangements (Oral)**		Head of Change and Collaboration	Information	171	15 Mins 15 Mins
14.	**HMICFRS Value for Money Profiles**		Management Accountant		183	15 Mins
	AOB (Advise the chair ahead of the meeting)					
	DATES OF FUTURE MEETINGS 7 December 2023 28 March 2024 30 July 2024 26 September 2024 31 October 2024 (prov Accounts signing) 28 November 2024					
			TOTAL			2.10 Hrs
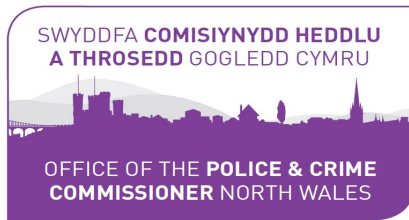
JOINT AUDIT COMMITTEE

Conference Room 1 and Online (Hybrid)
27 July 2023 at 13:00

PRESENT

JOINT AUDIT COMMITTEE:
Rachel Barber – Chair John Cunliffe Allan Rainford Sarah Davies Julie Perkins

FORCE OFFICERS:
Seb Phillips – Director of Finance & Resources Guto Edwards - Head of Finance Helen Williams - Financial Control Accountant T/Chief Superintendent Simon Williams – Corporate Services James Sutton – Head of Business Intelligence Matthew Stewart – Head of Strategic Planning Stephen Roberts – Head of Facilities (Items 1-7 only) Colin Jones – Health and Safety Manager (Items 1-7 only)

OFFICE OF THE POLICE AND CRIME COMMISSIONER:
Stephen Hughes – Chief Executive Officer Wayne Jones – Deputy Police and Crime Commissioner Kate Jackson – Chief Finance Officer Angharad Jones – PA to Chief Executive (minutes)

OTHER ATTENDEES
Helen Cargill, TIAA Michelle Phoenix, Audit Wales

1. **APOLOGIES AND DECLARATIONS OF INTEREST**

    Apologies - Anne Matthews – Finance & Budgets Officer

    Declarations of interest:
    Kate Jackson – relative working for Audit Wales

2. **MINUTES AND ACTION LOG**

The minutes of the meeting held on 28 March 2023 were agreed as a true record of the meeting.

3. **ACTION LOG**

The Action Log was updated and will be circulated with the minutes. Actions recommended closed and agreed closed were: Action 9 – 10/10/22, Action: 4, 12 – 8/12/22, Action: 1, 2, 4, 5, 6, 9, 10, 11, 12 & 13 – 28/03/23.

4. **ORGANISATIONAL UPDATE**

The Joint Audit Committee noted the updates from the pre-meeting and reports provided by the Office of the Police and Crime Commissioner and North Wales Police. Updates were provided on the work undertaken since the last Joint Audit Committee meeting in October.

North Wales Police

Director of Finance and Resources reported that a pay award of 7% had been agreed for all police officers. This is a significant amount as the Medium Term Financial Plan is based on a 2.5% increase. It was reported that for every percentage increase this equates to roughly £1.6m and therefore an additional 4.5% means that £7.2m was needed to fund the increase in pay.

Along with the pay award, additional funding was also announced to help fund this award.

North Wales Police currently receive circa 1% of the financial pot provided by Government. North Wales contribution from this equates to £3.3m in 2023/24 and £5.2m in 2024/25.

This means that there is likely to be a funding gap of circa £700,000 in the current year and circa £2m in 2024/25. Work is ongoing to confirm these figures, but they are bought to the Committee's attention as a likely issue for the Force. This issue will be dealt with through the organisational planning process.

5. **HMICFRS UPDATE**

Joint Audit Committee noted the update provided within the paper.

The PEEL report highlighted 11 Areas for Improvement (AFI). Much work is being undertaken to progress and a scrutiny process has been developed within the Force and owners identified for each AFI. Progress is tracked on a tracker system where all actions identified are highlighted and thus enables leads to be held accountable for their progress.

The Deputy Chief Constable has introduced a HMIC Assurance Board where services leads provide updates on progress and explain any barriers identified. This ensures that the Chief Officer Team are aware of progress and can support.

The Serious and Organised Crime (SOC) and Vetting inspection took place in February and a draft report received. Work has started on the AFI's identified.

T/Chief Superintendent Corporate Services noted the Force's desire to be on the front foot when the next PEEL inspection takes place, and a lot of work is being undertaken within the Force to achieve this position.

Chair requested that JAC members have sight of the AFI's and see if the AFI's are on target.

T/Chief Superintendent Corporate Services to provide this detail within the next meetings paper.

Action 5	T/Chief Superintendent Corporate Service to ensure that progress against AFI's is included within the next meetings paper.

6. **INTERNAL AUDIT**

a. <u>INTERNAL AUDIT SICA 2022-23</u>

Joint Audit Committee noted the update provided within the paper which provides an update on progress against the 2023-24 Annual Plan.

Work against the plan for last year has been finished with most audits receiving a positive grading but two limited assurance reports have been received – HR Absence Management and Health and Safety Management.

The Health and Safety audit received limited assurance because 2 Riddor reports were reported outside of the statutory time limit, but further work has been undertaken in this area to address the issue.

Chair questioned whether this was the second sequential limited Health and Safety audit.

Head of Facilities confirmed that this is the case and that some of the problems identified in 2021 still exist although significant progress has been made. It was reported that forms have been updated to improve feedback and that the Senior Management Team are now involved in this process. It was reported that much work had also been undertaken to raise awareness and the importance of staff completing the necessary forms and line-managers approving them promptly.

If officers/staff are now not doing what they should and completing the necessary forms the matter is escalated to the Senior Management Team.

Director of Finance and Resources confirmed that progress has been made and that the audit report received was significantly better than in 2021.

JAC member questioned what would be the consequences for the late Riddor reporting.

Head of Facilities stated that some staff do not understand the importance of reporting incidents and that this sometimes results in the late Riddor reports. Reporting has improved with compliance now at 80% compared to 20% in 2021. Contact was also made with HSE and no cause for concern raised.

Chair stated that it was disappointing to have limited assurance again but noted the good work being undertaken.

Regarding the HR Absence Management audit the Director of Finance and Resources stated that as an organisation wellbeing is very important and the force has invested the necessary resources to do this. Governance is also in place around the issue as it had already been identified as a force priority. The TIAA HR Absence Management report has reinforced this.

The audit was a fair assessment as change in policy is needed. Whilst processes are in place and absence is actively managed across the force this is not fully consistent across the organisation.

It was reported that the consultation process on changes to policy takes time as Unions are consulted and this affects timelines.

2023/24 Work Plan

Internal Audit reported that the document is very similar to that provided at the last meeting.

JAC member asked the difference between a collaborative audit and those which are not collaborative and noted that the Committee has asked that Treasury Management is included within the work plan every year.

Action 6a	Treasury Management is included within the Internal Audit work plan every year.

Internal Audit stated that collaborative audits look at the processes used by all four Welsh Police forces and look to identify good practice within organisations with only one report produced. The scope of the audit is also agreed by all four forces.

It is unlikely that a single force audit is any better but would have more control over the scope of what included within the audit.

JAC member requested that unstructured data is also looked at within the scope of the Data Protection audit to ensure that no additional risks are identified.

Internal Audit stated that the scope of this audit is currently being discussed with officers and will build this into the scope and then share with all to ensure that everyone happy with the scope of the audit.

Action 6b	Internal Audit and officers to consider whether unstructured data is included within the scope of the Data Protection audit.

JAC member also requested that the Capital Programme audit includes capital financial management processes within its scope to review how underspend could be lessened.

Internal Audit stated that the scope of this review has yet to be agreed but that the slippage of funds from year to year could be discussed with officers with a view of being incorporated within the review.

Action 6c	Internal Audit to discuss including the slippage of funds from year to year within the Capital Programme audit.

Chair requested that Finance and Unstructured Data be put forward as Collaborative audits within the Annual Plan as a common theme across all Forces.

b. <u>INTERNAL AUDIT OVERVIEW – MANAGEMENT REPORT</u>

Joint Audit Committee noted the paper which provides an overview of internal controls activity within North Wales Police.

7. **RISK UPDATE**

Joint Audit Committee noted the update provided within the Risk Update paper as of 29 June 2023.

Head of Business Intelligence stated that the Annual Review of Risk will be presented to the next Joint Audit Committee meeting in September.

JAC member thanked officers for separating the Force and OPCC risk registers.

JAC Chair requested access to the more detailed risk forms to be made available, as usual practice.

Action 7	Officers to provide JAC members with the more detailed risk forms.

8. **WORK PROGRAMME FOR 2022/23**

Joint Audit Committee noted the updated work programme presented and Chief Finance Officer noted that the programme was updated throughout the meeting with members comments.

It was noted that Risk Strategy and Risk Appetite would be placed on the September meeting agenda and Chair asked if any items could be deferred from the December meeting as looks to be a very full agenda.

Chief Finance Officer asked all to inform her of any further items that need to be included within the Work Programme.

Action 8	All to inform Chief Finance Officer of any additional items that need to be included within the Work Programme and consider if any agenda items could be moved from the December agenda due to large numbers of items to be discussed.

9. **AUDIT WALES – ANNUAL PLAN AND PROJECTION OF COSTS**

Joint Audit Committee noted the update provided within the Annual Plan and the Projection of Costs document.

It was reported that the ISA315 is a much more focused document and therefore impacts on the fees charged. As reported in previous meetings it is impacting on the time taken to prepare for the audit and the officer skill mix needed. It will be a much more focused audit.

It was reported that the fees have increased by 4.8% because of inflationary pressures and 10.2% because of the impact of the revised auditing standard. This is an increase which is affecting everyone in the United Kingdom.

JAC Member questioned whether Audit Wales believe they will be able to undertake the audit of Financial Statements during August to October and whether there is a risk that this work will not be completed in time.

Wales Audit stated that the work has been started to ensure that it is completed on time and is confident that the October target will be met.

JAC Member stated that with the increase of 15% in audit fees, individuals may not think that the police are getting a good deal with more costs for later timescales.

Wales Audit stated that the ISA315 is impacting on everyone, and all must comply with the new regulations. Costs have not increased as much as in England and Audit Wales are unable to profit from increased costs. If the audit does not take as long to complete, North Wales Police will receive a refund.

10.   **FORCE MANAGEMENT STATEMENT**

Corporate Head of Strategic Planning provided the Joint Audit Committee with the background to the Force Management Statement.

It was reported that the Force Management Statement is a continual process of reporting.

JAC member asked if horizon scanning is undertaken. Corporate Head of Strategic Planning stated that horizon scanning is undertaken and feeds into other Forces who carry out wider horizon scanning. Strategic leads also receive feedback on emerging issues.

Chair stated that the Joint Audit Committee members are keen to increase their knowledge of the Force Management Statement and would welcome a Deep Dive on this subject at a future meeting for information.

Action 10	Force Management Statement to be the subject of a Deep Dive agenda item at future JAC meeting for information.

11.   **JAC UPDATE – CAPITAL PROGAMME**

Joint Audit Committee noted the update provided by the Head of Finance which highlights the work which has been undertaken in the first quarter of 2023/24.

Head of Finance reported that he and colleagues had met with budget holders to identify any carry forward needed and understand what activity has been planned/scheduled for 2023/24.

The figures provided within the presentation have been submitted to the Senior Management Board and will also be presented to the Strategic Executive Board in early August.

Chair requested that Head of Finance to share presentation with JAC members.

Action 11	Head of Finance to share presentation with JAC members.

12.   **TREASURY MANAGEMENT PERFORMANCE**

Joint Audit Committee noted the update provided within the Treasury Management Performance report presented and the activity undertaken during 2022-23.

No breaches of limits or indicators had occurred during the period and interest from income being received from investments is approximately £2m.

JAC member asked if there was the possibility of repaying any outstand debt early as have the cash balance available and whether the Police and Crime Commissioner should be concerned that the actual figures are higher than the benchmark figures.

Head of Finance reported that they had not specifically considered the early repayment of outstanding loans as he believed that the penalties in doing so would be high and the loans held were borrowed at the historical low percentage rate of 1.25% interest. Will ask Arlingclose to look whether repayment of loans would be beneficial.

It was also reported that having higher figures than the benchmark would not cause worry on its own, but a close eye should be kept on this figure to ensure that a plan is in place on how these reserves are going to be used.

Head of Finance reported that the figures are taken at a point in time during March and that the working capital is affected by this as the pension payment is made during April.

13. **GOVERNANCE UPDATE – INCLUDING DRAFT AGS AND JAC TOR**

Joint Audit Committee noted the work undertaken by the Joint Governance Board and the input provided by the Assurance Board.

Further information on the work of the Joint Governance Board has been incorporated into the paper and the Joint Audit Terms of Reference are also provided for information.

Chair stated that in 2.1.4 it stated in brackets (individual force operational risk are specifically excluded from the remit of JAC) and questioned what operational means.

Chief Finance Officer explained that this means the low level organisational risk which fall below the Risk Register.

JAC members asked if this could be further explained, or further clarity given.

| Action 13 | Director Finance and Resources and Chief Finance Officer to clarify exactly what is meant under item 2.1.4 in the JAC Terms of Reference. |

14. **LEGAL REPORT**

Joint Audit Committee noted the paper which provides an overview of legal activity undertaken within the Force in the last six months.

Force Solicitor stated that employer learning is identified from each civil claim made and they continue to monitor for any emerging trends.

JAC member questioned the employer's liability with regards to employee slips, trips, and falls and asked what the process is for lodging a civil claim against North Wales Police and what role the manager takes.

Force Solicitor reported that these incidents have been minor and have not resulted in a Riddor report being submitted. An accident form may be submitted, and often the Force Legal Department will be contacted by an individual's solicitor. When claim received the legal department will investigate whether a Riddor or report from the manager is available. Every incident is investigated, and mitigation works put in place if appropriate.

It was confirmed that sometimes the first time that the Legal Department are made aware of an incident is when a solicitor contacts them. Director of Finance and Resources confirmed that this needs to be better linked to the Health and Safety processes.

15. **JAC ANNUAL REPORT – SELF ASSESSMENT AND ANNUAL REPORT**

The JAC Annual Report and Self-Assessment was noted and Chair awaits officer's response.

16. **ANY OTHER BUSINESS**

Joint Audit Committee would like to thank Helen Corcoran T/Chief Superintendent Corporate Services for all her help during the last year and wish her well in her new role.

The next Joint Audit Committee meeting will be held on 28th September at 1pm as a hybrid meeting: in person at Conference Room 1, FHQ Colwyn Bay and over Microsoft Teams.

	Open
	Closed
	Deferred

New/Open actions from March 2021

MEETING DATE	MINUTE NO.	ACTION DESCRIPTION	REQUIRED BY (DATE)	PERSON RESPONSIBLE	UPDATE
28/03/2023	3	**Organisational Update -** Director of Finance and Resources and Chief Superintendent Corporate to provide members with assurance that Whistleblowing Policy had been tested and fit for purpose.	Immediate	Director of Finance and Resources & Chief Super Corporate Services	23.06.23 – DFR engaged with Head of PSD regarding Whistleblowing. A summary of the current position is provided below: Our current whistleblowing guidance sits within the Counter Corruption Policy. This is being reviewed as a whole at this time. A piece of work started on an all Wales basis last year where between 3 of the 4 Welsh forces we have sought counsel advice for a specific Whistleblowing policy. This has been out for limited consultation in force with Staff associations, POD etc, however it will require full consultation when it is included in the full updated version of the Counter Corruption policy. This remains a work in progress. The target date for CCU policy completion is August23. This however does not negate what we already have and PSD staff, Legal and HR representatives attended a Whistleblowing input by counsel last year to ensure that should a individual fit this criteria each department would know how to respond accordingly. It has not been specifically tested since. We have significant engagement with our Police Integrity Line where people report concerns confidentially, but there is an option to instigate contact if the person so wishes.

MEETING DATE	MINUTE NO.	ACTION DESCRIPTION	REQUIRED BY (DATE)	PERSON RESPONSIBLE	UPDATE
					27/07/2023 JAC members questioned whether the Whistleblowing Policy had been tested and fit for purpose. Director of Finance and Resources to take away and provide further assurance at next meeting. 13/09/2023 – DFR & Head of PSD met to discuss the testing of the policy. No independent testing of the Whistleblowing policy currently takes place. However, there are a range of steps taken that do ensure accessibility and awareness of the policy exists including: • The current Counter Corruption Policy is accessible via the Force Intranet • A "Know where the line is" campaign was launched across Force in 2022 focussed on expectations for behaviour and standards that included Video footage and a posters campaign focussed on reporting routes for relevant issues. • The PSD signature include the details for contacting the Police Integrity line. The Head of PSD can confirm that engagement with the Police Integrity Line regularly occurs. An updated Anti-Corruption Policy is currently in its consultation phase. Once finalised the proposal is to issue a "Need to Know" across the force to ensure there is a broad awareness of the latest Force policy position. **Suggest action closed.**
28/03/2023	8	**Risk Update** - Head of Business Intelligence to share report on risk management review with members outside of the meeting.	Immediate	Head of Business Intelligence	28/06/23 - The Terms of Reference for the Risk Management Review to be undertaken by Gallagher Bassett was shared with JAC via their Google Drive on 07/03/23. Since then, the Force have changed insurers to Maven and therefore this review will no longer be carried out by Gallagher Bassett. One of the disadvantages of moving Insurer is that the risk management assistance provided ran alongside our actual policy as an added value benefit. As we know from the last few years, RMP offered a number of free risk management days within the term of the contact and additionally a host of online webinar training programmes of smaller bite sized areas. Unfortunately, Maven are not set up in such a way as to offer the extensive offering that RMP did. The Force have however been offered by Maven a risk management fund of £2,500 under the Liability quotation. Risk and Business Continuity Lead is currently in the process of communicating via the Broker to Maven to see which areas of the original Gallagher Bassett Terms of Reference they may be able to progress and organise within the

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					£2,500 budget. Maven have also suggested light training needs that they may be able to come up with and provide some in house advice without using the fund. A further update will be provided in due course. 27/07/2023 – JAC member expressed disappointment that the review did not take place with Gallagher Bassett. Member asked if this was one of their contractual obligations and enquired how this review will not take place. Director of Finance and Resources stated that it was not a contractual obligation of Gallagher Basset and Head of Business Intelligence stated that there was no obligation for NWP to undertake this review and that this would be a 3rd level of assurance. JAC member stated that it would be extremely helpful to have this review undertaken ad the same questions still arise. Chair stated that this review should be undertaken as provides reassurance for all. T/Chief Superintendent Corporate Services noted that this was still work in progress and would see to find a preferred way forward. 25/08/2023 - A verbal update will be provided by the Head of Business Intelligence in the meeting 28/09/23 on the Peer Review by South Wales Police.
27/07/2023	3	**Action Log – Internal Audit Overview** NEP Phase 2 actions arising from actions identified by internal audit	Immediate	JAC IT lead	JAC IT Lead to raise with officers during regular off-line meeting. **Recommend action closed.**
27/07/2023	5	**HMICFRS Update -** T/Chief Superintendent Corporate Service to ensure that progress against AFI's is included within the next meetings paper.	September meeting	T/Chief Super Corporate Services	Summary of the progress made against the AFI's included in the latest HMICFRS update paper for JAC. **Recommend action closed.**
27/07/2023	6a	**Internal Audit SICA 2023-24 -** Treasury Management is included within the	September meeting	Internal Audit / Finance & Budgets Officer	31/08/2023 – Finance and Budgets Officer reported that JAC members had previously requested that this be an annual audit and NWP have adhered to this. Treasury Management is undertaken on an annual basis and has received substantial assurance in 2017/18, 2018/29, 2019/20, 2020/21, 2021/22 and

MEETING DATE	MINUTE NO.	ACTION DESCRIPTION	REQUIRED BY (DATE)	PERSON RESPONSIBLE	UPDATE
		Internal Audit work plan every year.			2022/23, This year it will be a collaborative audit with Gwent and South Wales Police.
27/07/2023	6b	**Internal Audit SICA 2023-24** - Internal Audit and officers to consider whether unstructured data is included within the scope of the Data Protection audit.	ASAP	Internal Audit / finance & Budgets Officer	01/09/2023 – The Audit Planning Memorandum (APM) has not been received.
27/07/2023	6c	**Internal Audit SICA 2023-24** - Internal Audit to discuss including the slippage of funds from year to year within the Capital Programme audit.	September meeting	Internal Audit	12/09/2021 The Audit Planning Memorandum (APM) scope has been adjusted to incorporate slippage and the fieldwork commenced w/c 11/09/23
27/07/2023	7	**Risk Update –** Officers to provide JAC members with the more detailed risk forms.	September meeting	Head of Business Intelligence	25/08/2023 - PDF copies of LIVE Risks and recently CLOSED Risks up to the end of August will be submitted to the OPCC Executive Assistant for saving on the JAC Google Drive as soon as the Risk and Business Continuity Lead returns from Annual Leave on 11th September 2023.
27/07/2023	8	**Work Programme for 2022/23** - All to inform Chief Finance Officer of any additional items that need to be included within the Work Programme and consider if any agenda items could be moved from the December agenda due to large numbers of items to be discussed.	Immediate	All	
27/07/2023	10	**Force Management Statement** - Force Management Statement to be the subject of a Deep	September meeting	Chief Finance Officer	

MEETING DATE	MINUTE NO.	ACTION DESCRIPTION	REQUIRED BY (DATE)	PERSON RESPONSIBLE	UPDATE
		Dive agenda item at future JAC meeting for information.			
27/07/2023	11	**JAC Update – Capital Programme** - Head of Finance to share presentation with JAC members.	Immediate	Head of Finance	Presentation shared with JAC members 04.09.2023. **Recommend action closed.**
27/07/2023	13	**Governance Update – Including Draft AGS and JAC TOR -** Director Finance and Resources and Chief Finance Officer to clarify exactly what is meant under item 2.1.4 in the JAC Terms of Reference.	September meeting	Director of Finance and Resources / Chief Finance Officer	13/09/2023 – E-mail sent to JAC members clarifying what is meant under JAC ToR 2.1.4. **Recommend action closed.**

Closed actions since last meeting – Archived April 2023 – previously closed available on request

MEETING DATE	MINUTE NO.	ACTION DESCRIPTION	REQUIRED BY (DATE)	PERSON RESPONSIBLE	UPDATE
08/12/2022	1	**Organisational Update – OPCC -** Presentations from the Familiarisation event to be saved on google drive to enable members who were not present to have sight of content.	Immediate	PA to Chief Executive	Presentations saved on Google Drive. **Suggest action closed.**
08/12/2022	2	**HMICFRS Update -** Superintendent Corporate Service to ensure that further detail regarding delivery of actions and associated risks are included within the next Joint Audit Committee meeting paper.	March meeting	Superintendent Corporate Services	03/03/2022 – HMICFRS PEEL Report link to be shared with JAC members ahead of meeting and HMICFRS PEEL update to feature on March23 agenda. **Recommend action closed.**
08/12/2022	3	**Internal Audit – SICA -** Internal Audit and Finance and Budgets Officer to provide members with an update during January of completed and remaining audits for 2022/23.	January 2022	Internal Audit and Finance and Budgets Officer	21/12/2022 – Update shared with JAC Members **Suggest action closed.**

08/12/2022	5	**Work Programme for 2022/23 -** Chief Finance Officer to update Work Programme and present update paper on precept/budget in March JAC meeting.	March meeting	Chief Finance Officer	01/03/2022 - Link to Police & Crime Panel papers provided below. https://modgoveng.conwy.gov.uk/ieListDocuments.aspx?CId=800&MId=9252&Ver=4 **Suggest action closed.**
08/12/2022	6	**Work Programme for 2022/23 -** Chief Finance and Chief Executive Officers to meet with JAC Risk lead to review the OPCC risk register.	As soon as possible	Chief Finance Officer / Chief Executive	14/2/23 – CFO met with J Cunliffe 14 February 2023 to go through risk management within the OPCC, including how risks are escalated to/de-escalated from the corporate risk register. JC asked whether the process and thresholds to escalate/de-escalate risks are consistent across the OPCC and force. CFO referred the matter to Corporate Risk and Continuity Lead for conformation. **08/03/23 – NWP Risk Lead reported -**OPCC Risks are recorded on the Force Risk Register if they meet the same threshold as per NWP Risks. This is done via an agreed Scoring Process and in accordance with The Risk Management and Assurance Mapping Framework. Any OPCC Risks that are requested to be Closed, again follow the same process. OPCC risks are reported to the Strategic Executive Board for strategic oversight and review. **28/03/2023** – JAC members concerned that risk registers are combined and believe they should be stand-alone as could cause conflict if together. CEO stated that happy for both to stand alone if provide assurance. CEO/CFO and JAC Risk Lead to meet to discuss. **Recommend action closed.**
08/12/2022	7	**Treasury Management Performance -** Head of Finance to ask Arlingclose to provide Treasury Management training to JAC members.	As soon as possible	Head of Finance	22/12/22 - Treasury advice has been sent out to tender with a closing date of early January. 28/03/2023 - Arlingclose have been reappointed. Head of Finance to contact to identify suitable date for Treasury Management training. **Action closed.**

08/12/2022	8	**Capital Programme – Update –** Director of Finance and Resources to share graph with audit committee members	As soon as possible	Director of Finance and Resources	06/03/2023 - Slide deck outlining financial performance re. Capital expenditure shared with audit committee members. **Suggest action closed**
08/12/2022	9	**Ethics Update -** Director of Finance and Resources to ascertain if Ethics Committee had been involved in the Internal Audits process.	Immediate	Director of Finance and Resources	02/03/2023 – No specific Ethics audits undertaken in recent past or TIAA activity triggered as a result of Ethics Committee. 28/03/2023 – Any ethical issues from audit process with be forwarded into the Ethics Committee. **Recommend action closed.**
08/12/2022	10	**Ethics Update -** Director of Finance and Resources to clarify whether applicants are asked whether they are members of the Freemasons as part of the application/vetting process.	Immediate	Director of Finance and Resources	02/03/2022 – DFR clarified with Force Vetting Manager who confirmed there is no specific Freemasons enquiry as part of the vetting process. **Recommend action closed.**
08/12/2022	11	**Ethics Update -** Vice-Chair of Ethics Committee to share dilemma and outcome with Joint Audit Committee Members.	Immediate	Vice-Chair of Ethics Committee	03/03/2022 - Context for action was Medical records ethical issue. Further information shared with audit committee members via group drive following the meeting. **Suggest Action Closed.**

10/10/2022	9	**Briefing deep dive – Communications Strategies - OPCC and NWP -** Consider and feedback to the Joint Audit Committee, how we provide value for money through managed communications to all our communities, to build on public confidence.	Ongoing	OPCC Head of Communications and Engagement & NWP Head of Communications	18/11/22 – DFR has contacted the respective leads to advise that the DFR and CFO will consider engaging with them on an appropriate communication plan. 08/12/2022 – Transparency on underspend ongoing. 03/03/2022 – Factored into March23 closed session agenda which will consider HMICFRS report findings and provide further update. **Suggest action closed.**
08/12/2022	4	**Risk Update** - Joint Audit member John Cunliffe to share view around risk assurance with officers outside of meeting.	As soon as possible	John Cunliffe – JAC Member	06/03/2023 – Email sent to Head of Business Intelligence to provide a view on capturing the risks and its assurance. Will discuss further with officers if required. 28/06/2023 – JAC member has sent Head of Business Intelligence an e-mail which he is considering. 28/06/2023 - Head of Business Intelligence, Risk and Business Continuity Lead, Assistant Head of Finance and Resources have considered the suggestion of recording a new economic climate risk, but are satisfied this is already covered and mitigated in Risks 89 and 93. **Recommend this Action is closed.**

| 08/12/2022 | 12 | **Briefings – Sustainability and Decarbonisation -** Director of Finance and Resources and Environment and Energy Conservation Manager to produce paper setting-out the role of the JAC in scrutinising work. | By March meeting | Director of Finance and Resources / Environment and Energy Conservation Manager | 06/03/2023 - Intention would be to consider further alongside JAC TOR but main areas of focus where JAC could add value would be regarding compliance with legislation; compliance with force policy and once developed, periodic scrutiny of progress made in relation to force plans.
28/03/2023 – Need to consider alongside other areas. Will include within draft JAC ToR. Provide update at next meeting.
09/05/2023 – to be discussed under the Governance agenda item.
23.06.23 – Discussions have taken place regarding the role of the audit committee in this area. The proposal is that:
• Sustainability is incorporated to the Audit Committee work programme.
• Formal reports are provided to the Audit Committee twice per annum.
• The Audit committees role is to seek assurance and apply scrutiny in relation to:
1. The force strategy being adopted.
2. The risks and opportunities presented in the delivery of this strategy.
3. The compliance of the Force with its policies; adopted codes of practice and the wider legislative framework.

Suggest action closed. |
| 28/03/2023 | 1 | **Organisational Update -** Chief Executive Officer to share with JAC Members percentage numbers of officers under disciplinary action within other forces when published. | Immediate | Chief Executive Officer | 07.06.23 – Chief Executive has contacted other forces and has obtained limited data from them. Information to be included within the next organisational update paper. **Suggest action closed.** |

28/03/2023	2	**Organisational Update -** Chief Superintendent Corporate Service to share VAW Performance Framework data with JAC Members once published.	As soon as possible	Chief Super Corporate Services	There was a change in direction nationally and a decision made not to publish individual Force data as part of the VAWG Performance Framework. The attached report is the one that was published nationally. 📄 PDF Tackling VAWG Policing insights rep **Suggest action closed.**
28/03/2023	4	**HMICFRS Update -** Chief Superintendent Corporate Services to include high level progress of actions raised by HMICFRS within paper to future Joint Audit Committee meetings	July meeting	Chief Super Corporate Services	Included in HMICFRS Update paper on the Agenda. **Suggest action closed.**

| 28/03/2023 | 5 | **Internal Audit SICA 2022-23** - Director of Finance and Resources to review and consider if any further action/processes need to be put in place when expenses are being claimed to ensure legitimacy. | Immediate | Director of Finance and Resources | 23.06.23 – The expenses process is via our online HR self-service system.

It places the emphasis on the Individual claiming. Submissions are made on the back of them confirming that they have read, understood and adhered to the Expenses & Allowances Policy. The policy states that NWP will reimburse expenditure incurred provided it is:

• Necessary
• Reasonable
• In addition to what the employee would have otherwise incurred AND
• Backed by a receipt.

It is clearly stated that submitting a claim contrary to this can lead to a full recovery of expenses claimed and if deemed appropriate, disciplinary action.

Expense claims still require line manager authorisation.

The context for the action was that there had been an issue that some receipts were unreadable. Uploading and scanning has become easier with access scanners at force sites restored and digital receipts and photos via force mobile phones have further mitigated the issue.

The conclusion is that the processes are proportionate to ensure the legitimacy of claims.

Suggest action closed. |
| 28/03/2023 | 6 | **Internal Audit Overview – Management Report -** Finance and Budgets Officer to share the North Wales internal audit plan for 2023/24 with members for approval outside the meeting. | Immediate | Finance and Budgets Officer | 04/04/2023 - Plan shared with JAC members.
Suggest action closed. |

28/03/2023	7	**Internal Audit Overview – Management Report** - Director of Finance and Resources and Finance and Budgets Officer to summarise and ensure that updates are provided against actions identified by internal audit.	July meeting	Director Finance and Resources and Finance and Budgets Officer	23.06.23 – This was discussed post meeting. Of particular relevance were the TIAA recommendations associated with 'NEP Phase 2'. The relevant recommendations were 249424, 249425 and 249426. The DFR has held several working group meetings to ensure that the JAC members are briefed on this issue and that the updates to these recommendations (which remain long term) provide sufficient detail for the July JAC meeting. **Suggest action closed**.
28/03/2023	9	**Work Programme for 2022/23 -** Chief Finance Officer to share Auditor's General letter to Local Authorities with Joint Audit members for their information.	Immediate	Chief Finance Officer	29/03/2023 – Letter shared with JAC members. **Suggest action closed.**
28/03/2023	10	**Work Programme for 2022/23 -** Chief Finance Officer to share public facing introduction to accounts document with JAC members before it is published.	ASAP	Chief Finance Officer	03/07/2023 - Document shared with JAC Members. **Suggest action closed.**

28/03/2023	11	**Treasury Management -** Head of Finance to change the wording in paragraph 3.6 of the Treasury Management Report from Council to Police and Crime Commissioner.	Immediate	Head of Finance	Wording has been changed. **Recommend Action Closed.**
28/03/2023	12	**Treasury Management -** Head of Finance to produce projection of costs and include within Joint Audit Committee papers.	July meeting	Head of Finance	Projections will be included in reports where possible, at times there may be updated information that was not available at the time of writing the report that would be included on slides" **Recommend Action Closed.**
28/03/2023	13	**Governance Update** - Chief Finance Officer to review content of paper presented to Joint Audit Committee and provide further assurance of Joint Governance Board's effectiveness.	July meeting	Chief Finance Officer	The content of the Governance Update has been reviewed to ensure the effectiveness of the Joint Governance Board is more clearly demonstrated within the paper. **Suggest item closed.**

Abbreviation Key	

CC	Chief Constable
CEO	Chief Executive Officer (OPCC)
CFO	Chief Finance Officer (OPCC)
DFR	Director of Finance and Resources (NWP)
HMICFRS	Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services
JAC	Joint Audit Committee
NWP	North Wales Police
OPCC	Office of the Police and Crime Commissioner
PA	Personal Assistant to CEO and CFO
PCC	Police and Crime Commissioner
PSD	Professional Standards Department (NWP)
TIAA	Internal Audit
WAO	Wales Audit Office

Joint Audit Committee

Meeting Date: 28th September 2023

Title:	OPCC Organisational Update
Author:	Stephen Hughes
Purpose of the report:	
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ☐ Assurance ✓ Information
Summary / Key Points:	• Serious Violence Duty update • Joint Equality Plan • Misconduct Regulations • Support for victims of fraud
Recommendations:	That JAC members note the report and that further detail will be provided in the closed session in relation to the Casey Review
Risk register impact:	New risk added to the OPCC register in relation to the PCC election in May 2024.
Assurance implications:	None
Equality Impact:	None
Information exempt from disclosure:	None

Updates

The previous meeting of the Joint Audit Committee (JAC) was held on 27th July 2023. This report will provide an update to the JAC on OPCC matters of note since then.

The Serious Violence Duty

The Serious Violence Duty went live on 30th January this year. Further detail regarding the duty can be found here (Serious Violence Duty - GOV.UK (www.gov.uk))

The Police and Crime Commissioner is the lead convener of the specified authorities responsible for the Duty in North Wales. The Home Office has provided funding to the OPCC for two years to develop a Serious Violence Prevention Programme.

A programme lead has now been recruited to manage this work on a two year secondment. The Home Office provided £112,000 via the OPCC for the Serious Violence Prevention Partnership to use for interventions to support the prevention of violence in our communities.

The Futures without Violence fund closed for applications on 31st August and a panel consisting of members of the specified partners will consider the applications on 6th September.

Equality and Diversity

The new Equality Objectives for North Wales Police and the Office of the Police and Crime Commissioner for the coming 4 years are:

- **Effective Governance -** In meeting our equality duties, we will exercise effective governance, be transparent and ensure public oversight.
- **Our Public** We will encourage participation and ensure people are neither overpoliced nor under protected.
- **Our Partners –** We will work with partners to improve our equality performance.
- **Our Organisation –** We will embed a supportive environment that creates an inclusive culture.
- **Our Workforce –** We will work towards achieving a representative and professional workforce made up of people with the right skills.

These have now been incorporated into the Joint Equality Plan (2023 – 2027). The plan is undergoing final review for graphics etc and is likely to be published on the OPCC website by the time of the September Joint Audit Committee meeting.

The report here details the consultation and engagement activity undertaken to establish equality objectives for 2023-2027. In addition, the Plan and the report on the consultation and engagement activity have been produced in Easy Read formats which are also available on both the OPCC and Force websites.

Police Misconduct Hearings and Police Appeals Tribunals in Wales

To ensure that the PCC can meet the requirements of the Police Conduct Regulations 2020 we have recently recruited more Legally Qualified Chairs and Independent Panel Members to sit on Police Misconduct Hearings and Police Appeals Tribunals in Wales.

The recruitment has been carried out by the OPCC on behalf of all PCC's in Wales. The final cost of the recruitment exercise is not yet known, but the costs will be met equally by the four Police and Crime Commissioners.

Further changes to the Misconduct Regulations have very recently been announced by the Home Office and we await further detail on the future role of Legally Qualified Chairs and Independent Panel Members.

Fraud Caseworker

The former Police and Crime Commissioner (PCC) for North Wales funded a pilot project for a Fraud Caseworker to join the team of specialist caseworkers in the Victim Help Centre. The pilot began in 2019 and recent research (delayed by Covid) has shown the impact of the role and how the people of North Wales have benefited from the specialist support it offers.

Since the role was established, 2,246 victims of fraud have received tailored support from the Fraud Caseworker. The service means that these victims have received fraud-specific resources and can speak to someone who understands the unique impact being a victim of fraud can have. The victims also have one direct point of contact through their caseworker, meaning they don't have to repeat their story and relive the impact of trauma.

The PCC has confirmed funding to ensure the continuation of this vital role and support.

Report Author:	Stephen Hughes, Chief Executive

Joint Audit Committee

Meeting Date: 28th September 2023

Title:	Organisational Update – North Wales Police
Author:	Seb Phillips, Director of Finance & Resources
Purpose of the report:	To provide the Joint Audit Committee with an overview of key organisational events and issues taking place since the last JAC meeting.
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ☐ Assurance X Information
Summary / Key Points:	This report provides a high-level Organisational Update for North Wales Police highlighting key issues and events affecting the organisation for the period from 04.07.23 to 06.09.23. The issues and events are analysed between the four categories of Finance; People, Learning & Innovation; Operational and Public / Community.
Recommendations:	For members of the Joint Audit Committee to note the Director of Finance & Resources' report.
Risk Register Impact:	None.
Assurance Implications:	None.
Equality Impact:	None.
Information Exempt from Disclosure:	None - All content in **Open** Session

JOINT AUDIT COMMITTEE

28th September 2023

Organisational Update

Report by Director of Finance & Resources, North Wales Police

1. Introduction

This report provides a high-level Organisational Update for North Wales Police, highlighting key issues and events affecting the organisation for the period from 04.07.23 to 06.09.23.

The issues and events are analysed between the four categories of Finance; People, Learning & Innovation; Operational, and Public / Community.

2. Finance

2.1   Full year revenue projections have been produced at the end of Q1 with the full year revenue figures projecting a £3.694m / 1.95% underspend. The key drivers for the underspend are payroll costs at circa £2m and additional income (driven in part by increased interest rates) of circa £1m. The position will continue to be monitored and reported.

2.2   The Government announced a 7% pay award for police officers in July with a 7% pay award for Police staff being confirmed on 04.09.23. Some additional funding accompanies the pay award and as a result the implications for 2023-24 are broadly in line with the Q1 forecasts referenced above. Both pay awards are effective from 01.09.23.

2.3   The force is undergoing a Body Armour replacement programme at a cost of circa £1m with a recommendation that this is funded through the in year underspend. The original funding intended for this from the Uplift Reserve will be repurposed to fund emerging cost pressures associated with future recruitment and training demand.

2.4   The capital budget for 2023-24 has been revised from the original budget of £12.212m to £10.978m. This is largely as a result of delays with the new Holyhead police station, with work now due to commence in February 2024 rather than September 2023.

2.5   Planning for 2024-25 budgets is underway. The Optimisation Review will provide coverage of circa 50% of the Force budgets. The remaining budgets will be reviewed by the Service and Functional Leads using a similar governance process to the one adopted over the past 3 years. The pay awards whilst accompanied by some additional funding create a funding gap against MTFP assumptions of circa £2m. The drivers of the emerging underspend for this year will also be considered as part of the annual planning cycle.

2.6   Funding pressures are being experienced in a number of areas with Wrexham Council giving notice to withdraw its funding of 4 PCSOs and the Welsh first minister stating that the Welsh government is facing its "toughest financial situation" since devolution.

3. People, Learning & Innovation

3.1 The chief officer team held roadshows across the organisation in July and August to communicate the Vision and Priorities of the Force for 2023-24. A further online session is planned for 4th October 2023.

3.2 Recruitment of staff remains challenging across several areas placing pressure on resourcing and having an impact on underspend. The force continues to monitor the maintenance of its Uplift officer and PCSO numbers closely.

3.3 The first cohorts of the Degree Holder Entry Programme (DHEP) and Police Constable Degree Apprenticeship (PCDA) graduated from Bangor University in July. The DHEP is a two-year work-based programme which results in a graduate diploma in Professional Policing Practice. The PCDA is a mixture of practical on-the-job learning alongside academic classroom-based theory and learning and can take up to three years to complete.

3.4 The Force's Command & Control upgrade programme is remains challenging, complex and time pressured as it progresses. The Mobile App project is also progressing although technical issues have impacted timelines for implementation. A trial of the Pronto app is set to begin in Central later in September before being rolled out force wide.

4. Operational

4.1 DCC Richard Debicki's last day in North Wales Police was 6th September 2023. A number of temporary moves have taken place within the senior management team and a formal recruitment process for a Deputy Chief Constable is due to commence on 8th September 2023.

4.2 T/ACC Nigel Harrison has taken over as national NPCC Lead for the Rural Affairs and Wildlife portfolio.

4.3 The Optimisation review launched by the Chief Constable has continued to progress. Recommendations progressed in the period include the establishment of a Priority Crime Team. A number of warrants have recently been executed focusing on priority crime areas, which will help with repeat offending behaviours that we see around all types of crime. Officers are also spending more time away from stations in order to increase visibility and positive feedback has been received from the public in this regard.

4.4 The recommendations from the Force's Governance review are being progressed which will see a reduction in meetings and the number of attendees required, which will commence from the end of September, starting with the newly merged Senior Leadership Team (SLT) and Senior Management Board (SMB) meetings.

4.3 As part of the Body Armour Replacement Programme, measurement sessions will be held throughout September with both morning and evening sessions scheduled to accommodate all operational officers.

4.4 PC Cathy Parry was nominated for a National Police Bravery Award for tackling a knife wielding male in a supermarket whilst off duty. PC Parry attended the ceremony with the Chief Constable and Federation in July 2023.

4.5 Performance monitoring at Force and OPCC level continues with key performance updates from the Strategic Executive Board held on 2nd August 2023 including deep dives into the areas of Hate Crime and Restorative Justice.

5. Public / Community

5.1   NWP had a visible presence at both the Eisteddfod in Boduan and Anglesey Show in August, including the Corporate Communications and Rural Crime teams.

5,2   PCSO Connor Freel was presented with the Wales LGBT+ Police Network Excellence Award at the National LGBT+ Police Conference on 28th July 2023. Connor works in Flintshire South and was recognised for his contributions to LGBT+ Policing and his valued efforts towards trans inclusion in UK policing. Connor also volunteers as an LGBT+ Staff Support Liaison and has been instrumental in supporting the LGBT+ community both inside and outside of the Police.

6. Recommendations

For members of the Joint Audit Committee to note the Director of Finance & Resources' report.

Joint Audit Committee

September 2023

Title:	HMICFRS Update
Author:	Sarah O'Hara
Purpose of the report:	Update in relation to HMICFRS Inspections
The report is provided to JAC for: (Tick one)	☐ Decision ☐ Discussion X Assurance ☐ Information
Summary / Key Points:	**Police effectiveness, efficiency, and legitimacy (PEEL)** Evaluation of the force position against the PEEL 2024 Assessment Framework continues. This self-assessment exercise enables Chief Officers and Service Leads to have oversight of any areas of concern, whilst also highlighting any positive practice to HMICFRS ahead of the next inspection. Work remains ongoing to support the completion of the 11 AFIs received from the 2022 PEEL inspection report for North Wales Police. Below is a high-level summary of the work that is ongoing to support the completion of these AFIs. 1. **The force should ensure that, in relation to its use of force, all relevant officers and staff are recording when force is used and that there is effective supervisory oversight.** HMICFRS measure performance in this area by comparing the number of use of force incidents against the number of arrests made. The concept behind this is that use of force incidents should be higher than arrests, because not all use of force incidents lead to an arrest, but all arrests will involve some level of force (i.e. handcuffing). Annual stats for the force in this area suggest that North Wales Police is not recording all use of force incidents. To enable the force to understand this further, a Use of Force Audit Working Group was established in early 2023 and is led by three local policing Chief Inspectors. The aim for this working group was to understand force compliance in the submission of use of force forms, and to seek to improve it by reviewing occurrences and returning those whereby a form was omitted to the reporting officer. The group has seen a substantial increase in compliance and is working on implementing a formal internal auditing process to embed across the organisation. 2. **The force needs to attend calls for service in line with its published attendance times and ensure, that when this does not occur, victims are fully updated.** HMICFRS use the forces own response time targets to assess performance in this area, i.e. priority 0 incident in 20 minutes and priority 1 incident in 60 minutes. At the time of the HMICFRS crime file review, the force was 75% compliant in reaching incidents in the targeted time, but for those 25% that were outside of target time, only 35% of victims were informed of a delay in attendance. Response times are regularly presented to force performance boards to understand compliance, as well as on a dedicated Power BI Dashboard. Detailed breakdowns are available by district to enable further insight on the geographical differences of rural and urban areas across the force.

What isn't currently well understood is our victim contact when delays occur as referenced in the AFI. Whilst a prompt exists on the system prior to the one-hour response time to indicate a need for a call back, this is very dependent on staff availability and incoming demand. To gage a more detailed understanding of our compliance here, the FCIR has added questions to the FCC VSA *(Force Control Room Victim Service Assessment)* Audit: *"Were there any delays in meeting the allotted response time"* Y/N; *"If yes, was the victim informed of the delay".* Depending on the outcome of a series of audits, senior leaders can then determine whether any process changes are required.

3. **The force should make sure investigations have supervisory oversight and all investigative opportunities are considered.**

The HMICFRS crime file review determined that 20% of investigations lacked effective supervision. They also reported that feedback from operational officers emphasised delays in supervisory direction or reviews on their allocated crimes. HMICFRS requested that the force ensure there is a consistent approach and a way of monitoring supervisory oversight.

The Crime Management Practice Guide provides direction for the initial response to high impact crime, investigative standards, and case management requirements and includes detail of supervisory review periods depending on the crime type. This practice guide has been re-written and is scheduled for approval at Septembers Assurance Board. Similarly to AFI2, questions to support audit work in this area have been added to the VSA Audit booklets for supervision and investigative opportunities. Results of which will be reported to the appropriate forums.

4. **The force needs to make sure that it complies with the requirements of the Code of Practice for Victims of Crime. This includes offering people the opportunity to make victim personal statements and completing a victim needs assessment.**

Work on the overall governance of Victims Code of Practice (VCOP) is underway to determine where the data is best scrutinised and in line with the recent governance structure review. The HMICFRS crime file review determined that the force was compliant in completing a victim needs assessment in 70% of cases. To assess compliance moving forward, the force set up a VCOP Task and Finish group, chaired by the LPS Chief Superintendent, to set direct actions to seek to improve compliance. This group will continue to focus on consistency prior to automation due December 2023.

Face-to-face briefings on the adherence and responsibilities of VCOP will be delivered to staff at morning and afternoon briefings over the next few weeks. A guide sheet has been prepared which provides an overview of the victim needs assessment, referrals to victim support, identifying enhanced rights, and guidance around victim personal statements. In addition to this, the FCIR has embedded the requirements of VCOP into the VSA audit template to cover the measures utilised by HMICFRS to monitor compliance.

5. **The force needs to implement appropriate governance and monitoring processes to make sure that the use of outcomes is appropriate and that it complies with force and national policies.**

The HMICFRS crime file review examined a number of cases that had been finalised as 'outcome 10' *(not in the public interest – police decision)* and determined that these outcomes had been used incorrectly on several occasions, with North Wales Police being a significant outlier in this area when compared with the other 42 forces.

Whilst the force was conducting many audits, providing training to officers and sharing regular newsletters for guidance, compliance in the areas audited struggled to improve. To provide support and share further guidance, the sergeant from the audit and inspection team received outcome training from the FCIR and has been visiting sergeants on area to provide them with peer-to-peer training. In addition to this, the force has authorised a temporary centralised audit team to improve compliance. Every crime with a closed outcome of 10, 15, 16 or 21 will be reviewed and if the outcome is incorrectly applied, it will be returned to the reporting officer for review. The team is scheduled to be at full strength by October 2023 and whilst this team is temporary for a period of 12 months, it is hoped that the accompanied training for incorrectly applied outcomes will over time improve compliance.

6. **Within six months the force should demonstrate that it has sufficient capacity within the central referral unit, and that this has resulted in timely risk assessments being consistently completed and staff able to attend multi-agency meetings.**

The Central Referral Unit (CRU) demand model has recently been completed which states for the department to effectively meet demand a 12.4 FTE is required for researchers and 8.5 FTE for Detective Sergeants. This is based on the assumption that the demand over the next 12 months will continue to increase at around 7%. The Optimisation Programme will be reviewing the CRU Model as part of the Crime Services review and will take this analysis into consideration. In the interim period, a further Detective Sergeant has been agreed, increasing the number of DSs from 6 to 7.

7. **The force should be more proactive in promoting multi-agency working to ensure that vulnerable people are safeguarded effectively.**

The force is continually seeking to achieve multi-agency working across the force, but this is also at the discretion of partner agencies. There have however, been significant developments in implementing MASH across the force area. At present, the Conwy MASH is business as usual following the successful pilot. A pilot of a MASH *(children's services only)* commenced in March 2023 with Denbighshire County Council, with the adult services ready to commence from a policing perspective, but awaiting go ahead from the local authority due to staffing issues. Positive discussions are ongoing with Wrexham and Flintshire County Councils to trial a MASH with an options paper currently under development for Flintshire. Anglesey went live with a similar model in June this year. Work will continue as always with the local authorities to seek to reach an agreement with the establishment of MASHs.

8. **The force should review its digital capability within online child abuse investigation teams and management of sexual or violent offenders.**

Digital software options are being sought for the Online Child Abuse Investigation Team (OCAIT) to improve their capability of triaging devices at the scene, similar to that of the Management of Sex and Violent Offenders team (MOSOVO). Officers in MOSOVO have received further training to improve our digital capability around offender management by attending a nationally recognised course recommended by other forces, including Cumbria *(graded as outstanding)* who hold the portfolio for the management of sex and violent offenders. This course has improved MOSOVO officers' ability to conduct early triage of IT devices at scenes providing an early indication of potential offending and safeguarding issues to address.

9. **The force should review its sex offender management practice.**

As part of the upcoming Optimisation Programme review of Crime Services, the MOSOVO department will be assessed and the bid for an additional Detective Sergeant resource will be

considered. To ensure that there is well documented and timely supervisory oversight of work, risk management plans and updates from home visits with registered sex offenders is documented in the PVPU Performance Report and is presented to the PVPU Governance Board for SMT oversight.

10. The force needs to fully understand its capability and capacity to ensure it uses resources more efficiently to provide better services to its communities.

The force submitted its fourth Force Management Statement (FMS) to HMICFRS in June this year and provides HMICFRS a statement of:
1. the demand the force expects to face in the foreseeable future;
2. the performance, condition, composition, capacity, capability, serviceability and security of supply of the force's workforce and the extent to which current force assets will be able to meet expected future demand;
3. how the force will change and improve its workforce, policies, practices and other assets to cope with future demand;
4. the effect the force expects those changes to have and the effect of any residual risk of service failure; and
5. the money the force expects to have to do all this.

As the force prepares to head into its budget planning round, the findings from the FMS, organisational MoRiLE assessments, PEEL AFIs, force risk register and value for money profiles will all be taken into account when making the decisions for the next financial year.

In addition to this, the Chief Constable launched the Optimisation Programme soon after her appointment to North Wales Police. The project commenced with a review of Local Policing Services (LPS) and sought to maximise efficiency and streamline processes to ensure sufficient staffing levels to ease the pressure on the frontline. The Optimisation Team is soon to start its review of Crime Services and Operational Support Services (OSS) thereafter.

11. The force needs to improve how it communicates its financial plans and the challenges it faces in delivering its services.

Internal and external financial documents have been evaluated to ensure our financial plans and challenges are communicated appropriately. The force financial position is outlined to the Audit Committee, Police and Crime Panel, Finance and Resources Board, Strategic Executive Board and Strategic Management Board. Changes have been made to the Medium Term Financial Plan (MTFP) to allow for increased references to our financial underspend and strength of the force balance sheet. The precept details and reports have been shared with the six local authorities and the Capital Strategy (including Capital Budget) have been presented to the Joint Audit Committee, with an update on risks and assumptions within the MTFP. The Director of Finance and Resources has also made a force wide video-log focusing on the outturn for last year and this year's budget.

The force has also obtained independent assurance around the current communication in relation to Financial Position and Underspend via the JAC, with an action plan discussed in closed session of the committee with enhancements to reporting discussed.

Serious and Organised Crime (SOC) and Vetting Inspections

North Wales Police were inspected on our response to serious and organised crime in February 2023, as part of the North-West (NWROCU) region. The draft inspection report was received in July and pre-publication checks have since been returned to HMICFRS. The final report is

anticipated to be published within the next couple of months and a summary will be provided in the next JAC report.

The report of the inspection into the effectiveness of North Wales Police Vetting Arrangements was published on 16th June 2023. Work on the AFI from this inspection is well underway as most of the points referenced in the AFI mirror those that were distributed to forces as part of the national report on vetting, misconduct and misogyny.

National Thematic Report: An inspection of vetting, misconduct, and misogyny in the police service

The national thematic report into vetting, misconduct, and misogyny in the police service was published on 2nd November 2022. The findings of this inspection led to 43 recommendations and 5 AFIs for Chief Constables, the College of Policing, Home Office and the NPCC to consider.

Forces provided the NPCC positional updates in line with the deadlines stipulated from February to April 2023. There was a further request in July for forces to provide an updated progress report to the NPCC and to stipulate which recommendations/AFIs were deemed completed on the HMICFRS Monitoring Portal. North Wales Police has since received feedback from NPCC and now awaits for further review from HMICFRS on those deemed complete with a deadline for April 2023. The recommendations due for completion in October and December 2023 are progressing as anticipated with no delays expected.

Report on an unannounced inspection visit to police custody suites in North Wales Police

HMICFRS have informed the force that they will no longer be able to provide progress reviews against the custody recommendations/AFIs due to the capacity of the small inspection team. The Audit and Inspection Team will conduct visits to the custody suites over September to evaluate completion prior to formally confirming with HMICFRS. Attached is a high-level summary of the current position of the custody recs/AFIs:

Custody AFI rec
appendix (sept23).doc (See Attached Annex 1)

National recommendations and AFIs

As referred to in previous reports, HMICFRS has introduced a new process allowing Chief Officers to sign-off recommendations or AFIs in tier 2. Below summarises the forces current position:

Level 2 Force sign-off	Level 3 – Force & HMICFRS sign-off
New: Race disparity in police criminal justice decision making x 4	Vetting, misconduct and misogyny x 29 recommendations *(23 deemed complete)*
New: Homicide prevention x 2 recommendations	Custody x 4 recommendations *(4 deemed complete)*
New: Deployment of firearms x 8	NWP Vetting 2022 x 1 AFI
Values and culture in fire and rescue services x 1 recommendation	PEEL 2022 x 11 AFIs

	Serious Youth Violence x 2 recommendations	
	Online CSE x 10 recommendations	
	Digital forensics x 1 recommendation	
	Vetting, misconduct and misogyny x 5 AFIs *(3 deemed complete)*	
	Burglary, robbery and other acquisitive crime x 2 recommendations	
	Custody x 10 AFIs *(5 deemed complete)*	
	VAWG x 3 recommendations	
	Rape x 1 recommendation	

A tracker to monitor the progress of each of the open recommendations and AFIs is being designed to be included on the dedicated Microsoft Teams site for further transparency.

Recommendations:	None.
Risk register impact:	None.
Assurance implications:	None.
Equality Impact:	None.
Information exempt from disclosure:	None.

HMICFRS confirm completed	Force deemed complete *(subject to in force review)*	Outstanding
AFI 1: The force should make sure that all custody staff follow the College of Policing's APP (Detention and Custody), as well as its own guidance. This will mean that detainees receive an appropriate and consistent level of treatment and care.	**AFI 2:** The force should strengthen its approach to performance management by collecting and monitoring accurate information for its main services, and showing the outcomes achieved for detainees.	**AFI 13:** The force should strengthen its approach to AAs by making sure that: • all vulnerable adults in custody receive an AA; and • all children and vulnerable adults in custody are supported quickly, and information is collected to assess this. Position: The force uses The Appropriate Adult Service for vulnerable adults in custody and this works well across the three custody suites. The provision of appropriate adults for children in custody suits sits the local authorities and which falls outside of the forces' jurisdiction. The force acknowledges that the recording of the AA request and arrival times were inconsistent during the review of custody records and to rectify this, the force requested a formal Request for Change (RFC) in May 2022 to add a section to record AA arrival time. This was approved with the West Coast Collaboration and is now with Minerva to initiate the system change. To support the correct recording on custody records in the interim, inputs were included as part of refresher training to remind Custody Sergeants to accurately record when AAs are requested, and the steps taken to secure an AA and time of arrival.
AFI 5: The force should strengthen its approach to meeting detainees' individual and diverse needs by making sure that: • there is suitable provision for those with disabilities at all suites; • all detainees are asked to identify their ethnicity; • a female member of staff is readily available when assigned for female detainees, and carries out the role effectively; and	**AFI 3:** Officers should always have access to advice from mental health services to help them deal with people with mental ill health appropriately.	**AFI 14:** The force should continue to work with local authorities to improve the provision of alternative accommodation for children who are charged and refused bail. Position: This issue is a standing agenda item raised regularly by North Wales Police at the North Wales Heads of Children's Services Board. North Wales Police cannot force local authorities to comply with this and

• there is an adequate supply of resources for the main religious faiths at all suites, and they are given to those who may want them.		whilst consideration to charge authorities who do not provide this provision has been considered, the force feels that in doing so would result in LA's opting to pay the 'accommodation fee' which would not solve the issue of children needing to be accommodated outside of custody. Further discussions at executive level are being considered by our Chief Officer team (AA provision for children will also form part of this discussion).
AFI 6: Custody officers should consistently provide an easy read version of rights and entitlements to children, vulnerable adults and other detainees who would benefit from them.	**AFI 4:** The force should improve its approach to detainee dignity and privacy by making sure that: • staff communicate with detainees in a way that responds to their individual needs; • detainees can disclose private or sensitive information in a confidential environment, including during the initial risk assessment; • detainees can shower in sufficient privacy at all custody suites; and • detainees' clothes are respectfully removed and always stored properly.	**AFI 16:** Detainees should be able to access opiate substitution therapy and nicotine replacement products while in custody. Position: Soon to be marked complete. Nicotine provision now complete. SOP for opiate replacement therapy due for sign-off at next Assurance Board.
AFI 9: The force should adhere to legal requirements for fire regulations, particularly around emergency evacuations. Appropriate fire exit signs should be displayed at St Asaph.	**AFI 7:** Detainees should be able to make a complaint easily, and before they leave custody.	
AFI 10: Detainees should receive appropriate aftercare when sprayed with incapacitant.	**AFI 8:** Notices advising that CCTV is in operation should be prominently displayed throughout the suites.	
AFI 11: Handcuffs should be removed from compliant detainees at the earliest opportunity.	**AFI 12:** The force should improve its care for detainees by making sure: • detainees are offered the range of available services, including books, distraction materials, food, exercise or a shower; and • a good range of food is always available.	

AFI 15: Standards for professional relationships and custody record keeping should be checked by regular clinical audit to assure compliance.	**AFI 17:** The force should make sure that: • custody officers engage with detainees transferred to court, to identify and mitigate risks before their transfer from police custody; and • paper person escort records are fully completed for detainees transferring to hospital, in line with APP guidance.	
	Rec 1: The force should take immediate action to make sure that all custody procedures and practices comply with legislation and guidance.	
	Rec 2: The force should scrutinise the use of force in custody. This should be based on accurate information and robust quality assurance, including viewing CCTV footage of incidents. It should use this to show that when force is used in custody, it is necessary and proportionate.	
	Rec 3: The force should make sure that the information recorded in custody records is accurate and complete. It should clearly reflect the individual action taken and the reasons for any decisions for each detainee. The force should robustly quality assure custody records to identify and act on any concerns.	
	Rec 4: The force should take immediate action to mitigate the risk to detainees by making sure that its risk management practices follow APP guidance and are carried out and recorded to the required standard.	

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Police and Crime Commissioner North Wales and Chief Constable North Wales Police

Summary Internal Controls Assurance (SICA) Report

2023/24

September 2023

Summary Internal Controls Assurance

Introduction

1. This summary controls assurance report provides the Joint Audit Committee with an update on the emerging Governance, Risk and Internal Control related issues and the progress of our work at Police and Crime Commissioner North Wales and Chief Constable North Wales Police as of 4th September 2023.

    ### Whistleblowing - driving the conversation

2. **The importance of a healthy culture.**

    We have seen, over the last few months, the publication of several high-profile reports such as the Metropolitan Police (Casey Review March 2023), University Hospitals Birmingham (Bewick Report March 2023) and Plaid Cymru's review (conducted by Nerys Evans May 2023) where a common theme for each organisation was reported around the treatment of whistleblowers as well as 'poor' organisational culture, failures in leadership and poor whistleblowing reporting mechanisms.

    There are so many high-profile incidents that have arisen over the last few years across many sectors and industries, perhaps most notably the #METOO campaign which highlighted sexual abuse in the entertainment industry spanning decades, where, despite there being many reported incidents, the individuals were ignored, ostracised or simply closed down and the matter covered up.

    There is a real drive within government to look at the Whistleblowing Laws in the UK to drive through change. It is anticipated that there will be greater onus on organisations to improve their culture and to provide greater support and protection for whistleblowers. The outcome of the government's research is due for completion by the Autumn 2023.

    In anticipation of the key messages coming out from the government, we in TIAA are using our expertise and knowledge to support organisations by:

    1. Working with organisations to 'health check' organisational culture in respect of whistleblowing;

    2. Providing a platform for those responsible for governance, raising concerns, whistleblowing and freedom to speak up guardians to share knowledge expertise, good practice in a forum event.

    3. Examining poor practice and looking at the lessons to be learnt from recent incidents in webinar events and through consultation exercises such as online surveys.

    4. Sharing the information through benchmarking reports and roundtable events.

    Please use this link to keep up to date with our campaign and/or to be part of the conversation and drive through real change and improvement in this important area.

    https://www.tiaa.co.uk/publications/tiaa-organisational-culture-and-whistleblowing-webinar/

Audits completed since the last SICA report to the Joint Audit Committee

3.   The table below sets out details of audits finalised since the previous meeting of the Joint Audit Committee.

Audits completed since previous SICA report – 2023/24

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM
Budgetary Control	Substantial	28th July 2023	8th August 2023	9th August 2023	-	-	-	-
General Ledger	Substantial	22nd August 2023	5th September 2023	5th September 2023	-	-	-	-

4.   There are no issues arising from these findings which would require the annual Head of Audit Opinion to be qualified.

Progress against the 2023/24 Annual Plan

5.   Our progress against the Annual Plan for 2023/24 is set out in Appendix A.

Changes to the Annual Plan 2023/24

6.   There are no areas where areas where internal audit work is recommended to enable an unqualified Head of Audit Opinion to be provided for 2023/24.

Progress in actioning priority 1 recommendations

7.   We have made no Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA.

Root Cause Indicators

8.   The Root Cause Indicators (RCI) have been developed by TIAA to provide a strategic rolling direction of travel governance, risk and control assessment for Police and Crime Commissioner North Wales and Chief Constable North Wales Police. Each recommendation made is analysed to establish the underlying cause of the issue giving rise to the recommendation (RCI). The analysis needs to be considered over a sustained period, rather than on an individual quarter basis. Percentages, rather than actual number of reviews/recommendations made permits more effective identification of the direction of travel. A downward arrow signifies a positive reduction in risk in relation to the specific RCI since the previous quarter.

RCI – Direction of Travel Assessment

Root Cause Indicator	Qtr 2 (2022/23)	Qtr 3 (2022/23)	Qtr 4 (2022/23)	Qtr 1 (2023/24)	Qtr 2 (2023/24)	Medium term Direction of Travel	Audit Observation
Directed							
Governance Framework	50% (1)	-	4% (1)	-	-	↔	
Risk Mitigation	50% (1)	-	-	-	-	↔	
Control Compliance	-	-	96% (24)	84% (20)	-	↓	

Root Cause Indicator	Qtr 2 (2022/23)	Qtr 3 (2022/23)	Qtr 4 (2022/23)	Qtr 1 (2023/24)	Qtr 2 (2023/24)	Medium term Direction of Travel	Audit Observation
Delivery							
Performance Monitoring	-	-	-	4% (1)		↓	
Sustainability	-	-	-	4% (1)		↓	
Resilience	-	-	-	8% (2)		↓	

NB – The figures in Quarter 1 2023/24 relates to the final reports 2022/23 work. The one completed review in Q1; for Estates Management – Strategy has been recorded in quarter 2 figures.

Frauds/Irregularities

9.   We have not been advised of any frauds or irregularities in the period since the last SICA report was issued.

Other Matters

10.   We have issued a number of briefing notes and fraud digests, shown in Appendix C, since the previous SICA report. The actions taken by Police and Crime Commissioner North Wales and Chief Constable North Wales Police are summarised below:

Action taken by Police and Crime Commissioner North Wales and Chief Constable North Wales Police in response to Alerts issued by TIAA

Briefing Note	Management Response
Guidance issued by HMRC on tax avoidance schemes	To be provided by North Wales Police in the Internal Audit update

Fraud Alert	Management Response
Insider – Invoice Fraud	To be provided by North Wales Police in the Internal Audit update

Responsibility/Disclaimer
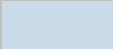
11.   This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. The matters raised in this report not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Progress against Annual Plan -2023-24

System	Planned Quarter	Current Status	Comments
Collaborative – Pan Wales			
Data Protection Act	2	Date to be confirmed	
Risk Management	3	Planned start date 18th September 2023	Lead Force - Gwent Police
Property Subject to Charge (Evidential Property)	3	Planned start date 29th January 2024	Lead Force - Dyfed-Powys
Treasury Management	3	Planned start date 9th October 2023	Lead Force – Gwent Police
Payroll	3	Planned start date 23rd October 2023	Lead Force – South Wales Police
Counter-Fraud (Anti-Fraud Procurement)	3	Planned start date 11th December 2023	Lead Force – North Wales Police
Debtors	3	Planned start date 6th November 2023	Lead Force – North Wales Police
Telematics	4	Planned start date 23rd February 2024	Lead Force – Dyfed-Powys Police
North Wales Police only			
Estates Management - Strategy	1	Final Report Issued	Presented to July 2023 SICA
Fixed Assets – ICT Assets	1	Planned start date 27th September 2023	Moved to Q3 at the request of Management
Eastern Area – Command Unit	1	Draft report issued 14th July 2023	
Capital Programme	2	Planned start date 11th September 2023	
HR Absence Management linked to Agility	2	Planned start date 13th November 2023	Moved to Q3 at the request of Management
Occupational Health Unit	2	Planned start date 12th September 2023	
Purchasing/Creditors	2	Planned start date 11th December 2023	Moved to Q3 at the request of Management
General Ledger	2	Final report issued 5th September 2023	Presented to September 2023 JAC
ICT Data Assurance	2	Date to be confirmed	

System	Planned Quarter	Current Status	Comments
Procurement	2	Draft report issued 4th September 2023	
Budgetary Control	2	Final report issued 9th August 2023	Presented to September 2023 JAC
ICT Change Management	2	Date to be confirmed	
Community Engagement	3	Planned start date 25th September 2023	
ICT Infrastructure Review	3	Date to be confirmed	
Governance - Collaborations and Partnerships	3	Planned start date 9th October 2023	
Fleet Management - Fuel	3	Planned start date 29th January 2024	
Follow-up	3	Date to be confirmed	
Liaison with Audit Wales	1-4		Next meeting scheduled 2nd October 2023
Annual Planning	1	Final report issued 23rd June 2022	
Annual Report	4		

KEY:

	To be commenced		Site work commenced		Draft report issued		Final report issued

Priority 1 Recommendations - Progress update

Recommendation	Priority	Management Comments	Implementation Timetable	Responsible Officer	Action taken to date (and any extant risk exposure)	Risk Mitigated
There were no Priority one recommendations						

KEY:

Priority Gradings 1

1	URGENT	Fundamental control issue on which action should be taken immediately.

Risk Mitigation

	CLEARED	Internal audit work confirms action taken addresses the risk exposure.		ON TARGET	Control issue on which action should be taken at the earliest opportunity.		EXPOSED	Target date not met & risk exposure still extant

Briefings on developments in Governance, Risk and Control

TIAA produces regular briefing notes to summarise new developments in Governance, Risk, Control and Counter Fraud which may have an impact on our clients. These are shared with clients and made available through our Online Client Portal. A summary list of those CBNs and Fraud Alerts issued in the last three months which may be of relevance to Police and Crime Commissioner North Wales and Chief Constable North Wales Police is given below. Copies of any CBNs are available on request from your local TIAA team.

Summary of recent Client Briefing Notes (CBNs)

CBN Ref	Subject	Status	TIAA Comments
23009	Guidance issued by HMRC on tax avoidance schemes		**Action Required** Raise the profile of tax avoidance across networks and communication channels Support HMRC by sharing the following link with stakeholders to help raise awareness among workers in the health and social care sectors, and to warn them of the risks of getting involved in tax avoidance. Link: https://taxavoidanceexplained.campaign.gov.uk/

Summary of recent Anti-Crime (Fraud Alerts)

Ref	Subject	Status	TIAA Comments
July 2023	Insider – Invoice Fraud		**Action Required** The City of London Police were contacted by the organisation that the fraudster had targeted following their discovery that 29 fake invoices had been received and processed through their accounts department. All of the fake invoices had been received as attachments within e-mails that were purportedly sent from the PA of the CEO, and were found in the shared email inbox within the organisation's accounts department. The invoices were identified as fake as none of the companies requesting funds were legitimate. In addition, each of the invoices had what appeared to be the CEO's signature authorising payment. All of the fake invoices were processed by a member of staff and evidence was found that linked the insider to the scam. The member of staff, the insider, was instrumental in this fraud being carried out. Insider invoice fraud refers to cases of fraud in which an insider's access to the organisation's systems and processes are essential in committing the fraud. Examples of insider invoice frauds, which are likely to increase during this period of increased financial pressures and the rising cost of living include: • False payment requests typically during busy periods • Overbilling a debtor and pocketing the difference • Recording false credits or refunds • Creating fictitious suppliers or shell companies for fraudulent payments • Forging signatures on payment authorisations • Submitting false invoices from fictitious or actual suppliers for payments.

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Police and Crime Commissioner for North Wales and Chief Constable North Wales Police

Internal Audit Annual Report

2022/23

August 2023

Internal Audit Annual Report

Introduction

This is the 2022/23 Annual Report by TIAA on the internal control environment of the Police and Crime Commissioner for North Wales and Chief Constable North Wales Police. The annual internal audit report summaries the outcomes of the reviews we have carried out on the organisation's framework of governance, risk management and control. This report is designed to assist the Police and Crime Commissioner for North Wales and Chief Constable North Wales Police in making their annual governance statement.

Our approach is based on the International Standards for the Professional Practice of Internal Auditing which have been developed by the Institute of Internal Auditors (IIA) and incorporate the Public Sector Internal Audit Standards (PSIAS). In 2022, TIAA commissioned an External Quality Assessment (EQA) of its internal audit service. The independent EQA assessor was able to conclude that TIAA 'generally conforms to the requirements of the Public Sector Internal Audit Standards and the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF).' 'Generally conforms' is the highest rating that can be achieved using the IIA's EQA assessment model.

Ongoing quality assurance work was carried out throughout the year and we continue to comply with ISO 9001:2015 standards. Our work also complies with the IIA-UK Professional Standards.

> **HEAD OF INTERNAL AUDIT'S ANNUAL OPINION**
>
> **I am satisfied that sufficient internal audit work has been undertaken to allow me to draw a positive conclusion as to the adequacy and effectiveness of the Police and Crime Commissioner's and the Chief Constable's risk management, control, and governance processes. In my opinion, the Police and Crime Commissioner and the Chief Constable have adequate and effective management, control and governance processes in place to manage the achievement of their objectives.**
>
> **This opinion is based solely on the matters that came to the attention of TIAA during the course of the internal audit reviews carried out during the year and is not an opinion on the ongoing financial viability or your ability to meet financial obligations which must be obtained by the Office of the Police and Crime Commissioner for North Wales and the Chief Constable North Wales Police from its various sources of assurance.**

Internal Audit Planned Coverage and Output

The 2022/23 Annual Audit Plan approved by the Joint Audit Committee was for 201 days of internal audit coverage in the year.

During the year there were three changes to the Audit Plan and these changes were reported to, and approved by the Joint Audit Committee as follows:

- The Fixed Assets - ICT Assets (part of the collaborative review) was deferred to 2023/24 at Management's request for North Wales Police only.
- The Community Engagement audit was deferred to 2023/24 at Management's request.
- The ICT Change Management was deferred to 2023/24.

The planned work that has been carried out against the plan and the status of work not completed is set out at Annex A.

No extra work was carried out which was in addition to that set out in the Annual Audit Plan.

Assurance

TIAA carried out 23 reviews, 22 of which were designed to ascertain the extent to which the internal controls in the system are adequate to ensure that activities and procedures are operating to achieve the Organisation's objectives. For each assurance review an assessment of the combined effectiveness of the controls in mitigating the key control risks was provided. Details of these are provided in Annex A and a summary is set out below.

Assurance Assessments	Number of Reviews	Previous Year
Substantial Assurance	14	15
Reasonable Assurance	5	7
Limited Assurance	3	2
No Assurance	0	0

The areas on which the assurance assessments have been provided can only provide reasonable and not absolute assurance against misstatement or loss and their effectiveness is reduced if the internal audit recommendations made during the year have not been fully implemented.

We made the following total number of recommendations on our audit work carried out in 2022/23. The numbers in brackets relate to 2021/22 recommendations.

Urgent	Important	Routine
2 (2)	30 (22)	21 (14)

Audit Summary

Control weaknesses: There were three areas reviewed by internal audit where it was assessed that the effectiveness of some of the internal control arrangements provided 'limited' or 'no assurance.' Recommendations were made to further strengthen the control environment in these areas and the management responses indicated that the recommendations had been accepted.

Recommendations Made: We have analysed our findings/recommendations by risk area, and these are summarised below.

Risk Area	Urgent	Important	Routine
Directed			
Governance Framework	0 (0)	2 (1)	0 (3)
Risk Mitigation	0 (0)	0 (0)	1 (1)
Compliance	2 (2)	26 (19)	18 (6)
Delivery			
Performance Monitoring	0 (0)	0 (0)	1 (1)
Sustainability	0 (0)	0 (0)	1 (0)
Resilience	0 (0)	2 (2)	0 (3)

Operational Effectiveness Opportunities: One of the roles of internal audit is to add value and during the financial year we provided advice on opportunities to enhance the operational effectiveness of the areas reviewed and the number of these opportunities is summarised below.

Operational
8 (9)

Independence and Objectivity of Internal Audit

There were no limitations or restrictions placed on the internal audit service which impaired either the independence or objectivity of the service provided.

Performance and Quality Assurance

The following Performance Targets were used to measure the performance of internal audit in delivering the Annual Plan.

Performance Measure	Target	Attained
Completion of Planned Audits	100%	100%
Audits Completed in Time Allocation	100%	100%
Final report issued within 10 working days of receipt of responses	95%	95%
Compliance with Public Sector Internal Audit Standards	100%	100%

Release of Report

The table below sets out the history of this Annual Report.

Date Draft Report issued:	12th July 2023
Date Final Report issued:	3rd August 2023

Annexes

Actual against planned Internal Audit Work 2022/23

System	Type	Planned Days	Actual Days	Assurance Assessment	Comments
Collaborative Reviews					
HR – Use of OLEEO	Assurance	5	5	Reasonable	Final Report Issued
Risk Management – Mitigating Risk	Compliance	5	5	Substantial	Final Report Issued
Expenses and Additional Payments	Assurance	6	6	Substantial	Final Report Issued
Payroll	Assurance	8	8	Substantial	Final Report Issued
Creditors	Assurance	6	6	Substantial	Final Report Issued
Fixed Assets – ICT Assets	Compliance	5	-		Deferred to 2023/24
Capital Programme	Assurance	6	6	Substantial	Final Report Issued
Counter-Fraud (Anti-Fraud Procurement)	Assurance	7	7	Substantial	Final Report Issued
Fleet Management – Strategy	Assurance	4	4	Substantial	Final Report Issued
North Wales Police Only					
Contract Management – (Building/ICT/Services Project 2022/23)	Assurance	6	6	Substantial	Final Report Issued
Property Subject to Charge (Evidential Property)	Compliance	6	7	Limited	Final Report Issued
Wellbeing and Strategy	Assurance	10	10	Substantial	Final Report Issued
Estates Management - Delivery	Compliance	6	6	Substantial	Final Report Issued
Central Area – Command Unit	Compliance	8	8	Reasonable	Final Report Issued
Corporate Communications	Assurance	10	10	Substantial	Final Report Issued
Community Engagement	Assurance	10	-		Deferred to 2023/24
Pensions	Assurance	8	8	Substantial	Final Report Issued
ICT Change Management	Assurance	8	-		Deferred to 2023/24
Vetting	Compliance	6	6	Reasonable	Final Report Issued

System	Type	Planned Days	Actual Days	Assurance Assessment	Comments
Cyber Security	Assurance	8	8	Reasonable	Final Report Issued
Health and Safety Management	Assurance	8	8	Limited	Final Report Issued
Treasury Management	Assurance	4	4	Substantial	Final Report Issued
Firearms Licensing	Compliance	6	6	Substantial	Final Report Issued
HR Absence Management	Assurance	6	6	Limited	Final Report Issued
Fleet Management – Repairs	Assurance	5	5	Reasonable	Final Report Issued
Liaison with Audit Wales Management	Management	2	2		
Follow-up	Follow up	6	6	N/A	Final Report Issued
Annual Planning	Management	4	4		Final Plan Issued
Annual Report	Management	4	4		Final Report Issued
Audit Management	Management	18	18		
	Total Days	**201**	**179**		

Title:	Internal Control Report
Author:	Anne Matthews, Finance & Budget Officer
Purpose of the report:	To provide the Joint Audit Committee with an overview of Internal Control activity within the Force
The report is provided to JAC for: (Tick one)	☐ Decision ☐ Discussion ✓ Assurance ☐ Information
Summary / Key Points:	Having considered recent feedback, this report focusses on the management response to ongoing Internal Audit issues, focussing on avoiding duplication with the TIAA SICA report where possible. The report includes: • The recommendation status from previous TIAA Audits • The recommendations issued with revised due dates for implementation. • The management response regarding Client Briefing Notes, Fraud Alerts, Fraud Articles and Security Alerts issued in the period. • An Update on Limited Assurance audits • Internal Audit Action Updates regarding 27/07/2023 JAC Actions • Summary Supplementary detail is provided by the Appendices to the report, should it be required. Internal audit is a fixed agenda item discussed in the bi-monthly Joint Governance Board meetings; Internal audit is also discussed during monthly meetings held between the DFR, HoF and FBO.
Recommendations:	None
Risk Register Impact:	TIAA control findings, Client Briefing Notes, Fraud Alerts and Anti-Crime Alerts have been considered for reflection on the Force Risk Register.
Assurance Implications:	This report is directly relevant to Internal Control Activity providing Assurance in North Wales Police.
Equality Impact:	None
Information Exempt from Disclosure:	N/A – All content in Open Session

JOINT AUDIT COMMITTEE

INTERNAL CONTROL REPORT – 28th September 2023

REPORT OF THE NORTH WALES POLICE AND CRIME COMMISSIONER AND CHIEF CONSTABLE

1.   **INTRODUCTION**

This report focusses on the management response to ongoing Internal Audit issues, focussing on avoiding duplication with the TIAA SICA report where possible.

The report includes:

- The recommendation status from previous TIAA Audits
- The recommendations issued with revised due dates for implementation.
- The management response regarding Client Briefing Notes, Fraud Alerts, Fraud Articles and Security Alerts issued in the period.
- An Update on Limited Assurance audits
- Internal Audit Action Updates regarding 28/07/2023 JAC Actions
- Summary

2.   **RECOMMENDATION STATUS OF TIAA AUDITS**

The position on Internal Audit recommendations as at 01/09/2023 is outlined below:
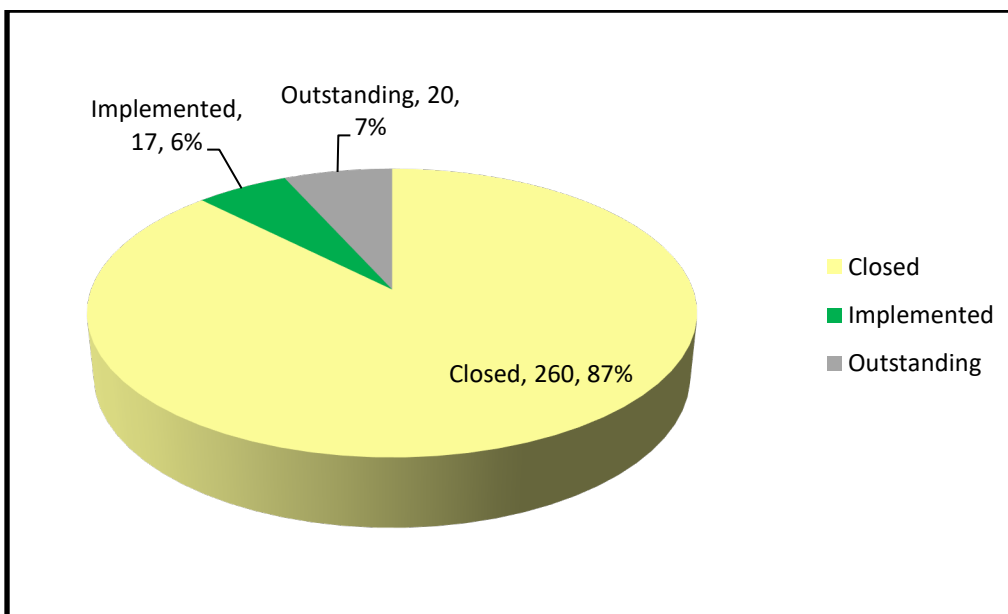
Movement since the last JAC meeting is as per the below:

- 2 new recommendations received during this period.
- 2 (new) recommendations implemented.
- 3 (existing) recommendations implemented.

Summary of 5 recommendations that have been implemented since July meeting detailed below:

No of Recs				JAC MEETING
Priority	ID	Job	Rec status	28/09/2023
2	271372	22/23 Health and Safety Management	New	1
	267051	22/23 Central Area – Command Unit	Existing	1
	267052	22/23 Central Area – Command Unit	Existing	1
	263859	21/22 Counter Fraud (Anti-Fraud Procurement) - Collaborative	Existing	1
	269699	22/23 ICT-Cyber Security	New	1
Grand Total				5

The carried forward recommendations continue to be monitored and pursued routinely.

The **accumalative** total of 17 implemented recommendations as at 01/09/2023 is outlined below:

Status Summary - Implemented	Category	No
Implemented on or before original due date	Cat 1	8
Implemented on or before 1st revised due date	Cat 2	3
Implemented on or before 2nd revised due date	Cat 3	1
Implemented on or before 3rd revised due date	Cat 4	0
Implemented on or before 4th revised due date	Cat 5	0
Implemented on or before 5th revised due date	Cat 6	0
Implemented after original and/or revised due date	Cat 7	5
		17

Analysis of the 20 outstanding recommendations as at 01/09/2023 is also outlined below:

Status Summary - Outstanding Recommendations	Category	No
No of Recommendations - still on original due date	Cat 1	13
No of Recommendations - 1st revised due date	Cat 2	3
No of Recommendations - 2nd revised due date	Cat 3	1
No of Recommendations - 3rd revised due date	Cat 4	0
No of Recommendations - 4th revised due date	Cat 5	1
No of Recommendations - 5th revised due date	Cat 6	0
No of Recommendations - Overdue	Cat 7	2
		20

An ongoing emphasis on trying to ensure that the initial deadlines set are both appropriate and realistic (to ensure that the revision of dates isn't happening as a matter of course) remains in place.

Analysis of the 20 outstanding recommendations and how they tally to each audit is provided on Appendix 1, page 6.

The latest position and update regarding the 20 outstanding recommendations is included in Appendix 2, pages 7-11. This includes the Responsible Officer for each outstanding action with roles, rather than individual names included in the report.

3.   **RECOMMENDATIONS ISSUED WITH REVISED DUE DATES FOR IMPLEMENTATION**

ICT Cyber Security

Recommendations 269697 & 269698 – Redacted, information in Closed Session Report.

4. MANAGEMENT RESPONSE REGARDING CLIENT BRIEFING NOTES (CBNs) FRAUD ALERTS, FRAUD ARTICLES AND SECURITY ALERTS INCLUDING THOSE ISSUED IN THE PERIOD

Current status of CBNs, Fraud Alerts, Fraud Articles and Security Alerts is shown below:

Type	Total No rec'd	No rec'd in current period	Action Required	Open Actions
CBNs - 19016-23009	55	1	0	0
Fraud Alerts - FA024 -FA038	39	2	0	0
Fraud Articles - FA001-FA005	5	0	0	0
Security Alerts - SA001 - SA003	3	0	0	0

CBNS, Fraud Alerts and Security Alerts received during the period were reviewed and progressed by the management team.

There was one CBN, two Fraud alerts, no Fraud articles or security alerts issued in the period 22/06/2023 to 01/09/2023.

CBNs

- CBN-23009 – Guidance issued by HMRC on tax avoidance schemes – for information only – circulated and closed.

Fraud Alerts

- FA037 - Payment Systems Regulator confirms new Requirements for Authorised Push Payment fraud reimbursement – circulated and closed.
  NWP mitigate this risk by segregation of duties – further information is in the Fraud Log which is uploaded to the JAC google drive.

- FA037 – Insider Invoice Fraud – circulated and closed.
  NWP mitigate this risk by segregation of duties and checks carried out on the creditors pay run prior to posting batches for payment – further information is in the Fraud Log which is uploaded to the JAC google drive.

Fraud Articles – for information purposes only

- None

Security Alerts

- None

5. UPDATE ON LIMITED ASSURANCE AUDITS

ICT Fixed Assets

2021/2022 Fixed Assets - ICT – Limited Assurance – 6 important recommendations.

As previously reported all recommendations were implemented on 07/06/2022 and closed by TIAA on completion of the Follow Up audit in February/March 2023.

Risk 101 is still on the Force Risk register; the current status of the risk is "Low".

As previously stated, the Fixed Assets audit was deferred to 2023/2024 and has been booked in during September 2023; it was deferred to allow the new targeted operating model which came into effect on 01/04/2023 to bed in; it is deemed there will be more value if TIAA audit the new process.

<u>Property Subject to Charge (PSTC) – Limited Assurance</u>

2022/23 Property Subject to Charge (PSTC) – Limited Assurance – 12 recommendations.

The PSTC audit was undertaken in September 2022; an extra day was authorised and used to check seized cash exhibits.
As per previous report all 12 recommendations were implemented and then closed by TIAA on completion of the Follow Up audit in February/March 2023.

PSTC will be undertaken as a collaborative audit with South Wales Police, North Wales Police and Dyfed Powys Police in 2023/2024; this audit has been booked in Q4 February 2024.

<u>HR – Absence Management – currently in draft format (28/02/2023)</u>

20222/2023 HR Absence Management – 9 x important and 1 x routine recommendations.

2 recommendations have been implemented.

8 recommendations are within implementation date.

- 7 of which are due for completion on 30/09/2023 and will be implemented once the current policy has been reviewed; once reviewed the policy will be sent out for consultation, any feedback received will be considered and if appropriate the policy will be updated. Once that aspect is complete the policy will be presented at the next available Assurance Board and if it is agreed at the Board, it will then be presented to the next SMT and then published on the Force Intranet.

  The due date of 30/09/2023 was arrived at by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.

  Latest update on these 7 recommendations (269283 – 269287, 269290 and 269292) – 08/09/23 - *The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.*

- Recommendation 269291 is due to be implemented by 30/04/2024 - *Latest update – 08/09/23 - Further development of the approach is dependent on the new policy being defined which remains a work in progress.*

<u>Health and Safety Management – Limited Assurance</u>

2022/2023 Health and Safety Management (HSM) – 3 x important recommendations

Following on from previous report recommendation 271372 has been implemented based on below:

Recommendation 271372 was issued to address the timeliness in reporting to HSE. Responsibility for this recommendation lies with the DFR as the Health and Safety Champion for NWP.

In addition to the ongoing work that the Health and Safety Manager and his Team undertake the following has been done to increase the levels of engagement from LPS:

- Vlogs from the Chief Constable
- Vlogs from DFR
- Attendance/discussion at SLT and the potential follow on actions.
- The quarterly attendance at SLT moving forwards.
- The scope of Divisional Command Unit audits has been amended to Include H&S, A879, HS1, RIDDOR reporting and DSEs. There are three divisions, Western, Central and Eastern and they are carried out on a cyclical basis, 2023/24 audit is currently underway in Eastern Division.

Recommendations 271373 and 271374 were issued in relation to HSM training being provided to officers and staff as they are promoted to supervisory positions and provision of training to existing Supervisors. Training of officers and staff is undertaken by the Force Trainers and as such the Head of Training has responsibility for these recommendations. This training will commence from 30/06/2023 in line with the recommendation date. The work on the nature and content of the training is ongoing and whilst this will develop between now and the follow up audit the action is in hand.

23/06/2023 - Update received from Head of Training - The Trainer for Leadership and Assessment Sgt to incorporate these audit recommendations into the Operational Sergeants courses. He liaised with the Health and Safety Manager and agreed that the information on the need to know circulars would be converted into an input on the courses and the trainer would deliver the input, ensuring the audit points were covered.

19/07/2023 - Update received from Head of Training - The H&S recommendations are incorporated into the Operational Sergeants course. Course are scheduled throughout the year. Due to current sickness absence the courses have been rescheduled. The Needs to Know messages are circulated by HSM on a regular basis to provide guidance on investigating and reporting near misses, accidents and injuries. I advise the status of recommendations 271373 and 271374 are ongoing.

19/07/2023 - Head of Training answered questions raised by FBO.

Question - Does the Trainer for Leadership and Assessment Sergeant train everyone who becomes a supervisor?
Answer - No he is not the only trainer to deliver HSM training as there is a variety of supervisory roles and responsibilities. His remit is to support the National Police Promotions Framework (NPPF) promotion officers as they commence NPPF and move through the stages of promotions process. Everyone who becomes a supervisor can be nominated and booked onto a range of supervisory courses. As an example, everyone who passes the Sgts or Inspectors legal examination or promotion board receives an email to advise on the courses relevant to the role of supervisor.

Question - What do we do for existing supervisors?
Answer - Existing supervisors are on the nomination list for IOSH courses and these are delivered by IOSH qualified trainers. This covers all elements of H&S responsibilities and are delivered throughout the year.

08/09/23 – H&S training has been incorporated to force programmes and this will continue as BAU. The proposal would be to close the action and assess its completion in the follow up audit with TIAA in Feb23. There is an ongoing discussion between Training and the HSM about how to improve and promote access to H&S courses. College Learn (previously known as NCALT) has recently updated the H&S courses and we are exploring which of these will be circulated and promoted to existing supervisors to complete to improve their knowledge and skills and improve H&S investigations and reporting.

6.   INTERNAL AUDIT ACTION UPDATES STEMMING FROM 27/07/2023 JAC MEETING

AP6a (27/07/2023) - Internal Audit SICA 2023-24 - Treasury Management is included within the Internal Audit work plan every year.

Person responsible: Internal Audit/Finance and Budget Officer (FBO).

FBO response - JAC members previously requested that this be an annual audit and NWP have adhered to this; Treasury Management is undertaken on an annual basis and has received substantial assurance in 2017/18, 2018/19, 2019/20, 2020/21, 2021/22(Collaborative audit all 4 forces) and 2022/23. This year 2023/2024 it will be a collaborative audit with GWP and SWP

AP6b (27/07/2023) - Internal Audit SICA 2023-24 – Internal Audit and officers to consider whether unstructured data is included within the scope of the Data Protection audit.

Person responsible: Internal Audit/Finance and Budget Officer (FBO).

FBO response – the Audit Planning Memorandum (APM) has not been received as at 01/09/2023.

AP6c (27/07/2023) Internal Audit SICA 2023-24 - Internal Audit to discuss including the slippage of funds from year to year within the Capital Programme audit.

Person responsible: Internal Audit/Finance and Budget Officer (FBO).

FBO response – the Audit Planning Memorandum (APM) scope has been adjusted to incorporate slippage and the fieldwork commenced w/c 11/09/23

7.   SUMMARY

This report is provided to the Joint Audit Committee to provide assurance around the internal control activity taking place in the period supplementing the information held within the TIAA SICA report.

Appendix 1 - Analysis of the 20 outstanding recommendations and how they tally to each audit.

No	ID	Service	Job	Year	Risk Area	Type	Recs Monitored Via	Linked to Risk Register
001 002 003	249424 249425 249426	ICT Audit	20/21 Collaborative Project Review – Office 365	2020	Directed Risk	Existing	Quarterly Joint Governance Board; Digital Transformation Board	46 Digital Transformation Programme
004 005 006 007 008 009 010 011	269283 269284 269285 269286 269287 269290 269291 269292	Internal Audit	22/23 HR Absence Management	2022	Directed Risk	New	Quarterly Joint Governance Board; SMT	-
012	269645	Internal Audit	22/23 Vetting	2022	Delivery Risk	New	Quarterly Joint Governance Board; SMT	-
013 014 015 016	269697 269698 269700 269701	ICT Audit	22/23 ICT Cyber Security	2022	Directed Risk	New	Quarterly Joint Governance Board	10 Network Security Risk from External Evidence 11 Encryption of Disks 46 Digital Transformation 60 Cyber Security Threats 72 Data Protection
017 018	271372 271373 271374	Internal Audit	22/23 Health and Safety Management	2022	Directed Risk	New	Quarterly Joint Governance Board; Quarterly SLT; Quarterly Health and Safety Board	-
019	271957	Internal Audit	23/24 Estates Management - Strategy	2023	Directed Risk	New	Quarterly Joint Governance Board; Quarterly Estates & Facilities Board	93. Inadequate financial resources to deliver service plans
020	272557	Internal Audit	22/23 HR – Use of OLEEO - Collaborative	2022	Directed Risk	New	Quarterly Joint Governance Board; All Wales People and Organisational Gold Group; Silver Resourcing Group	-

Appendix 2 – Latest Management Response relating to Outstanding Recommendations

Overview

Priority Level	No	Job	Original Due Date	Revised Due Date	No of Recs
2	001	20/21 Collaborative Project Review – Office 365	31/03/2022	29/02/2024	1
	002	20/21 Collaborative Project Review – Office 365	30/09/2023	29/02/2024	1
	004	22/23 HR Absence Management	30/09/2023		1
	005	22/23 HR Absence Management	30/09/2023		1
	006	22/23 HR Absence Management	30/09/2023		1
	007	22/23 HR Absence Management	30/09/2023		1
	008	22/23 HR Absence Management	30/09/2023		1
	009	22/23 HR Absence Management	30/09/2023		1
	010	22/23 HR Absence Management	30/04/2024		1
	013	22/23 ICT-Cyber Security	30/09/2023	31/01/2024	1
	014	22/23 ICT-Cyber Security	30/09/2023	31/01/2024	1
	015	22/23 ICT-Cyber Security	30/09/2023		1
	016	22/23 ICT-Cyber Security	31/03/2024		1
	017	22/23 Health and Safety Management	30/06/2023		1
	018	22/23 Health and Safety Management	30/06/2023		1
	020	22/23 HR – Use of OLEEO - Collaborative	30/11/2023		1
3	003	20/21 Collaborative Project Review – Office 365	30/09/2022	28/02/2024	1
	011	22/23 HR Absence Management	30/09/2023		1
	012	22/23 Vetting	31/12/2023		1
	019	23/24 Estates Management - Strategy	30/11/2023		1
Grand Total					**20**

No	ID	Job	Year	Risk Area	Recommendation	Priority	Management Comments	Responsible Officer	Due Date	Revised Due Date	Category	Last Update	Latest Response
001	249424	REDACTED											
002	249425	REDACTED											
003	249426	REDACTED											
004	269283	22/23 HR Absence Management	2022	Directed Risk	The Absence Management Policy be updated to include specific information and a clear process on managing long term sickness absence.	2	There is reference to the capability procedure for staff and UAP for Officers but there is little appetite to use these tools when managing long term cases. Include as part of the review of the Attendance Management Policy via a designated Task & Finish group. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
005	269284	22/23 HR Absence Management	2022	Directed Risk	Long term sickness cases be documented and reviewed on a regular basis in line with the Absence Management Policy requirement when it is updated.	2	There was evidence of contact but limited detail on the management of these cases. Include as part of the review of the Attendance Management Policy via a designated Task & Finish group. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
006	269285	22/23 HR Absence Management	2022	Directed Risk	The Absence Management Policy be updated to explicitly state what the force recognises as a trigger point for further intervention or closer monitoring.	2	Consultation will take place on what approach the Force wants to take in relation to triggers and this will be built into the new policy. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
007	269286	22/23 HR Absence Management	2022	Directed Risk	The management of cases of absence breaching the trigger point be improved and it be ensured that all cases are documented appropriately.	2	Once triggers have been agreed in policy, regular reports will be shared with SMT's to drive forward this approach. Supportive plans to be put in place to improve attendance and support with welfare. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
008	269287	22/23 HR Absence Management	2022	Directed Risk	The Absence Management Policy be updated to include the requirement for staff to complete a self-certification form following any period of sickness absence.	2	Consultation on whether the Force wishes to implement self-certification will be undertaken and as necessary this will be built into the policy. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal

											consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.

No	ID	Job	Year	Risk Area	Recommendation	Priority	Management Comments	Responsible Officer	Due Date	Revised Due Date	Category	Last Update	Latest Response
009	269290	22/23 HR Absence Management	2022	Delivery Risk	The force intranet be updated in line with the Absence Management Policy once the review has been completed.	2	Resources will be developed in tangent with the policy review. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	08/09/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
010	269291	22/23 HR Absence Management	2022	Delivery Risk	Mandatory training for Line Managers with responsibilities for managing sickness absence be delivered to ensure the correct and consistent procedures are followed for every case of sickness absence.	2	HR provide coaching on individual cases and briefings at local People Panels. This will be reviewed in line with first line management training from CoP to ensure that any gaps are bridged.	Head of HR	30/04/2024		1	20/06/2023	20/06/2023 - Update received from Head of HR - we have developed modules on Attendance Management for the first line leadership training (this was due to take place in June but has been cancelled, the next sessions are in October). Whilst that covers new first line managers, there is still a matter of wider training for line managers which I do not have ownership of. What we have discussed, is accompanying guidance, support, coaching and tools for managers which will be developed as part of the wider project and will align with the policy and procedure that is proposed and agreed. So, whilst we have begun to offer some training, this is more focussed currently on best practice and principles until we firm up the new policy and roll it out.
011	269292	22/23 HR Absence Management	2022	Directed Risk	Return to work interviews be included as standard within the Absence Management Policy for staff and officers returning to work from a period of sickness absence (the length of absence to be determined, although generally would apply to all absences).	3	Incorporated into review of policy as outlined above via T&F group. The implementation date has been reached by considering the time frame for the review of the policy and the consultation process prior to the policy being ratified.	Head of HR	30/09/2023		1	20/06/2023	20/06/2023 - Update received from Head of HR - The work on the policy is progressing and we have already shared an outline proposal with Fed/UNISON and will be going out to SMT's shortly. Once we have completed this we can then move this forward to formal consultation and thereafter implementation. I would emphasise that this is an extensive piece of work to be delivered and not a list of actions. 08/09/2023 - Update received from Head of HR - The work on the policy continues to progress but is still to reach a position to launch the formal consultation phase. The timeline of the end of September is currently being reviewed to ensure completion dates are achievable.
012	269645	22/23 Vetting	2022	Delivery Risk	The back fill of records completion exercise be undertaken as planned.	3	The COREVET system has been live since March 2021. A bid has been put in place to extend the contract of some of our temporary researchers to work towards completing this task.	Vetting Researchers	31/12/2023		1	30/05/2023	30/05/2023 - update received from Force Vetting Manager - We have the funding in place for three extra Researchers, two of these posts are filled and one is at application stage, they will be servicing the current demand due to the high levels, but as a researcher encounters a BRC in the course of their day, they will transfer the files over from the archives, to COREVET. **21/07/2023 - update received from Vetting Manager - Our position remains that cases are BRC on an individual basis as they are processed through the vetting department as a result of a health check or renewal, however the additional temporary resource continues to manage the increased demand through Uplift, recruitment demands and impact of elements of the Warwickshire Contractor Scheme moved back to forces. The impact of the newly released VCOP and APP are yet to be fully understood also. Staffing in the vetting department remains under review to ensure it can meet its demand,**

											and consideration for this work will continue through ongoing financial planning processes.
013	269697	REDACTED									
014	269698	REDACTED									
015	269700	REDACTED									
016	269701	REDACTED									

No	ID	Job	Year	Risk Area	Recommendation	Priority	Management Comments	Responsible Officer	Due Date	Revised Due Date	Category	Last Update	Latest Response
017	271373	22/23 Health and Safety Management	2022	Directed Risk	Health and safety training be provided to officers / members of staff as they are promoted to supervisory positions with an emphasis on their responsibility in reporting accidents to an appropriate deadline.	2	Head of L&D to agree on a process to ensure that managers and supervisors, who upon promotion, are given an appropriate health and safety input by a force trainer, outlining their responsibilities in terms of a) investigating injuries and near miss incidents, and b) recording their findings in line with the law and the Force's H&S Policy. In addition, Line managers/supervisors, will be provided with key information in terms of RIDDOR reporting, e.g., what categories of injuries and near misses fall under RIDDOR, and, critically what the decision-making process is to ensure that RIDDOR reports are submitted to HSE within the 15-day statutory deadline by the Force's Health and Safety Manager without exception. Note: Need to Know relating to the above circulated to all NWP employees twice in 2022/23. HSM submits a report on a monthly basis to DFR who in turn reports relevant issues to the Senior Force Governance Forum to ensure that Command and SMT units take responsibility and held to account in terms of the correct reporting process relating to the reporting of Injuries, Near Misses and DSEs, and fundamentally, the recording of Line Managers investigations to ensure the safety and welfare of staff under their command.	Head of L&D	30/06/2023	08/09/2023	7	08/09/2023	23/06/2023 - Update received from Head of Training - The Trainer for Leadership and Assessment Sgt to incorporate these audit recommendations into the Operational Sergeants courses. He liaised with the Health and Safety Manager and agreed that the information on the need to know circulars would be converted into an input on the courses and the trainer would deliver the input, ensuring the audit points were covered. **19/07/2023 - Update received from Head of Training - The H&S recommendations are incorporated into the Operational Sergeants course. Course are scheduled throughout the year. Due to current sickness absence the courses have been rescheduled. The Needs to Know messages are circulated by HSM on a regular basis to provide guidance on investigating and reporting near misses, accidents and injuries. I advise the status of recommendations 271373 and 271374 are ongoing.** **19/07/2023 - Head of Training answered questions raised by FBO. Question - Does the Trainer for Leadership and Assessment Sergeant train everyone who becomes a supervisor?** Answer - No he is not the only trainer to deliver HSM training as there is a variety of supervisory roles and responsibilities. His remit is to support the National Police Promotions Framework (NPPF) promotion officers as they commence NPPF and move through the stages of promotions process. Everyone who becomes a supervisor can be nominated and booked onto a range of supervisory courses. As an example, everyone who passes the Sgts or Inspectors legal examination or promotion board receives an email to advise on the courses relevant to the role of supervisor. **Question - What do we do for existing supervisors?** Answer - Existing supervisors are on the nomination list for IOSH courses and these are delivered by IOSH qualified trainers. This covers all elements of H&S responsibilities and are delivered throughout the year. 08/09/23 – H&S training has been incorporated to force programmes and this will continue as BAU. The proposal would be to close the action and assess its completion in the follow up audit with TIAA in Feb23. There is an ongoing discussion between Training and the HSM about how to improve and promote access to H&S courses. College Learn (previously known as NCALT) has recently updated the H&S courses and we are exploring which of these will be circulated and promoted to existing supervisors to complete to improve their knowledge and skills and improve H&S investigations and reporting.

No	ID	Job	Year	Risk Area	Recommendation	Priority	Management Comments	Responsible Officer	Due Date	Revised Due Date	Category	Last Update	Latest Response
018	271374	22/23 Health and Safety Management	2022	Directed Risk	All Officers / members of staff in supervisory positions be provided with health and safety training that outlines their responsibility in submitting A879, HS1 and DSE forms and the risks to the organisation caused by lack of compliance with HSE regulation.	2	Newly promoted supervisors and managers, attending courses, will be provided with an appropriate DSE input and presentation by a force trainer in terms of their responsibilities to staff working from home and in an office environment (place of work). Note: Need to Know and presentation circulated to all NWP employees twice in 2022/23.

HSM submits a report on a monthly basis to DFR who in turn reports relevant issues to the Senior Force Governance Forum to ensure that Command and SMT units take responsibility and held to account in terms of the correct reporting process relating to the reporting of Injuries, Near Misses and DSEs, and fundamentally, the recording of Line Managers investigations to ensure the safety and welfare of staff under their command | Head of L&D | 30/06/2023 | 08/09/2023 | 7 | 23/06/2023 | 23/06/2023 - Update received from Head of Training - The Trainer for Leadership and Assessment Sgt to incorporate these audit recommendations into the Operational Sergeants courses. He liaised with the Health and Safety Manager and agreed that the information on the need to know circulars would be converted into an input on the courses and the trainer would deliver the input, ensuring the audit points were covered.

19/07/2023 - Update received from Head of Training - The H&S recommendations are incorporated into the Operational Sergeants course. Course are scheduled throughout the year. Due to current sickness absence the courses have been rescheduled. The Needs to Know messages are circulated by HSM on a regular basis to provide guidance on investigating and reporting near misses, accidents and injuries. I advise the status of recommendations 271373 and 271374 are ongoing.

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Question - What do we do for existing supervisors?
Answer - Existing supervisors are on the nomination list for IOSH courses and these are delivered by IOSH qualified trainers. This covers all elements of H&S responsibilities and are delivered throughout the year.

08/09/23 – H&S training has been incorporated to force programmes and this will continue as BAU. The proposal would be to close the action and assess its completion in the follow up audit with TIAA in Feb23. There is an ongoing discussion between Training and the HSM about how to improve and promote access to H&S courses. College Learn (previously known as NCALT) has recently updated the H&S courses and we are exploring which of these will be circulated and promoted to existing supervisors to complete to improve their knowledge and skills and improve H&S investigations and reporting. |
| 019 | 271957 | 23/24 Estates Management - Strategy | 2023 | Directed Risk | The Estates Strategy be reviewed and updated to reflect current and future strategic arrangements for sustainability and decarbonisation. | 3 | There are some significant strategic decisions to be made during 2023 regarding the Force's Corporate Estate which will require updating of the Estate Strategy and the Implementation Plan as part of the 'Fit for the Future' corporate objectives. That will be the appropriate time to elaborate on the Force's strategic intentions in relation to sustainability and decarbonisation. | Head of Facilities and Fleet | 30/11/2023 | | 1 | | 31/08/2023 - Update from Head of Facilities and Fleet - the Estates Strategy is under review and discussions are ongoing with relevant parties. |

020	272557	22/23 HR – Use of OLEEO - Collaborative	2022	Directed Risk	The Section 22 National Collaboration Agreement in relation to 'The provision of an all-Wales e-recruitment platform' be finalised and agreed and signed by each force.	2	The North Wales Director of Finance has been liaising with his counterparts in the other Welsh Forces in order to progress the signing of the S22 agreement. Timetable is 3 months to enable progress through different Force Governance arrangements.	Director of Finance and Resources, NWP	30/11/2023		1		11/08/2023 – Update received from DFR - The perceived sticking points for the S22a were discussed at Finance JAG with a proposed approach agreed by the Directors of Finance & Resources. This proposal is being incorporated into the draft s22a. The Head of POD will then coordinate progressing the sign of this via the All Wales People Group. The s22a has proved difficult to resolve and there is the potential need for further engagement with stakeholders being required prior to sign off being achieved.

Appendix 3 – Recommendation Categorisation

"Priority" refers to the implementation timeline to adopt:

Description	Priority
URGENT - Fundamental Control issue on which action should be taken immediately.	1
IMPORTANT - Control issue on which action should be taken at the earliest opportunity.	2
ROUTINE - Control issue on which action should be taken.	3

"Category" refers to date revisions as per the below:

Description	Category
Recommendations - still on original due date	1
Recommendations - 1st revised due date	2
Recommendations - 2nd revised due date	3
Recommendations - 3rd revised due date	4
Recommendations - 4th revised due date	5
Recommendations - 5th revised due date	6
Recommendations - Overdue	7

JOINT AUDIT COMMITTEE

Title:	Risk Management Report (Open Session)
Author:	Neil T. Ackers, Risk and Business Continuity Lead
Purpose of the report:	To provide the Joint Audit Committee with an update on the organisational risk process and an oversight of the current risks recorded by North Wales Police and the North Wales Police and Crime Commissioner.
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ✓ Assurance ☐ Information

Summary / Key Points:	• All risks have been reviewed monthly by the Risk and Business Continuity Lead ensuring they are updated and remain on target. A dated entry is made alongside the review within the embedded risk record 'supporting information document'.
	
	• Reminders have been sent to Risk Leads to review and update their ongoing risks and actions either on a monthly or quarterly basis (dependent on the risk type).
	
	• Since the previous update all risks on the Force Risk Register have been reviewed in the following meetings with no issues or exceptions having been raised.
	
	   • Senior Management Team Meetings
	   • Senior Leadership Team Meeting
	   • Strategic Management Board
	   • Strategic Executive Board
	   • Strategic Operational Board
	   • Strategic People Board
	   • Strategic Change and Collaboration Board
	   • Assurance Board
	
	   • A summary of live NWP and OPCC risks recorded on the Force Risk Register 30th June 2023 - 25th August 2023.
	
	• **New NWP risks recorded on Force Risk Register since last report.**
	   • Risk 114 REDACTED CLOSED SESSION
	   • Risk 115 REDACTED CLOSED SESSION
	   • Risk 116 Loss of Trust and Confidence in NWP
	   • Risk 117 REDACTED CLOSED SESSION

	• **New OPCC risks recorded on Force Risk Register since last report.**
	
	• **NWP Risks removed from Force Risk Register since last report.**
	    • <mark>Risk 085 REDACTED CLOSED SESSION</mark>
	    • Risk 086 Disclosure Unit Backlogs
	    • Risk 097 Betsi Cadwaladr Medical Requests
	    • <mark>Risk 114 REDACTED CLOSED SESSION</mark>
	
	• **OPCC Risks removed from Force Risk Register since last report.**
	
	• **NWP Risk Changes on Force Risk Register since last report.**
	
	• **OPCC Risk Changes on Force Risk Register since last report.**
	
	• **Force Risk Register which included OPCC Risks.**
	    • Risk Actions RAG Ratings - NWP
	    • Risk Actions RAG Ratings - OPCC
	
	• **Force COVID19 Risk Register.**
	
	• **Developments regarding risk management.**
	    • Peer review by South Wales Police
	
	• **A summary table of NWP risks recorded on the Force Risk Register as at 25/08/23.**
	
	• **A summary table of OPCC risks recorded on the Force Risk Register as at 25/08/23.**

Recommendations:	None
Risk Register Impact:	This report is based on details recorded on both the Force Risk Register and Covid19 Risk Register
Assurance Implications:	This report is directly relevant to the development of assurance in North Wales Police
Equality Impact:	None
Information Exempt from Disclosure:	Yes <mark>(highlighted in yellow)</mark>

1. **INTRODUCTION**

The purpose of this report is to provide an update on the organisational risk management process and allow oversight of the status of North Wales Police and Crime Commissioner and North Wales Police risks and is based on information received and recorded by 25th August 2023 on the Force Risk Register version 6.213.

Project risks are managed separately within the Portfolio Management Office; however, those that require Force attention are escalated to the Force Risk Register through the agreed process documented in the Risk and Assurance Mapping Framework.

2. **FORCE RISK REGISTER SUMMARY**

We continue to embed our approach to Risk Management across the organisation through regular interaction with the Risk Leads/Owners either monthly or quarterly (dependent on the risk type). Reminders have been sent to relevant individuals to review and update ongoing actions to ensure the risk remains on target.   In addition to this we continue to conduct a monthly review of all risks and raised any concerns or issues with the Risk Leads and Senior Management Team's (SMT's) via their risk highlight reports. Risks are also reported to and reviewed at the Senior Leadership Team (SLT) Meeting, Senior Management Team (SMT) Meetings, Strategic Management Board (SMB), Strategic Executive Board (SEB), Strategic Operational Board (SOB), Strategic People Board (SPB), Strategic Change and Collaboration Board (SCCB), with no issues or exceptions having been raised.   A summary of all risks recorded on the Force Risk Register are also reported to the Assurance Board.

Table 1: - NWP risks on the Force Risk Register 30th June 2023 - 25th August 2023

Risk Levels before Controls	Previous NWP Risk Total	Risks removed in this period	New Risks in this period	NWP Risks currently recorded on Force Risk Register
Critical	10	2	1	9
High	13	2	3	14
Medium	1	0	0	1
Total	24	4	4	24

Table 2: - OPCC risks on the Force Risk Register 30th June 2023 - 25th August 2023

Risk Levels Before Controls	Previous OPCC Risk Total	Risks removed in this period	New Risks in this period	OPCC Risks currently recorded on Force Risk Register
Critical	1	0	0	1
High	2	0	0	2
Medium	0	0	0	0
Total	3	0	0	3

3. **NEW NWP RISKS RECORDED ON FORCE RISK REGISTER SINCE LAST REPORT**

There have been 4 new NWP risks added to the Force Risk Register since the last JAC risk report.

- **Risk 114 REDACTED CLOSED SESSION**

- **Risk 115 REDACTED CLOSED SESSION**

- **Risk 116 Loss of Trust and Confidence in NWP**
  There is a risk of the losing the trust and confidence of North Wales communities, in NWP response to violence against women and girls following the abuse of position of officers in high-profile national cases.
  This has been **caused by** the tragic murder of REDACTED by REDACTED, the conviction of REDACTED a serving officer for numerous rape offences, and a continuing number of

officers being held to account in Misconduct Hearings for sexual harassment, abuse of position for sexual purpose and police perpetrated domestic abuse.

Whilst this is positive that those committing this behaviour are held to account, the high-profile media attention **may result in** alienating those most vulnerable from calling the police if required or reporting any concerns.

This Static risk was raised by the Chief Constable on 23/01/23. The 'Before Controls Risk Level' was determined as HIGH and the 'Present Risk Level' is currently HIGH. The Target Level is MEDIUM with a Target Risk End Date of 31/10/23.

There are 3 Actions on this risk, 2 x LIVE, 1 x Completed.

The Risk Lead is Detective Superintendent, Professional Standards Department.

- <mark>Risk 117 REDACTED CLOSED SESSION</mark>

4.   NEW OPCC RISKS RECORDED ON FORCE RISK REGISTER SINCE LAST REPORT
There have been no new OPCC risks added to the Force Risk Register since the last JAC risk report.

5.   NWP RISKS REMOVED FROM FORCE RISK REGISTER SINCE LAST REPORT
There have been 4 risks Closed and removed from the Force Risk Register since the last report.

- <mark>Risk 085 REDACTED CLOSED SESSION</mark>

- **Risk 086 Disclosure Unit Backlogs**
  This risk was initially raised on 09/11/21 by the Disclosures Unit Manager.

  The 'Before Controls Risk Level' was determined as HIGH. The 'Present Risk Level' was MEDIUM. The 'Target Level' was MEDIUM.

  This Static risk within the Disclosures Unit, that family court disclosure requests are taking too much time to complete **caused by** the complexity of information requested by the Courts and the number of court orders received **which may have resulted in** backlogs of work due to insufficient staffing to cope with the demand.

  The risk was reviewed at Operational Support Services SMT on 04/07/23 and authorised for removal from the Force Risk Register due to:

  - All actions marked completed
  - Target Level Achieved
  - Return to business as usual
  - Risk has been Treated

  The risk was closed and removed from the Force Risk Register on 07/07/23.

- **Risk 097 Betsi Cadwaladr Medical Requests**
This risk was initially raised on 14/04/22 by Justice Delivery Manager.

The 'Before Controls Risk Level' was determined as HIGH. The 'Present Risk Level' was lowered from HIGH to MEDIUM on 26/06/23. The 'Target Level' was MEDIUM.

This Dynamic risk related to Betsi Cadwaladr having a backlog of processing North Wales Police medical requests **caused by** staff shortages in Betsi Cadwaladr UHB through long term sickness, Covid and vacancies being advertised, **which may have led to** CPS discontinuing cases, CPS authorising a lesser charge on North Wales Police Cases.

The risk was reviewed at Operational Support Services SMT on 04/07/23 and authorised for removal from the Force Risk Register due to:

- All actions marked completed
- Target Level Achieved
- Return to business as usual
- Risk has been Treated

The risk was closed and removed from the Force Risk Register on 07/07/23.

- Risk 114 REDACTED CLOSED SESSION

6. **OPCC RISKS REMOVED FROM FORCE RISK REGISTER SINCE LAST REPORT.**
There has been no OPCC risks Closed and removed from the Force Risk Register since the last report.

7. **NWP RISK CHANGES ON FORCE RISK REGISTER SINCE LAST REPORT**
There have been no Live NWP risks that have changed their Present Risk Levels since the last report.

8. **OPCC RISK CHANGES ON FORCE RISK REGISTER SINCE LAST REPORT.**
There has been no Live OPCC risks that changed their Present Risk Level since the last report.

9. **FORCE RISK REGISTER ACTIONS**

- **Risk Actions RAG Ratings - NWP**

Actions Not on Track	Actions On Track but with Issues	Actions On Track	Completed Actions
2	3	38	75

Risks highlighted with *'Actions On Track but with issues'* relate to Actions that are currently marked as pending or stalled and awaiting decisions on progression.

Risks highlighted with *'Actions Not On Track'* relate to Actions that are overdue and awaiting updates from Risk Leads.

- **Risk Actions RAG Ratings - OPCC**

Actions Not on Track	Actions On Track but with Issues	Actions On Track	Completed Actions
0	1	10	3

Risks highlighted with *'Actions On Track but with issues'* relate to Actions that are currently marked as pending or stalled and awaiting decisions on progression.

Risks highlighted with *'Actions Not On Track'* relate to Actions that are overdue and awaiting updates from Risk Leads.

10.   FORCE COVID19 RISK REGISTER
There are currently no risks recorded on the Force Covid19 Risk Register.

11.   DEVELOPMENTS REGARDING RISK MANAGEMENT

- **Peer review by South Wales Police**
  A verbal update will be made in the meeting by Head of Business Intelligence

12. SUMMARY OF NWP RISKS ON FORCE RISK REGISTER AS AT 25/08/2023

URN	Risk Title	Risk Levels			Risk Type	Date Risk Raised	Last Review Date	Risk Actions Progress				
		Before Controls	Present	Target				Outstanding Actions	Completed Actions	On Track	On Track with Issues	Not on Track
003	RMS Legacy Database	High	Medium	Low	Annual	10/08/16	01/07/24	1	1	1		
054	REDACTED CLOSED SESSION	High	Medium	Low	Dynamic	29/04/20	23/08/23	1	2	1		
060	REDACTED CLOSED SESSION	High	Medium	Medium	Static	19/05/20	16/08/23	1	3	1		
071	Pensions	High	Medium	Medium	Static	20/01/21	07/08/23	2	3	2		
074	REDACTED CLOSED SESSION	Critical	Medium	Medium	Dynamic	04/06/21	08/08/23	1	14	1		
081	Inability attracting Staff to apply for key roles in NWP	Critical	Medium	Medium	Dynamic	08/09/21	07/03/23	2	3	-		2
088	REDACTED CLOSED SESSION	High	High	Low	Dynamic	01/02/22	01/08/23	3	3	3		
091	Loss of money invested on the money market	Critical	Low	Low	Static	16/02/22	07/08/23	2	2	2		
093	Inadequate financial resources to deliver service plans for period 01/04/2024 to 31/3/2029	Critical	Medium	Medium	Static	15/03/22	07/08/23	2	2	2		
094	REDACTED CLOSED SESSION	High	Medium	Negligible	Dynamic	22/02/22	01/08/23	2	6	2		
096	Excess Demand within the Analysts Unit	High	Medium	Medium	Static	12/04/22	05/05/23	2	10	2		
098	REDACTED CLOSED SESSION	Critical	Critical	Medium	Dynamic	19/05/22	17/08/23	2	5	2		
099	REDACTED CLOSED SESSION	High	Low	Low	Dynamic	13/06/22	05/07/23	0	7	0		
101	REDACTED CLOSED SESSION	Medium	Low	Negligible	Static	07/06/22	24/08/23	1	1	1		
103	Ability to Uplift Officers	High	Low	Low	Dynamic	15/09/22	30/03/23	0	4	-		
105	REDACTED CLOSED SESSION	High	High	Medium	Static	03/01/23	14/07/23	4	1	1	3	
106	REDACTED CLOSED SESSION	Critical	Critical	Medium	Static	03/01/23	01/08/23	3	0	3		
108	REDACTED CLOSED SESSION	Critical	High	Negligible	Dynamic	20/12/22	08/08/23	3	4	3		
110	REDACTED CLOSED SESSION	High	High	Medium	Static	09/05/23	25/08/23	2	0	2		
111	Lack of Force Medical Advisor Cover	Critical	High	Medium	Dynamic	01/05/23	17/08/23	1	3	1		
112	REDACTED CLOSED SESSION	Critical	High	Low	Dynamic	01/05/23	29/07/23	5	0	5		
115	REDACTED CLOSED SESSION	High	High	Negligible	Static	20/06/23	20/06/23	1	0	1		
116	Loss of Trust and Confidence in NWP	High	High	Medium	Static	23/01/23	21/08/23	2	1	2		
117	REDACTED CLOSED SESSION	High	High	Low	Dynamic	18/07/23	18/07/23	Awaited	0	-	-	-

13. SUMMARY OF OPCC RISKS ON FORCE RISK REGISTER AS AT 25/08/2023

URN	Risk Title	Risk Levels			Risk Type	Date Risk Raised	Last Review Date	Risk Actions Progress				
		Before Controls	Present	Target				Outstanding Actions	Completed Actions	On Track	On Track with Issues	Not on Track
091	Loss of money invested on the money market	Critical	Low	Low	Static	16/02/22	07/08/23	2	2	2		
109	Adequacy of financial resources 2023/2024	Critical	Medium	Medium	Static	26/04/23	26/04/23	2	1	2		
113	PCC Election 2024	High	Medium	Low	Static	10/05/23	10/05/23	7	0	6	1	

Joint Audit Committee

Meeting Date: 28 September 2023

Title;	Proposed Work Programme
Author:	Chief Finance Officer
Purpose of the report:	To agree the work programme
The report is provided to JAC for: (tick one)	☐ X Decision ☐ Discussion ☐ Assurance ☐ Information
Summary / Key Points:	• Ensures that the Committee is able to fulfil its duties in line with statutory deadlines, and that all of the Committee's responsibilities are discharged during the course of each year • Feedback from the Joint Audit Committee, and have added the following items to be brought to future meetings: o information management and compliance o provision of internal audit service
Recommendations:	• For members of the Committee to note which items are subject to a statutory deadline, and therefore the meetings have been arranged to fulfil those requirements. • For members of the Committee to consider additional content which might be presented at future meetings. • For the future work programme to be brought to each meeting, outlining the work for the forthcoming twelve months on a rolling basis.
Risk register impact:	One of the purposes of the Committee is to provide assurance to the Police and Crime Commissioner and the Chief Constable that financial and non-financial risks are being managed effectively.
Assurance implications:	The purpose of Joint Audit Committee is to provide assurance to the Police and Crime Commissioner and the Chief Constable, in line with the Terms of Reference. The work programme helps to ensure that all relevant areas are presented to the Committee.
Equality Impact:	Equalities legislation was taken into account when recruiting the independent members of the Joint Audit Committee. There is a Joint Equalities' Scheme in place.
Information exempt from disclosure:	None.

JOINT AUDIT COMMITTEE

28 September 2023

PROPOSED WORK PROGRAMME

Report by the Chief Finance Officer

1.   INTRODUCTION

1.2   The Joint Audit Committee has been provided with a programme of work annually during the July meeting. This ensures that the Committee is able to fulfil its duties in line with statutory deadlines, and that all of the Committee's responsibilities are discharged during the course of each year.

1.3   In addition, items to be presented to the Joint Audit Committee are identified by various means – by officers, staff or the Committee members. These have been added to the work programme on a less formal basis, and are added to the agenda as appropriate.

1.4   Policing is an ever-changing environment. Since the last meeting, the following items have been incorporated into this work programme:

- Value for Money elements
- Sustainability
- Circulation of JAC training needs forms
- Circulation of Introduction to Accounts

1.5   This report, therefore, includes the proposed work plan for the next twelve months. Where the meeting date has not yet been finalised, the month of the meeting is shown for guidance.

2.   RECOMMENDATIONS

2.1   For members of the Committee to note which items are subject to a statutory deadline, and therefore the meetings have been arranged to fulfil those requirements.

2.2   For members of the Committee to consider additional content which might be presented at future meetings.

2.3   For the future work programme to be brought to each meeting, outlining the work for the forthcoming twelve months on a rolling basis.

3.   WORK PROGRAMME

3.1   With the exception of items timetabled the meet statutory deadlines, the work programme is flexible; therefore, additional items may be added should a need arise.

3.2   There are a number of standing agenda items currently scheduled for each meeting. These will remain on the JAC agenda until further notice:

Date of Meeting	Work Programme 2022/23
All (Until Further Notice)	• Business Update incl. VfM • HMICFRS Update (incorporated above unless significant) • Internal Audit Update • Risk Update • Organisational changes • ICT Digital Update • Work Programme

The work programme asides from the standing agenda items outlined above are as follows:

Date of Meeting	Work Programme 2023/24
24 October 2023	• Draft accounts before audited accounts published (JAC briefing) • Summary of accounts • Circulate JAC Annual Training Plan
7 December 2023	• ISA 260 and signing of accounts • Audit Wales – Value for Money and Annual Audit Report (Management Letter) • Value for Money Update • Risk deep dive: Risk 60 *closed session* • Briefing: SSF/SWAN/VAWG • Ethics update • Capital Programme - Update • Governance update • Treasury Management Performance • Legal report • HMICFRS Report – PEEL review • Applications Management Framework *closed session*
March 2024	• Capital Strategy (including Treasury Management Strategy) *to be approved before 1 April 2024* • Governance update – including draft AGS • Sustainability Update • Audit Wales – annual plan • Risk deep dive: Risks 117 and 112 *closed session*
Spring 2024	• All Wales Training event
June 2024	• Accounts Technical Briefing • Introduction to accounts
July 2024	• ISA260 and signing of accounts *to be signed by 31 July 2024* • Force Management Statement • Self-assessment and Annual report of JAC – final report • Risk Strategy & Risk Appetite Statement – Annual review • Treasury Management Performance • Legal report

	• Risk Deep Dive: Risk 99 *closed session*
September 2024	• Governance update • Sustainability Update • HMICFRS Value for Money Profiles
December 2024	• Audit Wales – Value for Money and Annual Audit Report (Management Letter) • Governance Update • Treasury Management Performance • Legal report • Value for Money Update • HMICFRS Report – PEEL Review

Other items to be discussed with JAC	JAC Evaluation Action Plan – Ensure that dedicated and closed sessions are scheduled as required to progress the JAC Evaluation plan actions as required. This includes reviewing the effectiveness of assurance providers considering the provision of internal audit services specifically. Roll-out of IT Programme (monthly, outside of meetings) Meeting between Joint Audit Committee and Audit Wales Meeting between Joint Audit Committee and Internal Audit Sustainability and decarbonisation Review/oversee governance arrangements for partnerships & collaboration

4.   IMPLICATIONS

4.1	Equality	Equalities legislation was taken into account when recruiting the independent members of the Joint Audit Committee. There is a Joint Equalities' Scheme in place.
4.2	Financial	Planning the work for the forthcoming year reduces the need for ad-hoc meetings.
4.3	Legal	Legislation requires that a Joint Audit Committee be established. The functions of the Joint Audit Committee are summarised within its Terms of Reference, which has been prepared in accordance with *Audit Committees\Practical Guidance for local Authorities and Police - 2018 Edition (CIPFA).* This work programme takes account of the statutory and practical requirements to fulfil these obligations.
4.4	Community	Meeting papers and minutes are published, and the meetings are open for the public to attend.
4.5	Risk	One of the purposes of the Committee is to provide assurance to the Police and Crime Commissioner and the Chief Constable that financial and non-financial risks are being managed effectively.

4 .6	Police and Crime Plan	The role of the Joint Audit Committee is part of the overall Police and Crime Plan.

Report Author:

Kate Jackson
Chief Finance Officer, Office of the Police and Crime Commissioner

JOINT AUDIT COMMITTEE

Title:	Annual Review of Force Risk Management and Assurance Mapping Framework (Open Session)
Author:	Neil T. Ackers, Risk and Business Continuity Lead
Purpose of the report:	To provide the Joint Audit Committee with an update on the Force Risk Management and Assurance Mapping Framework
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ✓ Assurance ✓ Information
Summary / Key Points:	The Force Risk Management and Assurance Mapping Framework was presented to the Senior Leadership Team (SLT) on 25th July and has been fully supported.
Recommendations:	None
Risk Register Impact:	This report follows an annual review of the Force Risk Management and Assurance Mapping Framework by the Risk and Business Continuity Lead
Assurance Implications:	This report is directly relevant to the development of assurance in North Wales Police Risk Management
Equality Impact:	None
Information Exempt from Disclosure:	No

1. APPROACH

The Force Risk Management and Assurance Mapping Framework was created in February 2020 which details NWP's Risk Management Processes. The recommended review date would normally be 3 years but as NWP's Risk Management processes are reviewed annually, the Framework document is regularly reviewed and updated by the Risk and Business Continuity Lead. The document v1.9 was presented to the Senior Leadership Team (SLT) on 25th July and has been fully supported.

2. CHANGES

The following changes have been made since the publication of the Risk Management and Assurance Mapping Framework:

Version No	Date	Author	Changes
0.1		Sian Wyn Jones	Transferred from Policy format (v0.5)
0.2		Sian Wyn Jones	Minor amendment from Ch Supt Corporate Services
0.3		Sian Wyn Jones	Reference to it being a joint framework between NWP and OPCC
1.0		Sian Wyn Jones	Agreed at Assurance Board 24/02/2020
1.1		Neil Ackers	Para 3.13 added re. Assurance Board Terms of Reference and amended reference to Risk & Business Continuity Coordinator to Risk & Business Continuity Lead throughout.
1.2		Sian Wyn Jones	Pic updated in 5.11 to reflect updated governance structure
1.3		Sian Wyn Jones	Section 4.6 updated
1.4	09/08/21	Neil T. Ackers	Section 5.5 Risk Wording updated from "If (EVENT), then (CONSEQUENCE) to "There is a Risk ………. Caused by …….. Which may result in ………."
1.5	19/11/21	Neil T. Ackers	Framework reviewed and updated
1.6	06/06/22	Neil T. Ackers	Section 4.6 updated (Innovation added)
1.7	01/07/22	Neil T. Ackers	Section 3.3 amended. 'As Force SIRO, the Director of Finance and Resources is responsible for providing scrutiny for information security risks'.
1.8	20/02/23	Neil T. Ackers	Annual Review of document
1.9	18/07/23	Neil T. Ackers	Document reviewed and updated. Submitted to SLT for approval

Full version of Force Risk Management and Assurance Mapping Framework v1.9 below

 (Annex A – below)

Risk Management
and Assurance Mappii

HEDDLU GOGLEDD CYMRU
NORTH WALES POLICE

FRAMEWORK

RISK MANAGEMENT AND ASSURANCE MAPPING FRAMEWORK

Document Type:	**Framework**
Framework Owner:	**Head of Corporate Services**
Department:	**Corporate Services**
Framework Writer:	**Business Continuity and Risk Co-ordinator**
Version:	**1.9**
Effective Date:	**19/07/2023**
Recommended Review Date:	**19/07/2026**

Version No	Date	Author	Changes
0.1		Sian Wyn Jones	Transferred from Policy format (v0.5)
0.2		Sian Wyn Jones	Minor amendment from Ch Supt Corporate Services
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1.9	18/07/23	Neil T. Ackers	Document reviewed and updated. Submitted to SLT for approval

CONTENTS

1. INTRODUCTION & PURPOSE

1.1 **Risk Management**

Risk Management is fundamental to any organisation's strategic management process and is a part of internal control systems.

North Wales Police (NWP) and the Office of the Police and Crime Commissioner (OPCC) have a duty to manage risk effectively to:

- Maintain confidence in the force
- Safeguard public confidence and integrity
- Ensure the delivery of the police and crime plan objectives

NWP and the OPCC's Risk Management follows the principals of ISO31000 and enables both to understand acceptable levels of risk and take a planned and systematic approach to the identification, evaluation and control of the risks that can threaten the Force.

The processes in place to manage risk within NWP:

- ensures the Force has strategic direction for risk management and seeks to achieve successful outcomes.

- provides clear and consistent standards for the management of risks that contribute to and support the Police and Crime Commissioner's (PCC) police and crime plan objectives and the efficient running of the Force.

- ensures risk management is embedded in the culture of the Force, by informing all officers and staff of their responsibilities in relation to risk management; and

- ensures the Force has up to date and live records relating to the highest risks affecting the Force.

2. TARGET AUDIENCE

2.1 This framework is a joint framework between NWP and OPCC and should therefore be used by all officers and staff of both North Wales Police and the Office of the Police and Crime Commissioner. It is vital that everyone understands the role they play in effective risk management.

3. ROLES AND RESPONSIBILITIES

3.1 The **Police and Crime Commissioner** is responsible for risk management within the OPCC; however this is delegated to the OPCC Chief Executive and Chief Finance Officer.

3.2 The **OPCC Chief Executive and Chief Finance** hold delegated responsibility for OPCC risk management.

3.3 The **Deputy Chief Constable** has overall responsibility for NWP risk management; however managing the process is delegated to the Risk and Business Continuity Lead. As

Force SIRO, the Director of Finance and Resources is responsible for providing scrutiny of information security risks.

3.4   The **Risk and Business Continuity Lead** is responsible for the administration of the risk management processes which includes arranging risk scoring meetings and providing support and guidance to Risk Leads, SMT's etc. The postholder will also provide regular reports to (SMTs), Force Strategic Boards and Joint Audit Committee.

3.5   **Senior Management Team's (SMT's)** are the **Risk Owners** of their respective risks. They will ensure Risk is a standing agenda item at all SMT Meetings, will monitor and challenge the performance of their risks with Risk Leads, review mitigation/controls and ensure actions are updated on time. The SMT will consider all new, emerging risks and determine through the risk scoring process with the Risk and Business Continuity Lead if the threshold to record on the Force Risk Register is met or not. For project risks, this will be the role of the Project and Programme Boards and Project Management Office (PMO).

3.6   The **Risk Lead** (not to be mistaken for the Risk and Business Continuity Lead) is the officer or staff member that is in the best position to actively influence the management of the risk, i.e., ensure mitigation/controls to reduce the Control Levels of the risk are documented, allocation of actions, providing updates to the Risk and Business Continuity Lead promptly when requested.

3.7   **Action Owners** may differ from the Risk Lead and may be tasked by the risk lead to provide controls/mitigations to reduce the risk levels. There may be several different Action Owners for one risk. Action Owners are responsible for progressing any actions associated to a risk and updating the Risk Lead in a timely fashion in order that the Risk and Business Continuity Lead can update the Risk Record and Force Risk Register.

3.8   The **Strategic Management Board and Senior Leadership Team (SLT)** will review the Force Risk Register and provide strategic oversight of all NWP 'CRITICAL' and 'HIGH' risks. For project risks, this will be the role of the Change and Collaboration Board.

3.9   A **Force Board, i.e., Strategic Operational Board, Change and Collaboration Board etc.** will provide a second level of scrutiny for all recorded risks under their remit and may challenge the decisions made at SMT level to ensure the risk remains On Track.

3.10   The **Joint Audit Committee** are responsible for considering the effectiveness of the OPCC and the Chief Constable's risk management processes by regularly reviewing risks recorded on the risk register and undertaking deep dives.

3.11   **Internal Audit** will provide independent assurance that risk management, governance and internal controls are operating effectively.

3.12   **Audit Wales** will provide further independent assurance that risk management, governance and internal controls are operating effectively.

3.13   **Assurance Board** will provide a single point for managing all assurance related matters i.e., policies, risk management and business continuity management. The Board will provide the Force with reassurance that there is sufficient evidence that the right level of assurance is in place in the right areas. The Assurance Board will be the final ratification point for all policies**.**

4.	RISK MANAGEMENT IN NWP

4.1 **Risk Management**

Risk management is a continuous process that runs through the whole Force and helps to reduce potential harms and risks.

Risk management is about making the most of opportunities, making the right decisions and achieving objectives once those decisions are made. A failure to manage risk effectively could result in financial losses, disruption to services, threats to public health & safety, reputational damage or claims for compensation.

There are both positive and negative aspects of risk; risk taking offers the possibility of harm but also the chance to be innovative and successful. As well as the threats, risk management can identify opportunities which contribute to the effectiveness of performance delivery.

Positive activity should be considered, documented, and offset against negative impacts. Positive activity, continuous improvement and lessons learned arising from good practise can highlight opportunities.

The below represents the 7R's and 4T's of risk management as noted in the ISO31000 and NWP risk arrangements follows this model.

```
        ┌─────────────────────────────┐
        │   1. Recognition of Risks   │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │     2. Ranking of Risks     │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │    3. Responding to Risks   │
        │        • Tolerate           │
        │        • Treat              │
        │        • Transfer           │
        │        • Terminate          │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │    4. Resourcing Controls   │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │     5. Reaction Planning    │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │     6. Reporting on Risk    │
        └─────────────────────────────┘
                      │
        ┌─────────────────────────────┐
        │  7. Reviewing and Monitoring│
        └─────────────────────────────┘
```

Type of control action

The following assists in determining if a risk needs to be controlled using the 4 Ts process.

```
┌─────────────────┐        ┌─────────────────┐          ╭───────────────╮
│ Is the risk     │  No    │ Can you         │   Yes    │               │
│ within          │ ─────▶ │ terminate the   │ ───────▶ │   Terminate   │
│ Force "risk     │        │ activity that   │          │               │
│ appetite"? (Can │        │ causes the      │          ╰───────────────╯
│ you live with   │        │ risk?           │
│ it?)            │        └────────┬────────┘
└────────┬────────┘                 │ No
         │                          ▼
         │                 ┌─────────────────┐   Yes    ╭───────────────╮
         │ Yes             │ Can you reduce  │ ───────▶ │               │
         │                 │ the impact      │          │     Treat     │
         │                 │ and/or          │          │               │
         │                 │ likelihood of   │          ╰───────────────╯
         │                 │ the risk?       │
         │                 └────────┬────────┘
         ▼                          │ No
 ╭───────────────╮   No    ┌─────────────────┐   Yes    ╭───────────────╮
 │               │ ◀────── │ Can you pass    │ ───────▶ │               │
 │   Tolerate    │         │ the risk on     │          │   Transfer    │
 │               │         │ e.g. to an      │          │               │
 ╰───────────────╯         │ insurer,        │          ╰───────────────╯
                           │ supplier?       │
                           └─────────────────┘
```
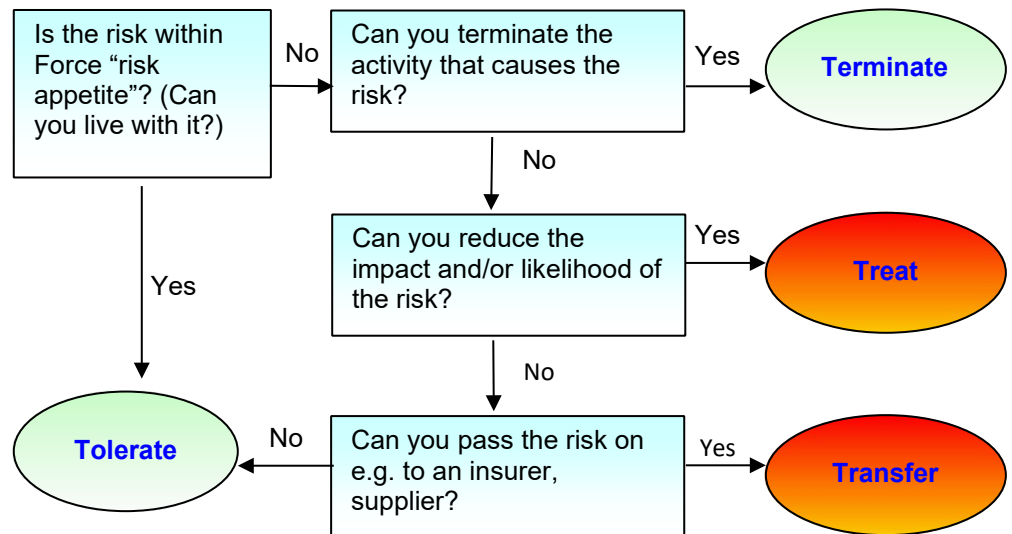
The "**4 Ts**" are:
- **Terminate** - the activity that causes the risk.
- **Treat -** the likelihood and/or impact to reduce them.
- **Transfer -** the risk to another party; or
- **Tolerate** - the risks which are acceptable, or which remain.

4.2 **Authorised Protected Practice (APP) Risk Principles**

NWP adhere to the College of Policing's APP risk principles which should underpin all considerations of risk and can be found here.

4.3 **What is a Risk?**

A risk can be defined as an uncertain event which may influence the achievement of the Police and Crime Plan objectives. A risk can be either a threat or an opportunity.

Risks that are identified, should be reported to a member of the SMT or direct to the Risk and Business Continuity Lead if deemed they may affect the Forces' capacity or capability to achieve the Police and Crime Plan objectives.

4.4 **When do Risks need to be recorded?**

Across the organisation officers and staff manage risks effectively as part of their daily activities; this framework does not impact on that activity. Whilst the general principles outlined in this document may support that activity, the processes outlined at section 5 only applies to those risks that meet the threshold following a Risk Scoring Process with the Risk and Business Continuity Lead.

The PESTELOM model (source: College of Policing) identifies areas that support identification of risks and should be considered when applying the threshold below:

- Political
- Economic
- Social
- Technological
- Environmental
- Legal
- Organisational
- Media

4.5 **Risk Appetite**

NWP's current risk appetite is stated as 'OPEN'; the Chief Constable is willing to consider all options and choose the one that is most likely to result in successful delivery, minimising residual risk as far as possible, while also providing an acceptable level of business benefit. This position falls satisfactorily within the overarching vision of Making North Wales the Safest Place in the UK.

While the diagrams at 4.4 and 5.11 illustrate the agreed triggers for escalation; de-escalation and reporting, it is accepted that the risk appetite below may change in response to circumstances or the general operating environment.

Risk Level	Description
Averse	Avoidance of risk and uncertainty is a key organisational objective.
Minimalist	Preference for ultra - safe business delivery options that have a low degree of inherent risk and only have a potential for limited reward.
Cautious	Preference to a safe delivery option that have a low degree of residual risk and may only have limited potential for reward.
Open	Willing to consider all potential delivery options and choose the one that is most likely to result in successful delivery while also providing an acceptable level of reward (and value for money etc.)
Hungry	Eager to be innovative and to choose options offering potentially higher business rewards, despite greater inherent risk.

The chart below reinforces NWP's risk appetite on certain risk areas.

Risk Category	Risk Area	Risk Level
Strategy	**Strategic Planning Alignment -** We will have a planning process that ensures resources and investments are strategically aligned, with rigorous governance and a full evidence base to support decisions.	Cautious
Governance	**Partnerships / Collaborations -** We are willing to take risks in pursuit of partnership / collaboration developments that have the potential to deliver higher benefits.	Open
	Internal Governance - We will ensure that decision making is done in a structured and evidenced manner that all understand and participate in.	Cautious

Risk Category	Risk Area	Risk Level
	Innovation - We will actively pursue innovative opportunities recognising that this is an important aspect of the organisation's future success. We will also recognise that as we pursue these innovative opportunities failures may result and we will learn from these events rather than be deterred by them.	Hungry
Operations	**Public Safety -** We will take action to avoid or mitigate risks that impact on public safety.	Averse
	Staff/Officers – Fraud and Corruption - We have no appetite for any fraud or corruption perpetrated by our officers or staff.	Averse
	Public Experience / Satisfaction - Public experience / satisfaction is very important to us; in a changing environment we are prepared to be innovative and forward-thinking. We are prepared to take some risks providing there is an operational/financial benefit.	Cautious
Legal	**Compliance (Legal / HO / IOPCC / HMIC) -** We will give due consideration to guidance, recommendations and non-statutory regulations considering local circumstances and the needs of the public of North Wales when making our decisions.	Cautious
	Data Protection/GDPR Compliance - We will ensure the Force meets all requirements of the data protection act whilst acknowledging that policing business still needs to be undertaken efficiently.	Cautious
Financial	**Financial Management -** We need to ensure that resources are aligned to strategic objectives, that we have a balanced and sustainable budget and provide VFM in delivering services.	Cautious
	Treasury Management - - We will prioritise Security, Liquidity and Yield in that order when undertaking Treasury Management activities. A balanced and sustainable budget taking account of the wider economic outlook and context.	Averse
Commercial	**Ethical and Reliable Supply Chain -** We will ensure through rigorous procurement processes that ethical and reliability considerations are fully explored for all supply chains.	Cautious
	Contract Management - We will regularly review the most valuable/critical contracts to ensure they are providing value for money and remain fit for purpose.	Cautious
People	**Staff and Officer Wellbeing -** The health and safety of our staff is important to the delivery of effective and efficient policing in North Wales. We will provide the tools (risk assessments; dynamic risk assessment; training; and equipment) for staff to take managed and acceptable risks.	Cautious
	Resource Levels and Management - We will actively monitor and manage resource levels in front line roles to ensure desirable staffing levels are maintained for the safety of the public and staff.	Cautious

Risk Category	Risk Area	Risk Level
Technology	**ICT Continuity of service for Force Critical Functions -** Where ICT supports Force Critical Functions, we will ensure measures are in place to ensure continuity of service in the event of disruption.	Averse: CAD/Life X Minimalist: RMS
Information	**Internal Information Sharing -** We will be mindful of sharing information securely and appropriately in line with the appropriate Security Labels, i.e. OFFICIAL, whilst ensuring police business can be undertaken effectively and efficiently.	Cautious
	Partnership Information Sharing - We will put in place information sharing agreements with Partners to ensure information is shared securely and in line with the appropriate Security Labels, i.e. OFFICIAL, whilst ensuring police business can be undertaken effectively and efficiently.	Cautious
	AI Ethics - The Force will ensure that all AI related software or developments are assessed for bias through the Force governance structure including public scrutiny through the ethics committee.	Cautious
Security	**IT and Cyber Security -** We have a very low appetite for risks to the network and availability of systems that support our critical functions; we have a very low appetite for threats to our assets arising from external malicious attacks.	Averse
	Site Security - Ensuring our sites are physically secure is important to maintain security of information and ICT equipment, and we will maintain all required access restrictions and use of appropriate identification to support this.	Cautious
Agile/Remote Working	**Agile -** We will ensure we are mindful of the appropriate security where we operate in an agile environment.	Cautious
Project / Programme	**Business Change -** We are open to taking some risk to ensure we remain focussed on the future. Business change can be achieved by developing new and innovative ways of managing our services and includes investment in new technologies and IT development.	Open
Reputational	**Reputation -** We are willing to accept some risks to reputation if there is clear potential for the benefits to outweigh the risks. Our willingness to take risks is limited to those situations where there is little chance of significant repercussions for the force should there be a failure. Our reputation is enhanced by our positive attitude towards Social Value and our risk appetite in other areas.	Cautious
	Staff / Officers - Unethical Behaviour - We will advise staff/officers whose behaviour falls short of the high standards expected, will be dealt with in a robust but proportionate and appropriate manner.	Cautious

4.6   **Risk Scoring Process**

A risk scoring meeting **must** take place with the Risk and Business Continuity Lead when a potential risk has been identified to ensure the Risk Levels are accurately recorded.

Section 5.14.5 details a template used during the risk scoring process. It is completed by the Risk and Business Continuity Lead at the time, and in consultation with the individual presenting the risk being considered for recording onto the Force Risk Register.

4.6.1 Before Controls Level Scoring Matrix

A risk identified through SMT, Strategic Board or by any other means will be scored against the following 'Before Controls Level Scoring Matrix' with the support and assistance of the Risk and Business Continuity Lead.

BEFORE CONTROLS Risk Scoring Matrix Recording/Reporting Route	Probability				
	Negligible Score 1 Rare, may occur in exceptional circumstances. No or little experience for a similar failure.	**Low** Score 2 Might occur at some point in time. Conditions do exist for this to occur, but controls exist and are effective.	**Medium** Score 3 Could occur, this is possible. Measures to reduce likelihood exist but may not be fully effective.	**High** Score 4 Will probably occur, measures may or may not exist to reduce likelihood.	**Critical** Score 5 Is expected to occur, almost certain.
Critical – Score 5 May cause key objectives to fail. Very **significant** impact on organisational goals. A major effect on the organisation/communities.	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** Record Force Risk Register. Report to SMT and Force Committee	**CRITICAL** Record Force Risk Register. Report to SMT and relevant Force Committee	**CRITICAL** Record Force Risk Register. Report to SMT and relevant Force Committee
High – Score 4 Risk factor may lead to significant delays or non-achievement of objectives. An event which has a high impact on the organisation and / or a serious effect on a Service Ares or Department.	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** Record Force Risk Register. Report to SMT and relevant Force Committee	**HIGH** Record Force Risk Register. Report to SMT and relevant Force Committee	**CRITICAL** Record Force Risk Register. Report to SMT and relevant Force Committee
Medium – Score 3 **Moderate** effect. Risk factor may lead to delays or increase in cost. An event that has an overall medium effect on the organisation or the outcome of which significantly affects a unit or section.	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** Record Force Risk Register. Report to SMT and relevant Force Committee	**HIGH** Record Force Risk Register. Report to SMT and relevant Force Committee
Low – Score 2 Some impact of the risk, **fairly minor.** An event that has an overall minor effect on the organisation but the outcome effects individual or unit level only.	**NEGLIGIBLE** Managed by Individual/team	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register
Negligible – Score 1 Some impact of the risk, but **negligible.** The outcome effects individuals or small unit only.	**NEGLIGIBLE** Managed by Individual/team	**NEGLIGIBLE** Managed by Individual/team	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register

4.6.2 Risk Threshold for recording on the Force Risk Register

A risk that has 'Before Controls Level' score of **MEDIUM**, will be referred back to the relevant SMT or Strategic Board for approval to either manage the risk locally or esclate to record on the Force Risk Register.

If the SMT or Strategic Board decide the risk will be managed locally, the considered risk and supporting documents will be recorded on the Risk Management Sharepoint Site and filed under folder Considered and Unapproved Risks.

Any risk that has a 'Before Controls Level' score of **CRITICAL** or **HIGH**, will always be escalated and recorded on the Force Risk Register.

4.6.3 Present and Target Risk Level Scoring Matrix

A risk that meets the threshold of recording on the Force Risk Register will be scored against the below 'Present and Target Risk Level Matrix'.

PRESENT & TARGET RISK LEVEL Scoring Matrix	Probability				
	Negligible Score 1 Rare, may occur in exceptional circumstances. No or little experience for a similar failure.	**Low** Score 2 Might occur at some point in time. Conditions do exist for this to occur, but controls exist and are effective.	**Medium** Score 3 Could occur, this is possible. Measures to reduce likelihood exist but may not be fully effective.	**High** Score 4 Will probably occur, measures may or may not exist to reduce likelihood.	**Critical** Score 5 Is expected to occur, almost certain.
Critical – Score 5 May cause key objectives to fail. Very **significant** impact on organisational goals. A major effect on the organisation/communities.	MEDIUM	MEDIUM	HIGH	CRITICAL	CRITICAL
High – Score 4 Risk factor may lead to significant delays or non-achievement of objectives. An event which has a high impact on the organisation and / or a serious effect on a Service Ares or Department.	LOW	MEDIUM	HIGH	HIGH	CRITICAL
Medium – Score 3 **Moderate** effect. Risk factor may lead to delays or increase in cost. An event that has an overall medium effect on the organisation or the outcome of which significantly affects a unit or section.	LOW	LOW	MEDIUM	HIGH	HIGH
Low – Score 2 Some impact of the risk, **fairly minor**. An event that has an overall minor effect on the organisation but the outcome effects individual or unit level only.	NEGLIGIBLE	LOW	LOW	MEDIUM	MEDIUM
Negligible – Score 1 Some impact of the risk, but **negligible**. The outcome effects individuals or small unit only.	NEGLIGIBLE	NEGLIGIBLE	LOW	LOW	MEDIUM

(Impact on vertical axis)

4.7 Assurance Mapping

Assurance Mapping compliments the Force's risk management approach as evidence gathering exercise and is structured on the three lines of defence model below.

1st Line of Defence	2nd Line of Defence	3rd Line of Defence
Operational or tactical evidence i.e. procedures, business level monitoring by local management.	Corporate or strategic oversight i.e. Force meetings which oversee and challenge or provide guidance and direction.	External assurance providers i.e. TIAA, Welsh Audit, HMIC who monitor compliance and provide independent challenge and assurance.

Assurance Mapping provides an additional level of scrutiny, an improved ability to understand and confirm that key mitigation/controls are in place and are effective. It also highlights where control gaps exist and therefore allows the Force to address those gaps and will be utilised in the following circumstances:

- Risks that have been Closed and removed from the Force Risk Register
- Risks recorded on the Force Risk Register that are over 12 months old

Assurance is fundamental to ensuring a robust governance approach. Assurance aims to provide additional confidence and evidence with a degree of certainty that the Force knows what reality is. Assurance also enables our regulators and auditors to have confidence that NWP knows where there are vulnerabilities and are therefore able to direct activity appropriately. Assurance provides confidence, evidence, and certainty.

Assurance Mapping feeds into governance, policy management and performance management. By managing controlled CRITICAL, HIGH and recorded risks over 12 months old and scrutinised through assurance mapping, it allows the Force to focus time and effort on the live management of dynamic risks.

5.	NWP RISK MANAGEMENT PROCESSES

5.1 **Force Risk Register (FRR)**
All risks that meet the threshold will be recorded on individual risk records and entered onto the Force Risk Register which is managed by the Risk and Business Continuity Lead, based in the Assurance Team, Corporate Services and can be viewed by authorised personnel via the Risk Management SharePoint Site.

Risks that do not meet the threshold, may be recorded in registers held locally however, that is not mandatory. Business Areas intending to establish a local register are encouraged to use an abbreviated version of the Force Risk Register which is available from the Force Risk and Business Continuity Lead on request.

If the SMT or Strategic Board decide the risk will be managed locally, the considered risk and supporting documents will be recorded on the Risk Management Sharepoint Site and filed under folder Considered and Unapproved Risks

5.2 **Risk Types**
Risks can be agreed by SMTs as being either:

- Dynamic
- Static

Dynamic risks should be recorded on the Force Risk Register and reviewed monthly as a minimum.

Static risks should be recorded on the Force Risk Register and reviewed quarterly as a minimum unless there is rationale for reviewing it on a less frequent basis, and in that case, would likely to be better being recorded on the relevant business areas assurance map.

This will enable attention to be focussed where it is most productive at that time.

5.3 **Risk Levels**
Risk level is derived from the potential impact a risk might have combined with the probability that the risk might become reality.

Three risk levels will be assessed for each risk during the Risk Scoring Process with the Risk and Business Continuity Lead

- Before controls – the exposure arising from a specific risk before any action has been taken to manage it. If action has already been taken to manage a risk, it should be discounted in arriving at the risk level 'Before Controls'. This will ensure that assumptions about the effectiveness of actions taken to date are scrutinised and tested. This risk level will tend to remain static throughout the life of the risk though it may be reassessed considering new information.

- Present – the risk level that exists now, this is a product of the risk level 'Present Controls' and any actions that have been taken to manage the risk.

- Target – this is the level that the risk is to be managed to, the level deemed acceptable for the Force.

It is the risk level before controls that determines if the risk should be added to the Force Risk Register and the reporting route for that risk. So, if a risk is considered 'high' before controls but has already been managed to 'medium' it will continue to be reported as a 'high' risk throughout its lifetime.

5.4 **Risk Owners**

Force risks will be owned by Senior Management Teams. Project risks will be owned by Project Boards. This will ensure that risks are discussed and assessed collectively and do not represent an individual's viewpoint. It will also reduce the impacts of prolonged absence of individual senior staff.

Where the ownership of a risk is unclear Service Leads will normally be able to discuss and resolve the situation. If that is not possible for any reason, then the matter can be referred to the DCC for a decision.

5.5 **Risk Description Wording**

Risks should be clear, specific, and as brief as possible. The nature of the risk needs to be understood by people who don't have direct knowledge of the subject matter. The model below is not prescriptive but is simple and can be adapted to most risks that will be recorded.

There is a Risk ………. Caused by …….. Which may result in ……….

E.g. **There is a Risk** *if policies and procedures are not updated and maintained as required* **Caused by** *an inefficient reporting, recording, and monitoring system* **which may result in** *officers/staff acting on incorrect or out of date information giving rise to complaints and legal action*

5.6 **Risk Actions**

Adding a risk to the Force Risk Register is not an end. Actions to be taken to mitigate the risk and progress in completing them must be clearly articulated by the Action Owners and reported to the Risk and Business Continuity Lead either on a quarterly basis for STATIC risks or monthly basis for DYNAMIC risks.

5.7 **Closing Risks**

When a risk has been managed to an acceptable level (usually the target level) or the circumstances around it have improved sufficiently that the mitigations/controls now in place are effective, the risk may be considered for closure.

The SMT. Strategic Board or Project Board that own the risk must approve closure and allocate an action to the Risk Lead to ensure the Risk and Business Continuity Lead is updated with a full rationale around the SMT/Board decision to close the risk.

The Risk and Business Continuity Lead will close the Risk once in receipt of all the information, update the risk record, remove from the Force Risk Register and arrange for the closed risk to be subject of the assurance mapping process.

Where there are open risks at the point that a project closes then the risks will be referred to the relevant SMT for decisions on the future management of that/those risk(s).

Closed risks will not be reopened. If a risk becomes active again it must be recorded as a new risk.

5.8   **Partnership/Collaboration**
Where risks relate to projects or programmes that are being undertaken in collaboration either with other forces or other organisations then there is no obligation to record risks on the NWP Force Risk Register; there is an expectation that those risks will be managed on an independent register.

Risks recorded and managed on this basis can be transferred to the NWP Force Risk Register if the circumstances warrant it. Alternatively such a risk can be rewritten to capture the risks that are posed for the Force.

5.9   **Programme and Project Risk Management**
All risks relating to programmes and projects are managed by the Portfolio Management Office. Risks deemed to impact the Force's ability to meet its objectives by the SRO will be escalated and recorded on the Force Risk Register. This will be a decision made at the Project or Programme Board.

Monthly meetings take place between the Risk and Business Continuity Lead and Corporate Head of Change to review risks recorded within the Portfolio Management Office and those on the Force Risk Register to ensure risks are recorded and managed appropriately.

5.10   **Duplication**
Where there is a legal or business requirement to record and maintain risks elsewhere there will generally not be a requirement to duplicate them in the Force Risk Register, as an example the Treasury Management Strategy and the Medium-Term Financial Plan include detailed financial risk analysis which is not replicated on the Force Risk Register.

However, there is nothing to prevent such risks, with SMT approval, from being transferred to or duplicated in the Force Risk Register when appropriate.

5.11   **Risk Reports**
Risks will be reported to a variety of meetings and strategic committees by the Risk and Business Continuity Lead. The reporting process allows for risks recorded on the Force Risk Register to be scrutinised and challenged with a strategic oversight. It also provides reassurance that NWP have robust risk management processes in place.

Risk must be a standing agenda item at SMT and Strategic Committee meetings. Programme and Project risks recorded on the Force Risk Register are also reported to Change and Collaboration Board.

5.12   **Record Retention**
Risk records – full version history will be retained while a risk is open. When a risk is closed only the last version will be archived, all other versions will be disposed of. The archived final version will be held for two years from the date the risk is closed.

Risk Register - the register does not hold original information; a full version history will be retained for twelve months, any version more than twelve months old will be disposed of.

Project Risks – full version history will be retained while a risk is open. When a risk is closed only the last version will be archived, all other versions will be disposed of. The final version of project risks will be retained for the same period as final project documentation, normally five years.

5.13 **Assurance Mapping**

The Assurance Team will be responsible for creating an assurance map for Critical, High and Live Risks on the Risk Register that are over 12 months with the relevant Risk Leads. Assurance maps will record details of the risk description, controls in place to mitigate the risk and evidence to demonstrate that the controls are effective. The Assurance maps will also highlight any risks with cross cutting themes by using the following tags

- Reputation
- Health & Safety
- Finance
- IT
- Information Security
- Training

This will ensure any cross-cutting themes are identified and reported to the most relevant meetings.

Any areas of weakness identified during the assurance map exercise will be addressed by an accompanying action plan.

Completed assurance maps and accompanying action plans should be reviewed at SMT meetings. They should also be reported to the Strategic Management Board so progress against action plans can be monitored.
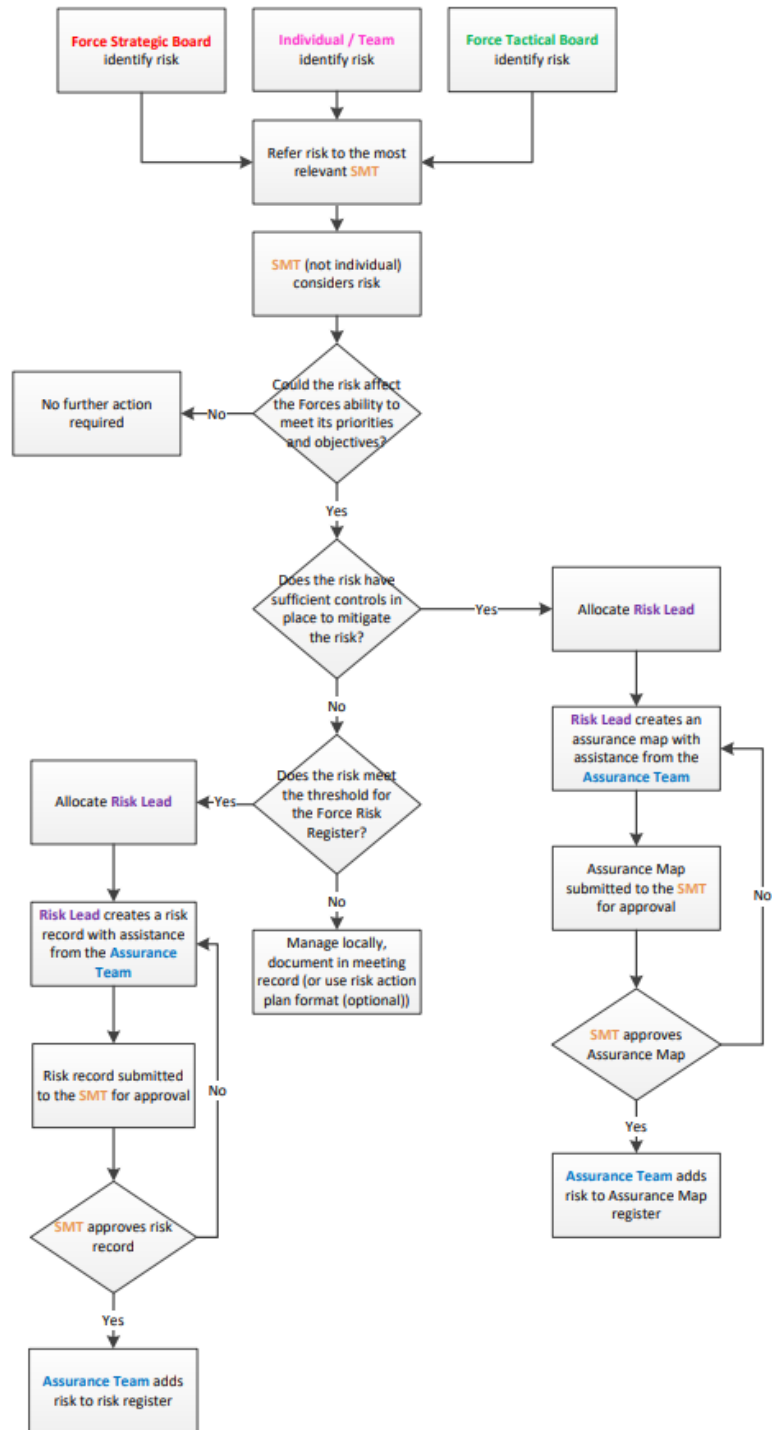
Assurance maps should be live working documents for risks recorded on the Force Risk Register for more than 12 months.

Assurance Maps will be completed for risks that are Closed and removed from the Force Risk Register and annually reviewed by the relevant Risk Lead and SMT to record any changes.
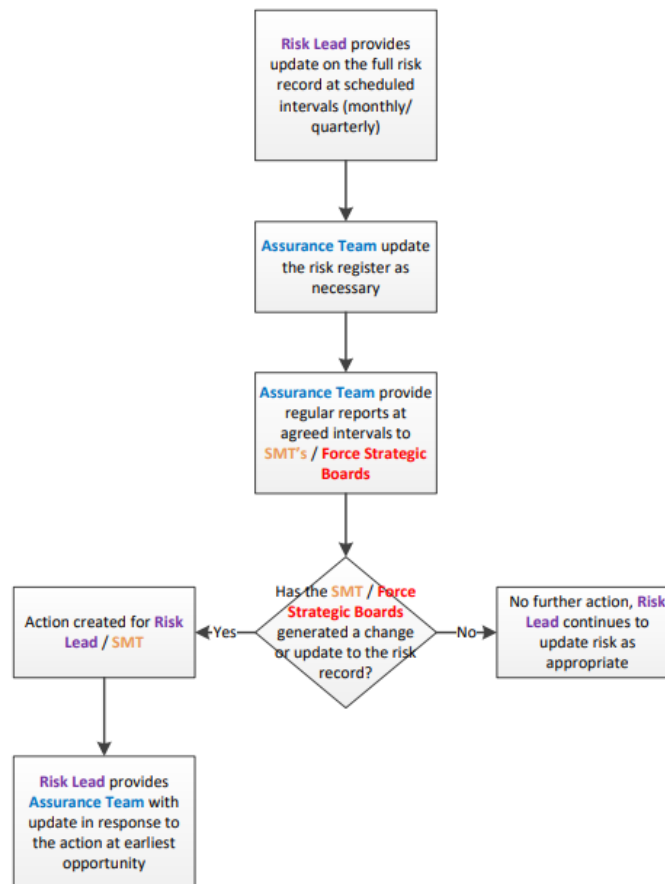
5.14 Process Flowcharts

### 5.14.1 Process for New Risk Identification

Process for New Risk Identification

5.14.2 Updating **Force Risks/Ongoing Force Risks on the Force Risk Register**

Process for Updating a Risk on the Force Risk Register

```
┌─────────────────────────┐
│ Risk Lead provides       │
│ update on the full risk  │
│ record at scheduled      │
│ intervals (monthly/      │
│ quarterly)               │
└─────────────────────────┘
            │
            ▼
┌─────────────────────────┐
│ Assurance Team update    │
│ the risk register as     │
│ necessary                │
└─────────────────────────┘
            │
            ▼
┌─────────────────────────┐
│ Assurance Team provide   │
│ regular reports at       │
│ agreed intervals to      │
│ SMT's / Force Strategic  │
│ Boards                   │
└─────────────────────────┘
            │
            ▼
```

┌──────────────────┐   ◇ Has the SMT / Force   ┌──────────────────┐
│ Action created   │◄─Yes─ Strategic Boards   ─No►│ No further action, Risk │
│ for Risk Lead /   │   generated a change   │ Lead continues to │
│ SMT   │   or update to the risk   │ update risk as   │
└──────────────────┘   record? ◇   │ appropriate   │
        │   └──────────────────┘
        ▼
┌──────────────────┐
│ Risk Lead provides │
│ Assurance Team with │
│ update in response to │
│ the action at earliest │
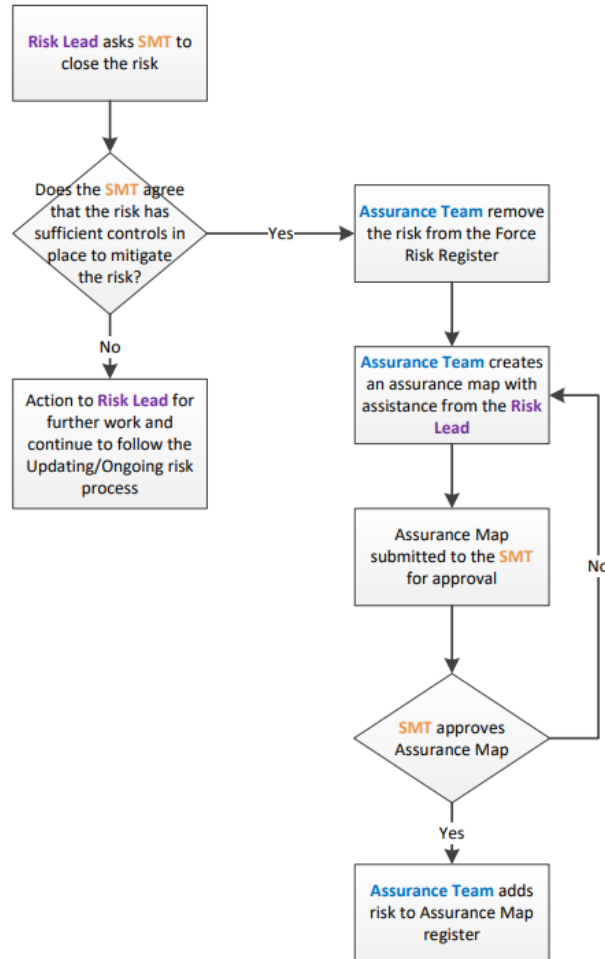│ opportunity   │
└──────────────────┘

5.14.3 Process for Updating a Risk on the Force Assurance Map Register

Process for Updating a Risk on the Force Assurance Map Register
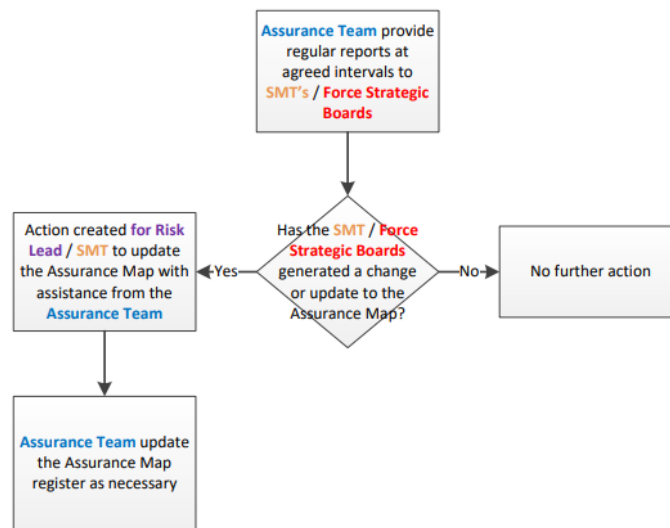
5.14.4 Process for Closing a Risk on the Force Risk Register

Process for Closing a Risk on the Force Risk Register

Risk Lead asks SMT to close the risk

Does the SMT agree that the risk has sufficient controls in place to mitigate the risk?

Yes → Assurance Team remove the risk from the Force Risk Register

No

Action to Risk Lead for further work and continue to follow the Updating/Ongoing risk process

Assurance Team creates an assurance map with assistance from the Risk Lead

Assurance Map submitted to the SMT for approval

SMT approves Assurance Map

No

Yes

Assurance Team adds risk to Assurance Map register

5.14.5 Risk Scoring Process Meeting Templates

Risk Scoring Process Meeting on / /

Persons in attendance:

Risk Description:

There is a Risk

caused by

which may result in

What is the Force Risk Appetite Statement for this type of Risk?

Scoring Risk Levels

	Impact	Probability	Overall Risk Level
Before controls			
Present with controls			
Target			

Before Controls Level
Impact:

Probability:

OVERALL SCORE LEVEL:

Present Risk Level with Controls
Impact:

Probability:

OVERALL SCORE LEVEL:

Target Risk Level
Impact:

Probability:

OVERALL SCORE LEVEL:

Present Mitigations

BEFORE CONTROLS — Risk Scoring Matrix Recording/Reporting Route

Impact \ Probability	Negligible — Score 1 (Rare, may occur in exceptional circumstances. No or little experience for a similar failure.)	Low — Score 2 (Might occur at some point in time. Conditions do exist for this to occur, but controls exist and are effective.)	Medium — Score 3 (Could occur, this is possible. Measures to reduce likelihood exist but may not be fully effective.)	High — Score 4 (Will probably occur, measures may or may not exist to reduce likelihood.)	Critical — Score 5 (Is expected to occur, almost certain.)
Critical – Score 5 — May cause key objectives to fail. Very **significant** impact on organisational goals. A major effect on the organisation/communities.	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** — Record Force Risk Register. Report to SMT and Force Committee	**CRITICAL** — Record Force Risk Register. Report to SMT and relevant Force Committee	**CRITICAL** — Record Force Risk Register. Report to SMT and relevant Force Committee
High – Score 4 — Risk factor may lead to significant delays or non-achievement of objectives. An event which has a high impact on the organisation and / or a serious effect on a Service Ares or Department.	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** — Record Force Risk Register. Report to SMT and relevant Force Committee	**HIGH** — Record Force Risk Register. Report to SMT and relevant Force Committee	**CRITICAL** — Record Force Risk Register. Report to SMT and relevant Force Committee
Medium – Score 3 — **Moderate** effect. Risk factor may lead to delays or increase in cost. An event that has an overall medium effect on the organisation or the outcome of which significantly affects a unit or section.	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**HIGH** — Record Force Risk Register. Report to SMT and relevant Force Committee	**HIGH** — Record Force Risk Register. Report to SMT and relevant Force Committee
Low – Score 2 — Some impact of the risk, **fairly minor**. An event that has an overall minor effect on the organisation but the outcome effects individual or unit level only.	**NEGLIGIBLE** — Managed by Individual/team	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register
Negligible – Score 1 — Some impact of the risk, but **negligible**. The outcome effects individuals or small unit only.	**NEGLIGIBLE** — Managed by Individual/team	**NEGLIGIBLE** — Managed by Individual/team	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**LOW** — Managed by individual or team. If necessary, may be referred to SMT for management at that level	**MEDIUM** — SMT - If cannot be managed by single SMT, should be escalated to Force Risk Register

PRESENT & TARGET RISK LEVEL — Scoring Matrix

Impact \ Probability	Negligible — Score 1 (Rare, may occur in exceptional circumstances. No or little experience for a similar failure.)	Low — Score 2 (Might occur at some point in time. Conditions do exist for this to occur, but controls exist and are effective.)	Medium — Score 3 (Could occur, this is possible. Measures to reduce likelihood exist but may not be fully effective.)	High — Score 4 (Will probably occur, measures may or may not exist to reduce likelihood.)	Critical — Score 5 (Is expected to occur, almost certain.)
Critical – Score 5 — May cause key objectives to fail. Very **significant** impact on organisational goals. A major effect on the organisation/communities.	MEDIUM	MEDIUM	HIGH	CRITICAL	CRITICAL
High – Score 4 — Risk factor may lead to significant delays or non-achievement of objectives. An event which has a high impact on the organisation and / or a serious effect on a Service Ares or Department.	LOW	MEDIUM	HIGH	HIGH	CRITICAL
Medium – Score 3 — **Moderate** effect. Risk factor may lead to delays or increase in cost. An event that has an overall medium effect on the organisation or the outcome of which significantly affects a unit or section.	LOW	LOW	MEDIUM	HIGH	HIGH
Low – Score 2 — Some impact of the risk, **fairly minor**. An event that has an overall minor effect on the organisation but the outcome effects individual or unit level only.	NEGLIGIBLE	LOW	LOW	MEDIUM	MEDIUM
Negligible – Score 1 — Some impact of the risk, but **negligible**. The outcome effects individuals or small unit only.	NEGLIGIBLE	NEGLIGIBLE	LOW	LOW	MEDIUM

Risk Appetite Slides

NWP's current risk appetite is stated as 'OPEN'; the Chief Constable is willing to consider all options and choose the one that is most likely to result in successful delivery, minimising residual risk as far as possible, while also providing an acceptable level of business benefit. This position falls satisfactorily within the overarching vision of Making North Wales the Safest Place in the UK.

While the diagrams at 4.4 and 5.11 illustrate the agreed triggers for escalation; de-escalation and reporting, it is accepted that the risk appetite below may change in response to circumstances or the general operating environment.

Risk Level	Description
Averse	Avoidance of risk and uncertainty is a key organisational objective.
Minimalist	Preference for ultra - safe business delivery options that have a low degree of inherent risk and only have a potential for limited reward.
Cautious	Preference to safe delivery options that have a low degree of residual risk and may only have limited potential for reward.
Open	Willing to consider all potential delivery options and choose the one that is most likely to result in successful delivery while also providing an acceptable level of reward (and value for money etc.)
Hungry	Eager to be innovative and to choose options offering potentially higher business rewards, despite greater inherent risk.

Risk Category	Risk Area	Risk Level
Strategy	**Strategic Planning Alignment -** We will have a planning process that ensures resources and investments are strategically aligned, with rigorous governance and a full evidence base to support decisions.	Cautious
Governance	**Partnerships / Collaborations -** We are willing to take risks in pursuit of partnership / collaboration developments that have the potential to deliver higher benefits.	Open
	Internal Governance - We will ensure that decision making is done in a structured and evidenced manner that all understand and participate in.	Cautious
	Innovation - We will actively pursue innovative opportunities recognising that this is an important aspect of the organisation's future success. We will also recognise that as we pursue these innovative opportunities failures may result and we will learn from these events rather than be deterred by them.	Hungry
Operations	**Public Safety -** We will take action to avoid or mitigate risks that impact on public safety.	Averse
	Staff/Officers – Fraud and Corruption - We have no appetite for any fraud or corruption perpetrated by our officers or staff.	Averse
	Public Experience / Satisfaction - Public experience / satisfaction is very important to us; in a changing environment we are prepared to be innovative and forward-thinking. We are prepared to take some risks providing there is an operational/financial benefit.	Cautious
Legal	**Compliance (Legal / HO / IOPCC / HMIC) -** We will give due consideration to guidance, recommendations and non-statutory regulations taking into account local circumstances and the needs of the public of North Wales when making our decisions.	Cautious
	Data Protection/GDPR Compliance - We will ensure the Force meets all requirements of the data protection act whilst acknowledging that policing business still needs to be undertaken efficiently.	Cautious

Risk Category	Risk Area	Risk Level
Financial	**Financial Management -** We need to ensure that resources are aligned to strategic objectives, that we have a balanced and sustainable budget and provide VFM in delivering services.	Cautious
	Treasury Management - We will prioritise Security, Liquidity and Yield in that order when undertaking Treasury Management activities. A balanced and sustainable budget taking account of the wider economic outlook and context.	Averse
Commercial	**Ethical and Reliable Supply Chain -** We will ensure through rigorous procurement processes that ethical and reliability considerations are fully explored for all supply chains.	Cautious
	Contract Management - We will regularly review the most valuable/critical contracts to ensure they are providing value for money and remain fit for purpose.	Cautious
People	**Staff and Officer Wellbeing -** The health and safety of our staff is important to the delivery of effective and efficient policing in North Wales. We will provide the tools (risk assessments; dynamic risk assessment; training; and equipment) for staff to take managed and acceptable risks.	Cautious
	Resource Levels and Management - We will actively monitor and manage resource levels in front line roles to ensure desirable staffing levels are maintained for the safety of the public and staff.	Cautious
Technology	**ICT Continuity of service for Force Critical Functions -** Where ICT supports Force Critical Functions, we will ensure measures are in place to ensure continuity of service in the event of disruption.	Averse: CAD/Life X Minimalist: RMS
Information	**Internal and external Information Sharing Agreements where appropriate with partners -** We will be mindful of sharing information securely and appropriately.	Cautious
	Partnership Information Sharing - We will put in place information sharing agreements with Partners to ensure information is shared securely and in line with the appropriate Security Labels, i.e. OFFICIAL, whilst ensuring police business can be undertaken effectively and efficiently.	Cautious
	AI Ethics - The Force will ensure that all AI related software or developments are assessed for bias through the Force governance structure including public scrutiny through the ethics committee.	Cautious
Security	**IT and Cyber Security -** We have a very low appetite for risks to the network and availability of systems that support our critical functions; we have a very low appetite for threats to our assets arising from external malicious attacks.	Averse
	Site Security - Ensuring our sites are physically secure is important to maintain security of information and ICT equipment, and we will maintain all required access restrictions and use of appropriate identification to support this.	Cautious

Risk Category	Risk Area	Risk Level
Agile/Remote Working	**Agile -** We will ensure we are mindful of the appropriate security where we operate in an agile environment.	Cautious
Project / Programme	**Business Change -** We are open to taking some risk to ensure we remain focussed on the future. Business change can be achieved by developing new and innovative ways of managing our services and includes investment in new technologies and IT development.	Open
Reputational	**Reputation -** We are willing to accept some risks to reputation if there is clear potential for the benefits to outweigh the risks. Our willingness to take risks is limited to those situations where there is little chance of significant repercussions for the force should there be a failure. Our reputation is enhanced by our positive attitude towards Social Value and our risk appetite in other areas.	Cautious
	Staff / Officers - Unethical Behaviour - We will advise staff/officers whose behaviour falls short of the high standards expected, will be dealt with in a robust but proportionate and appropriate manner.	Cautious

JOINT AUDIT COMMITTEE

Title:	Risk Management Report (Open Session)
Author:	Neil T. Ackers, Risk and Business Continuity Lead
Purpose of the report:	To provide the Joint Audit Committee with an update on the Force Risk Appetite Statement for 2023/2024
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ✓ Assurance ✓ Information
Summary / Key Points:	Introduction Risk Approach Risk Areas Risk Levels Changes Risk Appetite
Recommendations:	None
Risk Register Impact:	This report follows an annual review of the Force Risk Appetite Statement by the Risk and Business Continuity Lead, Head of Business Intelligence and Director of Finance. The Force Risk Appetite Statement was presented initially to the Senior Leadership Team (SLT) on 25th July 2023 and following feedback amended. The Force Risk Appetite Statement will be an agenda item at Strategic Management Board (SMB) which has replaced SLT for final agreement on 21st September 2023.
Assurance Implications:	This report is directly relevant to the development of assurance in North Wales Police Risk Management.
Equality Impact:	None
Information Exempt from Disclosure:	No

1. Approach

Following feedback at SLT on 25th July 2023, the draft risk appetite 2023/2024 statement has been amended. Draft v.2 is being presented to Strategic Management Board (SMB) on 21st September 2023 for review and final agreement of the content and that it meets the needs of the Organisation.

2. Risk Areas

The risk areas have been created from common risk areas used across other Forces with an additional Risk Category (Agile/Remote Working) being added during the consultation process.

3. Risk levels
The risk levels from Averse to Hungry were sourced from HM Treasury Risk Guidance publications.

Review of the mapped Risk Categories, Risk Areas, and Risk Levels

- Draft v.1 was presented to SLT on 25th July 2023 and feedback noted.
- Draft v.2 updated following SLT feedback.
- Consultation with SMB to be undertaken and for final support and agreement of revised 2023/2024 risk appetite.
- Draft v.2 submitted to Joint Audit Committee 28th September 2023 for information.
- Once supported and agreed by SMB, the Risk and Assurance Mapping Framework to be updated with the revised 2023/2024 risk appetite.

4. Changes

The following changes have been made:

- Amended Risk Level under Risk Category 'Operations' - Public Safety from **Averse** to **Cautious.**

Risk Category	Risk Area AMENDMENT FOR 2023/24	Risk Level
Operations	**Public Safety -** We will take action to avoid or mitigate risks that impact on public safety.	Cautious

- Addition of narrative under Risk Category 'Financial' - Treasury Management

Risk Category	Risk Area AMEND FROM 2022/23	Risk Area AMEND TO 2023/24	Risk Level
Financial	**Treasury Management**	**Treasury Management -** We will prioritise Security, Liquidity and Yield in that order when undertaking Treasury Management activities. A balanced and sustainable budget taking account of the wider economic outlook and context.	Averse

- Amended narrative under Risk Category 'Information' - Internal Information Sharing
- Amended narrative under Risk Category 'Information' - Partnership Information Sharing
- Amended Risk Level under Risk Category 'Information' - Partnership Information Sharing from **Minimalist** to **Cautious**

Risk Category	Risk Area **AMEND FROM 2022/23**	Risk Area **AMEND TO 2023/24**	Risk Level
Information	**Internal and external Information Sharing Agreements where appropriate with partners** We will ensure that guidance is provided for staff to ensure that information is shared in a manner such that restricted information is not shared whilst ensuring police business can be undertaken effectively and efficiently.	**Internal and external Information Sharing Agreements where appropriate with partners** We will be mindful of sharing information securely and appropriately in line with the appropriate Security Labels, i.e. OFFICIAL, whilst ensuring police business can be undertaken effectively and efficiently.	Cautious
Information	**Partnership Information Sharing -** We will put in place information sharing agreements with Partners to ensure information is shared in a secure manner.	**Partnership Information Sharing -** We will put in place information sharing agreements with Partners to ensure information is shared securely and in line with the appropriate Security Labels, i.e. OFFICIAL, whilst ensuring police business can be undertaken effectively and efficiently.	Cautious

- Addition of new Risk Category 'Agile/Remote Working'

Risk Category	Risk Area **NEW FOR 2023/24**	Risk Level
Agile/Remote Working	**Agile -** We will ensure we are mindful of the appropriate security where we operate in an agile environment.	Cautious

- Amended Risk Level under Risk Category 'Reputational' - Reputation from **Open** to **Cautious**

Risk Category	Risk Area **NEW FOR 2023/24**	Risk Level
Reputational	**Reputation -** We are willing to accept some risks to reputation if there is clear potential for the benefits to outweigh the risks. Our willingness to take risks is limited to those situations where there is little chance of significant repercussions for the force should there be a failure. Our reputation is enhanced by our positive attitude towards Social Value and our risk appetite in other areas.	Cautious

- Amended narrative under Risk Category 'Reputational' - Staff / Officers - Unethical Behaviour
- Amended Risk Level under Risk Category 'Reputational - Staff / Officers - Unethical Behaviour' from **Cautious** to **Averse**

Risk Category	Risk Area **AMEND FROM 2022/23**	Risk Area **AMEND TO 2023/24**	Risk Level **AMEND TO 2023/24**
Reputational	**Staff / Officers - Unethical Behaviour -** Where appropriate we will educate and advise staff / officers whose behaviour falls short of the high standards expected.	**Staff / Officers - Unethical Behaviour -** We will advise staff/officers whose behaviour falls short of the high standards expected, will be dealt with in a robust but proportionate and appropriate manner.	Averse

5. Full Risk Appetite Review Report for entry into the Force Risk and Assurance Mapping Framework

Risk Appetite Statement 2023/2024

NWP's current risk appetite is stated as 'OPEN'; the Chief Constable is willing to consider all options and choose the one that is most likely to result in successful delivery, minimising residual risk as far as possible, while also providing an acceptable level of business benefit. This position falls satisfactorily within the overarching vision of Making North Wales the Safest Place in the UK.

While the diagrams at 4.4 and 5.11 illustrate the agreed triggers for escalation; de-escalation and reporting, it is accepted that the risk appetite below may change in response to circumstances or the general operating environment.

Risk Level	Description
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Open	Willing to consider all potential delivery options and choose the one that is most likely to result in successful delivery while also providing an acceptable level of reward (and value for money etc.)
Hungry	Eager to be innovative and to choose options offering potentially higher business rewards, despite greater inherent risk.

The chart below reinforces NWP's risk appetite on certain risk areas.

Risk Category	Risk Area	Risk Level
Strategy	**Strategic Planning Alignment -** We will have a planning process that ensures resources and investments are strategically aligned, with rigorous governance and a full evidence base to support decisions.	Cautious
Governance	**Partnerships / Collaborations -** We are willing to take risks in pursuit of partnership / collaboration developments that have the potential to deliver higher benefits.	Open
	Internal Governance - We will ensure that decision making is done in a structured and evidenced manner that all understand and participate in.	Cautious
	Innovation - We will actively pursue innovative opportunities recognising that this is an important aspect of the organisation's future success. We will also recognise that as we pursue these innovative opportunities failures may result and we will learn from these events rather than be deterred by them.	Hungry
Operations	**Public Safety -** We will take action to avoid or mitigate risks that impact on public safety.	Cautious
	Staff/Officers – Fraud and Corruption - We have no appetite for any fraud or corruption perpetrated by our officers or staff.	Averse
	Public Experience / Satisfaction - Public experience / satisfaction is very important to us; in a changing environment we are prepared to be innovative and forward-thinking. We are prepared to take some risks providing there is an operational/financial benefit.	Cautious
Legal	**Compliance (Legal / HO / IOPCC / HMIC) -** We will give due consideration to guidance, recommendations and non-statutory regulations taking into account local circumstances and the needs of the public of North Wales when making our decisions.	Cautious
	Data Protection/GDPR Compliance - We will ensure the Force meets all requirements of the data protection act whilst acknowledging that policing business still needs to be undertaken efficiently.	Cautious

Financial	**Financial Management -** We need to ensure that resources are aligned to strategic objectives, that we have a balanced and sustainable budget and provide VFM in delivering services.	Cautious
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Project / Programme	**Business Change -** We are open to taking some risk to ensure we remain focussed on the future. Business change can be achieved by developing new and innovative ways of managing our services and includes investment in new technologies and IT development.	Open
Reputational	**Reputation -** We are willing to accept some risks to reputation if there is clear potential for the benefits to outweigh the risks. Our willingness to take risks is limited to those situations where there is little chance of significant repercussions for the force should there be a failure. Our reputation is enhanced by our positive attitude towards Social Value and our risk appetite in other areas.	Cautious
	Staff / Officers - Unethical Behaviour - We will advise staff/officers whose behaviour falls short of the high standards expected, will be dealt with in a robust but proportionate and appropriate manner.	Averse

Joint Audit Committee

Meeting Date: 28 September 2023

Title:	Joint Governance Board
Author:	Kate Jackson, Chief Finance Officer, Office of the Police and Crime Commissioner
Purpose of the report:	Update
The report is provided to JAC for: **(tick one)**	☐ Decision ☐ Discussion ☐ Assurance ☐ X Information
Summary / Key Points:	• The chair of JAC was in attendance at the meeting held on 6 September 2023. • The board endorsed the following: ○ That the Annual Governance Statement include the impact of implementing the governance review ○ The proposal for the Force to have a monitoring officer was supported
Recommendations:	• For members of the Joint Audit Committee to note the work of the Joint Governance Board. • For members of the Joint Audit Committee to be aware that they have a standing invitation to attend Joint Governance Board, and that meeting papers and minutes will be provided to them on request.
Risk register impact:	The way risk is managed is integral to good governance and is considered within the Governance Framework
Assurance implications:	The Joint Governance Board is to oversee changes to assurance arrangements following the Governance Review undertaken in 2019/20. These arrangements will change as a result of the forthcoming review. The Joint Governance Board is to oversee any future changes to the Manual of Governance.
Equality Impact:	None
Information exempt from disclosure:	None

JOINT AUDIT COMMITTEE

28 September 2023

Joint Governance Board

Report by the Chief Finance Officer

1.   Background

1.1.   The Joint Governance Board meets four times each year. A work programme has been prepared to ensure it meets its objectives to record governance arrangements, and to oversee and advise on changes to those arrangements.

1.2.   Members of the Joint Audit Committee have a standing invitation to attend the meeting; the chair and one additional member of the committee attended on 6 September 2023 and contributed at the meeting.

2.   Recommendations

2.1.   For members of the Joint Audit Committee to note the work of the Joint Governance Board.

2.2.   For members of the Joint Audit Committee to be aware that they have a standing invitation to attend Joint Governance Board, and that meeting papers and minutes will be provided to them on request. Meetings are held online via Microsoft Teams and future meeting dates are:
*   Wednesday 15th November 2023 at 10am
*   Thursday 18th June 2024
*   Wednesday 4th September 2024
*   Tuesday 29th October 2024

3.   Work of the Joint Governance Board

3.1.   At the meeting held on 6 September 2023, the following were discussed:

3.1.1.   Statement of Accounts 2022/23

The Head of Finance provided an update. Additional time was allowed this year to produce the draft accounts, and this allowed the opportunity to make improvements with the intention of reducing amendments needed later. The draft accounts were signed at the end of June.

3.1.2   Internal Audit

The Board received information regarding audits completed.

There was significant discussion around the Health and Safety audit, which has outstanding recommendations. The Board recommended that these be broken down into milestones in order that progress towards completion can be monitored before the follow-up audit takes place next February.

3.1.3 Monitoring officer role for the force

A paper was prepared to explain the rationale for introducing this role to the force. Police forces are not legally required to employ a monitoring officer, which is unusual in local government type organisations. However, some forces have introduced them recently, and North Wales is considering doing so.

While no weaknesses have been identified in the current arrangements, it was noted that the formalisation of the Force Solictor as Monitoring Officer strengthens the position of the role.

The purpose of the monitoring officer is for members and officers to consult an any issues of an organisation's legal powers, possible maladministration, impropriety and probity issues, and general advice on constitutional arrangements.

The proposal was supported by the Board.

3.1.4 Updates from Governance Review

The implementation of the new governance structure is now scheduled to be completed by the end of September. The Annual Governance Statement is scheduled to be signed following the Joint Audit Committee meeting on 7 December, and this will incorporate the changes arising from this review.

The next review will take place between April and June 2024, and it is expected by this time we will be able to assess the effectiveness of the gatekeeper role.

The scheme of delegation review forms part of the governance review. It was noted that the scheme of delegation needs to align with the overall Manual of Governance, in particular the Financial Regulations and Scheme of Consent.

Further updates will be provided at future meetings.

3.2 Members of the Joint Audit Committee will be able to access papers, including minutes and actions from the most recent meeting, via the G-drive. The next meeting will take place on 15 november 2023.

4. IMPLICATIONS

4.1	Equality	The Police and Crime Commissioner and Chief Constable operate with regard to the principles established within the Joint Equality Plan.
4.2	Financial	The way finances are managed is integral to good governance. The financial policies and the monitoring of financial systems and performance are considered within the Governance Framework.
4.3	Legal	It is a legal requirement to publish Annual Governance Statements for the Police and Crime Commissioner and Chief Constable alongside the Statements of Accounts each year. One purpose of the Joint Governance Board is to record the governance activities for both corporations sole (and ensure any concerns are addressed) in order that the Annual Governance Statements can be prepared accurately and in a timely manner.
4.4	Community and Social Value	Environmental policies, outcomes and engagement (and the monitoring of these) are considered within the Governance Framework. This includes the Wellbeing of Future Generations (Wales) Act 2017.
4.5	Risk	The way risk is managed is integral to good governance and is considered within the Governance Framework.
4.6	Police and Crime Plan	The objectives within the Police and Crime Plan are fundamental to both corporations sole. The way this is monitored is considered within the Governance Framework.

Report Author
Kate Jackson
Chief Finance Officer
Office of the Police and Crime Commissioner

2023 Governance Review

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Terms of Reference

The aims of the review were to

- Ensure North Wales Police had effective and efficient governance arrangements in place

- Ensure North Wales Police struck an optimal balance between assurance provided by formal governance, balanced against effective delivery and decision making.

- Ensure North Wales Police had a clear meeting structure which aligned with the Force priority areas

- Ensure North Wales Police made the best use of technology and information available to facilitate decision making and reduce demand and duplication

- Ensure models other than formal meetings for briefing and sharing of knowledge were considered.

The review focussed on the effectiveness of the current governance arrangements and looked to make improvements to the Force meeting structure to make it simpler and looked to make best use of technology to optimise decision making, briefings and reduce duplication.

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Approach and Progress

Phase	Activity	Progress
Phase 1	• Online meetings conducted with Forces to identify good practice • Review of the CIPFA Delivering Good Governance Guidance for Policing Bodies to identify good practice • One to one meetings conducted with Chief Officers, Service Leads and Staff Equivalent	✓
Phase 2	• Main themes, messages and conclusions from Phase 1 activity identified	✓
Phase 3	• Main findings and draft recommendations presented to Chief Officers	✓
Phase 4	• Final report containing findings, conclusions and recommendations presented to Service Leads • Implementation Plan prepared to support the delivery of the recommendations by October 2023	✓
Phase 5	• Implementation of recommendations	Ongoing

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- Monthly Strategic Management Board

- Decision making extended to all boards

- Governance structures aligned with priorities

- Clear performance reporting structures

- Forward focussed and problem solving meetings

- Gatekeeping function to oversee strategic meetings

- Extensive sharing of information from meetings

Feedback from Chief Officers, Services Leads and Staff Equivalent

- Clear appetite for change

- Good governance is often disregarded over the Forces' requirements

- Rank based reporting structures affect decision making

- Continue to make best use of technology with online or hybrid meetings

- Lack of consultation with Chief Officers

- Meetings used as a briefing and reassurance mechanism for Chief Officers and Service Leads

- Meetings don't challenge enough

- The management of Task and Finish Groups is poor

- Unclear from the governance structure how and which meetings drive forward priorities

- A lot of duplication

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Feedback from Chief Officers, Services Leads and Staff Equivalent on Themes Identified

- Monthly Strategic Management Board

- Aligning the Governance Structure to the Force Priorities

- Clearer Performance Reporting Structure

- Wider decision making

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Recommendations

- Governance Principles

- Extend the current scheme of delegation to widen decision making

- Align the Governance Structure to the Plan on a Page

- Portfolio Meetings for Chief Officers

- Performance Reporting Structure

- Merge Strategic Management Board and Senior Leadership Team

- Core Governance Concept

- Gatekeeper Function

- Governance Toolkit

Governance Structure – Approach

Core Governance

Assurance & Compliance Meetings

OPCC Meetings

Partnership and Collaboration Meetings

Executive Meetings

Strategic Pillar Lead Meetings

Pillar Delivery Meetings

Performance Meetings

Service Area | Department | Individual

Service Area Delivery Meetings

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CORE GOVERNANCE

CORE GOVERNANCE

OPCC

- **OPCC Engagement Group** *
  Chair: - PCC / CO
  Monthly
- **Strategic Executive Board**
  Chair: - PCC
  Quarterly

Executive

- **Chief Officer Team**
  Chair: - CC
  Weekly x 3
- **Strategic Management Board**
  Chair: - CC
  Monthly
- **Culture Board** *
  Chair: - CC
  Monthly
- **Strategic Performance Board**
  Chair: - DCC
  Monthly

Assurance & Compliance

- **Joint Audit Committee**
  Chair: - Independent
  Quarterly
- **SNCC**
  Chair: - Head of POD
  Quarterly
- **Joint Governance Board**
  Chair: - CFO (OPCC)
  Quarterly
- **Ethics Board**
  Chair: - External
  Quarterly
- **Assurance Board**
  Chair: - Head of BI
  Monthly
- **Information Security Board**
  Chair: - CIO
  Quarterly
- **CRUG**
  Chair: - Ch Supt OSS
  Quarterly
- **AI Ethics Board** *
  Chair: - Head of BI
  Monthly

Partnership & Collaboration

- **Emergency Services Collaboration Board**
- **Strategic Alliance Policing Group**
- **All Wales Collaboration Board**
- **West Coast Collaboration Board**
- **FCIN Collaboration Board**
- **Local Criminal Justice Board**
- **NW Safer Partnership Board**
- **NW Vulnerability & Exploitation Board**
- **NW Area Planning Board**
- **NW Contest Board**
- **NW Safeguarding Board**

Trust, Confidence & Legitimacy

- **Trust, Confidence and Legitimacy Board**
  Chair: - DCC
  Quarterly
- **Welsh Language and EDI Board**
  Chair: - Ch Supt Corp Ser
  Quarterly
- **Integrity Board** *
  Chair: - Head of PSD
  Quarterly
- **Recognition and Engagement Board**
  Chair: - Ch Supt Corp Serv
  Quarterly
- **HMIC and Organisational Learning Board**
  Chair: - Ch Supt Corp Serv
  Quarterly
- **Police and Public Encounters Board**
  Chair: - Ch Supt LPS
  Quarterly

Excellent Service Delivery

- **Excellent Service Delivery Board**
  Chair: - ACC
  Quarterly
- **Quality of Service Board**
  Chair: - Ch Supt LPS
  Quarterly
- **Strategic Casualty Reduction**
  Chair: - Ch Supt OSS
  Quarterly
- **PVPU Board**
  Chair: - Ch Supt Crime Ser
  Quarterly
- **MFH Board**
  Chair: - Ch Supt LPS
  Quarterly
- **Security Review Group**
  Chair: - Ch Supt Crime Ser
  Quarterly
- **Priority Crime Board** *
  Chair: - Ch Supt LPS
  Quarterly
- **Conflict Management Board**
  Chair: - Ch Supt OSS
  Quarterly
- **Stop / Search Board**
  Chair: - Ch Supt LPS
  Quarterly

Fit for the Future

- **Fit for the Future Board**
  Chair: - DFR
  Quarterly
- **Sustainability and Decarbonisation Board**
  Chair: - Ch Supt Corp Serv
  Quarterly
- **Estates and Fleet Board**
  Chair: - Head of Facilities
  Quarterly
- **Information Data Management** *
  Chair: - CIO
  Quarterly
- **Technology Board** *
  Chair: - Head of ICT
  Quarterly
- **Finance and Planning Board** *
  Chair: - Head of Finance
  Quarterly

People

- **People Board**
  Chair: - DFR
  Quarterly
- **Health & Wellbeing Board**
  Chair: - Head of POD
  Quarterly
- **Clinical Governance Board**
  Chair: - Head of POD
  Quarterly

Change

- **Change & Collaboration Board**
  Chair: - DCC
  Quarterly
- **Workforce Transformation Programme Board**
  Chair: - Head of POD
  Quarterly
- **Digital Transformation Board**
  Chair: - DFR
  Quarterly

Senior Management Team Meetings

Service Area Delivery Meetings

e.g Clothing & Equipment Meeting, H&S Meeting

Performance Meetings

| Service Area | Department | Individual |

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Joint Audit Committee

Meeting Date:

Title:	Audit Enquiries Letter
Author:	Kate Jackson, Chief Finance Officer
Purpose of the report:	To provide Joint Audit Committee with the response to the Audit Enquiries Letter
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ☐ Assurance X Information
Summary / Key Points:	• Where possible, responses from the previous Audit Enquiries letter have been included. • Some of the questions are different from the previous year; this means that some previous answers may not be present, or may not address this year's question exactly. • Additional questions have been asked directly to those charged with governance this year (the Commissioner and Chief Constable).
Recommendations:	To note the report
Risk register impact:	Governance and risk management are integral to each other. The Audit Enquiries Letter asks us to document governance arrangements in place in key areas.
Assurance implications:	The response to the Audit Enquiries Letter documents the governance in place in key areas. This will assist the auditors to form their overall opinion of the OPCC and force.
Equality Impact:	No separate equality impact
Information exempt from disclosure:	None

Kate Jackson (Chief Finance Officer)
Seb Phillips (Director of Finance)
Rachel Barber (Chair, Joint Audit Committee)
North Wales Police Headquarters
Glan - y – Don
Abergele Road
Colwyn Bay
LL29 8AW

Reference: NWP/PCC2023

Date issued: 11/07/2023

Dear Kate, Seb and Rachel,

North Wales Police and Crime Commissioner 2022-23 - Audit enquiries to those charged with governance and management

The Auditor General's Statement of Responsibilities sets out that he is responsible for obtaining reasonable assurance that the financial statements taken as a whole are free from material misstatement, whether caused by fraud or error. It also sets out the respective responsibilities of auditors, management and those charged with governance.

This letter formally seeks documented consideration and understanding on a number of governance areas that impact on our audit of your financial statements. These considerations are relevant to both the management of The Police and Crime Commissioner and Chief Constable and 'those charged with governance'.

I have set out below the areas of governance on which I am seeking your views:

1.   Matters in relation to fraud

2.   Matters in relation to laws and regulations

3.   Matters in relation to related parties

The information you provide will inform our understanding of The Police and Crime Commissioner and Chief Constable and its business processes and support our work in providing an audit opinion on your 2022-23 financial statements.

I would be grateful if you could update the attached table in Appendix 1 to Appendix 3 for 2022-23.

The completed Appendix 1 to Appendix 3 should be formally considered and communicated to us on behalf of both management and those charged with governance by **31/10/2023**. In the meantime, if you have queries, please contact me on 02920 320660 or Michelle.Phoenix@audit.wales .

Yours sincerely,

Michelle Phoenix

Audit Manager

Appendix 1

Matters in relation to fraud

International Standard for Auditing (UK) 240 covers auditors' responsibilities relating to fraud in an audit of financial statements. This standard has been revised for 2022-23 audits.

The primary responsibility to prevent and detect fraud rests with both management and 'those charged with governance'. Management, with the oversight of those charged with governance, should ensure there is a strong emphasis on fraud prevention and deterrence and create a culture of honest and ethical behaviour, reinforced by active oversight by those charged with governance.

As external auditors, we are responsible for obtaining reasonable assurance that the financial statements are free from material misstatement due to fraud or error. We are required to maintain professional scepticism throughout the audit, considering the potential for management override of controls.

What are we required to do?

As part of our risk assessment procedures we are required to consider the risks of material misstatement due to fraud. This includes understanding the arrangements management has put in place in respect of fraud risks. The ISA views fraud as either:

- The intentional misappropriation of assets (cash, property, etc); or
- The intentional manipulation or misstatement of the financial statements.

We also need to understand how those charged with governance exercises oversight of management's processes. We are also required to make enquiries of both management and those charged with governance as to their knowledge of any actual, suspected or alleged fraud, management's process for identifying and responding to the risks and the internal controls established to mitigate them.

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
1. What is management's assessment of the risk that the financial statements may be materially misstated due to fraud? What is the nature, extent and frequency of management's assessment?	The Police and Crime Commissioner and Chief Constable have an Anti-Fraud and Corruption policy and whistleblowing arrangements in place which manage effectively the risk of fraud and corruption. Processes for declaring interest and registers for gifts and hospitalities are maintained and updated as required. **Both the Joint Audit Committee and the Police and Crime Panel discharged fully all the functions as identified in the relevant CIPFA publication for Audit Committees.**	The Police and Crime Commissioner and Chief Constable have an Anti-Fraud and Corruption policy and whistleblowing arrangements in place which manage effectively the risk of fraud and corruption. Processes for declaring interest and registers for gifts and hospitalities are maintained and updated as required. Budget monitoring takes place regularly, with actuals and projections reviewed monthly and reported to SMTs; quarterly reports to SMB and SEB, and to Police and Crime Panel. There are annual internal audits on areas of risk including payments and payroll.

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
		Both the Joint Audit Committee and the Police and Crime Panel discharged fully all the functions as identified in the relevant CIPFA publication for Audit Committees.
2. Do you have knowledge of any actual, suspected or alleged fraud affecting the audited body?	**No**	**No, but one example of internal theft was detected.**
3. What is management's process for identifying and responding to the risks of fraud in the audited body, including any specific risks of fraud that management has identified or that have been brought to its attention?	From our Governance framework: Measure: anti-fraud and corruption policies which are up to date and working effectively Controls: Lesson Learned; MOU between IA, CFO's and PSD; Safecall; PSD; IOPC; PCP; TIAA fraud alerts.	From our Governance framework: Measure: anti-fraud and corruption policies which are up to date and working effectively Controls: Lesson Learned; MOU between IA, CFO's and PSD; Police Integrity Line; PSD; IOPC; PCP; TIAA fraud alerts. Measure: co-operation with the National Fraud Initiative

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
	Measure: co-operation with the National Fraud Initiative Controls: we participate in the NFI exercises and these are externally validated by AW; effective anti-fraud and corruption policies and procedures; procedures devised to minimise risk of fraud and error and/or to assist detection; IA; PSD **Measure: compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)**	Controls: we participate in the NFI exercises and these are externally validated by AW; effective anti-fraud and corruption policies and procedures; procedures devised to minimise risk of fraud and error and/or to assist detection; IA; PSD **Measure: compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014)**

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
4. What classes of transactions, account balances and disclosures have you identified as most at risk of fraud?	**n/a – new question for 2022/23**	**All financial transactions, especially creditors, expenses, debtors.** **Cash transactions are minimised; all expenditure and write-offs of debtors are authorised in line with the Financial Regulations and delegation limits.**
5. Are you aware of any whistleblowing or complaints by potential whistle blowers? If so, what has been the audited body's response?	**n/a – new question for 2022/23**	**There is an information sharing protocol between TIAA, PSD, DFR and CFO to ensure that any relevant information is shared.**
6. What is management's communication, if any, to those charged with governance regarding their processes for identifying and responding to risks of fraud?	n/a – new question for 2022/23	**CBNs from TIAA highlight current and emerging fraud issues, which are distributed to appropriate staff and officers on receipt. This is reported to JAC regularly.**

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
		Policies and procedures are reviewed and updated cyclically to ensure they remain fit for purpose. **Finance and Resources Board has a standing agenda item concerning compliance, which would include any incidences of fraud detected. Any errors identified are learned from to reduce the likelihood of recurrence.**
7. What is management's communication, if any, to employees regarding their views on business practices and ethical behaviour?	From our Governance framework: Measure: Ensuring that the PCC, chief officers and staff behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated	From our Governance framework: Measure: Ensuring that the PCC, chief officers and staff behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
	thereby promoting and upholding the reputation of the organisation among its stakeholders. Controls: Ethics Committee; staff support networks; CC held leadership seminar and staff roadshows online; CC and chief officers visit sites regularly to engage with staff and officers (subject to Covid regulations); Senior Management NPCC meetings and SMT's; health & wellbeing agenda emphasised; PCC via Panel; Staff surveys; Force via PCC & Staff Associations. Measure: Ensuring the PCC and chief officers lead in establishing specific standard operating principles or values for their	thereby promoting and upholding the reputation of the organisation among its stakeholders. Controls: Ethics Committee; staff support networks; CC held leadership seminar and staff roadshows online; CC and chief officers visit sites regularly to engage with staff and officers (subject to Covid regulations); Senior Management NPCC meetings and SMT's; health & wellbeing agenda emphasised; PCC via Panel; Staff surveys; Force via PCC & Staff Associations. Measure: Ensuring the PCC and chief officers lead in establishing specific standard operating principles or values for their organisations and staff and that they are communicated

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
	organisations and staff and that they are communicated and understood. The values should build on the Nolan Principles and the Code of Ethics. Controls: PSD (ACU Anti Corruption Unit) part of induction process; enhanced vetting programme; mandatory training such as data protection carried out annually; Codes of Conduct (OPCC); Code of Ethics; Published Values (Force). Information standards & compliance carry out audits on data protection, information security and monitoring (systems and information). Joint Audit Committee to abide by Nolan Principles. Internal Audit Publication schemes; FOI;	and understood. The values should build on the Nolan Principles and the Code of Ethics. Controls: PSD (ACU Anti Corruption Unit) part of induction process; enhanced vetting programme; mandatory training such as data protection carried out annually; Codes of Conduct (OPCC); Code of Ethics; Published Values (Force). Information standards & compliance carry out audits on data protection, information security and monitoring (systems and information). Joint Audit Committee to abide by Nolan Principles. Internal Audit Publication schemes; FOI; HMICFRS (Force); APP Measures; Leading by example and using above standard operating principles or values as a framework for decision making and other

	Enquiries of management – in relation to fraud	
Question	**2021-22 Response**	**2022-23 Response**
	HMICFRS (Force); APP Measures; Leading by example and using above standard operating principles or values as a framework for decision making and other actions; the manual of governance was updated to reflect changes made since the major review (undertaken 2019-20 and implemented 2020-21); Decision making policy.	actions; the manual of governance was updated to reflect changes made since the major review (undertaken 2019-20 and implemented 2020-21); Decision making policy.
8. For service organisations, have you reported any fraud to the user entity?	**n/a**	**n/a**

	Enquiries of those charged with governance – in relation to fraud	
Question	**2021-22**	**2022-23 Response**
1. Do you have any knowledge of actual, suspected or alleged fraud affecting the audited body?	**No**	**No, but one example of internal theft was detected.**
2. What is your assessment of the risk of fraud within the audited body, including those risks that are specific to the audited body's business sector?	From our Governance framework: Measure: anti-fraud and corruption policies which are up to date and working effectively **Controls: Lesson Learned; MOU between IA, CFO's and PSD; Safecall; PSD; IOPC; PCP; TIAA fraud alerts and Client Briefing Notes. These are shared with staff and officers if relevant**	From our Governance framework: Measure: anti-fraud and corruption policies which are up to date and working effectively **Controls: Lesson Learned; MOU between IA, CFO's and PSD; Police Integrity Line; PSD; IOPC; PCP; TIAA fraud alerts and Client Briefing Notes. These are shared with staff and officers if relevant** **Internal fraud is more likely than external fraud for our business sector. Our processes are designed to reduce the ability to defraud the organisation, and to detect at an early stage if a fraud is attempted.**

	Enquiries of those charged with governance – in relation to fraud	
Question	**2021-22**	**2022-23 Response**

3. How do you exercise oversight of:
  • management's processes for identifying and responding to the risk of fraud in the audited body, and
  • the controls that management has established to mitigate these risks?
	CFO, DFR, Internal Audit and PSD have contacted each other at regular intervals to confirm whether they have had any such instances.
	
	Controls as detailed in the governance framework. This is overseen by the Joint Governance Board.
		CFO, DFR, Internal Audit and PSD have contacted each other at regular intervals to confirm whether they have had any such instances.
		
		Controls as detailed in the governance framework. This is overseen by the Joint Governance Board.

Appendix 2

Matters in relation to laws and regulations

International Standard for Auditing (UK and Ireland) 250 covers auditors' responsibilities to consider the impact of laws and regulations in an audit of financial statements.

Management, with the oversight of those charged with governance, is responsible for ensuring that the Police and Crime Commissioner and Chief Constable's operations are conducted in accordance with laws and regulations, including compliance with those that determine the reported amounts and disclosures in the financial statements.

As external auditors, we are responsible for obtaining reasonable assurance that the financial statements are free from material misstatement due to fraud or error, taking into account the appropriate legal and regulatory framework. The ISA distinguishes two different categories of laws and regulations:

- laws and regulations that have a direct effect on determining material amounts and disclosures in the financial statements;
- other laws and regulations where compliance may be fundamental to the continuance of operations, or to avoid material penalties.

What are we required to do?

As part of our risk assessment procedures we are required to make enquiries of management and those charged with governance as to whether the Police and Crime Commissioner and Chief Constable is in compliance with relevant laws and regulations. Where we become aware of information of non-compliance or suspected non-compliance we need to gain an understanding of the non-compliance and the possible effect on the financial statements.

	Enquiries of management – in relation to laws and regulations	
Question	**2021-22 Response**	**2022-23 Response**
1. Is the audited body in compliance with relevant laws and regulations? How have you gained assurance that all relevant laws and regulations have been complied with? Are there any policies or procedures in place?	Yes Joint Governance Board - in 2021-22 the Board met quarterly in accordance with the revised Terms of Reference. Attendees include: DFR (Force), CFO (OPCC), CEO (OPCC), TIAA (internal audit), CIO, Force Solicitor, Chair of Assurance Board, representative of the JAC, and others as required. During 2021-22 the DFR introduced the Strategic Finance and Resources Board, which has a standing agenda item on resilience and compliance.	Yes Joint Governance Board - in 2022-23 the Board met quarterly in accordance with the Terms of Reference. Attendees include: DFR (Force), CFO (OPCC), CEO (OPCC), TIAA (internal audit), CIO, Force Solicitor, Chair of Assurance Board, representative of the JAC, and others as required. During 2021-22 the DFR introduced the Strategic Finance and Resources Board, which has a standing agenda item on resilience and compliance.
2. Have there been any instances of non-compliance or suspected non-compliance with relevant laws and	Yes – there was an instance of procurement which took place outside of the provisions of the	No

	Enquiries of management – in relation to laws and regulations	
Question	**2021-22 Response**	**2022-23 Response**
regulations in the financial year, or earlier with an ongoing impact on this year's audited financial statements?	Manual of Governance. After consideration of the matter, a waiver of standing orders was issued.	
3. Are there any potential litigations or claims that would affect the financial statements?	The amount held in the Insurance Reserve, together with the Insurance Provisions, were independently reviewed during 2021-22. The Police and Crime Commissioner has the sum of £2.215 million reserved for insurance (previously £1.944m). £0.117 million relates to the potential additional liabilities in relation to the Scheme of Arrangement for Municipal Mutual Assurance and £1.444 million for additional areas of insurance in relation to claims 'Incurred but not reported' (IBMR), 'Incurred but not enough reported	The amount held in the Insurance Reserve, together with the Insurance Provisions, were independently reviewed during 2021-22. The Police and Crime Commissioner has the sum of £2.215 million reserved for insurance. £0.117 million relates to the potential additional liabilities in relation to the Scheme of Arrangement for Municipal Mutual Assurance and £1.444 million for additional areas of insurance in relation to claims 'Incurred but not reported' (IBMR), 'Incurred but not enough reported reserves (provisions)' IBNR and recommended additional sums.

	Enquiries of management – in relation to laws and regulations	
Question	**2021-22 Response**	**2022-23 Response**
	reserves (provisions)' IBNR and recommended additional sums.	All known legal claims have been provided for in the accounts.
4. Have there been any reports from other regulatory bodies, such as HM Revenues and Customs which indicate non-compliance?	No	No

	Enquiries of those charged with governance – in relation to laws and regulations	
Question	**2021-22 Response**	**2022-23 Response**
1. Are you aware of any non-compliance with laws and regulations that may be expected to have a fundamental effect on the operations of the entity?	No	No
2. How does the Police and Crime Commissioner and Chief Constable, in your role as those charged with governance, obtain assurance that all relevant laws and regulations have been complied with?	Yes Joint Governance Board - in 2021-22 the Board met quarterly in accordance with the revised Terms of Reference. Attendees include: DFR (Force), CFO (OPCC), CEO (OPCC), TIAA (internal audit), CIO, Force Solicitor, Chair of Assurance Board, representative of the JAC, and others as required. During 2021-22 the DFR introduced the Strategic Finance and Resources Board, which has	Yes Joint Governance Board - in 2022-23 the Board met quarterly in accordance with the Terms of Reference. Attendees include: DFR (Force), CFO (OPCC), CEO (OPCC), TIAA (internal audit), CIO, Force Solicitor, Chair of Assurance Board, representative of the JAC, and others as required. During 2021-22 the DFR introduced the Strategic Finance and Resources

	Enquiries of those charged with governance – in relation to laws and regulations	
Question	2021-22 Response	2022-23 Response
	a standing agenda item on resilience and compliance.	Board, which has a standing agenda item on resilience and compliance.

Appendix 3

Matters in relation to related parties

International Standard for Auditing (UK) 550 covers auditors' responsibilities relating to related party relationships and transactions.

The nature of related party relationships and transactions may, in some circumstances, give rise to higher risks of material misstatement of the financial statements than transactions with unrelated parties.

Because related parties are not independent of each other, many financial reporting frameworks establish specific accounting and disclosure requirements for related party relationships, transactions and balances to enable users of the financial statements to understand their nature and actual or potential effects on the financial statements. An understanding of the entity's related party relationships and transactions is relevant to the auditor's evaluation of whether one or more fraud risk factors are present as required by ISA (UK and Ireland) 240, because fraud may be more easily committed through related parties.

What are we required to do?

As part of our risk assessment procedures, we are required to perform audit procedures to identify, assess and respond to the risks of material misstatement arising from the entity's failure to appropriately account for or disclose related party relationships, transactions or balances in accordance with the requirements of the framework.

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
1. Have there been any changes to related parties from the prior year? If so, what is the identity of the related parties and the nature of those relationships? Confirm these have been disclosed to the auditor.	here are no material interests or relationships of the Chief Officers or their direct families, which could influence or control the decision making, policies or financial transactions of North Wales Police/Police and Crime Commissioner. A robust process is also in place to approve and register the business interests of both police staff and officers.	There was a new Chief Constable from October 2022, therefore the declarations of interest relate to the incoming Chief Constable. No changes to staff/officers/Joint Audit Committee who remained in post throughout the year. These are disclosed to the auditor in the statement of accounts, and are published on the OPCC website. The son of the Chief Finance Officer is employed as an Audit Apprentice by

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
	The son of the Chief Finance Officer is employed as an Audit Apprentice by Audit Wales. Audit Wales has made arrangements to ensure this does not present a conflict of interest for either the Office of the Police and Crime Commissioner or Audit Wales. The Police and Crime Commissioner charges Denbighshire County Council, Abergele Town Council, North Wales Joint Branch Board, Tunnel and Network Services and Victim Support in respect of joint occupancy of buildings. The Chief Constable is a trustee of both PACT (North Wales Police and Community Trust) and Dangerpoint. The Force allocates funding from	Audit Wales. Audit Wales has made arrangements to ensure this does not present a conflict of interest for either the Office of the Police and Crime Commissioner or Audit Wales. The Police and Crime Commissioner charges Denbighshire County Council, Abergele Town Council, North Wales Joint Branch Board, Tunnel and Network Services and Victim Support in respect of joint occupancy of buildings. The Chief Constable is a trustee of both PACT (North Wales Police and Community Trust) and Dangerpoint. The Force allocates funding from income received via the Police Property Fund Account in support of PACT projects whose objectives are to raise the profile of community safety, significantly minimise the fear of crime and thus

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
	income received via the Police Property Fund Account in support of PACT projects whose objectives are to raise the profile of community safety, significantly minimise the fear of crime and thus enhance the quality of life throughout North Wales. For 2021-2022 this equated to £45,500 donated from the fund to PACT contributing towards meeting the costs of the Fund administration of £47,259.39. The Police and Crime Commissioner and Chief Constable participate in a partnership with HMPPS and the PCC provides funding to support the 'Dechrau Newydd' project in North Wales. This dual partnership is to reduce drug related offending and	enhance the quality of life throughout North Wales. For 2022-2023 this equated to to £28,100, in addition £120,000 was donated, funded equally by the OPCC and POCA activities funded by PACT. The costs of the Fund administration of £48,795 was also funded from the Force budget. The Police and Crime Commissioner and Chief Constable participate in a partnership with HMPPS and the PCC provides funding to support the 'Dechrau Newydd' project in North Wales. This dual partnership is to reduce drug related offending and

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
	deaths through community provision and support. Members of the Joint Audit Committee declared all their financial interests relating to contracts and businesses on appointment and signed an agreement to abide by the Seven Nolan Principles of Life and declare any revised interests to the Chief Executive. Joint Audit Committee members' declarations of interests can be found on the Office of the Police and Crime Commissioner's website www.northwales-pcc.gov.uk	deaths through community provision and support. Members of the Joint Audit Committee declared all their financial interests relating to contracts and businesses on appointment and signed an agreement to abide by the Seven Nolan Principles of Life and declare any revised interests to the Chief Executive. Joint Audit Committee members' declarations of interests can be found on the Office of the Police and Crime Commissioner's website www.northwales-pcc.gov.uk
2. What transactions have been entered into with related parties during the period? What is the purpose of these	n/a	The son of the Chief Finance Officer is employed as an Audit Apprentice by

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
transactions? Confirm these have been disclosed to the auditor.		Audit Wales. Audit Wales has made arrangements to ensure this does not present a conflict of interest for either the Office of the Police and Crime Commissioner or Audit Wales. The Police and Crime Commissioner charges Denbighshire County Council, Abergele Town Council, North Wales Joint Branch Board, Tunnel and Network Services and Victim Support in respect of joint occupancy of buildings. The Chief Constable is a trustee of both PACT (North Wales Police and Community Trust) and Dangerpoint. The Force allocates funding from income received via the Police Property Fund Account in support of PACT projects whose objectives are to raise the profile of community safety, significantly minimise the fear of crime and thus

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
		enhance the quality of life throughout North Wales. For 2022-2023 this equated to to £28,100, in addition £120,000 was donated, funded equally by the OPCC and POCA activities funded by PACT. The costs of the Fund administration of £48,795 was also funded from the Force budget. The Police and Crime Commissioner and Chief Constable participate in a partnership with HMPPS and provide funding to support the 'Dechrau Newydd' project in North Wales. This dual partnership is to reduce drug related offending and deaths through community provision and support.

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
		All of the above has been disclosed to the auditor.
3. What controls are in place to identify, account for and disclose related party transactions and relationships?	Declaration of interests at meetings Declaration of interests for staff and officers involved in procurement Register of interests Register of gifts and hospitality List of current and former partnerships is maintained by CIO	Declaration of interests at meetings Declaration of interests for staff and officers involved in procurement Register of interests, which is updated annually Register of gifts and hospitality List of current and former partnerships is maintained by CIO
4. What controls are in place to authorise and approve significant transactions and arrangements: • with related parties, and	n/a	Related parties are identified as above. All expenditure is authorised in line with the scheme of delegation, with limits set within the system, which are set at a

	Enquiries of management – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
• outside the normal course of business?		level sufficient for most day-to-day expenditure. If a higher level is required in order to approve a transaction, this is authorised by the Head of Finance, and a record is kept of all changes to limits. Limits are restored to default levels immediately after the large item has been approved. Transactions outside of the normal procurement processes must be approved by waiver.

	Enquiries of those charged with governance – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
1. How does the Audit Committee in its role as those charged with	Members of the Joint Audit Committee declared all their financial	Members of the Joint Audit Committee declared all their financial interests

	Enquiries of those charged with governance – in relation to related parties	
Question	**2021-22 Response**	**2022-23 Response**
governance, exercise oversight of management's processes to identify, authorise, approve, account for and disclose related party transactions and relationships?	interests relating to contracts and businesses on appointment and signed an agreement to abide by the Seven Nolan Principles of Life and declare any revised interests to the Chief Executive. Joint Audit Committee members' declarations of interests can be found on the Office of the Police and Crime Commissioner's website www.northwales-pcc.gov.uk	relating to contracts and businesses on appointment and signed an agreement to abide by the Seven Nolan Principles of Life and declare any revised interests to the Chief Executive. Joint Audit Committee members' declarations of interests can be found on the Office of the Police and Crime Commissioner's website www.northwales-pcc.gov.uk

North Wales Police

Sustainability & Decarbonisation - Update

Area	Estate and Facilities
Authors	Anna Pretious Environmental & Energy Conservation Manager
Date	September 2023
Purpose of paper	Information

Executive Summary	This report provides an overview and update on issues in relation to both the All Wales and North Wales Police's Sustainability and Decarbonisation agenda and will concentrate specifically on emissions recording and forthcoming waste legislation. Future reports will provide feedback on other areas, such as Utilities, Biodiversity, Fleet and Procurement.

1.NWP'S Decarbonisation Performance Summary:

Annual Emissions (kgCO₂e) compared to 2019-20 baseline year

	Gas & LPG Scope 1 (direct) Scope 3 (indirect)	Electricity Scope 2 (indirect) Scope 3 (indirect)	Fleet Fuel Scope 1 (direct) Scope 3 (indirect)	WATER Scope 3 (Indirect)	WASTE Scope 3 (indirect)	SUPPLY CHAIN Scope 3 (indirect)	Total Emissions kgCO2e	% reduction to 2019-20 baseline
2019-20	1,724,646	2,301,386	3,062,847	25,723	7,514	8,995,916	16,118,032	0
2020-21	1,807,504	1,890,114	2,922,302	24,058	6,010	8,536,122	15,186,110	-5.8
2021-22	1,759,374	1,885,506	2,694,199	11,425	4,041	8,316,048	14,670,593	-9.0
2022-23	1,652,790	1,677,953						

Base Data	Units	2019-20	2020-21	2021-22	2022-23
Electricity	kWh	7,283,329	6,559,935	6,472,729	6,415,420
Gas	kWh	8,087,101	8,462,325	7,995,624	7,544,215
LPG	kWh	184,185	203,230	184,449	171,152
Diesel	Litres	880,051	844,554	767,285	Being collated
Petrol	Litres	54,129	53,975	62,167	Being collated
Water	m³	25,303	23,665	28,044	Being collated
Waste	tonnes	356	269	298	Being collated
Supply Chain	£	33,873,253	32,442,527	32,248,414	Being collated

Values in blue are provisional, further work is required to finalise the data.

Consumption and performance reporting:
Electricity (grid), Gas and LPG consumption = quarterly
Diesel, Petrol, Water, Waste, Supply Chain = annually
Emissions   = annually

<u>Update on data:</u>

- <u>Electricity</u> - consumption for April 22 to March 2023 has been collated – provisional data is showing a reduction of 914,439 kWh in 2022-23 compared to the 2019-20 baseline, this is a 12% reduction in consumption.

  The reduction in electricity consumption since 2019-20 has resulted from (i) agile working in the larger administration buildings and (ii) installation of LED lighting to larger consuming sites and stations; approximately a quarter of the NWP estate now has LED lighting, with work programmes for further projects and sites currently being established.

- <u>Gas and LPG</u> - consumption for April 22 to March 2023 has been collated – provisional data is showing a reduction of 574,075 kWh in 2022-23 compared to the 2019-20 baseline, this is a 7% reduction in consumption.

- <u>Fleet Fuel</u> (diesel and petrol) - consumption for 2022-23 is currently being collated.

- <u>Water</u> (consumption and associated wastewater) for 2022-23 is currently being collated.

- <u>Waste</u> – waste data from 2019-20 to 2022-23 is currently being recalculated to include drugs sent for incineration.

  There are 33 waste streams being recorded, covering everything from bins in offices, to vehicle commissioning waste, to confidential waste to septic tanks. The waste streams are then collated into four main emissions groups, depending on the type of disposal route and the % of each emissions type determined; for example in 2019-20 these being; anaerobic digestion = 1% of Force total (food waste), combustion = 34% (energy from waste for general waste, clinical waste incineration and *drugs for incineration to be included once calculated*); landfill = 2% (feminine hygiene & shredded magnetic media) and recycling = 63% (all other wastes which are sent for recycling or re-processing). Subsequent years %'s are similar to 2019-20, but the data is still incomplete against some waste streams due to a delay in data availability from contractors (an ongoing issue, currently being addressed by Facilities).

- <u>Supply Chain</u> – emissions relating to the supply chain are based on spend (£), as this is the only available method. Data for 2022-23 is currently being collated.

2. All Wales Sustainability & Decarbonisation Group:
The last meeting was due to be held on 26th July 2023.
The next meeting is due on 4th October 2023

The focus of the July meeting was to discuss and compare the data collation and subsequent emissions calculations between the Welsh Forces. Each Force providing information on data and emissions for energy, fleet fuel, water, waste and supply chain, for 2019-20, 20-21, 21-22.

The standard approach to calculating greenhouse gas (GHG) emissions from activities is to multiply units of the 'activity data' (i.e., kWh of gas) by an 'emissions factor' (the EF specific to gas for the year being assessed in $kgCO_2e/kWh$). The main source of emission factors for GHG reporting in the UK is the annually produced UK Government GHG Conversion Factors for Company Reporting, these are readily available on the internet.

Emissions are divided into 'Scopes' which are defined by the Greenhouse Gas Protocol for

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GHG accounting and reporting purposes. Generally, all carbon accounts include scope 1 and 2 emissions, whereas scope 3 sources may only be partially included, depending on both the availability of data and the usefulness of its collection. There are also scope 3 emissions associated with the scope 1 and 2 emissions, for example the transportation and delivery of gas to a building through the network would be scope 3, whereas the actual use of the gas in a boiler in a building would be scope 1.

Scope 1 direct emissions derive from operations that are owned or controlled by the reporting organisation, for example natural gas use in buildings or fuel in vehicles.

Scope 2 indirect emissions derive from purchased electricity consumed by the reporting organisation.

Scope 3 indirect emissions derive from other sources, such as water usage; waste disposal; purchased goods and services (supply chain), fuel and energy-related upstream activities, transportation, and distribution; business travel; employee commuting and homeworking.

Calculations of carbon emissions always contain uncertainty derived from various issues, ranging from availability of the data source for the emissions being calculated to the type of data the emissions are being calculated against. For example, for energy usage, actual metered consumption in kWh will allow for greater accuracy of resultant emissions data, than if estimates were used; similarly, for waste, the actual quantity of a waste type in kg will provide greater accuracy than if spend (£) were used. Addressing uncertainty in carbon reporting is an important part of any improvement plan and organisations should consider options for improving activity data for subsequent reporting requirements with data providers. Emissions reporting also depends on current available methodology for organisations, for example the UK Government GHG Conversion Factors for Company Reporting available on the internet, does not include 'supply chain' conversion factors.

The Welsh Government, in 2017, set the ambition of achieving a carbon neutral public sector by 2030, as part of this the Welsh Public Sector Net Zero Carbon reporting was developed, consisting of guidance and annual template spreadsheets. Mandatory reporting organisations are provided with the template annually (the Police are not included in this); data is entered in the template and the emissions self-calculate within the reporting tool; these templates have the facility to calculate and emissions relating to 'supply chain'.

The Facilities Department undertake the annual reporting of energy, water and waste on behalf North Wales Fire & Rescue Service (a mandatory reporting organisation) and therefore have access to the Welsh Government reporting templates; NWP then share these with the other Welsh Forces, for their use, so that a common reporting mechanism is being used.

Nationally across the UK, a group has been formed from the Police, Fire, Ambulance, and other emergency services, known as 'The Emergency Services Environmental & Sustainability Group', to share best practice, knowledge, and work collaboratively on environmental, sustainability and decarbonisation issues; the ESESG contains sub-groups working on specific work areas. North Wales Police is a member of the Carbon Footprint subgroup, which has been formed to develop a shared and consistent approach for greenhouse gas emissions' accounting methodology for the organisations in the emergency services sector to aid reporting, fostering greater standardisation and comparability, and adoption of best practice.

North Wales Police is the only Welsh Force (and one of the few Forces in the UK) currently

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capable of reporting emissions relating to waste disposal based on actual quantities (kg and litres); other Forces are based on spend.

3. North Wales Police - Sustainability & Decarbonisation Group:
The last meeting was held on 20th July 2023
The next meeting is due on 3rd October 2023

Update:

(1) Data and emissions – see above.

(2) Finances - Funding has been made available in relation to Sustainability & Decarbonisation for 2023 onwards:

- Annual Sustainability Fund of £250k in financial year 2023-24
- Annual Sustainability Fund of £100k per annum (but with some carry over from recent years to fund specific capital investments)
- Additional funding of £2.5m allocated to an Energy Reserve with the high level plan being:
o The Energy Reserve is to be used to manage the unpredictability in costs and the Sustainability Reserve is to be used to invest in reducing energy use and associated emissions.
o If energy costs stabilise, the balance of the Energy Reserve might be moved to the Sustainability Reserve

Sustainability Fund projects currently being undertaken:

- Roofing insulation to improve thermal performance is being installed in 15 buildings across the Force, commencing in October 2023.
- LED lighting projects - sites for works during 2023-24 are currently being determined.
- A dedicated waste compound (for segregation and waste collection for the Eastern area) is being built in September 2023 at the Eastern Command & Custody Facility, Llay.
- 60 photovoltaic panels were removed from the Force Headquarters (due to roof leaks) – assessment to relocate these to a 'another' site within the Force is underway.
- New recycling bins for the canteen Joint Communications Centre to allow for greater segregation of waste types – being introduced in September 2023.

(3) North Wales Police Tracker – this has now been completed and reviewed by the members of the Sustainability & Decarbonisation Task & Finish Group.

The Tracker contains actions against the following subject areas, Minimal Waste, Carbon Reduction, Culture & Community, Health & Wellbeing, Positive Procurement, Sustainable Travel, Biodiversity. A reference code has been assigned against each of the actions and Benefits Analysis is being undertaken. The latest version of NWP's Tracker is attached below.

North Wales Police
Programme Tracker (

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Text in blue relates directly to the goals within the 'All Wales Strategy' Roadmap – these are contained in the sections of Carbon Reduction, Positive Procurement and Sustainable Travel.

Each subject area covers the 3 Phases of work periods according to Phase 1 (2022-23), Phase 2 (2023-2026) and Phase 3 (2026-2030). Some subject areas have then been further divided, for example:-

Carbon Reduction has been divided into Power decarbonisation of the buildings, Heat decarbonisation of the buildings and Power decarbonisation through the use of the buildings and the equipment within them.

Carbon reduction relating to Fleet is contained within the Sustainable Travel section.

Culture & Community has been divided into two main area, (i) the Internal governance and delivery of the S & D Strategy (i.e. Sustainability fund, partnership working and awareness raising communications etc) and (ii) how NWP contributes to enhancing the environment in the community (i.e. Environmental Visual Audits and Community Respect/Environmental Days)

Biodiversity has been divided into (i) biodiversity on the NWP Estate and (ii) Wildlife & Rural Crime.

(4.) Communicating Sustainability and Decarbonisation within North Wales Police:

- Sustainability & Decarbonisation is now a standing item for Senior Manager Team meetings across the Force. This allows for feedback from and to the Sustainability & Decarbonisation Group on ideas or projects, which have helped to form the Tracker.

- In August 2023 a carbon reduction and waste minimisation awareness campaign for staff was launched on the Internet Forcebook, highlighting some simple changes which can make a difference, both in the office and at home, such as switching off equipment and lighting when it is not required, reducing paper usage, and managing heating and cooling requirements more effectively.

4. Forthcoming legislation which the Force is preparing for:

From October 2023: The Environmental Protection (Single-use Plastic Products) (Wales) Act 2023 is a new law which will make it a criminal offence to supply or offer to supply (including for free) specific single-use plastic products to consumers in Wales. The Act has been introduced to tackle plastic pollution and deliver on the Welsh Governments commitment to abolish commonly littered single use plastic products. The law will stop the sale or supply of these products in Wales, unless there is an exemption; the bans will be introduced in 'phases', to allow businesses time to use up existing stock and to source alternatives. Phase 1, from October 2023, will include plates, cutlery, stirrers, cups and food containers made from expanded or foamed extruded polystyrene, plastic stemmed cotton buds, sticks for balloons and drinking straws. Phase 2 will begin to come into force from 2024 onwards and includes plastic single use carrier bags, polystyrene lids for cups and takeaway food containers and oxo-degradable plastic products. These products are being banned as they are all often found littered in parks, streets, seas and beaches, they all have reusable or non-plastic alternatives. The law is applicable to businesses, government bodies, sole traders, charities, clubs, voluntary organisations and public sector

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	providers. Projects undertaken so far:- - A small scale trial within Custody for replacing single use plastic breathalyser mouthpieces with a biodegradable alternative has been undertaken, feedback from NWP personnel within the trial has been positive, but production of these items is not yet at a stage where it could be rolled out, further information is awaited from suppliers. - Single use plastic sporks within Custody have been replaced with vegware biodegradable alternatives; in addition to being a more favourable environmental alternative, the items have also shown a significant cost reduction. - At Force canteens: St Asaph PFI – single use plastic cutlery and food containers replaced with bio-degradable alternatives in place. The Force Headquarters canteen is to be assessed during September 2023. - Single use plastic within the supply chain – a significant amount of work on this has already been undertaken several years ago and changes made, for example, boots no longer come packaged in plastic film, paper is used instead. From April 2024: The Welsh Government is introducing new regulations that will require all workplaces to separate recyclable materials in the same way that most householders do now. This will improve the quality and quantity of how waste is collected and separated. The legal requirements to separate waste will affect all workplaces (businesses, the public and third sector), those who arrange for waste to be collected, as well as those who collect, receive, keep, treat, or transport waste. The following materials will need to be separated for collection and collected separately - food; paper and card; glass; metal; plastic; cartons and other fibre-plastic composite packaging; small waste electrical and electronic equipment and textiles. There will also be a ban on (i) Sending food waste to sewers and (ii) separately collected waste going to incineration plants and landfills and ban all wood waste going to landfill. North Wales Police has for many years undertaken waste segregation and recycling of many of the items listed above; however, for bins in offices and stations the recycling of plastics, cans and non-confidential paper has been co-mingled in the same bin, due to a lack of space for multiple bins both inside and outside buildings, as well as being the preferred system by the waste contractors. A complete review of the recycling and bin systems within buildings is currently being undertaken.
Key Risks / Issues	Energy costs – there was a significant cost escalation from 1st October 2022 in the cost of purchasing electricity and gas; these were reduced slightly due to the implementation of the Government's Energy Bill Relief Scheme; energy costs for 1st October 2023 are lower, but still significantly higher than historical energy costs seen in previous years. Improving the control of heating and cooling in buildings – About 40 sites (approx. 60% of the Estate) are on the Building Energy Management System (BEMS); running on Trend 963 (originally installed in 1995) which is now obsolete, the latest version is now iQ Vision. The Trend 963 is still useable but limited as the remote dial in to sites by Facilities personnel has been lost due to changes in the NWP IT systems (the Trend Contractors are still able to access the BEMS through their systems). The Trend 963 also does not provide the modern features required for improved energy management, which are available through iQ Vision. To change from Trend 963 to iQ Vision entails changes to be made, moving from a phone line system to the NWP IT networked system, plus purchasing the iQ Vision software.

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	Facilities are liaising with the IT Department as it requires a network company to come in and spec the works required and ascertain the costs for the new system (costs are unknown at this stage but are expected to be significant).
Actions	To note the content of this report.

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Joint Audit Committee

Meeting Date: 28 September 2023

Title:	Collaboration Governance
Author:	Kerrie Ambrose
Purpose of the report:	Provide Information on current collaboration Governance Arrangements
The report is provided to JAC for: (tick one)	☐ Decision ☐ Discussion ☐ Assurance **Information**
Summary / Key Points:	• ALL Wales Collaboration • West Coast Collaboration • Joint Emergency Services Collaboration
Recommendations:	None
Risk register impact:	None
Assurance implications:	None
Equality Impact:	None
Information exempt from disclosure:	NA

Collaboration Governance

JAC presentation

All Wales Collaboration

JESG ESMCP

Tier 1-3 Collaborations

West Coast Collaboration

Niche Platform

Automation and robotics

Established collaborations; e.g.

Estates NWP/NWFRS

Armed Alliance

Health board & council

CT Policing Wales

Governance Arrangements – Areas covered in this presentation

- ➢ West Coast Collaboration
- ➢ All Wales Collaboration
- ➢ Joint Emergency Services Group

West Coast Collaboration

WCC Programme Governance

- Project Boards
- CCAB (technical)
- WCC Team meetings

WCC Programme Board

Niche Management Board

WCC DCC Board

Collaboration Oversight Board

West Coast Collaboration

Governance Board	Recommended Frequency	Chair	Requirement purpose	Attendee
DCC Board	Biannual	DCC Lead Force	Strategic Oversight of WCC programme, reports by exception only, with highlights on WCC finance and performance position, escalation of any recommendations outside of agreed budget	DCCs, OPCC representatives, WCC Programme Strategic Lead, Niche Business Coordination Manager, Minerva Lead Heads of Corporate Change
Niche Management Board	Triannual	Strategic Head IT Lead Force / Niche Coordination Manager	Key decision-making board, Programme escalation decisions, Niche change prioritisation, BAU Performance, budget	Strategic leads across WCC forces i.e., Heads of Corporate Change Strategic heads of ICT, WCC Strategic Lead, NCM, Programme and snr project manager, Minerva representative
WCC Programme Board	Monthly	Niche Coordination Manager / Senior Project Manager	WCC Change programme – Niche projects / change / BAU oversight board,	WCC management, Programme and project managers, Technical and Support manager, Key programme and IT spocs from forces (as appropriate)
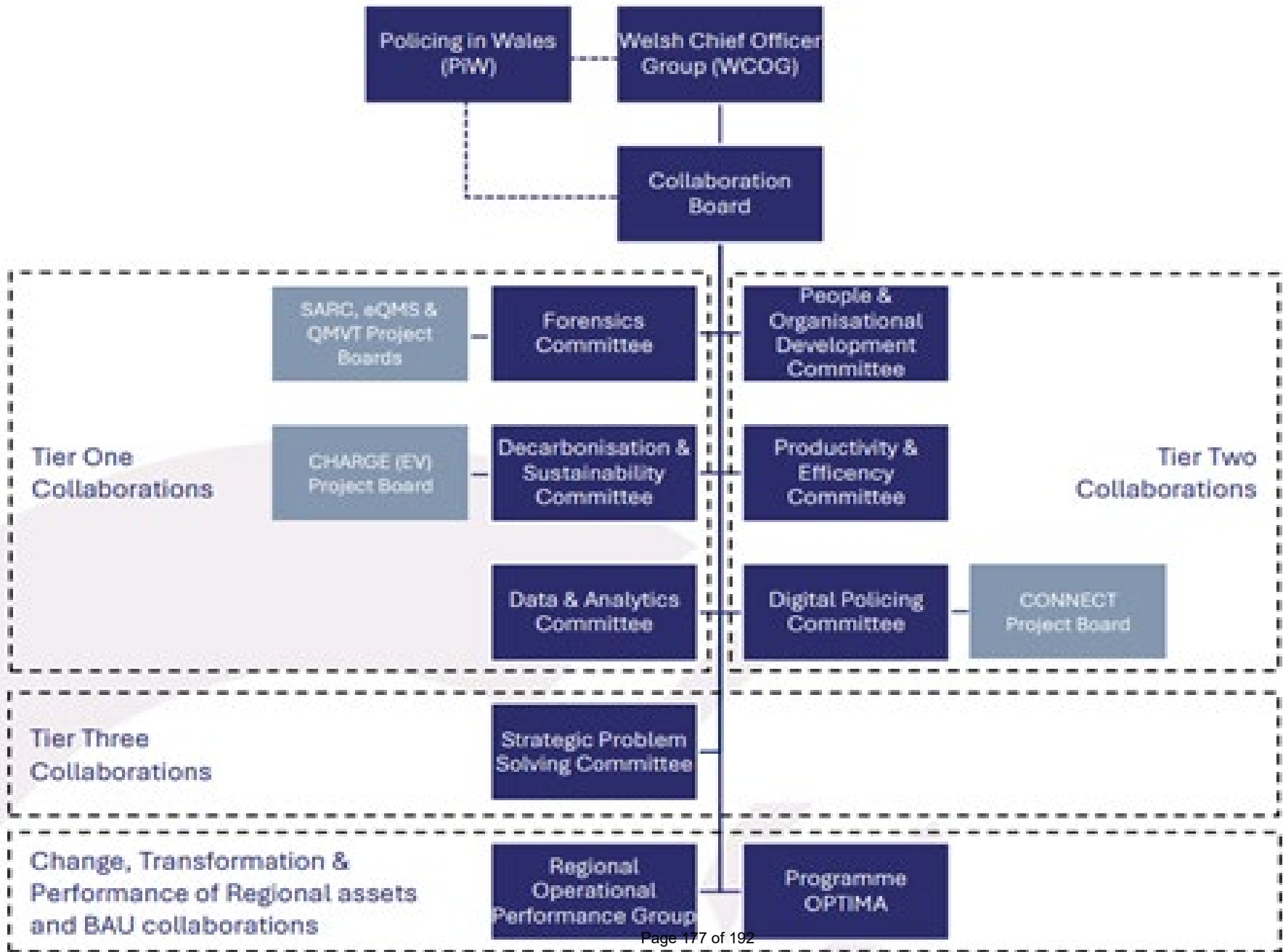
All Wales Collaboration

Governance Board	Recommended Frequency	Chair	Purpose	Attendee
ALL WALES COLLABORATION BOARD	**Quarterly**	**DCC Rotation**	**Strategic Oversight of programme, highlight reports, decision making**	**DCCs, Finance Directors, ALL Wales Collaboration ACC Programme Lead Force Programme Strategic Leads All Wales Programme Manager**
Project Boards	**Monthly**	**ACC Wendy Gunney - All Wales Collaboration Lead**	**Key decision-making board, Programme escalation decisions**	**Strategic leads across Welsh forces i.e., Heads of Corporate Change Relevant SMES /heads of dept (dependent on Project) Programme manager**
Tier 1 – 3 Task and finish groups	**As required per phase of project**	**Niche Coordination Manager / Senior Project Manager**	**WCC Change programme – Niche projects / change / BAU oversight board,**	**Forces programme or project managers Project managers, SMEs from forces (as appropriate)**

Joint Emergency Services Mobile Communications Programme

ALL WALES
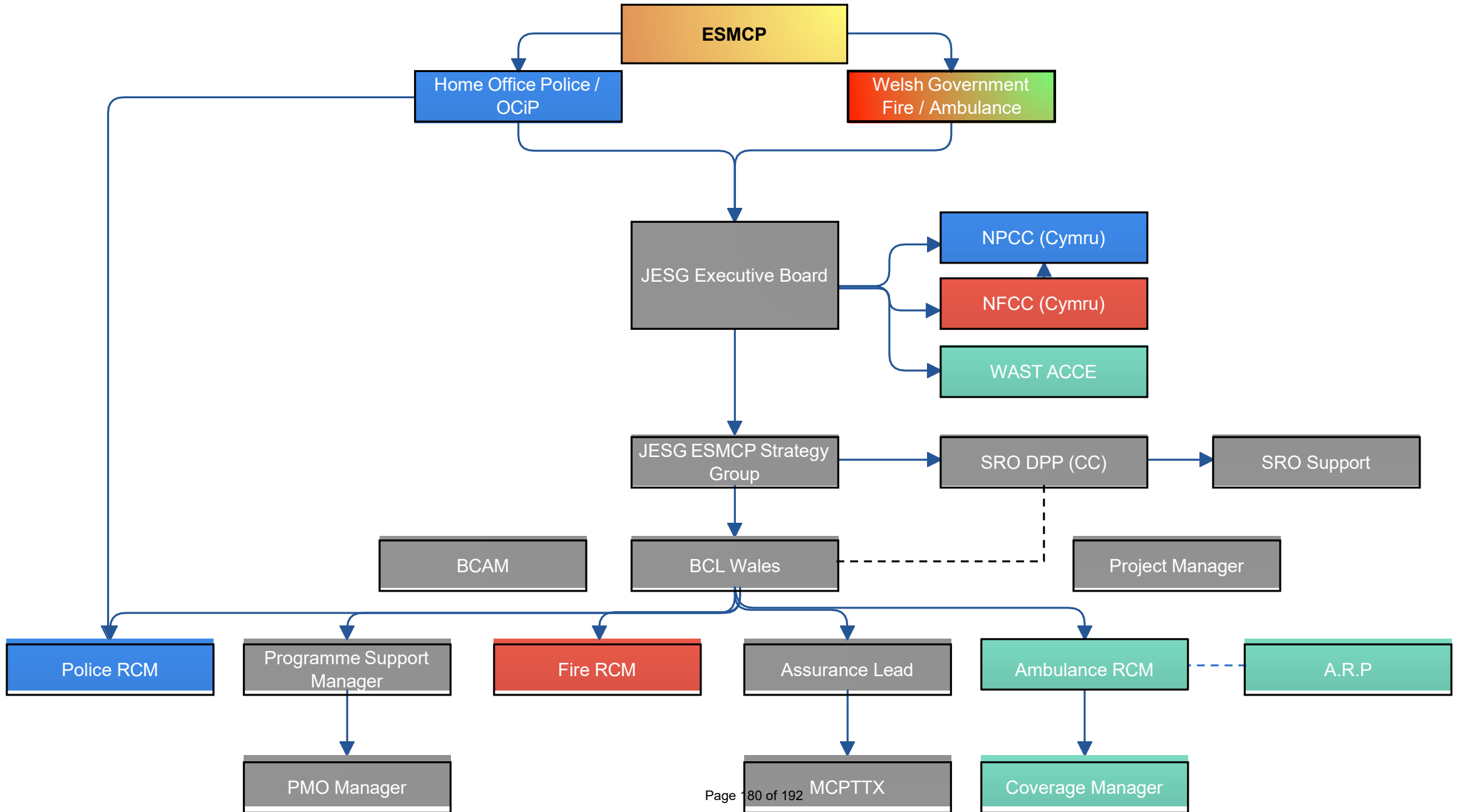
Joint Emergency Services Group Executive Board

JESG Exec Board is Strategic decision-making Group representing all Emergency Services, Director Finance and Resources attends

Number of Tactical and Management boards sit beneath , escalating through to JESG as necessary

Report into ESMCP Programme Board and by exception to SCCB

Critical decisions, exceptions and escalations go into Strategic Change

ALL WALES Programme

ESMCP

WEST COAST

NWP Strategic Change Board

NWP SMB

Joint Audit Committee

Meeting Date: 28th September 2023

Title:	HMICFRS Value for Money Profiles (Open Session)
Author:	Dewi Williams
Purpose of the report:	Provide JAC with overview on HMICRFS Value for Money Profiles
The report is provided to JAC for: **(tick one)**	☐ Decision ☐ Discussion X Assurance ☐ Information
Summary / Key Points:	• Annual issue of HMICVFM data • Cyclical HMIC PEEL assessments • Publicly available data set • Internal analysis of information for consideration in a number of forums • Information has worked through multiple internal governance forums. • Information provided to JAC should provide assurance that NWP is actively considering benchmarking information around VFM and feeding into appropriate internal activity.
Recommendations:	• JAC to note the report
Risk register impact:	• None
Assurance implications:	• None
Equality Impact:	• None
Information exempt from disclosure:	• None – Detailed internal analysis will feature in the closed session.

HMIC Value for Money Profiles 2022-23

Joint Audit Committee 28.09.23 (Open Session)

Value for Money Profiles - Introduction

 HMICFRS guidance on using the profiles:

" The profiles have done their job if they enable managers, inspectors, police and crime commissioners and other interested parties to identify and explore interesting differences in the data. Beware jumping to conclusion without proper investigation. For instance, high costs aren't necessarily a sign of poor value for money and cheapest isn't always best. You should consider exploring the reasons for any differences by assessing the force as a whole, using relevant local knowledge. You should consider workforce levels in the context of workforce modernisation, collaboration efforts and the outsourcing of services"

Latest available data set is predicated on 22-23 budget

The dashboards excludes both National Policing functions and the OPCC

The dashboards are refreshed as and when Forces resubmit their data (this presentation is based on snapshot at a point in time)at

Value for Money Profiles – Factors to Consider

- Indicative data which shines light on areas worthy of further investigation (triangulation)
- HMIC - Profiles prompt questions rather than to provide judgements
- Option to include or exclude Metropolitan Police from the profiles - Skew the data
- 43 Forces structured in different ways – Profiles attempts to benchmark
- Factors to consider:
    - VFM is measure of Economy, Efficiency and Effectiveness
        - Economy based on 22-23 Budget and Cost per '000 population
        - Efficiency and Effectiveness measured on Crimes and Outcomes 20-21 (does not factor in proactive and non crime work)
    - Outputs Measured on Cost per '000 population - No consideration of second homeowners/holidaymakers/day visitors with measurement tool deemed to be a relative blunt tool
    - Inputs (Funding) a combination of:
        - Home Office Funding – 1.03% (NWP Population is 1.16%)
        - Precept based on households with second home premium factored into precept
    - Measurement of Inputs and Outputs on different basis
    - Data Set Unaudited with data quality issues historically identified – Data set 300,000+
    - Demand vs Coverage
    - Geography, Rurality, Force Size and Economies of Scale
    - Impact of Outsourcing and Collaborative arrangements on profiles
    - Enabling/Support Functions – Cost per FTE better measure than Cost per '000 population (more frontline officers require more Estates, ICT, Vehicles, Training etc).

Value for Money Profiles - Comparison

Value for Money Profiles undertake comparisons with:

- All Forces
- Most Similar Group made up of the following forces:
    - Devon & Cornwall, North Yorkshire, Norfolk, Suffolk, Warwickshire, West Mercia, Wiltshire
- Functionality to compare against a single or a group of Forces of your choice
- Historically the force has undertaken comparisons with the other Welsh and North West forces given our close political and operational ties

Can drill down into data set on a combination of subjective and objective categories:
- Subjective – Police Officers, PCSOs, Police Staff, Non Staff and Income
- Objective – Local Policing, Dealing with the Public, Criminal Justice, Road Policing, Operational Support, Intelligence, Investigations, Public Protection, Investigative Support, Support Functions and Capital Financing

Triangulate with Question 12, HMIC PEEL Inspection assessments.

Funding per Head of Population

Financing Provision (Funding) per Head of Population
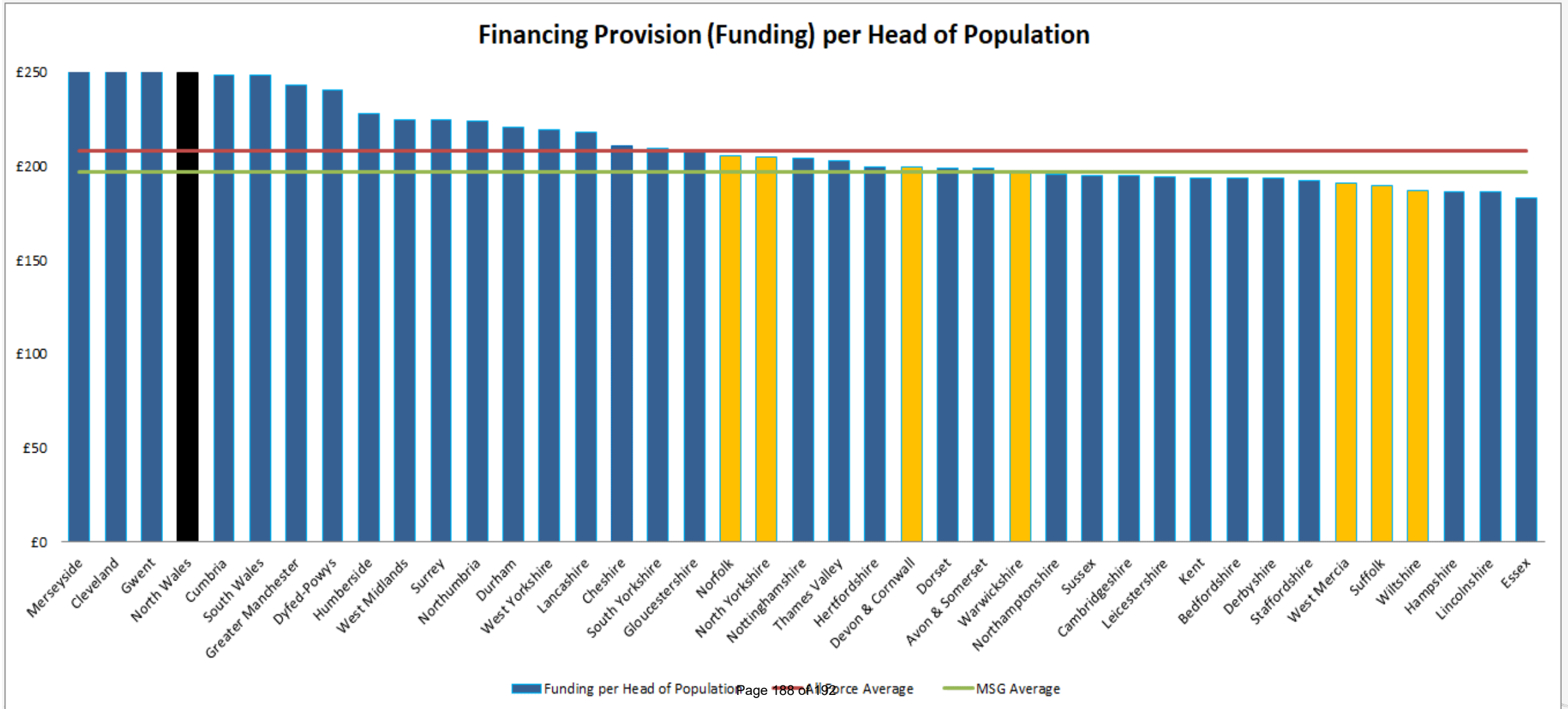
Measure of Efficiency and Effectiveness

Primary measure of Efficiency and Effectiveness within the profiles is Crime Outcomes based on 2020/21 data (narrow definition)

Significant amount of policing time spent on non crime and preventative policing.

No specific comparative data in areas such as:
- Public Satisfaction
- Preventative Policing
- Call Handling
- Road Policing – Casualties, Enforcement activities, Drink Driving, Drug Driving
- County Lines
- Public Protection activities
- Etc

Crime Outcomes 2020/21
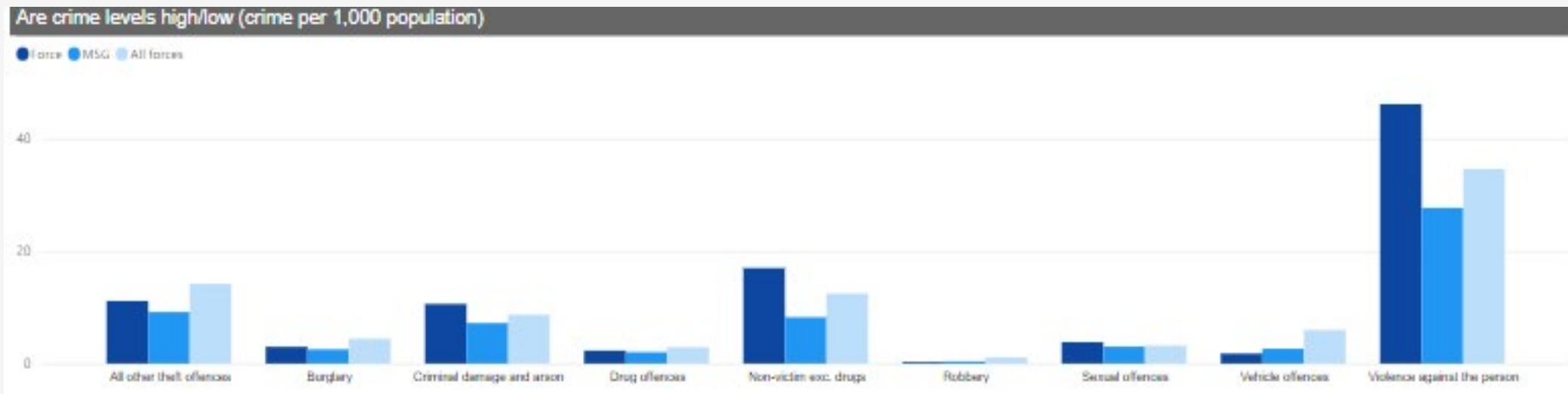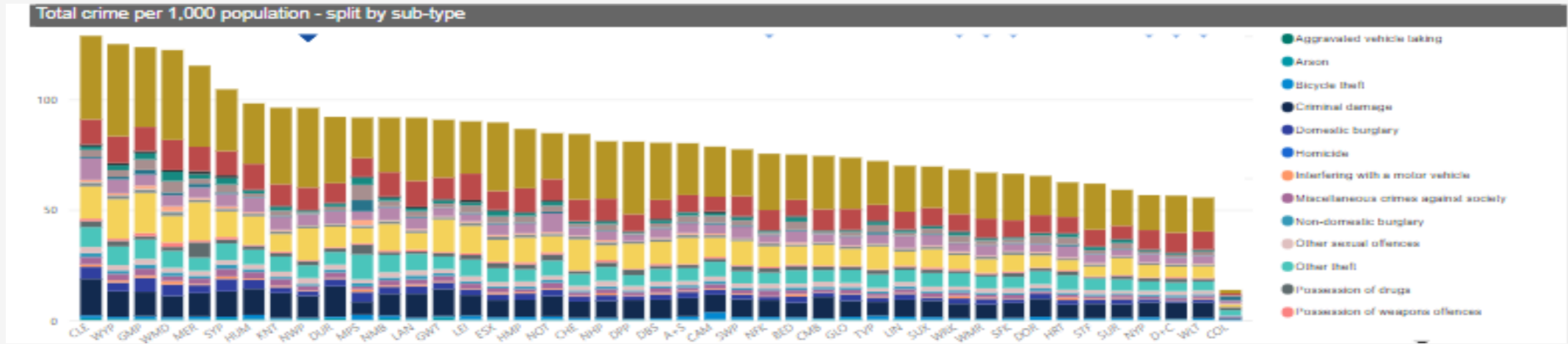
Value for Money Comparisons

Links to public Information:

1). HMICVFM Profiles www.justiceinspectorates.gov.uk/hmicfrs/our-work/article/value-for-money-inspections/value-for-money-profiles/value-for-money-dashboards/

2). HMICPEEL Assessment [PEEL 2021/22 – An inspection of North Wales Police - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (justiceinspectorates.gov.uk)](PEEL 2021/22)

Conclusion

- Indicative data which shines light on areas worthy of further investigation with the profiles prompting questions rather than providing judgements
- The profiles are a starting rather than an end point
- Supplement/Support other data set (Triangulation)
- The data set can help deliver value for money and ensure monies is spent in an economical, efficient and effective manner
- The Force is well resourced in comparison to comparator groups on basis of Cost per '000 population
  - More officers, PCSOs and staff
  - Higher level of investment in enabling functions such as ICT, Fleet, Estates and Corporate Development
- The efficiency and effectiveness measurements are outdated (predicated on 20/21 data set) and narrow reflection of the activities undertaken by police forces
- The profiles together with development of appropriate measures can be used to ensure the force delivers value for money with monies spent in an economical, efficient and effective manner

No huge warning lights or areas of concern jumping out but some areas to potential consider further.