



# THE POLICE AND CRIME COMMISSIONER FOR CLEVELAND AND THE CHIEF CONSTABLE OF CLEVELAND

Draft Internal Audit Strategy 2023/24 - 2025/26 (including the Internal Audit Plan 2023/24)

Presented at the Joint Audit Committee meeting of: 21 March 2023

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

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

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# EXECUTIVE SUMMARY

Our Internal Audit Plan for 2023 / 2024 is presented for consideration by the Joint Audit Committee. During the year, we will continue to work with management and hold regular meetings to deliver an internal audit programme which remains flexible and 'agile' to ensure it meets your needs.

The key points to note from our plan are:



**2023 / 2024 internal audit priorities:** internal audit activity for 2023 / 2024 is based on analysing your risk registers (Police and Crime Commissioner and Chief Constable), and assurances provided by other providers e.g. HMICFRS. We have also considered other factors affecting you in the year ahead including changes within the sector. Our detailed plan for 2023 / 2024 is included at section two of this report.

The internal audit priorities have been discussed at the Force's Audit, Inspection and Risk Board meeting in January 2023 and more detailed discussions have also been held with the Police and Crime Commissioner's Chief Finance Officer, Chief Constable's Chief Finance Officer and Head of Corporate Services.



**Level of resource:** the level of resource required to deliver the plan is in section two of this report and our daily rates are in line with our tender submission.



**Core assurance:** the key priorities and changes within the organisations during the period have been reflected within the proposed audit coverage for 2023 / 2024 and beyond. During the development of the internal audit plan the following key areas were considered:

**PEEL Assessment:** the Force has been subject to a PEEL inspection at the time of drafting the internal audit plan but the results of which have not been formally published. The plan has been considered by the Force's Audit, Inspection and Risk Board to ensure it considers the key risks facing the organisation. The plan will be revisited in year, and when the Inspectorate report is released, to ensure the audit programme focusses on the key risks / areas of priority.



**Risk Registers:** we have reviewed the Police and Crime Commissioner's (PCC) and Chief Constable's risk registers to inform the basis of the 2023 / 2024 plan and the wider three-year strategy. This has resulted in a number of reviews being included within the plan that are driven directly from risks identified by the Force / PCC risk registers.

**'Agile' approach:** our approach to working with you is that we will respond to your changing assurance needs. By employing an 'agile' or a flexible approach to our service delivery, we are able to change the focus of audits / audit delivery; keeping you informed of these changes in our progress papers to the Joint Audit Committee during the year.



# CONTENTS

1.	YOUR INTERNAL AUDIT PLAN.....	5
2.	INTERNAL AUDIT PLAN 2023 / 2024 .....	6
	APPENDIX A: YOUR INTERNAL AUDIT SERVICE.....	10
	APPENDIX B: INTERNAL AUDIT STRATEGY 2023 / 2026.....	11
	APPENDIX C: INTERNAL AUDIT CHARTER .....	17
	FOR FURTHER INFORMATION CONTACT .....	22

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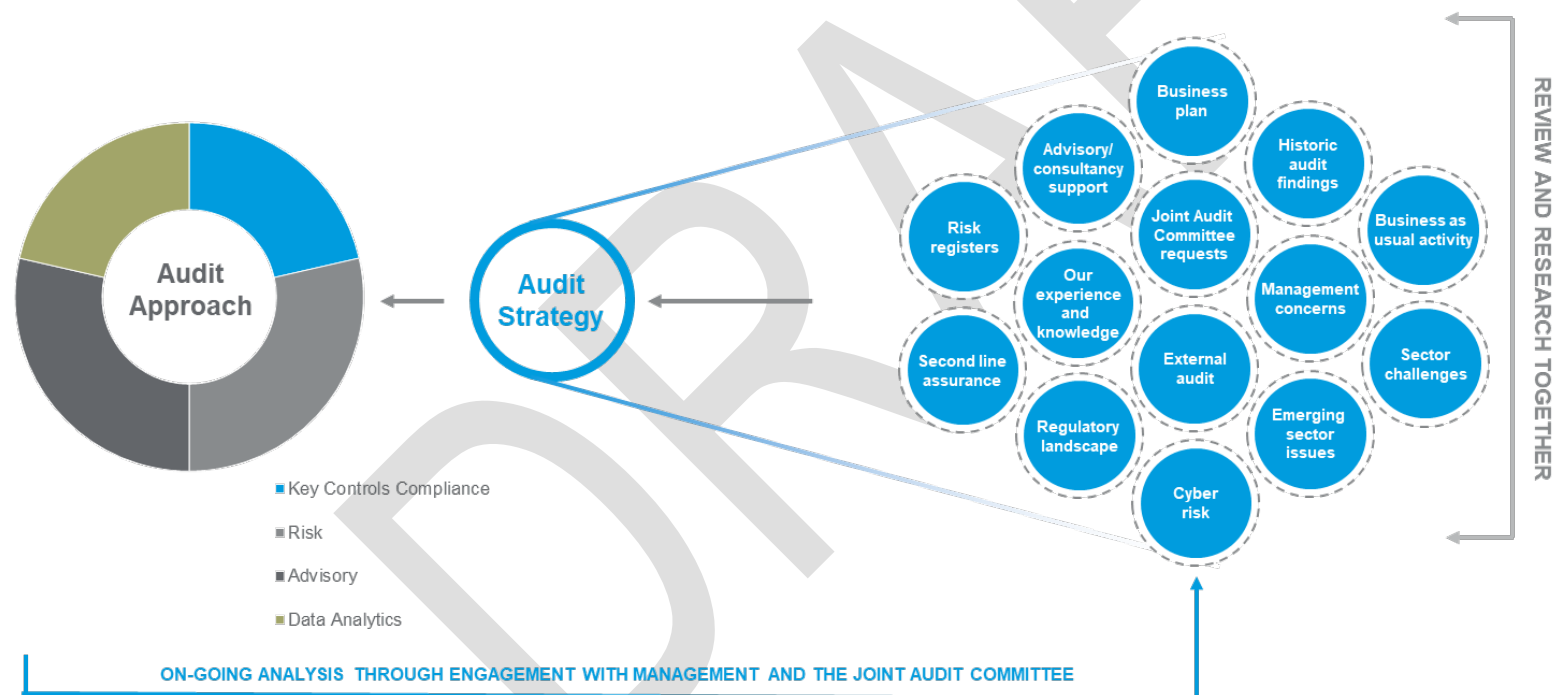
# 1. YOUR INTERNAL AUDIT PLAN

Our approach to developing your internal audit plan is based on analysing your risk profile and assurance framework as well as other factors affecting the Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland in the year ahead, including changes within the sector.

## Risk management processes

We have evaluated and reviewed your risk management arrangements in 2020/21 and consider that we can place reliance on your risk registers / assurance framework to inform the internal audit strategy. We also have regular sight of the risk register at the Joint Audit Committee and are familiar with the risk management arrangements at the Force and the OPCC. We have used various sources of information (see Figure A below) and discussed priorities for internal audit coverage with senior management and the Joint Audit Committee.

Figure A: Audit considerations – sources considered when developing the internal audit strategy.



Based on our understanding of the organisations, the information provided to us by stakeholders, and the regulatory requirements, we have developed an annual internal plan for the coming year and a high level strategic plan (see section two and Appendix B for full details).

## 2. INTERNAL AUDIT PLAN 2023 / 2024

The table below shows each of the reviews that we propose to undertake as part of the internal audit plan for 2023 / 2024. The table details the strategic risks which may warrant internal audit coverage. This review of your risks allows us to ensure that the proposed plan will meet the organisations' assurance needs for the forthcoming and future years. As well as assignments designed to provide assurance or advisory input around specific risks, the strategy also includes: time for tracking the implementation of actions and an audit management allocation.

Objective of the review (Strategic risk)	Days	Proposed timing	Proposed Joint Audit Committee
<b>Strategic risk:</b>			
<b><u>(Chief Constable) Risk Reference: 1439</u></b> <b><u>Sickness Absence</u></b> Our review will consider the application of the Force's sickness absence policy and communication with the payroll function to ensure pay is reduced accordingly in accordance with the length of absence.	15	Week commencing 17 July 2023	September 2023
<b><u>(Police and Crime Commissioner) Risk Reference: 1485</u></b> <b><u>Police and Crime Plan</u></b> The Commissioner's Police and Crime Plan has been developed following the appointment of the new Commissioner in May 2021. 10 priorities have been included in this plan. Our review will ascertain if there is evidence to support the delivery of the objectives, progress is reviewed at regular intervals and where appropriate remedial action is put in place.	8	Week commencing 7 August 2023	December 2023
<b><u>(Chief Constable) Risk Reference: 1662</u></b> <b><u>Ethical Standards</u></b> The Code of Ethics defines the expectations of standards and behaviour for everyone in policing. As part of this review we will consider the route available to chief officers to raise and discuss ethical concerns.	8	Week commencing 8 January 2024	March 2024
<b><u>(Chief Constable) Risk Reference: 1685</u></b> <b><u>ICT: Vulnerability and Incident Response</u></b> Our review will focus on the Force's technical vulnerability management and ICT incident management. This review will be performed by an IT specialist.	15	Week commencing 12 February 2024	June 2024
<b><u>(Police and Crime Commissioner) Risk Reference: 1720</u></b> <b><u>Complaints</u></b> The Police (Complaints and Misconduct) Regulations 2020 (the Regulations) came into force on 1 February 2020. This new legislation was introduced in order to simplify the complaints system, making it easier to navigate, and puts a greater emphasis on handling complaints in a reasonable and proportionate manner,	10	Week commencing 12 February 2024	June 2024

Objective of the review (Strategic risk)	Days	Proposed timing	Proposed Joint Audit Committee
along with an enhanced role for police and crime commissioners to strengthen independence. Under this new legislation the Commissioner has decided to take on the fullest responsibility for police complaints.			
<b><u>(Chief Constable) Risk Reference: 1724</u></b>	10	Week commencing 4 September 2023	December 2023
<b><u>Vetting</u></b> Following several highly public controversies, including the murder of Sarah Everard by a serving police officer, the importance of vetting existing and new recruits has been raised by the HMICFRS as a concern which it concluded that 'vetting standards are not high enough and it is too easy for the wrong people to both join and stay in the police.' RSM reviewed the Force's vetting arrangements in 2022/23 resulting in a <b>partial assurance</b> opinion, and this review will consider the changes made to ensure vetting requirements / standards are maintained.			
<b><u>Core Assurance</u></b>			
<b><u>Victims' Code</u></b> Our review will focus on providing assurance that the Force is complying with its statutory obligations under the Victims' Code which sets out the minimum level of service that victims should receive from the criminal justice system.	12	Week commencing 16 October 2023	March 2024
<b><u>Data Quality</u></b> Following the recent HMICFRS PEEL Assessment which encompassed CDI, we will review the actions raised by the Inspectorate in relation to data quality and agree the scope with management in year.	15	Week commencing 13 November 2023	March 2024
<b><u>Performance and Capability Management</u></b> The Force and PCC are committed to ensuring all staff achieve and maintain the standards of performance and capability required in order to enable operations and for all activities to be carried out effectively. Our review will focus on police officers and how objectives are set and monitored.	15	Week commencing 8 January 2024	March 2024
<b><u>Overtime</u></b> Our review will ensure that overtime has taken place to maintain a specific level of service or completion of a specific service, and that the use of overtime has been appropriately reviewed and approved in line with the Police Regulations. In 2020 / 2021, RSM reviewed the overtime arrangements at the Force which resulted in a <b>partial assurance</b> opinion being provided.	10	Week commencing 29 May 2023	September 2023
<b><u>Seized and Found Property</u></b>	12	Week commencing 19 June 2023	September 2023

Objective of the review (Strategic risk)	Days	Proposed timing	Proposed Joint Audit Committee
To ensure adequate recording, storage and disposal of non-cash items seized or found and handed to the police. This will include a review of the system to accurately record the location and status of the property.			
<b>HR: Training</b> The Force must ensure that each of its officers is suitably trained to perform the duties required by their role. Training requirements are often mandated by a number of governing bodies, such as the College of Policing (CoP) or National Police Chiefs' Council (NPCC), or government legislation (such as the Health and Safety at Work (Police) Act), and much of the training must be refreshed within a certain timeframe (often annually, as for officer safety training which is a requirement for all officers). Our review will confirm training requirements are managed, recorded and refreshed within the required timeframes. This review was scheduled to take place during the 2022 / 2023 internal audit programme but was deferred.	10	Week commencing 26 June 2023	September 2023
<b>Health and Safety</b> RSM reviewed the Force's health and safety arrangements in 2022 / 2023 resulting in a <b>minimal assurance</b> opinion. Our review will consider the strengthening of the Force's arrangements and ensuring its statutory responsibilities have been discharged appropriately.	10	Week commencing 2 October 2023	December 2023
<b>HMICFRS: Recommendation Tracking</b> Our review will consider the framework in place to manage and close actions raised by the HMICFRS through specific local review and thematic inspections.	10	Week commencing 18 September 2023	December 2023
<b>Other Internal Audit Activity</b> <b>Follow Up of Previous Internal Audit Management Actions</b> To meet internal auditing standards, and to provide assurance on action taken to address recommendations previously agreed by management. We will undertake two visits during the year.	14	Week commencing 14 August 2023  Week commencing 22 January 204	September 2023  March 2024
<b>Management</b> This will include: <ul style="list-style-type: none"> <li>• Annual planning;</li> <li>• Preparation for, and attendance at, Joint Audit Committee;</li> <li>• Regular liaison and progress updates;</li> <li>• Liaison with external audit and other assurance providers; and</li> </ul>	20	Ongoing	-



Objective of the review (Strategic risk)	Days	Proposed timing	Proposed Joint Audit Committee
<ul style="list-style-type: none"> <li>Preparation of the annual opinions.</li> </ul>			
<b>Total</b>	<b>194</b>		

A detailed planning process will be completed for each review, and the final scope will be documented in an assignment planning sheet. This will be issued to the key stakeholders for each review.

## 2.1 Working with other assurance providers

The Joint Audit Committee is reminded that internal audit is only one source of assurance and through the delivery of our plan we will not, and do not, seek to cover all risks and processes within the organisations.

We will however continue to work closely with other assurance providers, such as external audit to ensure that duplication is minimised, and a suitable breadth of assurance obtained.

# APPENDIX A: YOUR INTERNAL AUDIT SERVICE

Your internal audit service is provided by RSM UK Risk Assurance Services LLP. The team will be led by Daniel Harris as your Head of Internal Audit, supported by Philip Church as your Senior Manager and Mike Gibson as your Client Manager.

## Fees

The delivery of the 2023 / 2024 internal audit plan will be based around a core team and the fees are based on the day rates quoted within our tender. However, we will complement the team with additional specialist skills where required, for example, IT auditors, fraud solutions and policing specialists.

## Conformance with internal auditing standards

RSM affirms that our internal audit services are designed to conform to the Public Sector Internal Audit Standards (PSIAS).

Under PSIAS, internal audit services are required to have an external quality assessment every five years. Our risk assurance service line commissioned an external independent review of our internal audit services in 2021 to provide assurance whether our approach meets the requirements of the International Professional Practices Framework (IPPF), and the Internal Audit Code of Practice, as published by the Global Institute of Internal Auditors (IIA) and the Chartered IIA, on which PSIAS is based.

The external review concluded that RSM 'generally conforms\*' to the requirements of the IIA Standards' and that 'RSM IA also generally conforms with the other Professional Standards and the IIA Code of Ethics. There were no instances of non-conformance with any of the Professional Standards'.

\* The rating of 'generally conforms' is the highest rating that can be achieved, in line with the IIA's EQA assessment model.

## Conflicts of interest

RSM do provide risk management software to the Force. However, this engagement is via a completely separate team, led by a different partner and we have satisfied ourselves and the Force that this does not constitute a conflict of interest. We are not aware of any other relationships that may affect the independence and objectivity of the team, and which are required to be disclosed under internal auditing standards.

## APPENDIX B: INTERNAL AUDIT STRATEGY 2023 / 2026

The table below shows an overview of the audit coverage to be provided through RSM's delivery of the internal audit strategy. This has been derived from the process outlined in Section 1 above, as well as our own view of the risks facing the sector as a whole.

Assurance Provided	Internal Audit – Third Line of Assurance (Independent review / assurance)					
	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Red - Minimal Assurance / Poor Progress						
Amber/red - Partial Assurance / Little Progress						
Amber/green - Reasonable Assurance / Reasonable Progress						
Green - Substantial Assurance / Good Progress						
Advisory / AUP						
IDEA						

Audit Area						
Strategic risk						
Risk Reference: 1439	✓ (Human Resources: Wellbeing)	✓ (Sickness and Absence including Medical Retirement)		✓ (Sickness Absence)		
Risk Reference: 1523		✓ (Force Control Room)			✓	
Risk Reference: 1552				✓ (GDPR)		
Risk Reference: 1487	✓ (Commissioning)			✓ (Commissioning)		✓
Risk Reference: 1478 and 1435		✓ (Financial Planning)			✓	

Assurance Provided	
	Red - Minimal Assurance / Poor Progress
	Amber/red - Partial Assurance / Little Progress
	Amber/green - Reasonable Assurance / Reasonable Progress
	Green - Substantial Assurance / Good Progress
	Advisory / AUP
	IDEA

## Internal Audit – Third Line of Assurance

(Independent review / assurance)

2020/21

2021/22

2022/23

2023/24

2024/25

2025/26

## Audit Area

Risk Reference: 1474

✓

(Whistleblowing)

✓

Risk Reference: 1485

✓

(Police and  
Crime Plan)

Risk Reference: 1569

✓

(Domestic Abuse)

✓

(Vulnerable  
People)

Risk Reference: 1723

✓

(HR:  
Recruitment  
and Section)

Risk Reference: 1724

✓

(Vetting)

Risk Reference: 1733

✓

(Firearms  
Licensing)

Risk Reference: 1662

✓

Assurance Provided	
	Red - Minimal Assurance / Poor Progress
	Amber/red - Partial Assurance / Little Progress
	Amber/green - Reasonable Assurance / Reasonable Progress
	Green - Substantial Assurance / Good Progress
	Advisory / AUP
	IDEA

## Internal Audit – Third Line of Assurance

(Independent review / assurance)

2020/21

2021/22

2022/23

2023/24

2024/25

2025/26

## Audit Area

						(Ethics Standards)
Risk Reference: 1685			✓ (Cyber Security Review)	✓ (ICT)	✓ (ICT)	✓ (ICT)
Risk Reference: 1706					✓ (Civil Orders)	
Risk Reference: 1720				✓ (Complaints)		
<b>Core assurance</b>						
Health and Safety			✓	✓		
Complaints		✓				
Victims' Code		✓		✓		
Criminal Disclosure			✓			
Positive Action	✓					

Assurance Provided	
	Red - Minimal Assurance / Poor Progress
	Amber/red - Partial Assurance / Little Progress
	Amber/green - Reasonable Assurance / Reasonable Progress
	Green - Substantial Assurance / Good Progress
	Advisory / AUP
	IDEA

## Internal Audit – Third Line of Assurance

(Independent review / assurance)

2020/21

2021/22

2022/23

2023/24

2024/25

2025/26

## Audit Area

Collaborations

✓

(Tactical Training  
Centre (TTC) /  
CDSOU: Inventory  
Management)

✓

(CDSOU)

✓

Risk Management

✓

✓

Overtime

✓

✓

Business Continuity Planning

✓

Integrated Offender Management

✓

✓

Key Financial Controls

✓

✓

✓

✓

✓

(Purchases and  
Credit Cards)

(Key Financial  
Controls)

✓

(Payroll)

✓

(KFC)

Assurance Provided	
	Red - Minimal Assurance / Poor Progress
	Amber/red - Partial Assurance / Little Progress
	Amber/green - Reasonable Assurance / Reasonable Progress
	Green - Substantial Assurance / Good Progress
	Advisory / AUP
	IDEA

## Internal Audit – Third Line of Assurance

(Independent review / assurance)

2020/21

2021/22

2022/23

2023/24

2024/25

2025/26

### Audit Area

Seized Exhibits

✓

✓

✓

✓

✓

✓

Subject Access Requests

✓

✓

HMICFRS: Recommendation Tracking

✓

✓

✓

✓

✓

✓

Data Quality

✓

✓

(DQ Process (Crime Recording) – Force Audit and Monitoring Mechanisms)

Bail Management

✓

Evidence Based Prosecution Review

✓

✓

Policies and Procedures

✓

Performance and Capability Management

✓

Vetting

✓

ANPR

✓

✓

Assurance Provided	
	Red - Minimal Assurance / Poor Progress
	Amber/red - Partial Assurance / Little Progress
	Amber/green - Reasonable Assurance / Reasonable Progress
	Green - Substantial Assurance / Good Progress
	Advisory / AUP
	IDEA

## Internal Audit – Third Line of Assurance

(Independent review / assurance)

2020/21

2021/22

2022/23

2023/24

2024/25

2025/26

### Audit Area

Force Management Statements

✓

Firearm Licensing

✓

✓

Equality, Diversity and Inclusion

✓

Human Resources

✓

✓

✓

(Suspension  
and Restrictive  
Duties)

(Training)

(Agency  
Staff)

### Other Internal Audit Activity

Follow Up of Previous IA Management Actions: Visit 1

✓

✓

✓

✓

✓

✓

Follow Up of Previous IA Management Actions: Visit 2

✓

✓

✓

✓

✓

✓



# APPENDIX C: INTERNAL AUDIT CHARTER

## Need for the charter

This charter establishes the purpose, authority and responsibilities for the internal audit service for The Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland. The establishment of a charter is a requirement of the Public Sector Internal Audit Standards (PSIAS) and approval of the charter is the responsibility of the audit committee.

The internal audit service is provided by RSM UK Risk Assurance Services LLP ("RSM").

We plan and perform our internal audit work with a view to reviewing and evaluating the risk management, control and governance arrangements that the organisation has in place, focusing in particular on how these arrangements help you to achieve its objectives. The PSIAS encompass the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF) as follows:

- Core principles for the professional practice of internal auditing;
- Definition of internal auditing;
- Code of ethics; and
- The Standards.

## Mission of internal audit

As set out in the PSIAS, the mission articulates what internal audit aspires to accomplish within an organisation. Its place in the IPPF is deliberate, demonstrating how practitioners should leverage the entire framework to facilitate their ability to achieve the mission.

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*"To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight".*

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## Independence and ethics

To provide for the independence of internal audit, its personnel report directly to Dan Harris (acting as your Head of Internal Audit). The independence of RSM is assured by the internal audit service reporting to the Police and Crime Commissioner and the Chief Constable, with further reporting lines to the Chief Finance Officer, the Force and the Chief Finance Officer, Police and Crime Commissioner.

The Head of Internal Audit has unrestricted access to the Chair of Joint Audit Committee to whom all significant concerns relating to the adequacy and effectiveness of risk management activities, internal control and governance are reported.

Conflicts of interest may arise where RSM provides services other than internal audit to the Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland. Steps will be taken to avoid or manage transparently and openly such conflicts of interest so that there is no real or perceived threat or impairment to independence in providing the internal audit service. If a potential conflict arises through the provision of other services, disclosure will be reported to the Joint Audit Committee. The nature of the disclosure will depend upon the potential impairment and it is important that our role does not appear to be compromised in reporting the matter to the Joint Audit Committee. Equally we do not want the organisation to be deprived of wider RSM expertise and will therefore raise awareness without compromising our independence.

## Responsibilities

In providing your outsourced internal audit service, RSM has a responsibility to:

- Develop a flexible and risk based internal audit strategy with more detailed annual audit plans. The plan will be submitted to the Joint Audit Committee for review and approval each year.
- Implement the internal audit plan as approved, including any additional tasks requested by management and the Joint Audit Committee.
- Ensure the internal audit team consists of professional audit staff with sufficient knowledge, skills, and experience.
- Establish a quality assurance and improvement program to ensure the quality and effective operation of internal audit activities.
- Perform advisory activities where appropriate, beyond internal audit's assurance services, to assist management in meeting its objectives.
- Bring a systematic disciplined approach to evaluate and report on the effectiveness of risk management, internal control and governance processes.
- Highlight control weaknesses and required associated improvements together with corrective action recommended to management based on an acceptable and practicable timeframe.
- Undertake follow up reviews to ensure management has implemented agreed internal control improvements within specified and agreed timeframes.
- Report regularly to the Joint Audit Committee to demonstrate the performance of the internal audit service.

For clarity, we have included the definition of 'internal audit', 'senior management' and 'audit committee'.

- Internal audit - a department, division, team of consultant, or other practitioner (s) that provides independent, objective assurance and consulting services designed to add value and improve an organisation's operations. The internal audit activity helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of governance, risk management and control processes.
- Senior management team - who are the team of individuals at the highest level of organisational management who have the day-to-day responsibilities for managing the organisation.

- Audit committee - The committee responsible for enhancing public trust and confidence in the governance of the office of the police and crime commissioner and police force. In addition, assisting a police and crime commissioner in discharging statutory responsibilities in holding a police force to account.

## **Client care standards**

In delivering our services we require full cooperation from key stakeholders and relevant business areas to ensure a smooth delivery of the plan. We proposed the following KPIs for monitoring the delivery of the internal audit service:

- Discussions with senior staff at the client take place to confirm the scope four weeks before the agreed audit start date.
- Key information such as: the draft assignment planning sheet are issued by RSM to the key auditee four weeks before the agreed start date.
- The lead auditor to contact the client to confirm logistical arrangements at least 10 working days before the commencement of the audit fieldwork to confirm practical arrangements, appointments, debrief date etc.
- Fieldwork takes place on agreed dates with key issues flagged up immediately.
- A debrief meeting will be held with audit sponsor at the end of fieldwork or within a reasonable time frame.
- Draft reports will be issued within 10 working days of the debrief meeting and will be issued by RSM to the agreed distribution list / Sharefile.
- Management responses to the draft report should be submitted to RSM.
- Within three working days of receipt of client responses the final report will be issued by RSM to the assignment sponsor and any other agreed recipients of the report.

## **Authority**

The internal audit team is authorised to:

- Have unrestricted access to all functions, records, property and personnel which it considers necessary to fulfil its function.
- Have full and free access to the Joint Audit Committee.
- Allocate resources, set timeframes, define review areas, develop scopes of work and apply techniques to accomplish the overall internal audit objectives.
- Obtain the required assistance from personnel within the organisation where audits will be performed, including other specialised services from within or outside the organisation.

The Head of Internal Audit and internal audit staff are not authorised to:

- Perform any operational duties associated with the organisation.
- Initiate or approve accounting transactions on behalf of the organisation.
- Direct the activities of any employee not employed by RSM unless specifically seconded to internal audit.

## Reporting

An assignment report will be issued following each internal audit assignment. The report will be issued in draft for comment by management, and then issued as a final report to management, with the executive summary being provided to the Joint Audit Committee. The final report will contain an action plan agreed with management to address any weaknesses identified by internal audit.

The internal audit service will issue progress reports to the Joint Audit Committee and management summarising outcomes of audit activities, including follow up reviews.

As your internal audit provider, the assignment opinions that RSM provides the organisations during the year are part of the framework of assurances that assist the Joint Audit Committee in taking decisions and managing its risks.

As the provider of the internal audit service we are required to provide an annual opinion on the adequacy and effectiveness of the organisations' governance, risk management and control arrangements. In giving our opinion it should be noted that assurance can never be absolute. The most that the internal audit service can provide to the Joint Audit Committee is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes. The annual opinions will be provided to the organisations by RSM UK Risk Assurance Services LLP at the financial year end. The results of internal audit reviews, and the annual opinions, should be used by management and the Joint Audit Committee to inform the organisations' annual governance statement.

## Data protection

Internal audit files need to include sufficient, reliable, relevant and useful evidence in order to support our findings and conclusions. Personal data is not shared with unauthorised persons unless there is a valid and lawful requirement to do so. We are authorised as providers of internal audit services to our clients (through the firm's terms of business and our engagement letter) to have access to all necessary documentation from our clients needed to carry out our duties.

## Quality Assurance and Improvement

As your external service provider of internal audit services, we have the responsibility for maintaining an effective internal audit activity. Under the standards, internal audit services are required to have an external quality assessment every five years. In addition to this, we also have in place an internal quality assurance and improvement programme, led by a dedicated team who undertake these reviews. This ensures continuous improvement of our internal audit services.

Any areas which we believe warrant bringing to your attention, which may have the potential to have an impact on the quality of the service we provide to you, will be raised in our progress reports to the Joint Audit Committee.

## Fraud

The Joint Audit Committee recognises that management is responsible for controls to reasonably prevent and detect fraud. Furthermore, the Joint Audit Committee recognises that internal audit is not responsible for identifying fraud; however internal audit will be aware of the risk of fraud when planning and undertaking any assignments.

## Approval of the internal audit charter

By approving this document, the internal audit strategy, the Joint Audit Committee is also approving the internal audit charter.

# FOR FURTHER INFORMATION CONTACT

**Daniel Harris**

Head of Internal Audit

**RSM UK Risk Assurance Services LLP**

1 St. James' Gate, Newcastle Upon Tyne, NE1 4AD

**M:** +44 (0)7792 948767 | **W:** [www.rsmuk.com](http://www.rsmuk.com)

**rsmuk.com**

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

Our report is prepared solely for the confidential use of **The Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland**, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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