

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE

Internal Audit Progress Report

Presented at the Joint Audit Committee of:

24 March 2023

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1 Key messages

The internal audit plan for 2022/23 was noted by the Joint Audit Committee (JAC) at the meeting held on 23 September 2022. This report provides an update on progress against that plan and summarises the results of our work to date. As the Committee is aware, there was a delay in commencing some of our work, however all audits are either completed, in progress or scheduled in for completion in 2022/23.

We will continue to work closely with management to deliver an internal audit programme which remains flexible and 'agile' to ensure it meets your needs.



Since the last meeting, we have issued five final reports from the 2022/23 internal audit plan. This includes:

- Two substantial assurance reviews (**ESMCP – Financial Impact** and **Creditor Payments**);
- One reasonable assurance review (**Special Constabulary – Recruitment and Retention**); and

Two follow up reviews, one good progress (**Off Payroll Workers**) and one reasonable progress (**Follow up**). [\[to note\]](#)



We have also issued one draft report from the 2022/23 plan - **Overtime and Expenses and Allowances**.



The fieldwork is complete for a further review from the 2022/23 plan and the report is currently in the quality assurance process:

- **Crime Allocation Rationale Assessment (CARA)**.

The fieldwork for a further two reviews from the 2022/23 plan is in progress:

- **IT audit 1 (joint) – IT service delivery** (joint review with Kent) and;
- **Delivery of capital programme**. [\[to note\]](#)





The proposed internal audit plan for 2023/24 is on today's agenda. [\[To note\]](#)

2 Reports being presented to this Committee

2.1 Summary of final reports being presented to this committee

This section summarises the 2022/23 reports that have been finalised since the last meeting.

Assignment	Opinion issued	Actions agreed		
		L	M	H
<p>ESMCP – Financial Impact (joint) (1.22.23)</p> <p>Overall, we found that the numerous discussions and approvals to remove the risks from both of the Forces’ Risk Registers were adequately documented and updates on the national programme were available and shared amongst those concerned and the revised governance structure following the decision to pause the national programme. This has helped to ensure an appropriate level of continuity is in place and could be maintained. We also considered the interim proposal to refresh Airwave devices until the national programme recommences. We found that costs had been considered including margins for inflation, a detailed business case has been prepared ready for presentation to the ESMCP Board and the ESMCP Board had been notified of the revised options for approval. We concluded that adequate controls were in place, were well designed and had been complied with and we did not identify any control weaknesses during our review.</p>	<p>Substantial assurance</p> 	-	-	-
<p>Creditor payments (4.22.23)</p> <p>Overall, we found the control framework to be well designed and operating effectively for the management of creditor payments in line with documented procedures. We confirmed that payment runs had been prepared, checked, and approved accordingly and sample checking had been undertaken and recorded with payment runs reconciled to the bank statements. We noted that new vendors and vendor amendments had been processed, verified, and recorded with supporting evidence retained and we also found that an adequate segregation of duties had been applied. We confirmed that budgetary reporting of non-pay expenditure, including variances, was comprehensive and had been reported and presented within the governance structure to the Chief Officers Group (COG); and a reconciliation of creditors and the general ledger had been completed on a monthly basis. We found SAP user access had been sufficiently removed for leavers although we noted a minor weakness in relation to the timeliness of the removal process.</p>	<p>Substantial assurance</p> 	1	-	-

Off-payroll workers (Full Follow Up) (Joint - 2.22.23)

In our opinion, both of the Forces demonstrated good progress in implementing agreed management actions.

We confirmed that of the 13 management actions followed up, 12 had been implemented and one had been superseded.

Good progress - - -

Follow up 2022.23 (2021.22 Partial Assurance Opinions) (2.22.23)

In our opinion the Police, Fire and Crime Commissioner for Essex and Essex Police had demonstrated reasonable progress in implementing agreed management actions.

We found that of the 13 management actions followed up, we were able to confirm that nine low priority management actions and one high priority action had been implemented. We found that the implementation of two medium priority actions were ongoing. In the remaining case, we noted one medium priority management action as having not yet been implemented as we were not provided with sufficient evidence to complete our testing all of the three agreed management actions related to the Victims Code- Resolution Centre and Control Room (2021/22) review.

Reasonable progress - 3 -

Special Constabulary – Recruitment and Retention (3.22.23)

We confirmed that the Force had in place robust and adequate systems and processes to attract recruits through media campaigns and outreach events, although, it was not clear whether these have had a noticeable impact on recruitment. In addition, we confirmed that there are appropriate governance processes in place through the Special Constabulary Review Board which was in place to monitor the recruitment pipeline and identify issues with retention. We noted that there were recognition activities in place and effective communication of role progression opportunities to existing officers. We confirmed that exit interviews were conducted and analysed by ‘reasons for leaving’ to assist in retention efforts, and satisfaction workshops had been conducted to the same end.

However, we identified control weaknesses in relation to the timeliness and completion of pre-recruitment checks of special constabulary officers, the lack of evidence retained to confirm the communication of the Special Constabulary Handbook to new recruits, and for evidence of the completion of foundation training. We also found an issue with the lack of evidence to determine whether adequate engagement was taking place between Special Constable Line Managers and their officers.

Reasonable assurance 5 4 -



3 Summary of progress to date with the 2022/23 Internal Audit Plan

Assignment	Start date / Status	Draft report issued	Final report issued	Opinion	Actions agreed			Target JAC (as per revised IA plan*)	Actual JAC
					L	M	H		
Commissioning (PFCC)	FINAL	Draft 01/09/22, 20/10/22 & 23/11/22	08/12/22	Reasonable assurance	1	2		September 2022	December 2022
Follow up	FINAL	09/12/22 & 16/01/23	09/02/23	Reasonable progress	-	3	-	March 2023	March 2023
Off payroll workers follow up (joint)	FINAL	06/01/23 (revised draft 12/01/23)	06/02/23	Good progress	-	-	-	March 2023 (December 2022)*	March 2023
ESMCP – financial impact (joint)	FINAL	16/12/22	04/01/23	Substantial assurance	-	-	-	March 2023 (December 2022)*	March 2023
Special Constabulary and volunteers	FINAL	26/01/23	09/02/23	Reasonable assurance	5	4	-	March 2023 (December 2022)*	March 2023
Creditors	FINAL	02/02/23	23/02/23	Substantial assurance	1	-	-	March 2023	March 2023
Overtime and expenses and allowances	Draft issued	13/03/23						June 2023	
Crime allocation rationale assessment	Fieldwork complete							June 2023 (March 2023)*	

Assignment	Start date / Status	Draft report issued	Final report issued	Opinion	Actions agreed			Target JAC (as per revised IA plan*)	Actual JAC
					L	M	H		
IT audit 1 (joint) – IT service delivery	Fieldwork in progress							June 2023	
Delivery of capital programme	Fieldwork in progress							June 2023	
Payroll	20/03/23							June 2023 (March 2023)*	
Victim confidence	28/03/23							June 2023 (March 2023)*	
Police Cadets - Safeguarding	20/03/23							June 2023	
IT audit 2 (joint) – Demand management (ITIL control standards)	May 2023							June 2023	
Police officer uplift	Deferred to 2023/24							N/A (March 2023*)	

* See explanation of change below.

5 Other matters

Changes to the audit plans

There have been the following change to the 2022/23 plan since the last meeting:

Auditable area	Reason for change
Crime Allocation Rationale Assessment	We were asked to delay the start date of fieldwork from 23 January to 20 February by management and as such, the fieldwork did not complete in time to be presented at the March 2023 JAC. The fieldwork for this review has now completed and the final report will be presented at the June 2023 JAC.

The following changes were previously reported:

Auditable area	Reason for change
Off payroll workers (joint)	The Off payroll workers (IR35) follow up audit was deferred from the 2021/22 plan to allow time for the changes that have been put in place to take effect. The timing of our fieldwork was further delayed whilst the IA contract was signed and the scope of the review approved. The fieldwork for this audit is now complete and the final report will be presented at the March 2023 JAC.
ESMCP – financial impact (joint)	The commencement of the ESMCP audit was delayed whilst the IA contract was signed and the scope of the review approved. The fieldwork for this audit is now in progress and the final report will be presented at the March 2023 JAC.
Special Constabulary and Volunteers	The commencement of the Special Constabulary and Volunteers audit was delayed whilst the IA contract was signed and the scope approved. The fieldwork is now in progress and the final report will be presented at the March 2023 JAC.
Payroll	Due to a new Head of Payroll and Pensions being appointed and the 2021/22 report only recently being finalised and actions still being implemented, we were asked to delay the payroll audit to Q4 2023.

Victim confidence	We were asked by the CFO and Head of Business Services to bring forward the creditors, delivery of capital programme and overtime/expenses reviews to avoid clashes with year end closure. In order to do this, we moved the review of Victims confidence to March and the new date has since been agreed with ACC Baldwin.
Police officer uplift	We were advised by Chief Officer leads that the Police Officer Uplift Programme will still be in full activity in December 2022 and the Force would prefer the audit towards Q2/3 of 2023/24.

Head of Internal Audit Opinions 2022/23

The JAC should note that the assurances given in our audit assignments are included within our Annual Assurance report. In particular the JAC should note that any negative assurance opinions will need to be noted in the annual report and may result in a qualified or negative annual opinion.

We have not issued any final reports with negative assurance opinions to date. We will provide further updates to management as reports are finalised in our regular catch up calls. Our annual opinion will be presented to the June 2023 meeting.

Information and briefings

Since the last JAC we have issued the following newsletters and briefing papers:

- Emergency Services client briefing March 2023;
- Emerging Risk Radar; and
- Procurement and Contract Management Newsletters (January and February 2023).

RSM External reviews of quality

One of the key measures of quality is an independent third-party assessment and, as a firm we are required to conform to the requirements of the International Professional Practices Framework (IPPF) published by the Global IIA. Under the Standards, internal audit services are required to have an external quality assessment (EQA) every five years. The RSM UK Risk Assurance service line commissioned an external independent review of our internal audit services in 2021, to provide assurance as to whether our approach continues to meet the requirements.

The external review concluded that RSM 'generally conforms to the requirements of the IIA Standards' and that 'RSM IA also generally conforms with the other Professional Standards and the IIA Code of Ethics. There were no instances of non-conformance with any of the Professional Standards'. The rating of 'generally conforms' is the highest rating that can be achieved, in line with the IIA's EQA assessment model.

This is in addition to any feedback we receive from our post assignment surveys, client feedback, appraisal processes and training needs assessments.

6 Key performance indicators (KPIs) 2022/23

	Target	YTD Actual	Explanation of variance	Notes
% Proportion of audit plan complete or in progress	30%	77%	Some audit start dates have been delayed per the notes above.	100% target for the year.
Draft reports issued within 15 working days of debrief meeting	95%	100%		
Average working days between debrief meeting and draft report being issued	15 days	10 days		
Management responses received within 15 working days of draft report	95%	100%		Management target
Management responses to reports containing high priority actions or negative opinions received within 15 working days of draft report	95%	N/A		
Average working days taken for management to respond to draft report	20 days	13 days		Management target
Final report issued within 3 working days of management response	95%	100%		
% of staff with CCAB/CMIIA qualifications /qualified by experience on audits	50%	65%		QBE = 10+ years relevant sector experience

APPENDIX A – KEY FINDINGS FROM INTERNAL AUDIT WORK

(EXECUTIVE SUMMARY, SCOPE, AND HIGH AND MEDIUM PRIORITY MANAGEMENT ACTIONS ONLY)

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE AND KENT POLICE AND CRIME COMMISSIONER AND KENT POLICE

ESMCP – Financial Impact (Joint)

Internal audit report 1.22/23

AC FINAL

4 January 2023

This report is solely for the use of the persons to whom it is addressed. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY – ESMCP – FINANCIAL IMPACT (JOINT)

Why we completed this audit

We undertook a joint review of ESMCP – Financial Impact as part of the approved internal audit plans for 2022/23 of the Police, Fire and Crime Commissioner for Essex and Essex Police and Kent Police and Crime Commissioner and Kent Police. The objective of the audit was to review and assess the control framework in place for the removal of the Emergency Services Mobile Communications Programme (ESMCP) risk from both Force risk registers.

The Home Office is leading the cross-government ESMCP to deliver the new Emergency Services Network (ESN) critical communications system which will replace the current Airwave devices service. ESMCP was formed nationally in 2011 with the original forecasted transition date of September 2017 which was due to be concluded by the end of 2019. However, there have been several national delays including the requirement to re-procure the user services, including the critical communications app and support services. As such, the anticipated transition date is now proposed to be 2027.

As a result of the national delays the programme has effectively been paused, and both Forces requested approval from the ESMCP Board and each Force's Risk Star Chamber (meeting where risks are discussed and amended) to remove the applicable risks from within their Risk Registers. The risks for both Forces are recorded separately within each of their Strategic Risk Registers and are noted as follows:

Essex (2116) Financial Implications Delays to ESMCP - There is a risk that the current commercial arrangement (from the ESN national programmes procurement exercise met by the ESN National programme) makes optimum device allocation for officer safety unaffordable.

Kent (1601) ESMCP - Financial Implications Delays to ESN delivery - Costs will continue to escalate due to the continuing delays of ESMCP and the ESN in delivering a credible, comprehensive, and fit for purpose communications solution. This will lead to further cuts to services in order to fund the shortfall. This will impact on operational policing and potentially harm the force's reputation.

In addition to the decision to remove the strategic risks, both Forces have proposed an Airwave devices refresh. This decision has been made in light of the delay of moving to the new ESN for implementation in 2024/25, in order to maintain continuity of communications and officer safety. We have therefore considered this arrangement where necessary, in addition to the removal of the risks as part of our review.

Conclusion

Overall, we found that discussions (numerous) and approvals to remove the risks from both Risk Registers were adequately documented and updates on the national programme were available and shared amongst those concerned and the revised governance structure following the decision to pause the national programme. This has helped to ensure an appropriate level of continuity is in place and could be maintained.

We also considered the interim proposal to refresh Airwave devices until the national programme recommences. We found that costs had been considered including margins for inflation, a detailed business case has been prepared ready for presentation to the ESMCP Board and the ESMCP Board had been notified of the revised options for approval. As such, we have concluded that adequate controls were in place, were well designed and have been complied with and we have not identified any control weaknesses during our review.

Internal audit opinion:

Taking account of the issues identified, the Kent Police and Crime Commissioner, Essex Police, Fire and Crime Commissioner and the Chief Constables of Kent and Essex Police can take substantial assurance that the controls upon which the organisation relies to manage the identified risk(s) are suitably designed, consistently applied, and operating effectively.

**Key findings**

We noted the following controls to be adequately designed and operating effectively:

**Financial Modelling**

Following the pause to the National Programme, a financial modelling exercise was undertaken by the Forces to identify the costs for refreshing current Airwave devices as an interim requirement. We reviewed the Airwave Radio Refresh Options paper prepared by the Mobile Communications Manager in August 2022 and confirmed that it provided a breakdown of the options available to refresh handheld and vehicle radio devices. We noted that the paper included the number of devices required, associated costs per device and included forecast indexation considerations which appeared reasonable.

We also reviewed the Business as Usual (BAU) costs including actuals for prior years, forecasts, and the proposed budget for 2023/24. The Programme Director informed us that as the National Programme had paused and any future provisions identified had been removed from the financial plans in the interim. We were further informed that should provisions for inherent costs of the ESMCP be required in the future, the decision to go through a business case process will be the remit of the regional programmes.

At the time of our review, the decision to disband the ESMCP Board had been made and we were informed that this will be reformed when the national programme notifies all key contacts from the relevant Forces.

**Airwave Devices Refresh**

Where the Force makes in-house investments, these are required to be presented to the Digital Transformation Oversight Board (DTOB). We reviewed the meeting minutes from August 2022 for the DTOB and confirmed through review that the need to consider an Airwave devices refresh was documented in light of the national programme delays.

We reviewed the Airwave Radio Refresh Options paper from August 2022 presented to the ESMCP Board for oversight. We confirmed that the paper provided high level costings for replacing the Airwave radios in Kent and Essex and highlighted the pros and cons for refreshing devices in Q3 2022/23 versus 2024/25. We confirmed that it was recommended within the paper to choose to refresh handheld and vehicle radios in 2024/25.



Airwave Business Case

We reviewed the Strategic Outline Case for the Airwaves device refresh drafted by the Mobile Communications Manager in September 2022 for presentation to the DTOB. We were informed by the Chief Information Officer that this paper will be formally presented ahead of the August 2023 budget setting and had not yet been presented at the time of our review as it relates to 2024/25 spend. The DTOB were previously notified that Airwave arrangements would need to be considered in light of the national programme changes which we confirmed through review of the meeting minutes dated August 2022.

Through review of the Strategic Outline Case, we found it comprehensively outlined the summary of costs, income, benefits, risks, constraints, and dependencies. We also noted that the business case indicated that the £2m requested for Kent and £4m requested for Essex had already been budgeted for in the medium-term financial plan (we confirmed an extract was included in the Strategic Outline Case) as part of the subject to approval of capital projects under the ESMCP. We noted through review of the Strategic Outline Case that the £2m requested for Kent was because the refresh of devices was only for a partial refresh and the £4m for Essex was a full refresh of handheld devices.

We also confirmed through review of the ESMCP Board meeting minutes from October 2022 that the Airwaves Device Refresh proposal had been presented.



7Forces Programme Updates

In addition to updates shared within the governance structure, updates on the ESMCP are emailed to all relevant individuals involved within the region on a quarterly basis, or as and when an important update needs to be communicated. We reviewed the update summaries and associated emails issued for June and November 2022 by the 7Forces ESMCP Director and confirmed that Programme updates had been provided within the 7Forces.

Through review of email correspondence, we confirmed that key individuals involved in the Programme had received the updates including the Programme Director and the Director of Support Services and Senior Responsible Officer (SRO) for the ESMCP for Kent and Essex.



National Programme Updates

We reviewed an update from March 2022 to all ESN Strategic Shareholders as part of Chief Constable's Council, shared by the ESMCP Senior Responsible Officer from the Home Office which provided an overview of the changes underway regarding the current EE and Motorola Solutions. We reviewed a further update on ESMCP and its future approach, from September 2022 which we noted was prepared by the National Police Chief Council's ESMCP Lead, through review we confirmed it included actions for dissemination within the governance structure.



Removal of Risks Approval

Risk decisions relating to the ESMCP are presented and discussed at both the ESMCP Board and the separate Risk Star Chambers for both Forces. Once approval has been given by the separate Risk Star Chambers this is documented within each of the Risk Registers. We reviewed the ESMCP Board agenda for October 2022 and noted that it included a paper on the Future Governance Approach and Strategic Risk Discussion, to be presented by the Programme Director. Within the agenda item, we noted extracts from both Force's Risk Registers had been attached referring to the Strategic Risks 2116 (Essex) and 1601 (Kent) relating to the financial uncertainty of the ESMCP.

We reviewed the meeting minutes and record of actions and decisions from October 2022 and confirmed that it stated that the Airwave devices refresh had been factored into the medium-term financial statement. It had been noted within the meeting minutes that the ESMCP investment forecast had been removed from the medium-term financial plans and replaced with enough financial resources to support the Airwave devices technical refresh recommended for 2024/25. We have not however, reviewed the financial plans to confirm this as we were informed that they had not yet been approved at the time of our review and were not due to until 2023/24.

We confirmed that the October 2022 meeting minutes documented that as the ESMCP has been removed from the medium term financial plan it had been suggested to the ESMCP Board that these risks are now closed. We confirmed that approval of this had been noted by the ESMCP Board and recommended for closure to each of the Risk Star Chambers.



Risk Star Chamber

For Essex, we reviewed the paper presented by the Programme Director to the Essex Risk Star Chamber in October 2022 and confirmed that it included an update on the Strategic Risk 2116 - Financial Implications Delays to ESMCP. We confirmed that the risk had been recommended for closure noting that due to the significant delays to the National Programme there was a need to reduce resources. The paper documented that the ESMCP Board had agreed to pause the Programme and remove the forecast from the medium-term financial plan, noting the forecast had instead been replaced by a technical refresh proposal for the existing Airwave equipment which will remain in place for a longer period.

For Kent, the Programme Director advised us that the Risk Star Chamber verbally approved the removal of Strategic Risk 1601 during the meeting which followed the ESMCP Board meeting. We were informed that the Risk Register was subsequently updated confirming approval had been given. We were informed by both the Programme Director and ESMCP SRO for Kent and Essex that the Risk Star Chambers do not minute meetings and approvals are always obtained verbally.

We reviewed the Risk Registers for both Forces and confirmed that both risks, 2116 (Essex) and 1601 (Kent) had been updated to reflect the approvals given to remove the risks by the Risk Star Chambers during November 2022.



ICCS/ ESN Governance Board and ESMCP Board

We reviewed the Terms of Reference (ToR) for the Integrated Communications and Control Systems (ICCS)/ESN Governance Board dated February 2022. Through review we noted that the ToR spans across the whole ICCS project and includes the governance arrangements for functional, project delivery and programme delivery of the ESMCP (please see structure chart in appendix A of this report). As well as the structure we confirmed the ToR included the objectives of the Board, membership, inputs, outputs, and frequency of meetings.

We reviewed the meeting minutes from July 2022 for the Board and noted that key individuals had been recorded as in attendance including the Programme Director and representatives from Finance and IT. We confirmed that the Chair provided an update on the National Programme and whether teams should remain in place whilst they awaited progress at a national level. We confirmed that there were also updates on workstream progress, financials, and a summary of actions.

We noted through review that the ESMCP Board meeting minutes from October 2022 referred to the decision to scale back resources following the pause to the National Programme. We noted that the meeting minutes documented the decision to maintain the regional governance and infrastructure via a semi-annual get together to discuss ESMCP work. We noted that this would be a more informal arrangement ensuring a proper flow of information from national to region and into forces demonstrating that the governance structure would still be in place in a revised format to ensure a level of continuity was maintained. We confirmed that this was supported by the ESMCP Board, and a decision was noted for the ESMCP Board to be temporarily disbanded.

2. DETAILED FINDINGS AND ACTIONS

No control weaknesses were identified requiring further management action.

APPENDIX A: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following area:

Objective of the area under review	Risks relevant to the scope of the review	Risk Source
Removing the Emergency Services Mobile Communications Programme (ESMCP) risk from the risk registers of both Forces is the appropriate treatment as processes and controls are in place to monitor it.	Financial Implications Delays to ESMCP	Force Strategic Risk Register 2116 (Essex) 1601 (Kent)

ESMCP was formed nationally in 2011 with the objective of replacing Airwave. The original forecast deployment date was September 2017, however, there have been several national delays which have since moved the roll out completion date to December 2022 with contract extension for EE and Motorola to December 2024. As a result of this, the Forces have taken the view to remove the strategic risk from their risk registers and remove the provisions from the Capital Programme for costs which had been set aside for it. The risks will then be monitored and managed on a local level until the deployment date nears in the future. The most recent update is that the Government endeavour for Airwave to be switched off by the end of 2026.

When planning the audit, the following Risks for consideration and limitations were agreed:

- In light of the national project delays, that the Force(s) have made a provision in the Capital Programme, which has been based on reasonable assumptions, for business-as-usual costs such as Airwave refresh of devices and longevity planning, and the value is traceable through source data;
- An approval process has been followed for the Capital Programme which includes the updated bid for business-as-usual costs of the current arrangement with Motorola, including approval by the PFCC/PCC;
- The Forces have processes in place for keeping themselves informed of any future changes/updates to the national programme and how they ensure the information is shared with appropriate individuals involved in the programme;
- Roles and responsibilities have been assigned for relevant individuals at a local and strategic level to manage risks and keep abreast of any developments with the national programme;
- The Forces have considered risks and benefits and have articulated and discussed them as part of the decision to remove the risk from the risk register;
- Processes have been put in place to manage the risks of the programme at a local level including ensuring provisions are created in the future for inherent costs of the ESMCP programme, including whether a project level risk register has been developed and has processes in place for being managed/overseen;

- Approval has been sought via the Risk Star Chamber from both Forces to remove the risk from the risk registers at a strategic level;
- How the Force has kept the PFCC (Essex) and PCC (Kent) abreast of updates/changes to the risk including the financial impact of it. Testing will include confirming whether the PFCC/PCC have approved the removal of the risk where appropriate and the treatment of the costs allocated to it; and
- The reporting arrangements within the Force(s) (including 7Force arrangements), including whether there is an appropriate forum to discuss ESMCP matters and whether regular updates are provided to that forum and whether the content of the update is appropriate.

Limitations to the scope of the audit assignment:

- We have not traced the revised provision back to source data noting the provision has been removed from the financial plans.
- The scope of this work is limited to those areas examined and reported upon in the areas for consideration in the context of the objectives set out for this review. It should not, therefore, be considered as a comprehensive review of all aspects of non-compliance that may exist now or in the future;
- Any testing undertaken as part of this audit will be compliance based and sample testing only;
- We will not confirm that the provisions included in the Capital Programme are appropriate, only that they have been assessed and approved;
- We will not confirm that the removal of the risk from the strategic risk register is the best option, only whether steps have been taken to assess the situation and approve it;
- The results of our work are reliant on the quality and completeness of the information provided to us; and
- Our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.
- To minimise the risk of data loss and to ensure data security of the information provided, we remind you that we only require the specific information requested. In instances where excess information is provided, this will be deleted, and the client sponsor will be informed.

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE

Creditor Payments

Internal audit report 4.22/23

AC FINAL

23 February 2023

This report is solely for the use of the persons to whom it is addressed. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY – CREDITOR PAYMENTS

Why we completed this audit

An audit of Creditor Payments was undertaken as part of the 2022/23 approved internal audit plan. The objective of the review was to allow management, the Force and the Police, Fire and Crime Commissioner for Essex to take assurance around the controls in place to ensure payments for purchases of goods and services are made correctly.

The Finance Team within Business Services, managed by the Finance Business Services Manager, is responsible for the day-to-day management of the creditor payments process. This includes generating purchase orders, receipting goods received, generating payments for goods and services, and processing payment runs as well as vendor amendments. The Finance Team works alongside the Corporate Finance Team, Budget Holders and Purchasing Team who are responsible for raising requisitions and setting up new vendors.

BACS payment runs are processed on a weekly basis with CHAPS and cheque payment runs processed on an ad-hoc basis. The Force uses SAP for the administration and management of the creditors payments processes.

We carried out a number of data analytics tests as part of our review (details are included in Appendix A of this report) to determine whether there had been any potential duplicate payments made to vendors, invoices paid to vendors not on the vendors Masterfile, and potential duplicate vendor accounts within SAP. We also considered whether any efficiencies in process could be achieved as part of our review. Between April and November 2022, 13,028 invoices were paid with a total value of £76.6m.

Conclusion

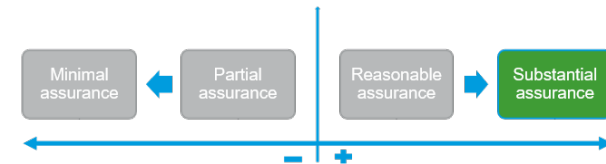
Overall, we found the control framework to be well designed and operating effectively for the management of creditor payments in line with documented procedures. We confirmed that payment runs had been prepared, checked, and approved accordingly and sample checking had been undertaken and recorded with payment runs reconciled to the bank statements. We noted that new vendors and vendor amendments had been processed, verified, and recorded with supporting evidence retained and we also found that an adequate segregation of duties had been applied.

We confirmed that budgetary reporting of non-pay expenditure, including variances, was comprehensive and had been reported and presented within the governance structure to the Chief Officers Group (COG); and a reconciliation of creditors and the general ledger had been completed on a monthly basis.

We found SAP user access had been sufficiently removed for leavers although we noted a minor weakness in relation to the timeliness of the removal process.

Internal audit opinion:

Taking account of the issues identified, the Police, Fire and Crime Commissioner for Essex and Essex Police can take substantial assurance that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and effective.



Key findings

We noted the following controls to be adequately designed and operating effectively:



Vendor Payments

We reviewed a sample of 30 vendor payments which consisted of 20 which were supported by a purchase order and 10 which were raised as non-purchase order transactions between April and November 2022. Through review of the requisition raised, purchase order (where applicable), goods received note, invoice, and supporting emails and SAP screenshots we confirmed that all payments had been processed in accordance with procedure and had been appropriately approved with segregation of duties applied.

We confirmed that goods received notes, invoices and purchase orders aligned and were matched prior to payments being made.

For those purchases without a purchase order, we confirmed that the vendor was noted on the Exceptions List for each of the 10 transactions as not requiring a purchase order for payment.



BACS Payment Runs

Through review of supporting emails and system generated reports for a sample of 10 BACS payment runs from April to November 2022, we confirmed that the payment runs had been prepared, checked, and approved for payment in accordance with the procedure and a segregation of duties had been maintained during each of the processing stages.

We confirmed that payments over £100k had been checked and recorded within a Business Services Manager (BSM) Checklist and a sample of 5 per cent of invoices had also been checked and recorded. We also reviewed the associated email communications and confirmed that sundry items had been listed and checked and the corresponding bank statements reconciled to all of the payment runs reviewed.



CHAPS and Cheque Payment Runs

We reviewed a sample of 10 CHAPS and 10 cheque payment runs from April to November 2022. Through review of supporting emails and system generated reports we confirmed that the payment runs had been prepared, checked, and approved for payment in accordance with procedures and a segregation of duties had been maintained during each of the processing stages.

Through review of the completed BSM Checklist for each payment run reviewed, we confirmed that adequate checks had been marked as having been undertaken by the Finance Business Services Manager.



New Vendors

The Force utilises E15 forms to initiate the setup of new vendors on SAP. The Procurement Department are responsible for performing due diligence checks to confirm vendors are genuine. Once E15 forms have been populated by the Procurement Department, they are issued to the Purchasing Team whereby E16 Forms are sent to the new vendors for completion before being input into the financial system SAP.

Through review of SAP screenshots, email correspondence and completed E15 and E16 forms, which demonstrated variation checks had been undertaken, we confirmed for a sample of 20 new vendors requested between April and November 2022, that all vendors had been set up as required. We also confirmed that an appropriate segregation of duties had been applied during the set up and checking process in line with procedures.



Vendor Amendments

We were informed by the Assistant Business Services Manager – Finance that telephone and email address amendments are only recorded as checked within the Vendor Amendments Spreadsheet. Vendor amendments are only confirmed in SAP by a second individual within the team if the bank details have been amended and as this is an SAP functionality it cannot be amended. However, we were informed that a second member of the team will always check that the amendment has been carried out correctly and this is recorded within the Vendor Amendments Spreadsheet.

Through review of SAP screenshots, the Vendor Amendments Spreadsheet maintained by the team and supporting evidence including invoices and letter headed paper from vendors, all checks for a sample of 20 vendor amendments had been completed in line with expectation and a segregation of duties had been applied.

We reviewed the Vendor Amendments Spreadsheet and noted that 10 per cent or more of checks had been marked as undertaken by a supervisor for all months between April and November 2022.



SAP Access for Leavers

We reviewed a report of all leavers between 1 April and 31 October 2022 provided by the HR Department which we noted included 469 individuals made up of police officers, staff and special constables. We reconciled each unique force ID within the leavers report to screenshots taken from the SAP finance system as at 24 November 2022. We confirmed that the screenshots included all individuals with various SAP access rights including superusers, input and enquiry users. We found that no leavers noted within the leavers report still had SAP access at the date the screenshots were taken.



Budgetary Reporting of Non-Pay

The Management Accounting Team reviews the budget on a monthly basis and produces a report which includes reporting on non-pay expenditure (which includes creditors) and this is presented to COG and the Police Chief's Council (PCC).

We reviewed the Monthly Financial Monitoring Review agendas, meeting notes and documented actions dated 1 and 29 September and 27 October 2022 and confirmed that budget monitoring, reserves, contingencies, forecasting and variances had been discussed. In addition, we reviewed the Financial Monitoring Reports presented to the COG in September, October, and November 2022 and to the PCC for the same months. We confirmed through review of corresponding emails that the Financial Monitoring Reports had been approved by the COG for sharing with the PCC.



Reconciliations

The creditors ledger is an integral part of SAP Financials and the Finance Team advised that the system does not allow for unreconciled balances to the value shown within short term creditors on the Balance Sheet. Through walkthrough of the system, we observed that the balancing of the ledger was automated. However, reconciliations are still prepared and checked on a monthly basis.

We reviewed the reconciliation of General Ledger to Creditors Ledger statements prepared for July, August and September 2022 and confirmed that all totals balanced with no differences noted. We also confirmed that clear segregation of duties had been applied between the preparer and reviewer of the reconciliations.



Procedure Notes

We reviewed the following procedure notes:

- Daily Vendor Checks (updated 18 May 2022).
- How to create a purchase order (updated (updated 3 November 2021).
- How to GRN (updated 10 May 2022).
- How to set up a new vendor (updated 23 February 2022).
- Vendor Amendments (updated 3 November 2021).

We confirmed that three of the five procedures had been reviewed and updated within the last year noting that they are reviewed and updated on a yearly basis. Whilst we noted that two of the procedure documents had passed their review dates; we were informed by the Finance Business Services Manager that this was due to a lack of resource within the team and due to the fact that in practice none of the processes had changed and were still therefore up to date and in line with current practice. We have therefore not agreed a management action in this regard.

We also reviewed a screenshot which we were informed depicts the location where all procedure notes are retained in which the whole business services team has access to.



Data Analytics

We conducted data analytics testing and sample testing to review potential:

- Duplicate vendor invoices based on invoice number, vendor ID, invoice amount and document date;
- Invoice transactions for which there was no corresponding vendor ID in the Vendor Master List; and
- Duplicate vendor accounts based on the vendor address.

We noted no exceptions for the samples selected. Further details can be found within Appendix A of this report.

We also agreed one low priority management action which is detailed in section 2 below.

APPENDIX C: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following area:

Objective of the area under review

To ensure payment for purchases of goods and services is made correctly.

When planning the audit, the following areas were considered as part of the review:

- Payments to suppliers – requisitions are authorised, Goods Received Notes registered, invoices matched to Purchase Orders, differences between invoice and Purchase Order over given level referred back to authoriser, workflow trail of users responsible at each stage, controls over duplicate payments.
- Payment runs including BACS, CHAPS, and cheques - reviewed for exceptions, agree back to bank statements, and are authorised.
- Suppliers (including Sundry Creditors) – there is separation of duties between supplier changes including changes to bank details and payment processing, changes supported by valid documentation and audit trail including independent verification of any supplier changes.
- SAP user access – user entitlements and links to budgets appropriately authorised and supported.
- Budgetary reporting of non-pay – appropriate reports are produced regularly and reviewed to ensure that non pay expenditure variances against budget are identified and investigated.
- Reconciliation of the Creditors system to the General Ledger – timely, documented, differences investigated and cleared.
- Procedure notes - appropriate current procedure notes are available to staff and subject to regular review.
- Where appropriate, our work will incorporate the use of data analytics using the IDEA software package. This will include key tests including but not limited to:
 - A duplicate payment test to identify if any duplicate payments have been made to suppliers;
 - A duplicate suppliers test to identify if any duplicate suppliers exist in the system;
 - A periodic graph test to review accounts payable activity over time to identify any unusual patterns in invoicing activity;
 - A stratification test of invoices paid to identify any unusual characteristics in the spread of the data; and

- We will identify any invoices to supplier not on the supplier Masterfile and select a sample for further investigation; and
- We will use anomaly detection techniques to identify outliers in accounts payable transactions to inform sample testing.

Limitations to the scope of the audit assignment:

- We have not undertaken the following data analytics:
 - Benfords Law testing to identify apparent non-random invoice values, which could be indicators of errors, fraud, or of legitimate characteristics of the accounts payable process; and
 - A test to ascertain whether old invoices remain on the system marked as unpaid.
- We will not comment on whether the organisation achieves value for money for its purchases.
- This review focuses on the identification and payment of creditors. As such the audit will not include consideration of whether tenders and quotations have been undertaken in accordance with Contract Standing Orders.
- The audit will cover data relevant to the current financial year.
- We will not consider the adequacy of goods or services received and appropriateness of these.
- Testing will be on a sample basis only.
- The results of our work are reliant on the quality and completeness of the information provided to us; and
- Our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE AND KENT POLICE AND CRIME COMMISSIONER AND KENT POLICE

Off Payroll Workers (IR35) Follow Up

Internal audit report 2.22/23

AC FINAL

6 February 2023

This report is solely for the use of the persons to whom it is addressed. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY – OFF PAYROLL WORKERS (IR35) FOLLOW UP

Background

As part of the approved Internal Audit Plan for 2022/23 we have undertaken a joint review to follow up progress made by Police, Fire and Crime Commissioner for Essex and Essex Police and Kent Police and Crime Commissioner and Kent Police to implement the previously agreed Off Payroll Workers (IR35) advisory recommendations whereby a number of significant weaknesses were originally identified .

The focus of this review was to provide assurance that the actions previously agreed, that have been marked by management as 'implemented' have been implemented.

The management actions considered in this review comprised of 11 high and four medium priority actions. The focus of this review was to allow management to take assurance that all high and medium priority actions previously agreed during these reviews which have been signed off as complete by the Chief Finance Officers from both Forces have been implemented. As such, we did not follow up one high and one medium priority management action (which had not been signed off) bringing the number of reviewed actions to 13 in total.

Conclusion

Taking account of the issues identified in the remainder of the report and in line with our definitions set out in Appendix A, in our opinion the Police, Fire and Crime Commissioner for Essex and Essex Police and Kent Police and Crime Commissioner and Kent Police have demonstrated **good progress** in implementing agreed management actions.

We confirmed that of the 13 management actions followed up, 12 had been implemented and one had been superseded.

Progress on actions

The following table includes details of the status of each management action:

Implementation status by review	Number of actions agreed	Status of management actions				Completed or superseded (1) + (4)
		Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Superseded (4)	
Off Payroll Workers (3.21/22)	13	12	0	0	1	13
Total	13	12	0	0	1	13

Implementation status by management action priority	Number of actions agreed	Status of management actions				Completed or superseded (1) + (4)
		Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Superseded (4)	
Medium	3	3	0	0	0	3
High	10	9	0	0	1	10
Totals	13	12	0	0	1	13

APPENDIX A: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The internal audit assignment has been scoped to provide assurance on how the Police, Fire and Crime Commissioners for Essex and Kent, and Essex and Kent Police manage the following area(s):

Objective of the area under review

Previously agreed management actions to improve the control framework are completed.

Taking a risk-based approach, we will assess the implementation of all management actions agreed during the advisory Off Payroll Workers (3.21.22) review. We will follow up all actions which have been signed off as complete by both Chief Finance Officers from both Forces focusing on sample testing for new recruits since April 2022.

Staff members responsible for the implementation of management actions will be interviewed to determine the current status of each point.

Audit sample testing will be completed, where appropriate, to assess the level of compliance with this status and the controls in place.

As a result of regulatory changes due to remove the requirement for employers to be responsible for contractors' tax obligations in April 2023, we will seek to identify controls that have been put in place by management which are effective and considered to be useful to remain after the changes.

Limitations to the scope of the audit assignment:

- The scope of this work is limited to those areas examined and reported upon in the areas for consideration in the context of the objectives set out for this review. It should not, therefore, be considered as a comprehensive review of all aspects of non-compliance that may exist now or in the future;
- Any testing undertaken as part of this audit will be compliance based and sample testing only;
- The results of our work are reliant on the quality and completeness of the information provided to us; and
- Our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE

Follow Up 2022/23 (2021/22 Partial Assurance Opinions)

Internal audit report 2.22/23

AC FINAL

9 February 2023

This report is solely for the use of the persons to whom it is addressed. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY – FOLLOW UP 2022/23 (2021/22 PARTIAL ASSURANCE OPINIONS)

Background

As part of the approved internal audit plan for 2022/23 we have undertaken a review to follow up progress made by the Police, Fire and Crime Commissioner for Essex and Essex Police to implement previously agreed management actions. The audits considered as part of this review were as follows, both of which were provided with a partial assurance opinion during 2021/22:

- Pensions and Ill Health Retirement (Joint with Kent) (4.21.22)
- Victims Code - Resolution Centre and Control Room (13.21.22)

The 13 management actions considered in this review comprised of one high, three medium and nine low priority actions, all of which had been signed off by the CFO (from both Forces for joint reviews) and had been marked as implemented on the Force tracker. The focus of this review was to allow management to take assurance that the previously agreed management actions have been implemented.

Conclusion

Taking account of the issues identified in the remainder of the report and in line with our definitions set out in Appendix A, in our opinion the Police, Fire and Crime Commissioner for Essex and Essex Police has demonstrated **reasonable progress** in implementing agreed management actions.

We found that of the 13 management actions followed up, we were able to confirm that nine low priority management actions and one high priority action had been implemented.

We found that the implementation of two medium priority actions were ongoing. In the remaining case, we noted one medium priority management action as having not yet been implemented as we were not provided with sufficient evidence to complete our testing.

Progress on actions

The following table includes details of the status of each management action:

Table 1 - Implementation status by review

	Number of actions agreed	Status of management actions				Completed or superseded (1) + (4)
		Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Superseded (4)	
Pensions and Ill Health Retirement (Joint) (4.21/22)	3	3	0	0	0	3
Victims Code- Resolution Centre and Control Room (13.21.22)	10	7	2	1	0	7
Total	13	10	2	1	0	10

Table 2 - Implementation status by action priority

Implementation status by management action priority	Number of actions agreed	Status of management actions				
		Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Superseded (4)	Completed or superseded (1) + (4)
Low	9	9	0	0	0	9
Medium	3	0	2	1	0	0
High	1	1	0	0	0	1
Totals	13	10	2	1	0	10



2 FINDINGS AND MANAGEMENT ACTIONS

Status	Detail
1	The entire action has been fully implemented.
2	The action has been partly though not yet fully implemented.
3	The action has not been implemented.
4	The action has been superseded and is no longer applicable.
5	The action is not yet due.

Victims Code- Resolution Centre and Control Room (13.21.22)

Original management action / priority The Force will endeavour to provide Victims Letters to all victims within a timely manner. If there are extenuating circumstances for not sending a letter to victims, rationale for this decision will be formally recorded within the Athena system. **(Medium)**
Original management action 4

Audit finding / status We reviewed a sample of 10 cases handled by the Force's Resolution Centre between July and September 2022. We observed that in seven of the 10 cases, a victims letter had been sent to the victim in a timely manner (between one and four days since being reported). In the remaining three cases, we noted that a victims letter was not sent. In two of these three cases, we confirmed appropriate rationale was documented within Athena (likelihood of being intercepted and unable to contact the victim). In the remaining case, no rationale was provided within Athena to outline why a letter was not sent. There is a risk that the Force is failing to comply with the Victims Code guidance if rationale for the decision to not send victims letters is not recorded within Athena.

The action has been partly though not yet fully implemented.

Management Action 1	If there are extenuating circumstances for not sending a letter to victims, rationale for this decision will be formally recorded within the Athena system.	Responsible Owner: T/Detective Chief Inspector Nikki Metson Head of Resolution Centre	Date: 31 March 2023	Priority: Medium
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Victims Code- Resolution Centre and Control Room (13.21.22)

Original management action / priority The Force will ensure that supervisors complete checks on officer entries as required by Force guidance.
 In instances where 100 per cent compliance is not met, underperforming officers will be provided with additional training or remedial action will be taken, as deemed appropriate by the Force. **(Medium)**
Original management action 7

Audit finding / status We reviewed the Athena Check reports for June, July, and August 2022 and noted that it clearly outlined the checks completed by supervisors as a percentage of what is required of them. We noted that in 45 of 51 cases, supervisors checks were marked at 100 per cent. However, we did note six instances where below 100 per cent compliance was achieved.
 Despite this, we were not provided with evidence to show that action was being taken to remedy the instances which did not achieve 100 per cent compliance.
 There is a risk that the Force are not acting to remedy compliance below 100 per cent reported within Athena Check Reports which could prolong sub-optimal performance.
The action has been partly though not yet fully implemented.

Management Action 2	In instances where 100 per cent compliance (supervisor checks on officer entries) is not met, underperforming officers will be provided with additional training or remedial action will be taken, as deemed appropriate by the Force.	Responsible Owner: T/Detective Chief Inspector Nikki Metson Head of Resolution Centre	Date: 31 March 2023	Priority: Medium
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Victims Code- Resolution Centre and Control Room (13.21.22)

Original management action / priority The Force will ensure that Case Action Plans are completed for each victim incident, where relevant.
The Force will also issue guidance to officers on the importance of fully logging the rationale for decisions when not completing standard guidance documents, such as Victims Care Contracts. **(Medium)**
Original management action 8

Audit finding / status We were not provided with evidence to allow us to confirm whether Case Action Plans had been completed for each victim incident nor did we receive evidence outlining guidance issued to officers regarding the requirement to fully log the rationale for decisions made when standard guidance documents are not completed, such as Victims Care Contracts.
There is a risk that Case Action Plans are not being completed in line with protocol and that officers are not aware of the requirement to fully log the rationale for decisions when not completing standard guidance documents, such as Victims Care Contracts.
The action has not been implemented.

Management Action 3		Responsible Owner:	Date:	Priority:
The Force will ensure that Case Action Plans are completed for each victim incident, where relevant. The Force will also issue guidance to officers on the importance of fully logging the rationale for decisions when not completing standard guidance documents, such as Victims Care Contracts.		T/Detective Chief Inspector Nikki Metson Head of Resolution Centre	31 March 2023	Medium

APPENDIX A: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The internal audit assignment has been scoped to provide assurance on how the Police, Fire and Crime Commissioner for Essex and Essex Police manages the following area:

Objective of the area under review

Previously agreed management actions to improve the control framework are completed.

When planning the audit, the following areas for consideration and limitations were agreed:

Areas for consideration:

The review will assess the implementation of management actions marked as complete by the Chief Finance Officer and archived on the Kent Police Audit Recommendation Tracker for reviews which were provided with a partial assurance opinion during 2021/22.

We will follow up all high, medium and low priority actions which have been signed off as complete by the CFO (from both Kent and Essex for joint reviews) from the following audit reports:

- Pensions and Ill Health Retirement (Joint) (4.21.22) – three low priority actions (two medium actions not yet signed off);
- Victims Code – Resolution Centre and Control Room (13.21.22); and

Staff members responsible for the implementation of management actions will be interviewed to determine the current status of each point.

Audit sample testing will be completed, where appropriate, to assess the level of compliance with this status and the controls in place.

The following limitations apply to the scope of our work:

- We will only follow up the management actions arising from the reports listed above, as agreed with management prior to the commencement of this review.
- The results of our work are reliant on the quality and completeness of the information provided to us.
- In addition, our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.
- Due to GDPR concerns and the sensitive nature of the content, we have not retained any evidence (screenshots) of testing completed on areas of the Victims Code actions.

POLICE, FIRE AND CRIME COMMISSIONER FOR ESSEX AND ESSEX POLICE

Special Constabulary – Recruitment and Retention

Internal audit report 3.22/23

AC FINAL

9 February 2023

This report is solely for the use of the persons to whom it is addressed.

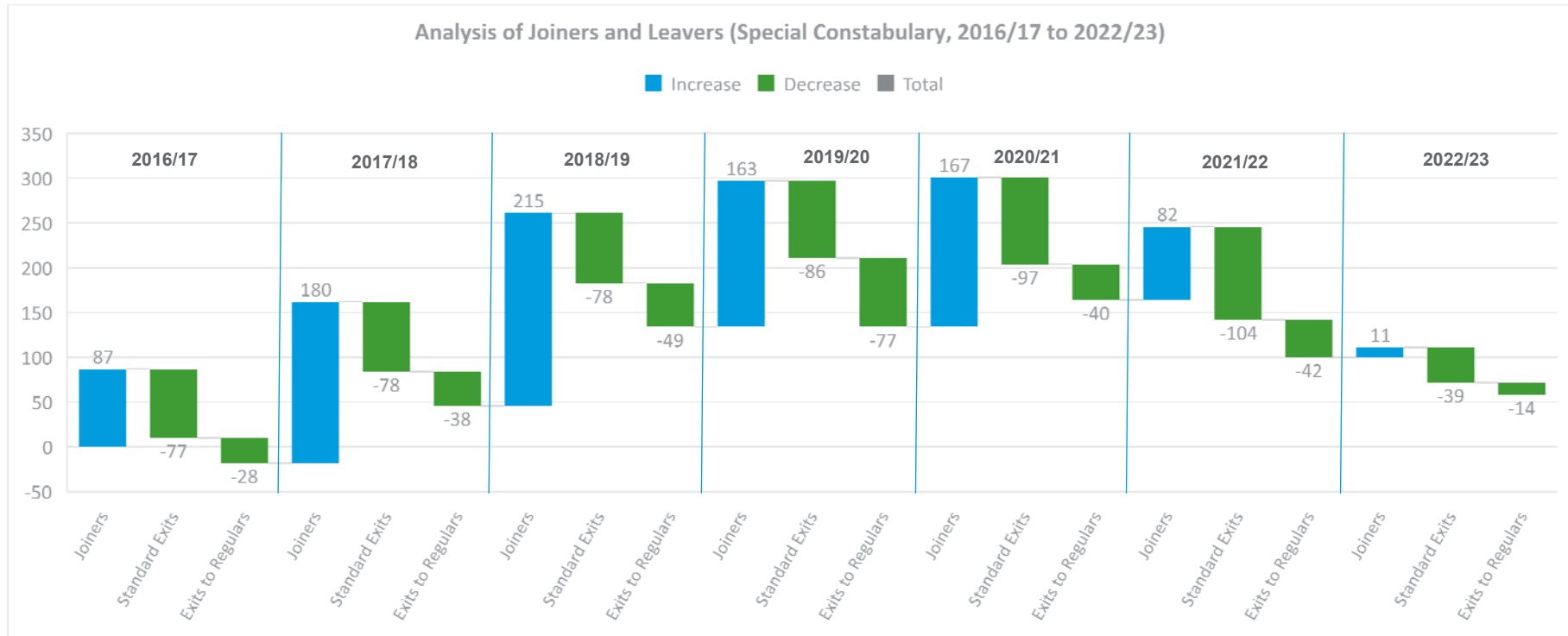
To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY – SPECIAL CONSTABULARY – RECRUITMENT AND RETENTION

Why we completed this audit

We undertook a review of Special Constabulary as part of the approved internal audit plan for 2022/23 for Police, Fire and Crime Commissioner for Essex and Essex Police. Special Constables are volunteer police officers who have the same police powers, uniforms and equipment as regular officers, but work on a voluntary basis. The objective of this audit was to assess the appropriateness of design and allow management to take assurance on the effectiveness of the execution of the systems and measures currently in place for recruitment and retention of the special constabulary.

As of the latest available data at the time of our review (July 2022), Special Constable average officer numbers were 444, down from an average of 520 in the previous year. In 2022/23, approximately 26 per cent of those who left the Special Constabulary had left to join the regular Force which is not viewed as a retention issue. There has been a noticeable drop in the number of joiners since a peak of 215 in 2018/19, which is notably partially attributable to the effects of the pandemic, and net joiners have been negative since. Between 2016/17 and 2022/23 to date there have been 58 net joiners overall. The following graph highlights new joiners and leavers (due to regular policing roles or exits) since 2016/17 through to 2022/23:



The Citizens in Policing (CIP) Command Team are in the process of exploring a range of measures to improve recruitment and retention, although the effects of the pandemic and the current cost of living crisis impose limitations. Measures for recruitment include media campaigns, attending outreach events, and the training of recruitment ambassadors. Measures for retention include the use of satisfaction surveys and regular engagement with officers.

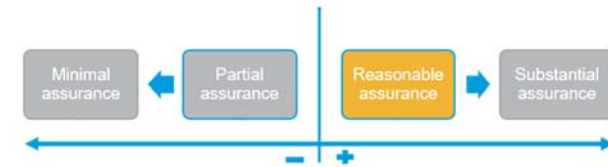
Conclusion

We confirmed that the Force has in place robust and adequate systems and processes to attract recruits through media campaigns and outreach events, although based on the chart above, it is not yet clear whether these have had a noticeable impact on recruitment. In addition, we confirmed that there are appropriate governance processes in place through the Special Constabulary Review Board (SCRB) to monitor the recruitment pipeline and identify issues with retention. We noted that there were recognition activities in place and effective communication of role progression opportunities to existing officers. We confirmed that exit interviews were conducted and analysed by ‘reasons for leaving’ to assist in retention efforts, and satisfaction workshops had been conducted to the same end.

However, we identified control weaknesses in relation to the timeliness and completion of pre-recruitment checks of special constabulary officers, the lack of evidence retained to confirm the communication of the Special Constabulary Handbook to new recruits, and for evidence of the completion of foundation training. We also found an issue with the lack of evidence to determine whether adequate engagement was taking place between Special Constable Line Managers and their officers.

Internal audit opinion:

Taking account of the issues identified, the Police, Fire and Crime Commissioner for Essex and Essex Police can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective. However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk.

**Key findings**

We identified the following weaknesses during our review resulting in four medium priority actions being agreed:

**Pre-recruitment Checks**

As the new recruit listing provided by the Force showed only seven new recruits in the current financial year (2022/23), we extended our sample testing and reviewed the full population of 14 new special constabulary recruits in the 12 months up to the audit date to confirm that all required checks had been performed in a timely manner prior to attestation of the officers. We identified six cases where the Business Services checklist indicated that the job-related fitness test had not been completed, and three where a face-to-face medical exam had not been completed. We were advised this was due to self-declarations and telephone exams utilised during the pandemic, and that officers should subsequently have completed the missing elements. However, in the absence of the tracker not being updated, we are unable to confirm this.

There is a risk that special constabulary officers have not completed the required tests and examinations, which could lead to operational issues and potentially performance of the role. We also found one case where the checklist had not been updated to confirm subsequent receipt of missing ID information from the officer, creating a risk that checklists are not accurate and cannot be fully relied on as assurance that appropriate pre-recruitment checks have been completed. In addition, in some cases there was a long lead time (up to 430 days) between sign-off of the checklist and the actual start date. This could lead to the risk that events in the interim may affect the recruitment decision. **(Medium)**

**Role Agreements**

Through discussion with the Citizens in Policing Commander, we were informed that once a volunteer has been accepted for a special constabulary role, an offer letter and documentation including the Special Constabulary Handbook is sent to the individual. The Handbook includes an agreement stating what is expected from each officer. However, we were advised at the time of audit that the process for sending the Handbook to new recruits had not been operating and recruits were not being provided with the Handbook as required.

There is therefore a risk that special constables are not made aware of, or are not held sufficiently accountable for, the expectations of their role. **(Medium)**



Foundation Training

Through review of a sample of the full population of 14 new recruits in the 12 months up to the audit date, we confirmed through inspection of the SAP system that 10 had completed their foundation training prior to attestation. In one further instance, we noted that training was partially completed, but this was not an issue as the officer had not yet been attested at the time of our review. In a second instance, we were informed that the training was not required as the individual was a transfer from the regular Force and would already have completed all required training. In the remaining two instances, we were advised training had been completed, but the SAP system had not been updated to reflect this. As this is the main source of evidence for training completion, we cannot confirm that these individuals, who were both attested, had received appropriate foundation training. There is a risk that these officers are not adequately prepared for duties. **(Medium)**



Engagement and Welfare

We confirmed through inspection of the Special Constabulary Performance Support Process that clear guidance was in place requiring Special Constable Line Managers to maintain regular, monthly contact with each member of staff. It was noted that contact may be informal but should give both the Line Manager and the Officer the chance to discuss any welfare or performance issues. It was noted that such contact should be recorded in Duty Sheet. However, at the time of our review, there was insufficient evidence to determine the extent to which such contact was occurring, and this was not being tracked to identify any lack of compliance with the guidance. There is a risk that performance or welfare issues are not being appropriately documented and potentially addressed. **(Medium)**

We also agreed five low priority management actions, which are detailed in section 2 below.

We noted the following controls to be adequately designed and operating effectively:



Media Campaigns and Promotional Material

We confirmed through inspection of several types of promotional material that there was an active recruitment campaign for special constabulary in place. This includes social media posts on Facebook, Instagram, and Twitter, the use of paid for advertisements, publication of a promotional flyer, and the Force website. We confirmed there was a clear timeline and plan in place for the campaign, managed and monitored by the Campaigns and Events Officer. We also confirmed through inspection of the Specials Campaign Matrix document that the Campaign and Events Officer was monitoring the performance of various promotional channels, including click-throughs, reach, video plays etc.



Reward and Recognition

Through discussion with the Citizens in Policing Commander, we were informed that there are a range of reward and recognitions activities in place in relation to the special constabulary. We confirmed through inspection of thank you letters to officers who have worked over 192 and 400 hours respectively, that a clear recognition process was in place for length of service.

We also confirmed robust evidence of reward and recognition communicated through the weekly Chief Constable's blog, as well as through social media channels such as Facebook and Twitter.



Opportunities

We confirmed through inspection of regular email updates from the Citizens in Policing Development Manager, announcements, and advertisements through DutySheet, Force vacancy emails, and advertisements for the Special Promotions Board that special constabulary officers were being made aware of opportunities for development and promotion through a suite of different channels.



Exit Interviews

We reviewed a sample of 10 leavers since April 2022 and sought to confirm that exit interviews had been conducted, with the outcomes recorded in the Duty Sheet system. We confirmed that in all 10 instances that there was evidence on the system that the exit interview had been conducted, and the reason for leaving had been recorded appropriately.

We noted through discussion with the CIP Commander that analysis of exit interview outcomes is reported as part of the PRSB Special Constabulary recruitment update. We confirmed through inspection of the last three reports (December 2021, March 2022 and December 2022) that each included a breakdown of the number of leavers and the reasons for leaving. As of December 2021, the main reason for leaving was to transfer to a regular police officer position, and this was not considered as a retention issue.



Performance and Resources Scrutiny Board (PRSB)

We reviewed the terms of reference for the PRSB, confirming they were up to date and appropriately approved. We confirmed they adequately set out the remit, meeting frequency, quorum, and membership of the group.

2. DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Pre-recruitment Checks		Assessment:		
Control	Prior to the formal attestation of a Special Constable, the Business Centre ensures all pre-employment checks are concluded. This includes vetting, a GP medical check and a job-related fitness test, references from a current employer, a written test, and a biometrics test.	Design	✓	
	Once all appropriate checks have been passed, the Business Centre provides a certificate (Form SC73) to the Specials Command certifying fitness to attest. No officer may be attested without this certification.	Compliance	×	
Findings / Implications	<p>We reviewed a sample of 14 new recruits in the 12 months up to the date of audit, to confirm that all required checks had been performed in a timely manner prior to on-boarding of the officers. We noted the following:</p> <ul style="list-style-type: none"> • in six cases, the checklist tracker indicated that the officer had not completed the required job-related fitness test; • in three cases, the checklist tracker indicated that the officer had not completed a face to face medical exam; and • in one case, the checklist tracker indicated only partial ID had been received. We were advised in this case that the missing element was the individual's NI number, and that this had since been received. However, as the tracker had not been updated, we do not have sufficient evidence to confirm this. <p>For both the fitness test and the medical exam exceptions, we were advised this was due to self-declarations being accepted and telephone exams being utilised during the pandemic, and that officers should subsequently have completed the missing elements since. However, in the absence of the tracker not being updated, there is a risk that these officers have not since completed the required tests and examinations, which could lead to operational issues with performance in the role.</p> <p>We also noted from inspection of the date of checklist sign-off in comparison to the start date of the officers that some were completed a significantly in advance of the start date, this included checklists signed off anywhere between 100 to 430 days before the start date.</p> <p>While we were advised that many of the checks performed often have a shelf-life of six to 12 months, we note in the case of the 430 day signoff that it was unclear from the checklist whether vetting had been renewed prior to recruitment. This creates a risk that any adverse events in the interim that would have affected the recruitment decision were not picked up.</p>			
Management Action 4	<p>The Specials recruitment team will ensure that all required checks are fully completed before certifying the individual for attestation.</p> <p>Where genuine exceptions are temporarily allowed, the checklist will be updated once any missing elements have been completed.</p>	Responsible Owner	Date:	Priority:
		Amanda Stock, Business Services Supervisor	31 March 2023	Medium

Role Agreements		Assessment:	
Control	As special constables are volunteers, there is no employment contract in place as such. However, an induction handbook is in place which clearly sets out the requirements and expectations for the role, and new special constables sign their agreement with the handbook electronically as part of the induction process.	Design	✓
		Compliance	×
Findings / Implications	<p>Through discussion with the Citizens in Policing Commander, we were informed that once a volunteer has been accepted for a Special Constabulary role, an offer letter and documentation including the Special Constabulary Handbook is sent to the individual. We confirmed through inspection of the Handbook that it includes an agreement stating what is expected from each officer. However, we were advised at the time of audit that the process for sending Handbooks to new recruits had not been operating and Handbooks were not being sent to Special Constables.</p> <p>There is a risk that Special Constables are not made aware of, or are not held sufficiently accountable for, the expectations of their role.</p>		
Management Action 5	The Force will ensure that offer documentation, including the Special Constabulary Handbook, is sent to all new Special Constables and that this is electronically signed to confirm receipt without exception.	Responsible Owner	Date:
		Sarah Wright, CIP Development Manager	28 February 2023
			Priority: Medium
Training		Assessment:	
Control	Training of new special constables is provided by Essex Police College, which is based on the first year of the Police Constable Degree Apprenticeship. Initial training provides theoretical knowledge and understanding of the practical skills and behaviour required for a new Special Constable to conduct a safe and lawful accompanied patrol. Initial training also includes defensive skills and medical training, as well as Job-Related Fitness Training (JRFT).	Design	✓
		Compliance	×
	The status of training for each Special Constable is recorded and monitored through the SAP system.		
Findings / Implications	<p>Through review of a sample of 14 new recruits, we sought to confirm that each had completed the required foundation training prior to attestation. We were unable to confirm this as the initial evidence provided for completion of training consisted of comment from Business Services that 12 out of 14 individuals in the sample had completed their training.</p> <p>We subsequently sought to confirm this through inspection of SAP system screenshots which we were able to confirm for 10 instances that training had been marked as complete on the system. In one further instance, training was partially completed, we were informed that this was not an issue as the officer had not yet been attested at the time of our review.</p>		

In a second instance, the training was not required as the individual was a transfer from the regular Force, who would already have received all required training as part of the regular role. In the final two instances, we were advised training had been completed, but the SAP system had not been updated to reflect this. As this is the main source of evidence for training completion, we cannot confirm that these individuals, who were both attested, had received appropriate foundation training.

In the absence of further evidence, there is a risk that special constabulary officers are not receiving the required training to perform their duties.

**Management
Action 6**

Adequate evidence will be retained in relation to completion of foundation training by new special constabulary recruits.

Responsible Owner

Chris Gliddon, Specials Training Manager

Date:

31 March 2023

Priority:

Medium

Engagement and Welfare

Assessment:

Control

The Force has a monthly SSMT (Special Superintendent Management Team) meeting attended by the Deputy Chief Officer, Superintendents, Citizens in Policing Commander, and Development Manager, where each of the superintendents runs through their local area in terms of what is and is not working in relation to the special constabulary.

Design

✓

Compliance

×

Special Superintendents also have regular one-to-one meetings with Special Sergeants, who then have a similar process in place with their Special Constables. This may be a purely verbal process or may take place via email exchanges. All such contact should be recorded on Duty Sheet.

**Findings /
Implications**

We confirmed through inspection of the Special Constabulary Performance Support Process that clear guidance was in place requiring Special Constable Line Managers to maintain regular, monthly contact with each member of staff. It was noted that contact may be informal but should give both the Line Manager and the Officer the chance to discuss any welfare or performance issues. It was noted that such contact should be recorded in Duty Sheet.

However, at the time of audit, we could not obtain the relevant Duty Sheet records, and there was insufficient evidence to determine the extent to which such contact was occurring, or that this was being tracked to identify any lack of compliance with the guidance.

There is therefore some risk that performance or welfare issues are not being appropriately addressed.

**Management
Action 7**

The CIP Team will monitor and analyse the level of contact between Line Managers and Officers to identify any areas where insufficient engagement is taking place.

Responsible Owner

Derek Hopkins, Deputy Chief Officer
Jenny Brouard, CIP Commander

Date:

31 March 2023

Priority:

Medium

APPENDIX A: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following risks:

Objective of the area under review	Risks relevant to the scope of the review	Risk Source
Recruitment and retention of special constables is managed effectively to attract and retain to fulfil establishment.	Unable to meet the Special Constabulary establishment target due to Force recruitment	Management risk 1196

When planning the audit, the following areas for consideration and limitations were agreed.

Our review will focus on the following areas

Recruitment

- Special constabulary posts are advertised in line with policy to ensure sufficient and effective reach to attract new recruits including campaigns and online advertisements. As part of this, we will review the recruitment levels since the campaign was launched to assess its effectiveness;
- Policies and procedures are in place, up to date and available to relevant staff for the recruitment and retention of special constables;
- Processes have been determined and governance mechanisms are in place to monitor and challenge the pipeline (the methodology used for recruitment tracking) from registration of interest through to recruitment;
- Relevant checks are undertaken on new recruits prior to offer of a position (vetting, medical requirements etc). We will undertake sample testing to confirm checks have been undertaken as required;
- Positions have been accepted including the receipt and retention of signed contracts (this includes confirming the key job specifications agreed);
- New starters training is in place for new special constables and records are retained to confirm completion of mandatory training; and
- KPIs are in place to monitor recruitment performance and KPIs are reported at and challenged and scrutinised by a relevant forum.

Retention

- Processes have been put in place, including 1:1 meetings and forums have been created to allow for issues/concerns/welfare to be discussed and reported as necessary;
- Praise and recognition incentives are in place to highlight good work and thanks specials for their contributions such as letters being sent, blog entries on share point and events being organised as a reward;
- Special constables are made aware of their options such as working in different teams, or working towards an employed post in the Force;
- The Force undertakes surveys and assessments to determine satisfaction levels and results are analysed as appropriate;
- An exit interview is undertaken for specials who have resigned from their position to determine reasons for leaving and results are analysed with actions put in place to address any problem areas identified; and
- KPIs are in place to monitor retention and KPIs are reported at and challenged and scrutinised by a relevant forum.
- We will use data analytics to analyse the average tenure for special constables using start date data for all specials still in post at the time of our review and provide this information to the Force.

The following limitations apply to the scope of our work:

- The scope of this work is limited to those areas examined and reported upon in the areas for consideration in the context of the objectives set out for this review. It should not, therefore, be considered as a comprehensive review of all aspects of non-compliance that may exist now or in the future;
- Our review is limited to that of the Special Constabulary;
- Any testing undertaken as part of this audit will be compliance based and sample testing only;
- We will not comment on whether the Force is meeting establishment or whether the campaign was a success or not;
- We will not determine the reasons for specials leaving, only whether analysis has been done to assess this;
- We will not comment on the appropriateness of any appointments made;
- We will not review the appointment, starting or payroll procedures or compliance with these;
- We will not provide an opinion on the performance of individual members of staff, or the training or qualifications of those involved in the recruitment process;
- The results of our work are reliant on the quality and completeness of the information provided to us; and
- Our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

For more information contact

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

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