

**Objective 1: Establishing principal statutory obligations and organisational objectives:**

Step 1 In support of objective 1 – mechanism established to identify principal statutory obligations						
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments
1. Responsibilities for statutory obligations are formally established	<ul style="list-style-type: none"> <li>Documents (e.g. constitution) recording individual officer and member responsibilities</li> </ul>	Chief Executive	Set out in legislation (e.g. PRSRA 2011), Regulations (e.g. Code of Financial Management) Financial Regulations, Scheme of Delegation, Standing Orders, terms of reference and Force Policies & Procedures. Officers and staff operate within the code of conduct and Code of Ethics. Responsibilities are also set out in role profiles.	+	CFO/Head of HR	Set out in legislation (e.g. PRSRA 2011), Regulations (e.g. Code of Financial Management) Financial Regulations, Scheme of Delegation, Standing Orders, terms of reference and Force Policies & Procedures. Officers and staff operate within the code of conduct and Code of Ethics. Responsibilities are also set out in role profiles.
	<ul style="list-style-type: none"> <li>Minutes of delegations to officers and committees</li> </ul>	Chief Executive	Financial Regulations, Scheme of Delegation & Standing Orders. Decisions of OPCC recorded on Website.	+	ACPO Secretariat	Financial Regulations, Scheme of Delegation & Standing Orders. Decisions of OPCC recorded on Website.
	<ul style="list-style-type: none"> <li>Committee terms of reference</li> </ul>	Chief Executive	Held by Chief Executive	+	ACPO Secretariat	Held by ACPO Sec. Reviewed annually
	<ul style="list-style-type: none"> <li>Job descriptions of key officers</li> </ul>	Chief Executive	Held by Chief Executive	+	Head of HR	Held by line managers and on intranet
	<ul style="list-style-type: none"> <li>Structure charts</li> </ul>	Chief Executive	Held by Chief Executive	+	Head of HR	Within HR system
2. Record held of statutory obligations	<ul style="list-style-type: none"> <li>Accessible record of statutory obligations (e.g. central registry or legal library, intranet) and Force Policies and Procedures (FPP) library.</li> </ul>	Chief Executive	Police Reform & Social Responsibility Act 2011 and other legislation or guidance cited in the Act	+	Force Solicitor	Police Reform & Social Responsibility Act 2011 and other legislation or guidance cited in the Act. FPP Library and PNLD (Police National Legal Database) accessible via intranet
3. Effective procedures to identify, evaluate, communicate, implement, comply with and monitor legislative change exist and are used	<ul style="list-style-type: none"> <li>Established identification and implementation processes in place as part of Programme and Project Management system.</li> </ul>	Chief Executive	Membership of APCCs. Environmental scanning. Professional subscriptions and membership of national organisations supporting PCCs	+	ACPO Secretariat scan and delivery leads add to risk register. FPPs are owned by Corporate Communications	ACPO Secretariat Environmental Scanning identifies and communicates legislative change. Membership of various bodies such as ACPO/NPCC, Regional groups, professional functional groups etc highlights areas of change. An intranet news channel has been developed. Force Policies & Procedures are owned by a FPP Manager within Corporate Communications. Policy owners measure compliance. Risk Manager owns the Force Strategic Risk Register and co-ordinates input from other sources such as HMIC, management, external audit, internal audit, PSD, IPCC.
	<ul style="list-style-type: none"> <li>Risk resulting from Legislative changes is recognised and is listed on the corporate risk register.</li> </ul>	Chief Executive	Added as necessary	+		
	<ul style="list-style-type: none"> <li>Appointment of suitably qualified and experienced employees, selected against accurate and specific job descriptions and person specifications</li> </ul>	PCC/Chief Executive	All posts have role profiles that meet minimum criteria e.g. Chief Finance Officer role requirements	+	Head of HR	All posts have role profiles and person specifications. There is a comprehensive recruitment process for all officers. All police staff posts and specialist police officer posts have a formal selection process and appropriate vetting process. CFO is a qualified accountant.
	<ul style="list-style-type: none"> <li>Evidence of effective arrangements for internal and external communication (e.g. by review of communication of recent legislation to relevant officers and members)</li> </ul>	Head of Communications	Communications staff are in position to manage effective communications.	+	Corporate Communications	The Force has communication strategies, policies and procedures. The Force uses screen savers, payslips, E-learning, the force newspaper (Frontline). Intranet to promulgate new legislation. Force Policies and Procedures are regularly reviewed and changes notified in Force Routine Orders. The Chief Constable issues a weekly message that highlights significant issues such and has a rolling programme of roadshows.
	<ul style="list-style-type: none"> <li>Appropriate induction training has been given to specific post holders</li> </ul>	Chief Executive	All new employees have induction training	+	Head of Training	Student officer training delivered to all officers. All staff have induction training. Any essential skills for the post are trained immediately either in-house or by fully funded external courses. All employees complete mandatory e-learning. PDRs are held annually to ascertain the individual's performance, ability and any required training. The PDR process is being developed to link the individual to unit and force objectives more closely and allow ongoing personal development to be an integral part of the appraisal process. This will allow better management of the succession planning and organisational development. All training is presented to Training Prioritisation Steering Group quarterly, to approve, defer or not approve against the Force Control Strategy, abstraction and resources. This incorporates all legislative changes. Certain postholders must have relevant training e.g. area car driver. However, it is acknowledged that training for many posts can be ad hoc. There are current proposals to more closely align recruitment and training within one HR structure and with a direct reporting line. This will ensure joined up delivery of the right pe

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Awareness training tailored to job profiles has been provided</li> </ul>	Chief Executive	Staff are appointed ordinarily because of the skills they bring. The role profile reflects the requirements for relevant skills. Basic awareness training is given to ensure the role and priorities of the PCC are understood.	←	Head of Training	Force procedures, desktop procedures, E-learning, internal training courses, external courses, briefings, team meetings, website access, email access, membership of professional institutions, circulars from Govt Depts and ACPO help to keep staff informed. Training needs are covered in PDRs. Relevant professional training is not always available for some posts, particularly specialist posts. However, new legislation is subject of Training Needs Analysis and officers that need to be aware but are not directly affected by change are updated by means of mandatory e Learning. Where specialist professional training cannot be delivered in Force, significant budget is made available to cover this training need via external providers. Emerging priorities in training provision are caught through environmental scanning and considered at TSPG. These are delivered through a range of blended training activity.	←
	<ul style="list-style-type: none"> <li>Inspection of reports to members on implications of new legislation</li> </ul>	Chief Executive	There are no members but the PCC does brief the PCP on some issues of interest	→	ACPO/ ACPO Secretariat	Frontline Training now delivers enhanced Training provision for all officers. Leadership and Development Training will now be provided as a single work-stream that will provide for Business, Executive and Professional leadership training provision bespoke to role and rank	←
	<ul style="list-style-type: none"> <li>Evidence that assurance has been given to Chief Executive (or equivalent) that all relevant legislative changes have been reported and addressed</li> </ul>	Chief Executive	As Monitoring Officer, the Ch Exec provides this assurance to the PCC	→		All new legislation is subject of Training Needs Analysis and officers that need to be aware but are not directly affected by change are updated by means of mandatory e Learning. Frontline Training is now designed to meet a combination of forcewide and local performance needs. E-learning can be used in combination with other training methods or on its own.	←
4. Effective action is taken where areas of non-compliance are found in either mechanism or legislation	<ul style="list-style-type: none"> <li>Review of evidence to demonstrate that action has been taken to overcome identified areas of non-compliance, for example:                             <ul style="list-style-type: none"> <li>Internal /external audit reports to audit committee or equivalent;</li> <li>Monitoring reports on progress on delivering action plans in response to identified legal/statutory risks in risk register;</li> <li>Evidence of corrective action being taken in response to upheld complaints against the authority</li> </ul> </li> </ul>	Chief Executive		←	DCC, CFO, Head of HR	All issues are fed into a strategic assessment process to generate actions. The Terms of Reference of the JAC includes consideration of summaries of specific Internal Audit reports and to receive reports from External Audit, including the Annual Governance Report.	←
		Chief Executive	Audit report summaries are presented to the JAC			Audit reports are considered by the JAC. All recommendations are followed up to check whether they have been mitigated. Professional Standards Dept uses an organisational learning matrix (OLM) to ensure that lessons learnt from public complaints and misconduct investigations are disseminated and actioned at Force /Area level.	
		Chief Executive	A risk register is maintained. Action to mitigate risks is managed. Audit action points are monitored by the JAC.			Strategic risk registers are maintained. Recommendations and Areas for Improvement identified by HMIC are monitored by action owners . PSD conducts a strategic assessment every 6 months and bi-monthly TCG meetings drive the business and assess priorities.	
		Chief Executive	No upheld complaints to evidence.			Within the force all criminal cases and gross misconduct cases are referred to PSD for police officers and staff.. PSD manage and action items on the Organisational Learning Matrix. HR manage complaints against staff and employee tribunals. Some minor complaints may be managed through supervisors giving advice.	
<b>Step 2: In support of Objective 1 – Mechanism in place to establish organisational objectives (see footnote 5 at end)</b>							
Examples of assurance:	Evidenced by:			Direction	Lead	Comments	Direction
1. Consultation with stakeholders on priorities and objectives	<ul style="list-style-type: none"> <li>Results from internal and/or external consultation exercises have been analysed and published</li> </ul>	PCC/Chief Executive	The PCC undertakes internal and external consultation on an ongoing basis using web-based tools and meetings to gather consultation results. A facilitated event is also held to develop key issues such as priorities and council tax precept.	→	Ch Supt Intel & Tasking Directorate	The Force undertakes internal and external consultation on an ongoing basis using web-based tools, telephone surveys, meetings and roadshows to gather consultation results. The results are analysed and reported to the Force Performance Group to agree action to be taken.	←
2. The authority's priorities and organisational objectives have been agreed (taking into account feedback from consultation).	<ul style="list-style-type: none"> <li>Authority's approved policing plan takes account of all consultation and local and national priorities</li> </ul>	PCC/Chief Executive	The PCC has developed clear priorities after extensive consultation. These have been communicated in the Police & Crime Plan and at various meetings, are on the website and printed literature has been published.	→	Chief Constable	A vision, mission, values and commitments have been set after consultation, including consultation with the PCC on the Police and Crime Plan priorities.	→

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Priorities and objectives in strategic partnerships are aligned with corporate priorities and objectives</li> </ul>		All partnerships exist to work jointly to achieve shared objectives. All partnership objectives should be aligned with the corporate priorities and objectives, contained in the Police & Crime Plan. Care is taken to ensure that specific funding for specific activities does not divert resources from priorities.	+		All partnerships exist to work jointly to achieve shared objectives. All partnership objectives should be aligned with the corporate priorities and objectives. Care is taken to ensure that specific funding for specific activities does not divert resources from priorities.	+
3. Priorities and objectives are aligned to principal statutory obligations and relate to available funding	<ul style="list-style-type: none"> <li>Corporate priorities and objectives are clearly set out in the policing plan</li> </ul>	PCC/Chief Executive	Police and Crime Plan	+	Chief Constable	Police and Crime Plan and Performance Profile	+
	<ul style="list-style-type: none"> <li>Strategic plan takes account of annual budget and medium term financial plan</li> </ul>	Chief Executive	Police and Crime Plan and Medium Term Financial Strategy aligned	+	Chief Constable	Police and Crime Plan and Medium Term Financial Strategy aligned	+
	<ul style="list-style-type: none"> <li>Financial plans take account of strategic partnership contributions and income streams</li> </ul>	Chief Finance Officer	The medium and forward budget process takes account of partnership contributions and income.	+	CFO	The medium and forward budget process takes account of partnership contributions and income.	+
4. Objectives are reflected in departmental plans and are clearly matched with associated budgets	<ul style="list-style-type: none"> <li>Clear terms of reference are set for the preparation of departmental and/or service plans</li> </ul>	Chief Executive	Police and Crime Plan. The budget for the PCC is being split over priorities.	+	DCC	Clear performance targets and budgets are set for units within the Force. Performance is monitored at Force Performance Group and budgets monitored by Finance.	+
	<ul style="list-style-type: none"> <li>Departmental and/or service plans clearly reflect corporate objectives and match approved funding</li> </ul>	Chief Executive	Police and Crime Plan	+		As above	+
	<ul style="list-style-type: none"> <li>Annual reports are produced on the outcome of departmental and/or service plans</li> </ul>	Chief Executive	Police and Crime Plan	+		Reviewed at Force Performance Group	+
5. The authority's objectives are clearly communicated to staff and to all stakeholders, including partners.	<ul style="list-style-type: none"> <li>A communication strategy in respect of the corporate objectives has been developed, approved and implemented</li> </ul>	Chief Executive/Comms	A communication strategy does exist for the Police and Crime Plan. Leaflets have been published, meetings and presentations have been arranged. Information on website.	+	Corporate Communications	Communication Strategies published for PCC and the Force. Campaigns and events have taken place to convey objectives e.g. Chief's roadshow and weekly message. Website.	+
	<ul style="list-style-type: none"> <li>Evidence of consultation with stakeholders (e.g. public and internal surveys etc) and strategic partners on service provision against cost.</li> </ul>	Chief Executive/Comms	The PCC undertakes internal and external consultation on an ongoing basis using web-based tools and meetings to gather consultation results. A facilitated event is also held to develop key issues such as priorities and council tax precept.	+	Ch Supt Intel & Tasking Directorate	Public consultation, Independent Advisory Group, victims of crime survey, Safer Neighbourhood surveys, precept leaflet issued, FAQs on intranet, meeting with residents associations etc, staff survey.	+
	<ul style="list-style-type: none"> <li>Documented meetings across departments to discuss key objectives in corporate and departmental and/or service plans</li> </ul>	Chief Executive	Leadership Team	+	ACPO Secretariat	Boards have clear terms of reference that align to corporate objectives.	+
	<ul style="list-style-type: none"> <li>Corporate objectives and aims are set out in key documents (annual plans, Local Area Agreements etc) on the authority's website and intranet site</li> </ul>	Chief Executive	Police and Crime Plan on PCC website.	+	Head of Communications	Objectives and key documents are published on the intranet but they are not collected together and not easy to find on the internet.	↓
<b>Step 3: In support of objective 1 – Effective corporate governance arrangements are embedded within the authority</b>							
Examples of assurance:	Evidenced by:			Direction	Lead	Comments	Direction
1. Code of corporate governance established	<ul style="list-style-type: none"> <li>A Code of Corporate Governance in line with the CIPFA/SOLACE guidance relevant to the type of authority has been adopted by the authority.</li> </ul>	Chief Executive	Code of Corporate Governance to JAC and approved by PCC	+	CFO	Code of Corporate Governance to JAC and approved by CC	+
	<ul style="list-style-type: none"> <li>A communication strategy in relation to the Code has been developed, approved and implemented</li> </ul>		Published with JAC papers	+		Published with JAC papers	+
2. Review and monitoring arrangements in place	<ul style="list-style-type: none"> <li>The Code itself incorporates a review date and/or a system for continuous update in response to changed requirements</li> </ul>	Chief Executive	The Code will be reviewed at least annually by the JAC	+	CFO	The Code will be reviewed at least annually by the JAC	+
	<ul style="list-style-type: none"> <li>There are clear arrangements for continuously monitoring compliance with the Code e.g. reports on compliance are regularly submitted to the committee charged with corporate governance responsibility</li> </ul>	Chief Executive	Submission of Annual Governance Statement Audit plans and reports. Relevant reports from other agencies.	+	CFO	Submission of Annual Governance Statement Audit plans and reports. Relevant reports from other agencies.	+
	<ul style="list-style-type: none"> <li>An annual report on compliance with the Code of Corporate Governance is prepared and submitted to members</li> </ul>	Chief Executive	The JAC receives an annual report covering all assurance areas. This is supplemented by annual audit reports. In addition, progress reports are given on weak assurance areas and audit findings.	+	CFO	The JAC receives an annual report covering all assurance areas. This is supplemented by annual audit reports. In addition, progress reports are given on weak assurance areas and audit findings.	+
	<ul style="list-style-type: none"> <li>Internal/external audit reports on adequacy of corporate governance arrangements</li> </ul>		All relevant reports submitted to JAC to advise TCWG. Corporate Governance is an annual audit as part of the approved internal audit plan.	+		All relevant reports submitted to JAC to advise TCWG. Corporate Governance is an annual audit as part of the approved internal audit plan.	+
	<ul style="list-style-type: none"> <li>An action plan is prepared to address any significant identified weaknesses in complying with the Code and is continuously monitored by the authority or committee charged with corporate governance responsibility</li> </ul>		Action plans prepared by lead stakeholder and reported in the AGS	+		Action plans prepared by lead stakeholder and reported in the AGS	+

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
3. Committee charged with governance responsibilities	• Responsibility for overseeing corporate governance has been formally delegated to an appropriate committee	Chief Executive	Those Charged With Governance, Board and advice from JAC	←	CFO	Those Charged With Governance, Board and advice from JAC	←
	• Committee terms of reference clearly demonstrating responsibility for corporate governance issues have been approved by the authority	Chief Executive	Legislation puts responsibility with TCWG. Advised by JAC. Defined in terms of reference	←	CFO	Legislation puts responsibility with TCWG. Advised by JAC. Defined in terms of reference	←
	• Terms of reference are sufficiently comprehensive to ensure that all appropriate aspects of corporate governance are covered		Yes, based on CIPFA template and reviewed at least annually.	←		Yes, based on CIPFA template and reviewed at least annually.	←
	• Agendas and minutes from the committee charged with corporate governance responsibility indicate that the responsibility is being discharged adequately in accordance with terms of reference		JAC minutes issued on website	←		JAC minutes issued on website	←
4. Governance training provided to key officers and all members	• Induction training for key new officers and all new members incorporate suitable coverage on corporate governance issues according to responsibilities	Chief Executive	Officers have a PDR to assess any individual training needs. General updates for all relevant officers are provided usually through a report to the JAC. JAC members have requisite skills to discharge the role e.g. knowledge of governance, risk, accountancy, law. Training has been provided on some of the more police specific aspects but there is a lot to cover and it is a changing environment, so ongoing training necessary.	↑	CFO	Officers have a PDR to assess any individual training needs. General updates for all relevant officers are provided usually through a report to the JAC. JAC members have requisite skills to discharge the role e.g. knowledge of governance, risk, accountancy, law. Training has been provided on some of the more police specific aspects but there is a lot to cover and it is a changing environment, so ongoing training necessary.	↑
	• Ongoing awareness training is provided as appropriate to key staff and all members to ensure that changes in the Code are made known within the authority	Chief Executive	As above	↑	CFO	As above	↑
5. Staff, public and other stakeholder awareness of corporate governance	• There is a general staff awareness training programme	Chief Executive	Minutes of the JAC are published on the website. All portfolios provide input to the governance process. Senior officers are aware, but there is no general awareness programme.	←	CFO	Minutes of the JAC are published on the website. All portfolios provide input to the governance process. Senior officers are aware, but there is no general awareness programme.	←
	• The Code has been published and is accessible to all staff, the public and other stakeholders	Chief Executive	Website	←	CFO	HPA Website	←
<b>Step 4: In support of objective 1 – Performance management arrangements are in place</b>							
Examples of assurance:	Evidenced by:			Direction	Lead	Comments	Direction
1. Comprehensive and effective performance management systems operate routinely	<ul style="list-style-type: none"> <li>There is a clearly defined performance management framework that identifies:                             <ul style="list-style-type: none"> <li>all sources of performance measures;</li> <li>who is responsible for achieving each performance measure;</li> <li>who is responsible for collating the data for each one;</li> <li>who determines and approves the performance measures;</li> <li>who receives reports on performance and how often;</li> <li>how data quality is assured;</li> </ul> </li> <li>how performance data is captured and its integrity maintained;</li> <li>how poor performance is addressed;</li> <li>how performance is driven upwards over time</li> </ul> <ul style="list-style-type: none"> <li>Reports resulting from internal or external reviews of performance management</li> <li>Year-on-year comparison of achievement against performance targets (e.g. in annual reports)</li> <li>Best value reviews, including benchmarking results</li> <li>Departmental and/or service benchmarking results</li> </ul> <ul style="list-style-type: none"> <li>Annual reports issued by, or in relation to, strategic partnerships</li> </ul>	PCC/Chief Executive/ Head of Performance	PCC holds the CC to account for performance. OPCC rep attends Force Performance Group Public meetings such as COMPASS	←	DCC	Force Performance Group reviews performance with commanders and Dept Heads. Intel & Tasking Directorate produces data and quality assures.  Force level and local Pls set  Performance data packs published monthly on intranet.  Clear responsibilities for all Pls  Data produced by centralised Performance, research and Analysis teams under Tasking & Co-ordination.  Scorecards being developed for Force and departmental use.  Reports from HMIC/PSU/Audit Commission received, responded to and acted upon. Phase HMIC inspections. Annual baseline assessments.  Year on year comparisons undertaken.  Business improvement reviews and intervention undertaken.  Benchmarking provided by HMIC and produced locally.. HMIC produces annual VFM data using CIPFA statistics and ADR (staffing) return, with an analysis of where the Force performance is significantly different to its peers. Strategic partnership risks and budgets are incorporated within the Policing Plan and Budget process	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
2. Key performance indicators are established and monitored	<ul style="list-style-type: none"> <li>Appropriate key performance indicators (KPIs) have been established and approved for each service element and are included in departmental and service business/annual plans</li> </ul>	PCC/Head of Performance	PCC sets KPIs in Police and Crime Plan  Pls and reports sent to Force Performance Group each month. PCC meets CC each month and holds CC to account in public meetings. The Head of Performance manages and monitors performance against the PCC's Police and Crime Plan	*	DCC	The performance pack produced covers the Force KPIs. These are monitored by Force Performance Group. Performance is also monitored and managed locally within units.	*
	<ul style="list-style-type: none"> <li>KPIs have been developed and are monitored in respect of key partnerships</li> <li>A robust monitoring system has been approved and implemented</li> <li>There are regular reports on progress on delivering approved KPIs</li> <li>There is an approved mechanism for reviewing the continuing suitability of KPIs and for securing continuous improvement</li> </ul>				DCC	Pls and reports sent to Force Performance Group  Constant review through National Policing KPIs (e.g. from the Home Office and HMIC) as well as local review at Force Performance Group	
3. The authority knows how well it is performing against its planned outcomes	<ul style="list-style-type: none"> <li>Regular reports are presented to members on the delivery of national, authority, departmental and partnership performance targets</li> </ul>			*	DCC	PCC rep attends FPG	*
	<ul style="list-style-type: none"> <li>Internal and external auditor's reports on key performance indicators</li> </ul>				FPG	Force Performance Group reviews Performance Profile	
	<ul style="list-style-type: none"> <li>Key performance indicator risk scorecards</li> </ul>				CH Supt Tasking & Co-ordination	Monthly performance pack issued and KPI risk areas constantly monitored as part of developing dashboards indicator system.	
	<ul style="list-style-type: none"> <li>Use of Resources reviews and progress reviews against the action plans.</li> </ul>				N/a	FPG	
	<ul style="list-style-type: none"> <li>Monitoring reports on the achievement of local performance targets in the Local Policing Plan</li> </ul>				DCC/CH Supt Tasking & Co-ordination	FPG	
	<ul style="list-style-type: none"> <li>Best Value Performance Indicators</li> <li>Internal performance indicators</li> </ul>				n/a	n/a	
	<ul style="list-style-type: none"> <li>Regular budget monitoring reports (capital and revenue, current year and medium-term)</li> </ul>				DCC/CH Supt Tasking & Co-ordination	Force performance indicators	
	<ul style="list-style-type: none"> <li>Voluntary benchmarking exercises with peer groups</li> </ul>				CFO	Monthly meetings with PCC and updates at Executive	
	<ul style="list-style-type: none"> <li>National comparative performance measures against comparable authorities</li> </ul>				DCC	IQanta data is published in the monthly Force performance pack Benchmarking data including HMIC VFM used.	
	<ul style="list-style-type: none"> <li>Local Area Agreements and other strategic partnerships</li> </ul>				DCC	Local Crime Reduction Partnerships monitor performance in their area.	
	<ul style="list-style-type: none"> <li>Balanced score card</li> </ul>				DCC	A "dashboard" is available to view and drill down on performance	
	<ul style="list-style-type: none"> <li>EFQM model adopted</li> </ul>				DCC	EFQM underpins self assessment process.	
	<ul style="list-style-type: none"> <li>External audit/agency reports on performance (e.g. compliance with National Crime Recording Standard, HMIC reports, Police Standards Unit reports)</li> </ul>				DCC	Audit Letter Baseline Assessments	
	4. Knowledge of absolute and relative performances achieved is used to support decisions that drive improvements in outcomes				<ul style="list-style-type: none"> <li>Monitoring reports are regularly presented to the appropriate committee</li> </ul>		
<ul style="list-style-type: none"> <li>The reports include detailed performance results, both absolute and relative to peer authorities, a clear indication of below target, on target and at, or above, target results, highlighting areas where corrective action is necessary</li> </ul>		DCC	Reports include comparison to most similar forces, targets and over time				
<ul style="list-style-type: none"> <li>Committee reports on below par performance include 'SMART' action plans to improve performance</li> </ul>		DCC	Not always a SMART action plan but actions are given to relevant staff and progress is monitored at subsequent meetings.				
<ul style="list-style-type: none"> <li>Performance targets in subsequent corporate and departmental and/or service business plans are revised in the light of actual performance</li> </ul>		DCC	Taken into account when setting targets. The NIM based integrated planning process establishes a risk based approach to target setting and prioritisation.				
<ul style="list-style-type: none"> <li>Continuous improvement is strived for by</li> </ul>		DCC	Taken into account when setting targets				

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>increasing the difficulty of performance targets when they have been met over a period (e.g. movements on KPI results)</li> </ul>						
	<ul style="list-style-type: none"> <li>Performance trends are established and reported upon over the medium term and are fed into the corporate and departmental and/or service planning process and into the planning process of key partnerships</li> </ul>			+	DCC	Taken into account when setting targets	+
	<ul style="list-style-type: none"> <li>Performance targets are adjusted in the light of the performances of peer authorities</li> </ul>			+		Taken into account when setting targets	+
5. The authority continuously improves its performance management	<ul style="list-style-type: none"> <li>The performance management systems are regularly reviewed and updated to take account of changes in organisational structure, new performance measurement frameworks (i.e. new Government initiatives, new internal performance measures etc) and other factors</li> </ul>			+	DCC	Performance review systems regularly reviewed internally and externally. HMIC/Audit Commission make recommendations to improve systems. Complaints procedure compliant with the Police Reform Act, Conduct Regs and IPCC Guidelines.	+
	<ul style="list-style-type: none"> <li>The performance management arrangements are revised in line with external or internal review of the arrangements</li> </ul>			+		Yes. Tasking & Co-ordination has a performance team. Performance management initiatives such as balance scorecards are also considered and the development of corporate and bespoke performance dashboards for SPI/KPI monitoring..	+
	<ul style="list-style-type: none"> <li>Performance management arrangements are reviewed to assimilate new techniques and/or technology e.g. developments in performance management information</li> </ul>			+		Regular appraisal of new options for reviewing performance e.g. EFQM, balance scorecard. Boundary changes updated, sector analysis updated and changes in crime definitions updated.	+
	<ul style="list-style-type: none"> <li>Performance management arrangements are developed and monitored in relation to key partnerships</li> </ul>			+	DCC	Partnerships exist to work jointly on shared objectives. The performance output achieved through key partnerships is embedded within the current performance management arrangements.	+

**Objective 2: Identify principal risks to achievement of objectives:**

Step 1: In support of objective 2 – The authority has robust systems and processes in place for the identification and management of strategic and operational risk							
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Lead	Comments	Direction
1. There is a written strategy and policy in place for managing risk which:	<ul style="list-style-type: none"> <li>Existence of approved strategy and policy document</li> </ul>	Chief Executive	There is an approved policy in place which has been subject to internal audit review.	↑	Risk Manager	There is an approved policy in place which has been subject to internal audit review.	↑
	<ul style="list-style-type: none"> <li>Evidence of formal approval (e.g. management board/committee minutes)</li> </ul>		Strategic Risk register reported to JAC. Boards and programmes have their own risk registers	+		Strategic Risk register reported to JAC. Boards and programmes have their own risk registers	+
<ul style="list-style-type: none"> <li>Has been formally approved at political and risk management board (or equivalent) level</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of formal review (e.g. management board/committee minutes, document version number and date)</li> </ul>		FPG reviews performance, FCB Risk Register, Joint Working Risk Register, ECP Risk Register, Portfolio Boards risk register, etc	+		FPG reviews performance, FCB Risk Register, Joint Working Risk Register, ECP Risk Register, Portfolio Boards risk register, etc	+
<ul style="list-style-type: none"> <li>Is reviewed on a regular basis</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of communication strategy, possibly covered in strategy document</li> </ul>		On intranet and awareness raised through review of risks at meetings. New approach will need to be communicated. <b>Awareness of practical operational risk issues is good, but the processes for strategic risk management need further work</b>	+		On intranet and awareness raised through review of risks at meetings. New approach will need to be communicated. <b>Awareness of practical operational risk issues is good, but the processes for strategic risk management need further work</b>	+
<ul style="list-style-type: none"> <li>Has been communicated to all relevant staff</li> </ul>	<ul style="list-style-type: none"> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, policy and strategy published on intranet, strategic diagnostic questionnaire results</li> </ul>		Intranet. Culturally embedded in PRINCE 2 methodology for programmes and boards. More awareness and training required when new processes are in place.	+		Intranet. Culturally embedded in PRINCE 2 methodology for programmes and boards. More awareness and training required when new processes are in place.	+
<ul style="list-style-type: none"> <li>Includes partnership risks</li> </ul>	<ul style="list-style-type: none"> <li>Partnership risk registers</li> <li>Constabulary Partnership Risk Register</li> </ul>		as above	+		as above	+
2. The authority has implemented clear structures and processes for risk management which are successfully implemented and:	<ul style="list-style-type: none"> <li>Management board/committee minutes</li> </ul>		Reports to the PCC's management meetings and various boards including ECP, Joint Working, Collaboration, FCB	+	Risk Manager	Reports to Force Executive and various boards including ECP, Joint Working, Collaboration, FCB	+

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
<ul style="list-style-type: none"> <li>Management board and elected members see risk management as a priority and support it by personal interest and input</li> <li>Decision making considers risk</li> <li>A senior manager has been appointed to "champion" risk management</li> <li>Roles and responsibilities for risk management have been defined</li> <li>Risk management systems are subject to independent assessment</li> <li>Risk management is considered in the annual business planning process</li> <li>Risk management extends to partnership risks</li> </ul>	<ul style="list-style-type: none"> <li>Job descriptions of senior and operational managers and corporate risk manager</li> </ul>		Estates Strategy Director has taken a lead role for the OPCC. Risk Manager has a clear role profile.	←		Risk Manager has a clear role profile.	←
	<ul style="list-style-type: none"> <li>Internal audit reports and external audit comments on risk management system</li> </ul>		Reviews of risk mgmt and business continuity	←		Reviews of risk mgmt and business continuity	←
	<ul style="list-style-type: none"> <li>CPA or PPAF review comments on risk management</li> </ul>		n/a	←		n/a	←
	<ul style="list-style-type: none"> <li>Annual business plans</li> </ul>		Risk Mgt Co-ordinator submits a service plan that includes both risk management and business continuity considerations on an annual basis.	↑		Risk Mgt Co-ordinator submits a service plan that includes both risk management and business continuity considerations on an annual basis.	↑
	<ul style="list-style-type: none"> <li>Link between internal audit and risk management functions is clearly defined in terms of reference of internal audit</li> </ul>		Risk management is included within the Internal Audit Strategy. It forms a key part of the Corporate Governance audit, which is undertaken annually.	←		Risk management is included within the Internal Audit Strategy. It forms a key part of the Corporate Governance audit, which is undertaken annually.	←
	<ul style="list-style-type: none"> <li>Responsibility for risk management function, including partnership risk management, is set at appropriate senior level</li> </ul>	Chief Executive	Roles set out for JAC, PCC/Ch Exec, DCC, Risk Manager in Code of Corporate Governance	←	DCC	Roles set out for JAC, PCC/Ch Exec, DCC, Risk Manager in Code of Corporate Governance	←
	<ul style="list-style-type: none"> <li>Committee reports setting out options for change include an appropriate risk assessment, including the 'no change' option</li> </ul>	DCC	PRINCE2 methodology adopted by Force which requires risk assessments and risks to be identified and managed through a risk log maintained as part of project documentation. There is a risk section in all reports.	←	DCC	PRINCE2 methodology adopted by Force which requires risk assessments and risks to be identified and managed through a risk log maintained as part of project documentation. There is a risk section in all reports.	←
	<ul style="list-style-type: none"> <li>The corporate business plan and financial plan assess risks as appropriate and in particular take account of new and emerging risks facing the authority</li> </ul>	DCC/CFOs	Budget risks and pressures are identified during the Medium Term Financial Strategy process. Risks are regularly reviewed and updated. Local - i.e. Operational - risk registers are maintained and significant risks can become entries on the Strategic Risk Register. The Force Change programme has focussed on the risks to the delivery of the strategic aims of any proposals which have come forward. These are subject to scrutiny at key stages of the process.	←	DCC/CFOs	Budget risks and pressures are identified during the Medium Term Financial Strategy process. Risks are regularly reviewed and updated. Local - i.e. Operational - risk registers are maintained and significant risks can become entries on the Strategic Risk Register. The Force Change programme has focussed on the risks to the delivery of the strategic aims of any proposals which have come forward. These are subject to scrutiny at key stages of the process.	←
<p>3. The authority has developed a corporate approach to the identification and evaluation of risk which is understood by all staff</p> <ul style="list-style-type: none"> <li>Systematic procedures for risk identification and evaluation have been agreed and are consistently applied across all business units and partnerships</li> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, strategic diagnostic questionnaire results</li> </ul>	<ul style="list-style-type: none"> <li>Partnership risks are assessed before agreements are signed</li> </ul>	Delivery lead	Risks are assessed on all new partnerships but there is no established process or training for assessing the risks.	←	Delivery lead	Risks are assessed on all new partnerships but there is no established process or training for assessing the risks.	←
	<ul style="list-style-type: none"> <li>Control Strategy, Portfolio Boards, Operational Orders must identify risks. Health &amp; Safety standard risk assessments and guidance exist on the intranet. Procedures for agreed general risk identification/evaluation (not just H &amp; S issues). Strategic Risk Register now developed. Risk processes reviewed by internal audit.</li> </ul>	Chief Executive	Control Strategy, Portfolio Boards, Operational Orders must identify risks. Health & Safety standard risk assessments and guidance exist on the intranet. Procedures for agreed general risk identification/evaluation (not just H & S issues). Strategic Risk Register now developed. Risk processes reviewed by internal audit.	↑	Risk Manager	Control Strategy, Portfolio Boards, Operational Orders must identify risks. Health & Safety standard risk assessments and guidance exist on the intranet. Procedures for agreed general risk identification/evaluation (not just H & S issues). Strategic Risk Register now developed. Risk processes reviewed by internal audit.	↑
	<ul style="list-style-type: none"> <li>Training courses on risk management, business continuity, health &amp; safety, operational planning. Risks identified in operation orders and covered at briefings. All officers trained in Operational risk mgmt. Info on intranet. Training has been provided to the 2nd line managers course as well as OCU's. Needs updating for new process.</li> </ul>	Chief Executive	Training courses on risk management, business continuity, health & safety, operational planning. Risks identified in operation orders and covered at briefings. All officers trained in Operational risk mgmt. Info on intranet. Training has been provided to the 2nd line managers course as well as OCU's. Needs updating for new process.	←	Risk Manager	Training courses on risk management, business continuity, health & safety, operational planning. Risks identified in operation orders and covered at briefings. All officers trained in Operational risk mgmt. Info on intranet. Training has been provided to the 2nd line managers course as well as OCU's. Needs updating for new process.	←
<p>4. The authority has well defined procedures for recording and reporting risk</p> <ul style="list-style-type: none"> <li>Evidenced by review of risk management strategy and policy</li> <li>Examination of corporate and partnership risk registers</li> <li>Key risk indicators have been determined and there is evidence of monitoring against these risks</li> <li>Evidence of regular and frequent reporting of risk to political and management board level</li> <li>Evidence of risk based auditing being carried out</li> </ul>	<ul style="list-style-type: none"> <li>Strategy and policy revised and published</li> </ul>	Chief Executive	Strategy and policy revised and published	↑	Risk Manager	Strategy and policy revised and published	↑
	<ul style="list-style-type: none"> <li>Strategic register is reviewed and reported into JAC. Improvements identified and actioned. Reviewd by internal audit.</li> </ul>	Chief Executive	Strategic register is reviewed and reported into JAC. Improvements identified and actioned. Reviewd by internal audit.	↑	Risk Manager	Strategic register is reviewed and reported into JAC. Improvements identified and actioned. Reviewd by internal audit.	↑
	<ul style="list-style-type: none"> <li>Key risks are identified in the strategic risk register. Risk owners are assigned to the strategic register risks. Risk owners must notify any relevant changes. Updates are requested from risk owners. A no. of risks have been archived as a result of effective action plans.</li> </ul>	Chief Executive	Key risks are identified in the strategic risk register. Risk owners are assigned to the strategic register risks. Risk owners must notify any relevant changes. Updates are requested from risk owners. A no. of risks have been archived as a result of effective action plans.	←	Risk Manager	Key risks are identified in the strategic risk register. Risk owners are assigned to the strategic register risks. Risk owners must notify any relevant changes. Updates are requested from risk owners. A no. of risks have been archived as a result of effective action plans.	←
	<ul style="list-style-type: none"> <li>FPG reviews performance, FCB Risk Register, Joint Working Risk Register, EDP Risk Register, etc</li> </ul>	Chief Executive	FPG reviews performance, FCB Risk Register, Joint Working Risk Register, EDP Risk Register, etc	←	DCC	FPG reviews performance, FCB Risk Register, Joint Working Risk Register, EDP Risk Register, etc	←
	<ul style="list-style-type: none"> <li>Internal audit develop the audit plan and undertake individual audits on a risk assessed basis.</li> </ul>	CFOs	Internal audit develop the audit plan and undertake individual audits on a risk assessed basis.	←	CFOs	Internal audit develop the audit plan and undertake individual audits on a risk assessed basis.	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Evidence of risks not properly addressed identified in internal audit reports etc being fed into the risk management process</li> </ul>	CFOs	All risks identified in internal audit reports require an action plan. Completion of action plans are monitored and any outstanding actions reported to Constabulary Finance and JAC	+	CFOs	All risks identified in internal audit reports require an action plan. Completion of action plans are monitored and any outstanding actions reported to Constabulary Finance and JAC	+
	<ul style="list-style-type: none"> <li>Environmental scanning reports are fed into the risk management process so as to identify new and emerging risks</li> </ul>	Chief Executive	Scanning undertaken by Force Development Team. Numerous professional subscriptions and networks also highlight potential risk.	+	DCC	Scanning undertaken by Force Development Team. Numerous professional subscriptions and networks also highlight potential risk.	+
5. The authority has well-established and clear arrangements for financing risk	<ul style="list-style-type: none"> <li>Evidence that the authority's policy for risk financing is regularly reviewed in the light of costs and alternative risk mitigation strategies</li> </ul>	Chief Executive	The Risk Manager constantly reviews risk financing and the position is formally reviewed annually. Currently looking at the opportunities presented by operating a managed fund for Insurance, and a commitment has been made to the regional SEERPIC Insurance framework to join in the contract for additional areas of Motor & Liability Insurance at the next opportunity.	+	Risk Manager	The Risk Manager constantly reviews risk financing and the position is formally reviewed annually. Currently looking at the opportunities presented by operating a managed fund for Insurance, and a commitment has been made to the regional SEERPIC Insurance framework to join in the contract for additional areas of Motor & Liability Insurance at the next opportunity.	+
	<ul style="list-style-type: none"> <li>All legal requirements for insurance are met</li> </ul>		Yes	+		Yes	+
	<ul style="list-style-type: none"> <li>Evidence that self-insurance provisions are subject to annual independent actuarial valuation and that contributions to the fund are adjusted accordingly</li> </ul>		The benefits of the Force moving to a Managed Fund will be considered in the future and some initial actuarial advice has been provided. An earmarked (i.e. useable) reserve is held on the Balance Sheet to fund any unexpected or exceptional liabilities.	+		The benefits of the Force moving to a Managed Fund will be considered in the future and some initial actuarial advice has been provided. An earmarked (i.e. useable) reserve is held on the Balance Sheet to fund any unexpected or exceptional liabilities.	+
	<ul style="list-style-type: none"> <li>Insurance claims being managed in accordance with 'Woolf' principles</li> </ul>		The timescales imposed by the Woolf principles are adhered to by legal services.	+		The timescales imposed by the Woolf principles are adhered to by legal services.	+
	<ul style="list-style-type: none"> <li>Evidence of monitoring the incidence of successful and unsuccessful claims and of feeding the results back into the policy for risk financing accordingly</li> </ul>		Claims are monitored and fed back into the risk financing process using the networked Figtree system operated by the Insurance Officer and updated on a daily basis or as and when required. .	+		Claims are monitored and fed back into the risk financing process using the networked Figtree system operated by the Insurance Officer and updated on a daily basis or as and when required. .	+
6. The authority has developed a programme of risk management training for relevant staff	<ul style="list-style-type: none"> <li>Training programme for risk management</li> </ul>	Chief Executive	<b>Operational risk included with all training. Strategic risk processes needs further delivery</b>	+	Risk Manager	<b>Operational risk included with all training. Strategic risk processes needs further delivery</b>	+
	<ul style="list-style-type: none"> <li>Training needs analysis (both specialist staff development and general awareness)</li> <li>Regular newsletter or other means of communicating risk management issues to staff</li> </ul>		There is training on operational risk and risk related issues are communicated in intranet messages. Communicated via Boards. Risk management understood on a daily basis by officers and staff but no publicity of new approach.	+		There is training on operational risk and risk related issues are communicated in intranet messages. Communicated via Boards. Risk management understood on a daily basis by officers and staff but no publicity of new approach.	+
	<ul style="list-style-type: none"> <li>Induction programme includes risk management</li> </ul>		All operational staff have risk mgmt training on induction.	+		All operational staff have risk mgmt training on induction.	+
	<ul style="list-style-type: none"> <li>Appropriate responsibilities for risk management incorporated into job descriptions and appraisals</li> </ul>		Risk Mgmt do have risk management specifically identified within their role profile. In addition, risk management responsibility is covered in the strategic perspective element of senior managers' role profiles.	+		Risk Mgmt do have risk management specifically identified within their role profile. In addition, risk management responsibility is covered in the strategic perspective element of senior managers' role profiles.	+
7. The corporate risk management board (or equivalent) adds value to the risk management process by:	<ul style="list-style-type: none"> <li>Corporate risk management board or equivalent terms of reference</li> </ul>	Chief Executive	JAC	+	DCC	JAC	+
	<ul style="list-style-type: none"> <li>Advising and supporting corporate management team on risk strategies</li> <li>Identifying areas of overlapping risk</li> <li>Driving new risk management initiatives</li> <li>Communicating risk management and sharing good practice</li> <li>Providing and reviewing risk management training</li> <li>Regularly reviewing the risk register(s)</li> <li>Coordinating the results for risk reporting</li> </ul>			+			+
	<ul style="list-style-type: none"> <li>Minutes of corporate risk management board</li> <li>Reports to corporate management team</li> </ul>			+			+
8. A corporate risk officer has been appointed with the necessary skills to analyse issues and offer options and advice and:	<ul style="list-style-type: none"> <li>Support decision making and policy formulation</li> </ul>	Chief Executive	Estates Strategy Director has taken a lead for risk within the OPCC. Risk Mgr role profile covers risk management across the organisation	+	DCC	Risk Mgr role profile covers risk management across the organisation	+



Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
<ul style="list-style-type: none"> <li>Provides support in the risk identification and analysis process</li> <li>Provides support in prioritising risk mitigation action</li> <li>Provides advice and support in determining risk treatments</li> <li>Inspires confidence in managers</li> </ul>	<ul style="list-style-type: none"> <li>Key task matrix of corporate risk officer</li> </ul>		All posts have role priorities agreed with line managers	★		All posts have role priorities agreed with line managers	★
	<ul style="list-style-type: none"> <li>Evidence of the corporate risk officer reporting to corporate management team on risk management issues</li> </ul>		Estates Strategy Director reports to Ch Exec. Input from Risk Manager. Reports to JAC.	★		Risk Manager reports to DCC. Reports to JAC.	★
	<ul style="list-style-type: none"> <li>Evidence of training on current risk management topics / membership of appropriate organisations (e.g. ALARM)</li> </ul>		Membership to ALARM and attendance at annual conference. Quarterly regional meetings and 3 national meetings per year.	★		Membership to ALARM and attendance at annual conference. Quarterly regional meetings and 3 national meetings per year.	★
	<ul style="list-style-type: none"> <li>Use of consultancy as appropriate</li> </ul>		Consultancy has been used to assist where required.	★		Consultancy has been used to assist where required.	★
<p>9. Managers are accountable for managing their risks</p> <ul style="list-style-type: none"> <li>Evidence of manager involvement in risk identification and analysis process</li> <li>Risk owners detailed in corporate /departmental risk register(s)</li> <li>Risk owners assigned in relation to key partnerships</li> <li>Job descriptions of managers outline their risk management responsibilities</li> <li>Evidence of (at least) annual review of risk at service/operational levels and of partnership risks</li> <li>Analysis of completed control and risk self-assessment questionnaires</li> </ul>		Chief Executive	Estates Strategy Director has produced a new Risk Strategy for the OPCC in conjunction with the Risk Manager	★	Risk Manager	Special Branch review and report on operational risk levels nationally and locally. Control Strategy in place. Daily TCG meeting held operationally to identify risks Supervisory officers are trained in identifying risk and covered in operational orders. All projects run on PRINCE2 methodology. Fortnightly IT security meetings All senior managers have been trained in health and safety and the use of risk assessment forms. Managers have approved standard risk assessments available on the intranet. Managers have been involved in business continuity & disaster recovery plans. Business Continuity workshop held annually enlightens managers of current issues and how to manage risks.	★
			Operationally the duty officers are responsible for risk management. Action managers identified for strategic risks. Action plans are developed within the Programme and Portfolio risk registers	★		Operationally the duty officers are responsible for risk management. Action managers identified for strategic risks. Action plans are developed within the Programme and Portfolio risk registers	★
		Chief Executive	All partnerships have lead owners	★	Delivery lead	All partnerships have lead owners	★
		Chief Executive	Estates Strategy Director objectives	★	DCC	Risk Mgr profile	★
			Reports to JAC include reviews of all the strategic risk register.	★		Reports to JAC include reviews of all the strategic risk register.	★
			Analysis of strategic diagnostic questionnaires completed and feedback. Plan to repeat. The highest risk recommendations from the strategic diagnostic have been completed. The remainder is now been surpassed by recommendations in various audits.	★		Analysis of strategic diagnostic questionnaires completed and feedback. Plan to repeat. The highest risk recommendations from the strategic diagnostic have been completed. The remainder is now been surpassed by recommendations in various audits.	★
<p>10. Risk management is embedded throughout the organisation</p> <ul style="list-style-type: none"> <li>Evidence of a general risk management culture at all levels</li> <li>Risk management training programme</li> <li>Evidence of managers involvement in risk management aspects of business planning</li> <li>Results of strategic diagnostic survey to ascertain the extent to which risk management is understood by each category of officer (senior management, operational managers etc) and members</li> </ul>		Chief Executive	Operational officers face daily risk assessments. They are trained to be able to deal with these. Operational risk management is not of concern to the Force. PRINCE 2 training for projects. Risk registers for all programmes and boards.	★	Risk Manager	Operational officers face daily risk assessments. They are trained to be able to deal with these. Operational risk management is not of concern to the Force. PRINCE 2 training for projects. Risk registers for all programmes and boards.	★
			Needs to be refreshed when new process out	★		Needs to be refreshed when new process out	★
			Managers have been involved in risk management as described above (section 9).	★		Managers have been involved in risk management as described above (section 9).	★
			Results of strategic diagnostic received and completed. Will be done again in future to assess movement. Operational risk assessments are done continually. Policing Priorities steering group created to assess risks and assign to the correct internal board for development and review.	★		Results of strategic diagnostic received and completed. Will be done again in future to assess movement. Operational risk assessments are done continually. Policing Priorities steering group created to assess risks and assign to the correct internal board for development and review.	★
<p>11. Risks in partnership working are fully considered</p> <ul style="list-style-type: none"> <li>Evidence of risk assessments being undertaken before the commencement of major projects, preferably in the report on which the decision to proceed is based</li> <li>Evidence that risk assessment are regularly reviewed during the project period</li> </ul>		Chief Executive	Major projects should be managed using PRINCE2 methodology, and therefore risk should be evidenced by the existence of risk registers. However there is little evidence of risk review and submissions relating to entering into partnerships. Risk section in all reports to PCC. Annual assessment of financial surety for ACRO See PRINCE2 methodology - risks are logged and managed. Risks in two major partnerships have been identified and managed in recent times.	★	Delivery lead	Major projects should be managed using PRINCE2 methodology, and therefore risk should be evidenced by the existence of risk registers. However there is little evidence of risk review and submissions relating to entering into partnerships. Risk section in all reports to PCC. Annual assessment of financial surety for ACRO See PRINCE2 methodology - risks are logged and managed. Risks in two major partnerships have been identified and managed in recent times.	★

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Evidence that potential partners are required to produce and submit risk assessments</li> <li>Evidence that partnership arrangements are reviewed in terms of risk before they are entered into and, subsequently, that the risks are reviewed</li> <li>Evidence that there are effective arrangements in place for risk sharing (e.g. in the partnering contract terms and conditions or agreement)</li> </ul>						
12. Where employed, risk management information systems meet users' needs	<ul style="list-style-type: none"> <li>Evidence of risk information being updated promptly</li> <li>Review of accuracy and usefulness of output from information systems</li> <li>Evidence that users were/are consulted on initial implementation and further development</li> <li>Interviews with users to assess suitability of the system for their needs</li> </ul>	Chief Executive	Risk management Strategy available with business continuity plans and guides available on the Force intranet. Policy & Procedures have been published. However for various strategic and practical reasons a software package for risk mgmt will not be installed. Spreadsheets and publication on the intranet will be the method used. Spreadsheets produce limited information output. Accounting for feedback is an essential part of the decision making process to develop the most practical system.	←	Risk Manager	Risk management Strategy available with business continuity plans and guides available on the Force intranet. Policy & Procedures have been published. However for various strategic and practical reasons a software package for risk mgmt will not be installed. Spreadsheets and publication on the intranet will be the method used. Spreadsheets produce limited information output. Accounting for feedback is an essential part of the decision making process to develop the most practical system.	←

**Objective 3: Identify and evaluate key controls to manage principal risks**

**Step 1: In support of objective 3 – The authority has robust system of internal control which includes systems and procedures to mitigate principal risks**

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Lead	Comments	Direction
1. There are written financial regulations in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff:	<ul style="list-style-type: none"> <li>Financial regulations and instructions exist &amp; are reviewed &amp; updated regularly</li> <li>Evidence of formal approval</li> </ul>	CFO	Financial Regulations and Contract Standing Orders in place. Fully reviewed in 2012 for changes for PCC.	←	CFO	Financial Regulations and Contract Standing Orders in place. Fully reviewed in 2012 for changes for PCC.	←
<ul style="list-style-type: none"> <li>Authority has adopted CIPFA code on Treasury Management</li> <li>Compliance with the Prudential Code</li> </ul>	<ul style="list-style-type: none"> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, accessible in finance manuals and/or on intranet site</li> <li>Reports to audit committee or equivalent confirming compliance or identifying extent of non-compliance with regulations and instructions</li> <li>Report approving annual treasury management and investment strategy</li> <li>Outturn report on treasury mgt.</li> <li>External audit assessment of compliance with Prudential Code</li> <li>Results of Use of Resources (or PURE) assessment of internal control KLOEs</li> </ul>		PCC Decision	←		PCC Decision	←
			Available on intranet	←		Available on intranet	←
			JAC	←		JAC	←
			JAC	←		JAC	←
			Outturn report in June each year.	←		Outturn report in June each year.	←
			External audit interim audit & audit letter	←		External audit interim audit & audit letter	←
			HMIC PEEL Assessment has replaced this	←		HMIC PEEL Assessment has replaced this	←
2. There are written contract standing orders in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff	<ul style="list-style-type: none"> <li>Standing orders exist, are reviewed and updated regularly to cover new procedures such as partnering arrangements and on-line tendering</li> <li>Evidence of formal approval</li> <li>Examples of communication and dissemination e.g. induction, briefings, awareness sessions, accessible in finance manuals and/or on intranet site</li> </ul>	CFO	Amended 2013	←	CFO	Amended 2013	←
			Decision log	←		Decision log	←
			Emails, on intranet and internet	←		Emails, on intranet and internet	←
3. There is a confidential reporting policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff	<ul style="list-style-type: none"> <li>confidential reporting policy exists and has been reviewed and updated regularly</li> <li>Evidence of formal approval</li> </ul>	Chief Executive	Policies and procedures are published on the intranet on confidential reporting and integrity witnesses. There has been a poster and sticker campaign. An external reporting facility exists through Crimestoppers in addition to the internal line.	←	Head of Professional Standards Department	Policies and procedures are published on the intranet on confidential reporting and integrity witnesses. There has been a poster and sticker campaign. An external reporting facility exists through Crimestoppers in addition to the internal line.	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Examples of communication and dissemination e.g. induction, briefings, awareness sessions, accessible on website and intranet site</li> <li>Evidence of effectiveness of policy (e.g. reports on incidence of usage, evidence on annual declarations on fraud to Audit Commission)</li> </ul>		Number of reports has increased. 'Reputation Matters' - i.e. PSD newsletter - reports on developments in policy and procedure, as well as outcomes of investigations into conduct.			Number of reports has increased. 'Reputation Matters' - i.e. PSD newsletter - reports on developments in policy and procedure, as well as outcomes of investigations into conduct.	
4. There is a counter fraud and corruption policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff	<ul style="list-style-type: none"> <li>Counter fraud and corruption policy exists and has been reviewed and updated regularly</li> <li>Evidence of formal approval</li> <li>Examples of dissemination (briefings, induction, awareness sessions, accessible on website and intranet site)</li> <li>Evidence of effectiveness of policy (e.g. reports on identified frauds; annual AF70 returns to Audit Commission, reports on results of National Fraud Initiatives)</li> <li>Review of register of gifts and hospitality</li> </ul>	Chief Executive	<p>Confidential Reporting Procedure exists and is on the Force intranet. PSD undertake some proactive and reactive misconduct checks which could identify fraud (e.g. overtime &amp; mileage claims). Accounting controls are in place to prevent and detect fraud. Internal audit undertake anti-fraud work as part of the Audit Commission's National Fraud Initiative. Constabulary has set up Anti-Corruption Unit, part of whose role is to manage the Confide in Us reporting tool. Anti-Corruption Policy in production. Internal Audit conducting pro-active fraud audit work. The PCC and Constabulary have drafted Anti-Fraud and Corruption Strategies.</p> <p>Registers are held by all units. The Compliance Unit that will undertake testing designed to identify fraud.</p> <p>Reports to JAC</p>		Head of Professional Standards Department/CFO	<p>Confidential Reporting Procedure exists and is on the Force intranet. PSD undertake some proactive and reactive misconduct checks which could identify fraud (e.g. overtime &amp; mileage claims). Accounting controls are in place to prevent and detect fraud. Internal audit undertake anti-fraud work as part of the Audit Commission's National Fraud Initiative. Constabulary has set up Anti-Corruption Unit, part of whose role is to manage the Confide in Us reporting tool. Anti-Corruption Policy in production. Internal Audit conducting pro-active fraud audit work. The PCC and Constabulary have drafted Anti-Fraud and Corruption Strategies.</p> <p>Registers are held by all units. The Compliance Unit that will undertake testing designed to identify fraud.</p> <p>Reports to JAC</p>	
5. There are codes of conduct in place which have been formally approved and widely communicated to all relevant staff	<ul style="list-style-type: none"> <li>Codes of conduct have been agreed, including national schemes (e.g. police officers)</li> <li>Evidence of formal approval</li> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, accessible on intranet site</li> </ul>	Chief Executive	Codes of conduct exist. Codes of conduct are appropriately approved and issued on appointment. Codes of conduct are published on the intranet. Code of Corporate Governance approved.		Head of HR	Codes of conduct exist for officers and staff. Codes of conduct are appropriately approved and issued on appointment. Codes of conduct are published on the intranet. Code of Corporate Governance approved.	
6. A register of interests is maintained, regularly updated and reviewed	<ul style="list-style-type: none"> <li>Inspection of register of interests (members and staff)</li> <li>Evidence of regular updating and review by senior officer(s)</li> </ul>	Chief Exec/CFO	All chief officers complete a register of pecuniary interests and also have to make declaration of related party transactions as part of the Statement of Accounts disclosures. Outside interests or secondary employment must be approved by the line manager. Declarations of interest is a standing item at JAC.		DCC/Head of Professional Standards Department	All chief officers complete a register of pecuniary interests and also have to make declaration of related party transactions as part of the Statement of Accounts disclosures. Outside interests or secondary employment must be approved by the line manager. Declarations of interest is a standing item at JAC.	
7. Where a scheme of delegation has been drawn up, it has been formally approved and communicated to all relevant staff	<ul style="list-style-type: none"> <li>Scheme of delegation incorporates adequate controls and sanctions</li> <li>Evidence of formal approval</li> <li>Examples of communication and dissemination e.g. induction, briefings, awareness sessions, accessible on intranet site</li> <li>Regular reports on the operation of the scheme (e.g. compliance, budget monitoring, year-end balances)</li> </ul>	PCC/CFO	<p>Available on intranet and internet, Briefing to Executive</p> <p>PCC Decision</p> <p>Available on intranet and internet, Briefing to Executive</p> <p>Reports to PCC</p>		CFO	<p>Available on intranet and internet, Briefing to Executive</p> <p>PCC Decision</p> <p>Available on intranet and internet, Briefing to Executive</p> <p>Reports to PCC</p>	
8. A corporate procurement policy has been drawn up, formally approved and communicated to all relevant staff	<ul style="list-style-type: none"> <li>Procurement policy exists and has been reviewed and updated regularly to take account of new initiatives e.g. drive towards wider consortia arrangements, shared services</li> <li>Evidence of formal approval</li> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, accessible on intranet site</li> <li>Evidence of effectiveness of policy (e.g. benchmarking results, best value review, internal/external audit review)</li> </ul>	CFO	<p>Standing Orders cover key issues.</p> <p>PCC Decision</p> <p>Full learning guides are available on intranet.</p> <p>Where any areas of non-compliance are identified, appropriate action is taken by Procurement Officers (category managers) to address such matters with the department or individual concerned. Subject to regular internal audit.</p>		CFO	<p>Standing Orders cover key issues.</p> <p>PCC Decision</p> <p>Full learning guides are available on intranet.</p> <p>Where any areas of non-compliance are identified, appropriate action is taken by Procurement Officers (category managers) to address such matters with the department or individual concerned. Subject to regular internal audit.</p>	
9. Business/service continuity plans have been drawn up for all critical service areas and the plans:	<ul style="list-style-type: none"> <li>Current business/service continuity plans exist covering all critical service areas and are readily accessible</li> <li>Evidence of regular testing</li> </ul>	Risk Manager	Exist and in place for major systems such as control room, deployment strategy and custody. Process is under review.		Risk Manager	Exist and in place for major systems such as control room, deployment strategy and custody. Process is under review.	
• Are subject to regular review and testing		Risk Manager	Regular testing of back-up power supplies and alarms. An annual detailed testing process is undertaken on a particular area. More testing is needed as current tests do not cover all scenarios and not all plans tested. However recent experience shows this may not present a significant risk.		Risk Manager	Regular testing of back-up power supplies and alarms. An annual detailed testing process is undertaken on a particular area. More testing is needed as current tests do not cover all scenarios and not all plans tested. However recent experience shows this may not present a significant risk.	

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
	<ul style="list-style-type: none"> <li>Evidence of regular review in the light of the results of testing and for changes in structures, procedures, information systems, responsibilities etc</li> </ul>	Risk Manager	As above	←	Risk Manager	As above	←
10. The corporate/departmental risk register(s) includes expected key controls to manage principal risks	<ul style="list-style-type: none"> <li>Risk register sets out principal risks and sets out appropriate key controls to manage them.</li> </ul>	Risk Manager	Programme and Portfolio risk registers set out principal risks and how these are being managed or mitigated.	←	Risk Manager	Programme and Portfolio risk registers set out principal risks and how these are being managed or mitigated.	←
	<ul style="list-style-type: none"> <li>Key controls are monitored, reviewed and updated regularly</li> </ul>		Regularly monitored and updated at meetings.	←		Regularly monitored and updated at meetings.	←
	<ul style="list-style-type: none"> <li>Use of risk management workshops to underpin the process and review of register and key controls</li> </ul>		Risk management workshops were delivered, but more training required and planned for delivery. Training delivered within the Leadership Level 2 course. Operation risk covered in training.	←		Risk management workshops were delivered, but more training required and planned for delivery. Training delivered within the Leadership Level 2 course. Operation risk covered in training.	←
	<ul style="list-style-type: none"> <li>Risk owners are assigned to manage principal risks</li> </ul>		Risk owners and action owners are both assigned on the strategic risk register	←		Risk owners and action owners are both assigned on the strategic risk register	←
	<ul style="list-style-type: none"> <li>Partnership risks are considered</li> </ul>		Partnerships are included as and when required, currently the only risk relating to Partnerships has been archived.	←		Partnerships are included as and when required, currently the only risk relating to Partnerships has been archived.	←
11. Key risk indicators have been drawn up to track the movement of key risks and are regularly monitored and reviewed.	<ul style="list-style-type: none"> <li>Appropriate key risk indicators are documented</li> </ul>	Risk Manager	Programme and Portfolio risk registers set out principal risks and monitors progress and outstanding actions.	←	Risk Manager	Programme and Portfolio risk registers set out principal risks and monitors progress and outstanding actions.	←
	<ul style="list-style-type: none"> <li>Evidence of regular monitoring</li> </ul>			←			←
	<ul style="list-style-type: none"> <li>Evidence of changes in risk indicators (and reasons for change) emanating from appropriate information sources (e.g. where internal audit findings are used to change the perceived level of risk)</li> </ul>			←			←
12. The authority's internal control framework is subject to regular independent assessment	<ul style="list-style-type: none"> <li>Internal audit plans and reports</li> </ul>	CFO	Internal and External Audit Review. All reports submitted to JAC. The Annual Governance Statement is covered in the Audit Commission's Annual Governance Report.	←	CFO	Internal and External Audit Review. All reports submitted to JAC. The Annual Governance Statement is covered in the Audit Commission's Annual Governance Report.	←
	<ul style="list-style-type: none"> <li>Annual report/opinion of Head of Internal Audit</li> </ul>			←			←
	<ul style="list-style-type: none"> <li>External audit reports</li> </ul>			←			←
	<ul style="list-style-type: none"> <li>Use of Resources</li> </ul>			←			←
13. A corporate health and safety policy has been drawn up, formally approved, is subject to regular review and has been communicated to all relevant staff	<ul style="list-style-type: none"> <li>Health &amp; safety policy exists and has been reviewed and updated regularly</li> </ul>	Ch Exec/Health & Safety Manager	On intranet	←	DCC/Health & Safety Manager	On intranet	←
	<ul style="list-style-type: none"> <li>Policy covers partnerships</li> </ul>		All personnel are covered by H&S policy, as are persons on authority premises, observers and visitors.	←		All personnel are covered by H&S policy, as are persons on authority premises, observers and visitors.	←
	<ul style="list-style-type: none"> <li>Evidence of formal approval</li> </ul>		PCC	←		Approved by Chief Constable	←
	<ul style="list-style-type: none"> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, inclusion of policy on website and intranet site</li> </ul>		H&S included on Induction. Training for managers and staff, including some mandatory training, managed by HR Managers. Policies and procedures on intranet.	←		H&S included on Induction. Training for managers and staff, including some mandatory training, managed by HR Managers. Policies and procedures on intranet.	←
	<ul style="list-style-type: none"> <li>Evidence of effectiveness of policy e.g. number of cases investigated by Health &amp; Safety Executive – and the number of cases proven</li> </ul>		Review undertaken by Health & safety lead. No outstanding issues with Health & Safety Executive	↑		Review undertaken by Health & safety lead. No outstanding issues with Health & Safety Executive	↑
	<ul style="list-style-type: none"> <li>Review of number of reported incidences and 'near misses'</li> </ul>		There is an accident database for electronic reporting which automatically reports to the H&SE when necessary. Those responsible for Health and Safety - Force H&S Committee, Departmental H&S committees, HR Managers - review incidents and trends as part of the organisational learning and overall response to risk assessment and management.	←		There is an accident database for electronic reporting which automatically reports to the H&SE when necessary. Those responsible for Health and Safety - Force H&S Committee, Departmental H&S committees, HR Managers - review incidents and trends as part of the organisational learning and overall response to risk assessment and management.	←
	<ul style="list-style-type: none"> <li>Review of number of reported incidences and 'near misses'</li> </ul>		There is an accident database for electronic reporting which automatically reports to the H&SE when necessary. Those responsible for Health and Safety - Force H&S Committee, Departmental H&S committees, HR Managers - review incidents and trends as part of the organisational learning and overall response to risk assessment and management.	←		There is an accident database for electronic reporting which automatically reports to the H&SE when necessary. Those responsible for Health and Safety - Force H&S Committee, Departmental H&S committees, HR Managers - review incidents and trends as part of the organisational learning and overall response to risk assessment and management.	←
14. A corporate complaints policy/procedure has been drawn up, formally approved, communicated to all relevant staff, the public and other stakeholders is regularly reviewed	<ul style="list-style-type: none"> <li>Complaints policy/procedure exists and has been reviewed and updated regularly</li> </ul>	Chief Executive	Formal complaints subject to the policy and procedure	←	Head of Professional Standards Department	Formal complaints subject to the policy and procedure	←
	<ul style="list-style-type: none"> <li>Procedure is compliant with all relevant statutory requirements</li> </ul>		Compliant with statutory requirements for police complaints and complaints about PCC and staff	←		Compliant with statutory requirements for police complaints and complaints about PCC and staff	←
	<ul style="list-style-type: none"> <li>Evidence of formal approval</li> </ul>		Approved by PCC/COG	←		Approved by PCC/COG	←
	<ul style="list-style-type: none"> <li>Examples of dissemination e.g. induction, briefings, awareness sessions, inclusion of policy on website and intranet site</li> </ul>		Reports, E-learning, briefings, 'Reputation Matters' PSD newsletter, Chief Constable's communications to all staff re. standards of behaviour and Policing with a Purpose. Complaints procedure is on the website, has been updated and given a more prominent position in accordance with IPCC guidance.	←		Reports, E-learning, briefings, 'Reputation Matters' PSD newsletter, Chief Constable's communications to all staff re. standards of behaviour and Policing with a Purpose. Complaints procedure is on the Force website, has been updated and given a more prominent position in accordance with IPCC guidance.	←
	<ul style="list-style-type: none"> <li>Leaflets/posters highlighting complaints procedure</li> </ul>		Reports, E-learning, briefings	←		Reports, E-learning, briefings	←
	<ul style="list-style-type: none"> <li>Complaints files</li> </ul>		Held by Chief Executive	←		Held by Professional Standards Dept	←
	<ul style="list-style-type: none"> <li>Committee reports summarising complaints dealt with analysed by outcome</li> </ul>		n/a	←		n/a	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
<b>Objective 4: Obtain assurance on the effectiveness of key controls</b>							
<b>Step 1: In support of objective 4 – Appropriate assurance statements are received from designated internal and external assurance providers:</b>							
<ul style="list-style-type: none"> <li>The authority has identified appropriate sources of assurance</li> <li>Appropriate external assurances are identified and obtained</li> </ul>							
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
1. The authority has determined appropriate internal and external sources of assurance	<ul style="list-style-type: none"> <li>Minutes of committee at which report on assurances was considered</li> <li>Sources of assurance are appropriate to the authority</li> </ul>	Chief Executive	JAC minutes	←	CFO	JAC minutes	←
			HMIC, Audit Commission, Internal Audit, Her Majesty's Revenue & Customs, H&SE	←		HMIC, Audit Commission, Internal Audit, Her Majesty's Revenue & Customs, H&SE	←
2. Appropriate key controls on which assurance is to be given have been identified and agreed	<ul style="list-style-type: none"> <li>Briefing notes, guidance, instructions etc given to appropriate managers regarding what is expected of them</li> </ul>	Chief Executive	AGS review process consisted of updating action plan, review by responsible officers for the areas appertaining to their work.	←	CFO	AGS review process consisted of updating action plan, review by responsible officers for the areas appertaining to their work.	←
3. Departmental assurances are provided	<ul style="list-style-type: none"> <li>Departmental heads sign off on adequacy of controls (i.e. provide annual governance assurance statements)</li> <li>Supporting documentation provided by departmental heads re review and monitoring arrangements that key controls have been in operation for the period and will continue to operate until accounts signed off.</li> <li>Completed Control &amp; Risk Self-Assessment questionnaires</li> <li>Annual governance assurance statements evaluated by officer team or committee charged with the responsibility of preparing the AGS. Evaluation to include 'reality checking' of sample of assurance statements</li> </ul>	Chief Executive	Discussions have taken place with lead stakeholders to ensure that they their views are included and they agree with the comments made in each case.	←	CFO	Discussions have taken place with lead stakeholders to ensure that they their views are included and they agree with the comments made in each case.	←
		Chief Executive	Leadership team	←		AGS agreed at COG	←
		Chief Executive	Not used due to compensating controls in current AGS Matrix process. This is partly covered by this process.	←		Not used due to compensating controls in current AGS Matrix process. This is partly covered by this process.	←
		Chief Executive	AGS reviewed by JAC	←	CFO	AGS reviewed by COG and JAC	←
4. External assurance reports are collated centrally	<ul style="list-style-type: none"> <li>Sources of external assurance relevant to authority are identified and agreed, including partnerships</li> <li>External assurance reports will vary according to type of authority and could include comment and input from the following (the list is not exhaustive):</li> <li>Audit Commission</li> <li>External Auditor (either from direct audit work or from work jointly commissioned</li> <li>Social Services Inspectorate</li> <li>Use of Resources assessment</li> <li>PURE assessment (police service)</li> <li>Best Value Reviews</li> <li>HMIC</li> <li>Police Standards Unit</li> <li>Home Office commissioned reports</li> <li>Senior management team minutes</li> <li>Follow up reports to appropriate committee</li> </ul>	Chief Executive	Reports from:  Audit Commission - Annual Governance Report to JAC	←	ACPO Secretariat	Reports from:  Audit Commission - Annual Governance Report to JAC  External Auditor  HMIC  Police Crime Standards Directorate HO Force board minutes  As above	←
5. Internal Audit Arrangements	<ul style="list-style-type: none"> <li>Reports of Head of Internal Audit to audit committee or equivalent throughout the year</li> <li>Annual report of Head of Internal Audit, including opinion on internal control and risk management framework</li> </ul>	Chief Internal Auditor	Reports to JAC	←	Chief Internal Auditor	Reports to JAC	←
			Annual opinion issued	←		Annual opinion issued	←
6. Corporate Governance Arrangements	<ul style="list-style-type: none"> <li>Annual corporate governance assurance statement</li> <li>Internal or external audit review of corporate governance arrangements</li> <li>Monitoring reports to committee on delivery of action plans in response to reviews of corporate governance</li> </ul>	Chief Executive	Annual Governance Statement produced	←	CFO	Annual Governance Statement produced	←
			Internal audit annual audit	←		Internal audit annual audit	←
			External audit annual audit	←		External audit annual audit	←
			Action plans and progress will be reported to JAC	←		Action plans and progress will be reported to JAC	←
7. Performance monitoring arrangements	<ul style="list-style-type: none"> <li>Annual and in-year reports on delivery of key performance indicators by internal and/or external review agencies</li> </ul>	Ch Exec / Head of Performance	All relevant reports on KPIs/SPIs reported to PCC and Force Performance Group	←	DCC	All relevant reports on KPIs/SPIs reported to PCC and Force Performance Group	←

**Objective 5: Evaluate assurances and identify gaps in control/assurances**

<b>Step 1: In support of objective 5 – The authority has made adequate arrangements to identify, receive and evaluate reports from the defined internal and external assurance providers to identify areas of weakness in controls</b>							
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
1. Responsibilities for the evaluation of assurances are clearly defined throughout the organisation.	<ul style="list-style-type: none"> <li>Minutes of committee meetings</li> <li>Training plans</li> <li>Job descriptions</li> </ul>	Chief Executive	Code of Corporate Governance identifies specific responsibilities for key members and officers. Committee/Board Terms of Reference identify responsibilities	←	DCC	Code of Corporate Governance identifies specific responsibilities for key members and officers. Committee/Board Terms of Reference identify responsibilities	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
<p>2. Mechanism established for collecting governance assurances</p> <ul style="list-style-type: none"> <li>Overall responsibility allocated to governance senior officer group</li> </ul> <p>Required assurances are agreed and recorded</p> <ul style="list-style-type: none"> <li>Central record of all assurances (either evidence file, or showing clear link to where evidence is held)</li> <li>Clear guidance as to evaluation procedure including assurance over risks, independence and objectivity of assurances</li> </ul> <p>Defined evaluation mechanism</p> <ul style="list-style-type: none"> <li>Timetable for completion by statutory deadline</li> </ul> <p>Gap assessment – performed and challenged</p>	<ul style="list-style-type: none"> <li>Committee terms of reference</li> <li>Terms of reference and key responsibilities</li> </ul>	Chief Executive	Internally, the review of the AGS is conducted by Ch Exec and Constabulary CFO. The outcome from the initial review of the AGS matrix is presented within the AGS. The AGS is produced using the review of the AGS matrix, Internal Audit reports and the Annual Internal Audit Opinion, External Audit reports and other sources to form a rounded view of the current situation. This identifies any significant risks which are managed via an action plan. Internal and External Audit recommendations are followed up by Internal and External Audit as well as by the PCC or Constabulary. The Audit Commission's Annual Governance Report reviews the AGS and confirms that all assurances have been given. The JAC reviews and comments on the AGS.	←	CFO	Internally, the review of the AGS is conducted by Ch Exec and Constabulary CFO. The outcome from the initial review of the AGS matrix is presented within the AGS. The AGS is produced using the review of the AGS matrix, Internal Audit reports and the Annual Internal Audit Opinion, External Audit reports and other sources to form a rounded view of the current situation. This identifies any significant risks which are managed via an action plan. Internal and External Audit recommendations are followed up by Internal and External Audit as well as by the PCC or Constabulary. The Audit Commission's Annual Governance Report reviews the AGS and confirms that all assurances have been given. The JAC reviews and comments on the AGS.	←
	<ul style="list-style-type: none"> <li>Record of assurances required and received is held and is complete</li> </ul>		Annual internal audit opinion	←		Annual internal audit opinion	←
	<ul style="list-style-type: none"> <li>Approved written guidance re evaluation procedure</li> </ul>		Evidence gathered through assurance statements from lead stakeholders. Internal audit undertake annual reviews of corporate governance. This document supported by declarations and further evidence	←		Evidence gathered through assurance statements from lead stakeholders. Internal audit undertake annual reviews of corporate governance. This document supported by declarations and further evidence	←
	<ul style="list-style-type: none"> <li>Scoring matrix/methodology (Not all assurances are suitable for grading; many will be subjective anyway)</li> </ul>		Not required – a traffic light system is used to identify areas that require improvement (amber) or significant improvement (red)	←		Not required – a traffic light system is used to identify areas that require improvement (amber) or significant improvement (red)	←
	<ul style="list-style-type: none"> <li>An agreed timetable, allowing for in-year evidence gathering and assessment and for the period between the year-end and the date of the governance assurance statement (timetable driven by that for the production of the annual statement of accounts)</li> </ul>		Not required – a traffic light system is used to identify areas that require improvement (amber) or significant improvement (red)	←		Not required – a traffic light system is used to identify areas that require improvement (amber) or significant improvement (red)	←
	<ul style="list-style-type: none"> <li>Gap assessment results and actions arising there from; Minutes of meetings; Annual report of Head of Internal Audit – including opinion on internal control and risk management framework; Reports of external auditor and other external review agencies</li> </ul>		See above re. process for preparing and producing the AGS.	←		See above re. process for preparing and producing the AGS.	←
		Action plans produced and reported to JAC; JAC minutes on internet	←		Action plans produced and reported to JAC; JAC minutes on internet	←	

**Objective 6: Action plan to address weaknesses and ensure continuous improvement of the system of internal control**

Step 1: In support of objective 6 – There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored							
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Lead	Comments	Direction
1. An action plan is drawn up and approved	<ul style="list-style-type: none"> <li>Prioritised action plan, setting out actions, responsibilities and timescales, approved at appropriate level</li> <li>Minutes</li> </ul>	Chief Executive	Action plans received and held by Ch Exec. Progress reported to JAC	←	CFO	Action plans received and held by Compliance Unit. Progress reported to JAC	←
			JAC minutes	←		JAC minutes	←
2. All actions are 'SMART':	<ul style="list-style-type: none"> <li>Each action on prioritised action plan is compliant with 'SMART' test</li> </ul>	Chief Executive	Action plans received and held by Ch Exec. Progress reported to JAC	←	CFO	Action plans received and held by Compliance Unit. Progress reported to JAC	←
				←			←
3. Actions communicated and responsibilities assigned	<ul style="list-style-type: none"> <li>Responsibilities for each action are defined in action plan</li> <li>Evidence of distribution of action plan to those who require it</li> </ul>	Chief Executive	Action plans received and held by Compliance Unit. Progress reported to JAC	←	CFO	Action plans received and held by Compliance Unit. Progress reported to JAC	←
				←			←
4. Implementation timescales agreed	<ul style="list-style-type: none"> <li>Target dates included in action plan</li> </ul>	Chief Executive	Target dates are in action plans	←	CFO	Target dates are in action plans	←
				←			←
5. Ongoing review of progress and of continuing appropriateness of action	<ul style="list-style-type: none"> <li>Timetabled reviews</li> <li>Minutes</li> <li>Progress reports</li> <li>Internal audit or other review of implementation of agreed actions</li> </ul>	Chief Executive	Updates given at meetings as appropriate	←	CFO	Updates given at meetings as appropriate	←
			JAC minutes produced	←		JAC minutes produced	←
			Updated reports received by JAC	←		Updated reports received by JAC	←
			In the internal audit plan as an annual review. Informs the Internal Audit strategy and risk assessment process.	←		In the internal audit plan as an annual review. Informs the Internal Audit strategy and risk assessment process.	←

**Objective 7: Annual Governance Statement:**

Step 1: In support of objective 7 – An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 200, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006, and is in accordance with CIPFA guidance.							
Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Lead	Comments	Direction
1. Responsibility for the compilation of the Annual	<ul style="list-style-type: none"> <li>Documented key responsibilities</li> </ul>	Chief Executive	Chief Executive to draft	←	CFO	Assigned to the Chief Finance Officer	←

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Force Lead	Force Comments	Direction
Governance Statement has been	Minutes		JAC minutes monitor progress	←		JAC minutes monitor progress	←
2. There is an Annual Governance Statement production timetable that meets the statutory deadline	<ul style="list-style-type: none"> <li>Annual Governance Statement timetable is linked to that for the preparation of statutory accounts</li> </ul>	Chief Executive	The timetable is set by the deadline for the Accounts. The timetable shows individual responsibilities. The matrix is drafted by the Constabulary's CFO and subject to review by the Ch Exec. The resultant AGS is written by the Ch Exec.	←	CFO	The timetable is set by the deadline for the Accounts. The timetable shows individual responsibilities. The matrix and AGS is drafted by the Constabulary's CFO .	←
3. The Annual Governance Statement is reviewed, challenged and approved by the authority	<ul style="list-style-type: none"> <li>Terms of reference assigned to senior officers group</li> <li>Annual Governance Statement is compliant with CIPFA guidance</li> <li>Minutes</li> </ul>	Chief Executive	Reviewed by JAC and signed by PCC	←	CFO	Reviewed by JAC and signed by Chief Constable.	←
4. Governance assurance statement is prepared, incorporating all the required elements of the statement on internal control	<ul style="list-style-type: none"> <li>Format of governance assurance statement clearly incorporates required elements of the statement on internal control</li> <li>Governance assurance statement is prepared by a senior officer group under terms of reference defined by the authority</li> <li>Statutory timetable is followed</li> </ul>	Chief Executive	Produced in accordance with required content	←	CFO	Produced in accordance with required content	←
		Chief Executive	Prepared by Ch Exec	←	CFO	Prepared by CFO	←
		Chief Executive	Authorised by 30 September.	←	CFO	Authorised by 30 September.	←

**Objective 8: Report to cabinet/executive committee**

**Step 1: In support of objective 8 – An annual report to the authority (or delegated committee) on the Annual Governance Statement is presented, in accordance with the CIPFA pro forma**

Examples of assurance:	Evidenced by:	OPCC Lead	OPCC Comments	Direction	Lead	Comments	Direction
1. Responsibility for reporting is clearly defined	<ul style="list-style-type: none"> <li>Initial report explaining the requirement to produce an annual governance assurance statement should establish the reporting arrangements / responsibilities of all involved and set out who should sign the annual governance assurance statement after approval by the authority or designated committee</li> <li>Reports identifying any changes to initial arrangements</li> </ul>	Chief Executive	Annual Governance Statement to be signed by PCC. AGS reviewed by JAC.	←	CFO	Annual Governance Statement to be signed by Chief Constable. AGS reviewed by JAC.	←
		Chief Executive	Supplementary evidence and action plans to be available to support conclusions and ensure that work will be undertaken where necessary	←	CFO	Supplementary evidence and action plans to be available to support conclusions and ensure that work will be undertaken where necessary	←
2. The signatories to the annual governance assurance statement are defined and are appropriate in accordance with statutory requirements (i.e. Most senior officer and most senior member of the organisation)	As above	Chief Executive	As above	←	CFO	As above	←
3. The report is likely to be published in a timely fashion with the statutory accounts	Assessment of the current position in relation to the statutory deadline	Chief Finance Officer	The Accounts and Audit (England) Regulations make it clear that the AGS is not part of the statutory accounts (and subsequent external audit opinion), rather that they accompany the accounts. The accounts will now be approved at the September meeting of the JAC. The approval of the AGS is likely to be at the same meeting.	←	CFO	The Accounts and Audit (England) Regulations make it clear that the AGS is not part of the statutory accounts (and subsequent external audit opinion), rather that they accompany the accounts. The accounts will now be approved at the September meeting of the JAC. The approval of the AGS is likely to be at the same meeting.	←