Suffolk Police and Crime Commissioner

Making Suffolk a safer place to live, work, travel and invest

ORIGINATOR: TIAA (INTERNAL AUDITORS)	PAPER NO: AC24/31

SUBMITTED TO:	AUDIT COMMITTEE – 4 DECEMBER 2024

SUBJECT:	SUMMARY INTERNAL CONTROLS ASSURANCE (SICA) REPORT 2024

SUMMARY:

1. The summary report provides an update on the progress of internal audit. The report is based on internal audit work carried out by TIAA and management representations that have been received during the period since the last progress report.

2. The follow up of internal audit recommendations undertaken by TIAA is undertaken throughout the year and reported to the Audit Committee during the year at each meeting.

RECOMMENDATION:

1. The Audit Committee is requested to consider the attached report.

Office of the Police and Crime Commissioner for Suffolk and Chief Constable of Suffolk Constabulary

Summary Internal Controls Assurance (SICA) Report

November 2024

Summary Internal Controls Assurance

Introduction

1. This summary controls assurance report provides the Audit Committee with an update on the emerging Governance, Risk and Internal Control related issues and the progress of our work for the Office of the Police and Crime Commissioner for Suffolk and Chief Constable of Suffolk Constabulary at the 22nd November 2024.

New Internal Audit Code of Practice (Global Internal Audit Standards)

2. The new Internal Audit Code of Practice, which sets out fundamental principles for running a strong and effective internal audit function. For the first time, it presents a unified Code that encompasses the financial services, private, and third sectors.

   The Code reflects the final recommendations of the Independent Internal Audit Code of Practice Review Committee and has received full endorsement by the Chartered IIA's Council. The Global Standards urge boards and Audit Committees across the financial, private and third sectors to adopt and implement the Code's principles, embarking on their path to full compliance. Embracing these principles will maximise the value of internal audit and unlock the full potential of the profession.

   The purpose of the Code

   The principles which follow are aimed at enhancing the overall impact and effectiveness of internal audit within organisations operating in the UK and Ireland. They are regarded as a benchmark of good practice against which organisations should assess their internal audit function.

   Who is it for?

   The intended audience for the Code of Practice (the 'Code') includes members of board audit and risk committees, chief audit executives, non-executive directors, senior management, and, where appropriate, regulatory bodies. The Code is intended to be applied by all organisations in the financial services, private and third sectors with an internal audit function and a board audit committee of independent non-executive directors or their equivalent. This Code may prove useful for internal audit in the public sector, but it is not drafted with the public sector specifically in mind. Public sector internal audit functions should continue to follow the Public Sector Internal Audit Standards.

   How should it be applied?

   The Code should be applied in conjunction with the International Professional Practices Framework and the Global Internal Audit Standards. The Code builds on these Standards and seeks to increase the impact and effectiveness of internal audit. The Code is principles-based. It is expected that the principles are applied proportionately, in line with the nature, scope and complexity of the organisation. Internal audit functions should apply the Code in the context of internal audit regulatory standards applicable to the organisation.

   See Appendix E for further information and available resources

Audits completed since the last SICA report to the Audit Committee

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

Audits completed since previous SICA report

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM
22/23 Commissioning	Substantial	06/11/24	15/11/24	19/11/24				

4.   The Executive Summaries for each of the finalised reviews are included at Appendix A. There are no issues arising from these findings which would require the annual Head of Audit Opinion to be qualified.

Reports that are currently at draft report stage and awaiting management comments to finalise

5.   The table below sets out the reports that are at draft report stage that are awaiting management comments to finalise.

Audits currently at draft report stage

Review	Evaluation	Draft issued	Draft management comments provided	Comments
Limited Duties	Limited	27/09/24	07/11/24	Initial management comments have been provided, but they have not been provided for all recommendations.
Risk Management	Reasonable	01/10/24	04/11/24	Awaiting sign off by the senior leadership team.
Corporate and HR Policies	Substantial	28/10/24	06/11/24	Awaiting sign off by the senior leadership team.

Progress against the Internal Annual Plan

6.   Our progress against the Internal Annual Plan is set out in Appendix B.

Changes to the Annual Plan 2024/25

7.   There have been no changes to the internal audit plan since the last Audit Committee meeting.

Progress in actioning priority 1 & 2 recommendations

8.   We have made no Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA. The recommendation tracker is provided for the Committee, and is shown in Appendix C.

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 D, since the previous SICA report.

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.

Appendix A: Executive Summaries

The following Executive Summaries and Management Action Plans are included in this Appendix. Full copies of the reports are available to the Audit Committee on request. Where a review has a 'Limited' or 'No' Assurance assessment the full report has been presented to the Audit Committee and therefore is not included in this Appendix.

Review	Assurance Level / Notes
22/23 Commissioning	Substantial

Executive Summary – Commissioning

OVERALL ASSESSMENT

SUBSTANTIAL ASSURANCE

SUBSTANTIAL ASSURANCE
REASONABLE ASSURANCE
LIMITED ASSURANCE
NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Grants awards are not awarded appropriately.

SCOPE

The audit focused on whether collaborations and partnerships are fulfilling their requirements. The audit concentrated on the Office of the Suffolk Police and Crime Commissioner. The PCC receives funding from the Ministry of Justice (MOJ), the value of this is £2million. In addition to MOJ funding there is PCC grant funding the value of this is £300k, and this is managed by Suffolk Community Foundation.

KEY STRATEGIC FINDINGS

A key part of the Police and Crime Commissioner's role is to commission services that support the Constabulary to achieve their role.

Designated personnel have been assigned to co-ordinate the commissioning function within the Office of the Police and Crime Commissioner (OPCC).

There is a Grants Team at Suffolk Community Foundation to process the PCC Fund. The Crime and Disorder Reduction Grants and Victim Support commissioning is coordinated by the Head of Governance and Commissioning.

Monitoring arrangements are dependent on the value of the grant awarded/value of service commissioned.

GOOD PRACTICE IDENTIFIED

Appropriate procurement processes have been followed for commissioning services.

Monitoring arrangements are dependent on the value of the grant awarded/value of service commissioned.

ACTION POINTS

Urgent	Important	Routine	Operational
0	0	0	0

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Appendix B: Progress against Annual Plan

2023/24 Plan

System	Audit Days	Planned Quarter	Current Status	Comments
23/24 Procurement Strategy and Compliance	12	3	Final report	
22/23 Agile Working	10	2	Final report	
22/23 Firearms Licensing	10	3	Final report	Private report
22/23 Resource Management Unit	10	3	Final report	
22/23 Succession Planning	10	2	Final report	
23/24 Key Financial Controls	16	4	Final report	
22/23 Commissioners Grants	10	2	Final report	
22/23 Vetting	10	4	Draft report to issue	

2024/25 Plan

System	Audit Days	Planned Quarter	Agreed Start Date	Audit Committee Reporting	Current Status	Comments
23/24 New E-recruitment systems	16	2		September 2024	Final report	
23/24 Limited Duties	16	2	25/06/2024	December 2024	Draft Report Issued	Awaiting management comments to finalise, draft report was issued on the 27th September
24/25 Corporate and HR Policies	13	2	27/08/2024	December 2024	Draft Report Issued	Awaiting management comments to finalise, draft report was issued on the 28th October
23/24 Risk Management	10	4	30/07/2024	December 2024	Draft Report Issued	Awaiting management comments to finalise, draft report was issued on the 1st October
23/24 Culture and Required Behaviour	12	2	25/06/2024	March 2025	Fieldwork in progress	Debrief meeting is scheduled for the 3rd December.
22/23 ICT Cyber Security Maturity	22	2	08/10/2024	March 2025	Fieldwork in progress	Audit days from the 2022/23 have been transferred to the 2023/24 audit so that in-depth 23/24 internal audit can be undertaken. There have been delays in receiving information from the audit leads to complete the audit.
22/23 ICT Strategy combined with ICT Project Management	22	2	29/10/24	March 2025	Fieldwork in progress	Audit in progress. There have been delays in receiving information from the audit leads to complete the audit.
24/25 Fleet Maintenance	16	2	01/10/2024	March 2025	Fieldwork in progress	Debrief has been arranged for the 29th November.
24/25 Recruitment and Induction Training	15	2	01/10/2024	March 2025	Fieldwork in progress	Debrief has been arranged for the 27th November.
24/25 Workforce Planning	12	2	21/11/2024	March 2025	Fieldwork in progress	

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Audit						
24/25 Payroll	15	2	22/11/2024	March 2025	Fieldwork in progress	
24/25 Contract Business Continuity	16	2	26/11/2024	March 2025	Fieldwork in progress	
22/23 Data Protection / Freedom of Information	10	2	07/01/2025	June 2025	Being scheduled	Paused due to data breach in 2023/24. Audit recommencing the 7th January 2025.
23/24 Fleet Management Strategy	12	4	03/03/2025	June 2025	Being scheduled	Moved to the 2024/25 audit plan at the request of management, due to the fleet management strategy being completed refreshed. A start date has been agreed for the audit. The audit is to be commenced on the 3rd March 2025.
22/23 Change Management	10	3	10/02/2025	June 2025	Being scheduled	Moved to the 2024/25 audit plan at the request of management. A start date has been agreed for the audit. The audit is to be commenced on the 10th February 2025.
24/25 Commissioner and Partnerships	18	2	17/02/2025	June 2025	Being scheduled	Start date has been agreed
24/25 Complaints	12	2	11/12/2024	March 2025	Scheduled	Start date has been agreed
24/25 Key Financial Controls	25	4	21/01/2025	March 2025	Scheduled	Start date has been agreed
24/25 Safeguarding	12	2	27/01/2025	June 2025	Being scheduled	Start date has been agreed
24/25 Retention of Staff	15	3	18/02/2025	June 2025	Being scheduled	Start date has been agreed
Audits Paused until plan is further progressed						
24/25 Communications Strategy	12	3			Paused	
24/25 Pensions	12	3			Paused	
24/25 MoPI Compliance	14	3			Paused	
24/25 Body Worn Cameras	14	3			Paused	
24/25 Asset Management	12	3			Paused	

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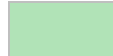
Follow Up	12	All					
Annual Planning	2	All					
Annual Report	2	All					
Audit Management	24	All					
Total b/fwd Days	**130**						
Total 2024/25 Days	**275**						

KEY:

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

Recommendations Summary

Audit	Implemented / No longer relevant since last Audit Committee	Not due	Overdue	Newly added recommendations and recommendations not due	Comments
21/22 Absence Management with Limited Duties	1				
23/24 Business Interest, Secondary Employment & Declaration of Interest			1		
23/24 Sustainability		2	2		
23/24 Data Quality	1	1		1	
23/24 Staff Appraisals	1	1		1	
23/24 Procurement	6	1			
Total Recommendations	**9**	**5**	**3**	**2**	

Recommendations implemented since the last Audit Committee meeting:

Audit	Recommendation	Priority	Management Comments	Original Due Date	Revised Due Date	Responsible Officer	Progress
Procurement	All necessary documentation to demonstrate and support compliance with the Strategic Procurement Policy to be maintained. A checklist to be compiled which records the necessary procurement information that needs to be maintained, and this to be independently checked to confirm all necessary steps have been undertaken	1	The *checklist in the form of a planning and control document already exists as does a report at the end of the procurement process. Both documents are signed off by a senior manager. A reminder will be issued to all staff to complete all documents and to load them into the 7 Force contract management system, Atamis*	30/06/24		7F Senior Commercial Support Manager	This has been addressed a checklist has been developed, and random checks are being undertaken to ensure that all necessary information is maintained.
Procurement	A review be undertaken to ascertain contract documentation available either within 7F or locally for Building Fabric extension agreement and the Body Worn Video Devices to give assurance that there are contracts in place which is signed by all parties and are up to date.	2	*Documents will be located and stored on Atamis.*	30/06/24	n/a	7F Senior Commercial Support Manager	This has been addressed, documentation has been located and stored appropriately. Reminders have been issued to ensure that documentation is stored appropriately.
Procurement	Contracts for where there is environmental impact to include social value measures and outcomes and these to be formally reported against	2	All *staff managing contracts to be reminded that social value benefits tendered must be monitored to ensure they are being delivered.*	30/06/24	n/a	7F Head of Category Management	This has been implemented a process is in place to ensure that contracts with social value measures are identified, and reports against progress is being undertaken.

Audit	Recommendation	Priority	Management Comments	Original Due Date	Revised Due Date	Responsible Officer	Progress
Absence Management	A formalised process to be developed which requires individuals to obtain approval to continue with any secondary employment, and the absence management policy to be updated accordingly to reflect this.	2	Agreed, this will be addressed. Guidance will be developed and this will be communicated so that a consistent approach is adopted.	30/09/23		HR Manager	This has been addressed, a formalised process is now in place to ensure that line managers discuss and provide approval to staff undertaking secondary employment. Formal guidance has been issued to Line Managers to ensure that appropriate process is followed.
Data Quality	All staff and officers be reminded of the Data Quality Policy. The Policy and key roles and responsibilities be referenced and communicated within Athena training courses.	3	Communications will be arranged to highlight to staff that it their responsibility to keep abreast of policies and refer them specifically to the need to review the Data Quality Policy.	31/8/24		Records & DQ Manager	This has been implemented, communication has been issued.
Staff appraisals	Further enhancements to be made to the PDR process to ensure that objectives set in the PDRs are being used to support effective 121s.	3	ePDR process to be reviewed to ensure that objectives are discussed and tracked throughout the performance year.	31/08/24		Head of L&D	This has been implemented, additional training has been provided to appropriate personnel.
Procurement	The 7F Strategic Procurement Policy be amended to include the most up to date financial regulation thresholds	3	This will be updated when the policy is reviewed which will be from June 2024. It should be noted that the updated policy has to be consulted on and agreed across the 7 Forces before it can be signed off.	30/09/24		7F Senior Commercial Support Manager	This has been addressed, the policy has been amended appropriately.
Procurement	A review be undertaken of the contract register to ensure that commencement and expiry date are complete	3	Those contracts that did not have dates were for procurements in process rather than completed contracts. The report will be refined to remove these or so it is clear that these are procurements underway.	31/07/24		7F Senior Commercial Support Manager	This has been addressed, a review of the contract register has been undertaken. Training has been provided to ensure contract register is kept updated.

Audit	Recommendation	Priority	Management Comments	Original Due Date	Revised Due Date	Responsible Officer	Progress
			This can be helpful to stakeholders to know that work is being undertaken.				
Procurement	A review of all contracts exceeding their expiry date be undertaken to ensure that their status is correct (i.e. archived or live) and to include within contract progress reports further information of waivers and/or extensions to contracts where relevant.	3	*Archiving of expired contracts is currently underway. Extension information is included in the contract report and 7F staff will be reminded to adjust this information as extensions are taken.*	31/07/24		*7F Senior Commercial Support Manager*	This has been addressed, a review of contracts was undertaken and where appropriate contract extensions were undertaken. Training has been provided to ensure contract register is kept updated

The following table lists the recommendations that are overdue:

Audit	Recommendation	Priority	Management Comments	Original Due Date	Revised Due Date (s)	Responsible Officer	Latest update
Business Interest, Secondary Employment & Declaration of Interest	Review the arrangements for cover in the absence of the Business Interest Administrator, including training for other members of staff within the team and preparing procedure notes/guidance on the key parts of the process.	2	Agreed that resilience is an issue with regards to processing business interests. Plan to upskill PSD Administrator. Detailed process maps will also be devised.	28/02/24	31/12/24	Head of PSD	Structural work within PSD is ongoing. The SIT model is in the process of being changed to support a central data / research hub within PSD. This will provide the resilience required for BI's as it is intended to train one or more members of staff in the administration of BI's to support the role. The BI workflow guides have been creased and stored on the W drive.

Audit	Recommendation	Priority	Management Comments	Original Due Date	Revised Due Date (s)	Responsible Officer	Latest update
							Requested extension to 31/12/24 due to ongoing work to comply. A revised due date has been requested.
Sustainability	The decision template used for decisions submitted to the Norfolk PCC be at least as robust as the Norfolk PCC template regarding the impact that the decision will have on carbon emissions. The relevant section of the decision submission to oblige the writer to provide a considered evaluation of the impact on the PCC's annual emissions. Without measurable indicators of the impact, e.g. in terms of TCO2e, it will not be possible to accurately track performance against 'budgeted' emissions during the year.	2	We have previously provided the Chief Executive of the Norfolk PCC office with the same wording as the Norfolk PCC to cover the future impact of PCC decisions on carbon reduction and environmental impacts. We will raise the TIAA recommendation with the Norfolk PCC office again, post the PCC May 2024 elections.	01/07/2024	31/12/24	Head of Estates	This has been delayed, work is progressing to address. A revised due date has been requested
Sustainability	Develop KPIs that can be readily calculated from existing data and shared widely among staff; to demonstrate areas where improvements are being made, and those areas where further intervention is required to keep the annual performance on track. Examples could include: miles travelled, fuel consumed, average mileage, EVs procured, waste recycled, Carbon emissions (TCO2e).	3	The Sustainability & Environmental Manager has commenced working on the proposed template for the annual carbon reduction performance report. This is planned to report by the end of June 2024. This will include key KPI's relating to carbon reduction and environmental performance & progress, which can then be reviewed and monitored annually.	30/06/2024	31/12/24	Sustainability & Environmental Manager	The new annual carbon management performance plan has been produced and is awaiting to be formally approved. A revised due date has been requested

Appendix D: Briefings on Developments in Governance, Risk and Control

TIAA produce regular briefing notes to summarise new developments in Governance, Risk, Control, Counter Fraud and Security Management 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 briefings issued in the last three months which may be of relevance to Office of the Police and Crime Commissioner for Suffolk and Chief Constable of Suffolk Constabulary is given below:

Summary of recent Client Briefings and Alerts

Subject	TIAA Comments
The Economic Crime and Corporate Transparency Act 2023	**Action Required** Audit Committees and Boards to note the key points and requirements of the Act, and obtain assurance from Executives about the organisation's arrangements to prevent fraud in preparation for the Act.
Authorised Push Payment Scams	**Action Required** For information only to Audit Committees and Boards.
Global IT Outage highlights need for robust IT Disaster Recovery and Business Continuity	**Action Required** Management and Boards are recommended to seek independent assurance that the current IT Disaster Recovery planning and Business Continuity Plans are robust and fit for purpose.

Appendix E: Updates to Global Internal Audit Standards

In January 2024, the Institute of Internal Auditors released the long-awaited changes to the industry's Standards that will have far-reaching impact on the year(s) ahead.

The standards will be adopted by 9th January 2025.

There are some significant changes that will provide internal audit functions with a refreshed framework and clearer requirements.

Key Innovations and Enhancements

Among the significant new requirements include:
- Establishment of an internal audit strategy.
- Heightened governance and oversight by the board and senior management.
- Enhanced reporting including ratings/rankings considerations.
- External quality assessments to be conducted by a team that includes at least one CIA.
- Technology considerations for the internal audit function's evolving needs.

Elevating the mandate and stature of Internal Audit

- Defining IA's purpose – business stakeholders should understand and be able to articulate the value of internal auditing and the mandate must be included in the internal audit charter.
- Separating independence and objectivity – Clear definitions
- Enhancing stakeholder coordination
- Building trust – Developing an approach to building relationships with key stakeholders and promote effective communication across all stakeholder groups

Maximising use of Technology

- Enabling technology as a key resource
- Using technology in audit operations – including audit planning, human and technology resource allocation
- Technology use in audit delivery – using technology to test more effectively and efficiently, for example using applications to test full populations instead of a sample (Increased costs)

Delivering more valuable results

- Promoting continuous improvement – responsible for measuring the performance of the IA function and ensuring it continuously improves
- Enhancing and elevating engagement level – A formal requirement of engagement reporting, including rating or ranking of audit findings, formulating recommendations, obtaining management's action plans and developing an engagement conclusion
- Performing external quality assessments (EQAs) – The board of directors must review EQA results, and the assessment team must include at least one individual with an active certified internal auditor (CIA) designation

Structure of standards into 5 domains containing principles and standards. The key domain for Audit Committee members is Domain 3.

Domain 1 – Purposes of internal auditing and adding value
Domain 2 - Ethics and professionalism -behavioural expectations.
Domain 3 – Governing the IA Function (Relationship between IA and Board (Committee) and responsibilities)
Domain 4 – Managing the IA function
Domain 5 – Performing IA services – expectation on engagement

Topical Requirements - such as Cyber / Fraud and ESG will have updated standards against which TIAA must audit those topics when they come into the audit plans.

Useful Resource:

Title	
Audit Committee Presentation (IIA-UK)	CIIA%20-%20Audit%20Committee-present
Audit Committee Check List (IIA-UK)	CIIA-Audit%20Committee%20Annual%20A
IIA-UK Fact Sheet	code-of-practice-document_september202