THE POLICE, FIRE AND CRIME COMMISSIONER FOR NORTH YORKSHIRE

Freedom of Information Requests

REVISED FINAL

Internal audit report 7.20/21

18 January 2021



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Debrief held	11 December 2020	Internal audit team	Daniel Harris, Head of Internal Audit
Draft report issued	22 December 2020		Angela Ward, Senior Manager
Responses received	15 January 2021		Philip Church, Client Manager
Final report issued Revised final report issued	15 January 2021 18 January 2021		Robert Knowles, Senior Auditor
		Client sponsor	Interim Assistant Chief Executive and Deputy Monitoring Officer
			Office and Volunteer Manager
		Distribution	Interim Assistant Chief Executive

and Deputy Monitoring Officer Office and Volunteer Manager

1 EXECUTIVE SUMMARY

With the use of secure portals for the transfer of information, and through electronic communication means, remote working has meant that we have been able to complete our audit / assignment and provide you with the assurances you require. It is these exceptional circumstances which mean that 100 per cent of our audit has been conducted remotely. Based on the information provided by you, we have been able to sample test the control framework.

1.1 Background

From February 2020 the Office of the Police, Fire and Crime Commissioner (OPFCC) for North Yorkshire assumed responsibility for their freedom of information requests from the North Yorkshire Police Civil Disclosure Unit (CDU) who were previously managing the OPFCC's freedom of information requests. As part of this assumption of responsibility, the OPFCC inherited a back log of 12 open requests all but one of which had been closed by December 2020.

Since February 2020, there have been 24 requests received into the OPFCC, the average time to respond is 33 working days (range 1-110 working days). Of the 24 requests, 11 were responded to within the 20-working day deadline as is required under the Freedom of Information Act.

The OPFCC uses off-the-shelve software to manage its freedom of information requests. Responsibility for overseeing compliance with the Freedom of Information Act (FoIA) lies with the Office and Volunteer Manager (who assumed responsibility for FOIs in July 2020) who reports into one of the two Interim Assistant Chief Executives and Deputy Monitoring Officers.

1.2 Conclusion

Our review confirmed that there has been an improvement in the response times to freedom of information (FOI) requests since mid-year 2020, and management has revised its FOI processes on the back of lessons learned from a grievance received from a querent as well as through internal discussions. We did note, however, that responses to FOI requests (outcomes) had not been published on the Disclosure Log on the OPFCC website (the last response was published in April 2020).

Internal audit opinion:

Taking account of the issues identified, the Police, Fire and Crime Commissioner for North Yorkshire can take **reasonable assurance** that the controls in place to manage this risk are suitably designed and consistently applied.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified area.



1.3 Key findings

We noted the following areas for improvement:

• The last disclosure (i.e. outcome of an FOI request) on the Disclosure Log on the OPFCC website was published on 6 April 2020. Public authorities must publish outcomes of FOI requests (disclosures) as required by the Freedom of Information Act: 'Disclosure of information should be the default – in other words, information should be kept private only when there is a good reason and it is permitted by the Act'. There is a risk that the OPFCC is not adhering with the FoIA requirement to be transparent in its responses to its FOI requests. (Medium)

We agreed a further eight low priority management actions which are detailed in section two of this report.

We have identified the following controls that were well-designed and consistently applied.

- We could evidence revision of the FOI processes to address grievances raised by a querent ('lessons learned') as well as internal review and discussion of processes among the team.
- For all 15 FOI requests sampled, both the source requests and responses had been retained and were produced on request.
- Improvements in compliance with the 20-working day deadline to respond to FOI requests since mid-2020 was confirmed to the source documentation, proving the dates recorded in the tracker spreadsheet were correct.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control Non-			Agreed actions			
		gn not ctive*		pliance controls*	Low	Medium	High
Freedom of Information Requests	1	(8)	6	(8)	8**	1	0
Total					8	1	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

** More than one management action has been raised against one control.

2 DETAILED FINDINGS

Categor	tion of internal audit findings						
Priority	Definition						
Low	There is scope for enhancing control or improving efficiency and quality.						
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.						
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.						

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

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management
1	There is an FOI Process document used internally which was recently revised in October to reflect change to the process proposed by the Office and Volunteer Manager. Information on the FOI process is available to the public on the OPFCC website along with the complaints process, the latter of which is also noted in	Yes	No	 We confirmed there is a dedicated page on the North Yorkshire Office for Police, Fire and Crime Commissioner (OPFCC) website which documents the Freedom of Information (FOI) Act and the public's right to request information from the OPFCC as a public organisation. There is also a link the OPFCC's Disclosure Log where responses to requests are published. Alongside this publicly available information there is an internally used FOI Process which is a working document that outlines the FOI process in stages: from receipt of an FOI request to issuing the response, including internally set deadlines for processing requests within the 20 working day deadline for response. The OPFCC has in place five pro forma letter templates which cover the following outcomes: Disclosure of information requested; 	Low	We will enforce that responses are always provided on the applicable pro forma letter. This will be monitored by the Office and Volunteer Manager. Implementation date 31 January 2021 Responsible owner Office and Volunteer Manager

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
	the pro forma			Decline due to personal data;		Low	We will:
	response letters of which there are five to			Information requested available already	/ elsewhere;		• include guidance in
	cover a of number			• Information not held by OPFCC; and			the FOI Process
	outcomes of requests.			• Decline due to cost involved in search.			document regarding which requests need
		It was noted in our testing that of the 15 FOI requests, three responses had not been provided to the querent on the pro forma template. While this is not against the letter of the FOI Process, there is a risk that the querent is not provided with all relevant information including a clearly worded outcome/decision as well as how they can complain. Risk exposure Root cause Querents are not provided with the required, or sufficient, information in the response to their request. Pro forma templates are not used when responding to FOI requests.	ma template. While this is not against that the querent is not provided with		ACE review (as well as that the guidance is not catch-all);		
			how they can complain.	_	 document the governance framework for 		
			Root cause		reporting and		
			-	monitoring in the FOI Process document; and			
				Within the FOI Process, it notes that respon Assistant Chief Executive (ACE) 'in all case Volunteer Manager it was noted that not all in particular those where OPFCC does not querent. The FOI Process should be revise responses require review by an ACE prior t	es'. In discussion with the Office and responses require review by an ACE, hold the information requested by the d to guide users as to which to issuing to the querent.	_	 present the FOI Process document to the Police Fire and Crime Panel for their oversight and challenge. We will incorporate any revisions to the FOI Process raised in this review.
		Risk exposure	Risk exposure	Root cause		Implementation date	
				Delays to responding to FOI requests, potentially breaching the 20-working day deadline.	Unnecessary review by an ACE of standard responses to FOI requests.	•	31 January 2021

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
				It was noted in our discussion with the Offic ACE that the FOI Process is not currently preview and approval. The process should be Committee/Board to ensure there is the opp management to scrutinise the process as w visibility/knowledge of the process among the increase accountability on those involved in	resented to a Committee/Board for e presented to an appropriate portunity for senior/executive ell as to improve the ne wider workforce which will in turn		Responsible owner Office and Volunteer Manager
				Risk exposure FOI processes are not fit-for-purposes or not well known among senior/executive management.	Root cause No review and scrutiny of FOI processes by senior/executive management.	_	
2	FOI requests can be made through a number of means but must all be processed through the info@northyorkshire- pfcc.gov.uk inbox which automatically logs the request on the tracking system through which FOI requests are managed and monitored. There is a field within the tracking system to denote the original source of the request.	Yes	No	As per the FOI Process, FOI requests receiper forwarded to the info@northyorkshire-pfcc.gethe request onto the tracking system Within which identifies the source (contact type) of Campaign Card; Campaign Card; Email; Letter; Meeting; Other; Public meeting; Social media; Surgery; Telephone call; and Visit of office.	yov.uk inbox which automatically logs the tracking system, there is a field	Low	 We will include in the summary section of the tracking system: where referrals have come from other bodies (i.e. NYP CDU) this will support OPFCC compliance when 20-day deadlines are missed due to requests not being forwarded in a timely fashion;

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
				Requests made through social media woul Officer who monitors the OPFCC's social media woul While requests are progressed through the purposes the Office and Volunteer Manage Combined FOI Log, in which she monitors response deadline. To ensure the complete Combined FOI Log spreadsheet, we compare requests logged on the tracking system whi included in the offline spreadsheet. We sampled 15 FOI requests from the Corr source request. Our testing confirmed that had been retained. In 10 cases, the source querent while in the remaining five cases the from another body. There is a limitation in the tracking system from another body (i.e. North Yorkshire Pol manages NYP FOI requests) cannot be flat that this was often the cause of responses deadline (in five of 15 cases).	e tracking system, for analysis er maintains an offline spreadsheet, adherence to the 20-working day eness of the information on the ared the information to a download of ich confirmed all requests had been nbined FOI Log to agree back to the for all 15 requests, the source request e request was a direct email from the ne source of the request was an email that requests which have originated lice Civil Disclosure Unit, which gged as such. Our testing revealed		 the date the request was assigned and to whom. We will also include the initial deadline for response (20 working days from the day following receipt); and any requests for extension with rationale and ensure also an email is sent from the tracking system to querent. This procedure will be written into the FOI Process document. To include reference to 'public interest test', Section 10(3). We will replicate the aforementioned in the
				Risk exposure	Root cause		tracker/analysis spreadsheet
				OPFCC cannot evidence that the cause of exceeding the 20-working day deadline to respond is due to other bodies not forwarding requests or providing information in a timely manner.	Delays to responding to FOI requests outside of the OPFCC's control.	•	Implementation date 31 January 2021
						-	Responsible owner
							Office and Volunteer Manager

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
3	FOI requests sent through the info@northyorkshire- pfcc.gov.uk inbox is automatically acknowledged with an auto response email. It is the responsibility of the Diary and Secretary Correspondence Officer to acknowledge requests and assign to the appropriate individual who will manage the response.	Yes	No	It is the responsibility of the Diary and Secret acknowledge requests and assign to the ap the response. There is an auto response for info@northyorkshire-pfcc.gov.uk inbox; our information provided in the auto response d process. The information should be updated process to bolster confidence in the queren appropriately. In addition to the automated response, the I Officer follows up with a manual email to ac Office and Volunteer Manager noted that th been introduced as standard since she assi- July. Of the 15 requests sampled, manual acknow be evidenced in four cases. Of the remaining period January to April, five were from the p from October. Also five of these 11 requests another body (i.e. NYP CDU, NY OPFCC C OPCC).	propriate individual who will manage r emails received into the review noted, however, that the loes not explicitly refer to the FOI d to include reference to the FOI t that their request will be processed Diary and Secretary Correspondence knowledge receipt of the request. The e latter process has only just recently umed responsibility for FOIs since wledgement of the request could only ig 11 requests, five were from the beriod May to August and one was s had been received initially by	Low	We will update the auto response to include reference to the FOI process. Implementation date 31 January 2021 Responsible owner Office and Volunteer Manager
				Risk exposure Querents are not made aware of the OPFCC's FOI processes, potentially causing operational disruption due to frequent chasing of responses. The Office and Volunteer Manager records	Root cause Information relating to the OPFCC's FOI processes are not made easily available to querents.	-	

spreadsheet the dates requests were received and the dates when they were assigned ('Opened OPFCC'). There is a limitation, however, in the tracking system regarding provision of an audit trail of dates.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
				The Office and Volunteer Manager noted the track the progress of requests (i.e. when the Correspondence Officer assigns requests as working days from the date of assignment as deadline.	e Diary and Secretary she inputs a Review Date of five		
				The individual assigned a request moves the progress in gathering the information reque			
				Of the 15 cases in our sample, 11 had been working day of receipt. Two of those assign receipt of the request were FOI requests re remaining two were from May (four working working days from receipt). A correspondin raised to address this issue; please refer to	ed more than one working day after lating to the NYP back log, while the days from receipt) and October (four g management action has been		
				Risk exposure	Root cause		
				The 20-working day deadline for response is exceeded.	The dates of assignment and deadline for response are not recorded clearly for quick reference.	•	
4	Responses to FOI requests within the required 20 working days are monitored by the Office and Volunteer Manager in an offline spreadsheet, Combined FOI Log.	Yes	No	We reviewed a copy of the Office and Volunteer Manager's offline Combined FOI Log spreadsheet which confirmed that in practice the Office and Volunteer Manager is monitoring the time elapsed between receipt of requests, 'Received', and response to requests, 'Closed', and marks those responded to within 20 working days as 'Compliance' [sic]. We did note, however, that the 20 working day deadline has included the date of receipt which is not in line with the ICO guidance which states 'Authorities must respond to requests promptly, and by the twentieth working day following the date of receipt of the request' (Section 10 of the Freedom of Information Act). Of the 15 requests sampled, we were provided with copies of the source responses for all 15.			We will update the tracker/analysis spreadsheet to commence 20 working day deadline from the day following receipt of the FOI request (as per the ICO guidance). This change to procedure will be written into the FOI Process document.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management
				Of the 15 requests sampled, as per the Combined FOI Log, seven had been responded to within the required 20 working days, while eight had exceeded the 20-working day deadline.		We will also ensure dates requests received and responses issued are accurately reflected in the
				In six of the 15 cases, the date logged as the Received date did not match with that of the source request; however, four relate to requests which had been forwarded from another body. Specifically:		Combined FOI Log spreadsheet for reporting purposes.
				 NY5096 - source request email into CDU 27 January 2020 (date forwarded from CDU could not be determined, relates to back log), Received date as per Combined FOI Log 07 April 2020; 		Implementation date 31 January 2021
				 NY5294 - source request email from querent 18 May 2020, Received date as per Combined FOI Log 19 May 2020; 		Responsible owner
				 NY5298 - source request email from querent 11 May 2020 (date forwarded from Cleveland OPCC Community Hub 20 May 2020), Received date as per Combined FOI Log 20 May 2020; 		Office and Volunteer Manager
				 NY5395 - source request email from querent 01 July 2019 (date forwarded from NYP Legal Officer - CDU 19 June 2020), Received date as per Combined FOI Log 19 June 2020; 	Medium	We will work through backlog of disclosures
				 NY5489 - source request email from querent 25 June 2020 (date forwarded from NYP Legal Officer - CDU 23 July 2020), Received date as per Combined FOI Log 23 July 2020; and 		and publish on the website.
				 NY5709 - source request email from querent 12 November 2020, Received date as per Combined FOI Log 13 November 2020. 		Implementation date 31 January 2021
				In four of the 15 cases, the date logged as the closed date did not match with that of the source response. Specifically:		Responsible owner
				• NY4928 - source response email sent 07 February 2020, Closed date as per Combined FOI Log 21 February 2020;		Office and Volunteer Manager
				 NY5009 - source response letter dated 06 April 2020, Closed date as per Combined FOI Log 07 April 2020; 		

F	Ref	Control	Adequate	Controls Audit findings and implications	Priority	Action for management
			control	complied		
			design	with		
			(yes/no)	(yes/no)		

- NY5488 source response letter dated 27 August 2020, Closed date as per Combined FOI Log 01 September 2020; and
- NY5489 source response letter dated 27 August 2020, Closed date as per Combined FOI Log 01 September 2020.

Re-analysis of our sample to exclude the date of receipt from the 20 working day deadline for response and to agree the dates of receipt and response to the source documentation revealed that nine of the 15 cases had in fact been responded to within the required 20 working days (compared with seven as per the internal calculation).

Risk exposure	Root cause
There is undue pressure on the OPFCC to turnaround FOI requests.	Inclusion of the day of receipt in the 20-working day deadline, in effect reducing the deadline by a day.

The last disclosure (i.e. outcome of an FOI request) on the Disclosure Log on the OPFCC website was published on 6 April 2020. We discussed the rationale for the lack of updates to the Disclosure Log with the Office and Volunteer Manager who noted that it had been caused due to dealing with the backlog of requests transferred from the CDU as well as embedding of the OPFCC's own FOI processes. The Office and Volunteer Manager confirmed that any responses which are publishable are with the Media Officer to be published and that a new process has been included in the most recent revision of the FOI Process (a copy of which was provided). This process stipulates that as soon as the response is sent to the querent a copy is added to an internal folder; this acts as notification to the Media Officer to publish the response on the website.

Public authorities must publish outcomes of FOI requests (disclosures) as required by the Freedom of Information Act: 'Disclosure of information should be the default – in other words, information should be kept private only when there is a good reason and it is permitted by the Act'.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications		Priority	Action for management
				Risk exposure	Root cause		
				The OPFCC is not adhering with the FoIA requirement to be transparent in its responses to its FOI requests.	Responses are not published in a timely manner on the OPFCC Disclosure Log.		
5	The Office and Volunteer Manager should contact the querent to update and manage expectations at any time where there is an indication the response will be later than the 20 working days. There is a traffic light reminder in the tracking system which draws the attention of users to the status of the requests assigned to them.	Yes	No	 It was noted in discussion with the Office are has not been notifying querents as standard likely to exceed the 20 working day deadline documenting the rationale for responses ex As per the ICO guidance, extensions of up be within the 'public interest'. There is a risk rationale for exceeding the initial 20 working cannot prove it was in the 'public's interest'. the response to their request will not be issued ays could results in reputational damage. There is a very has been raised to address this issue; please Of the 15 requests in our sample, eight wer working day deadline. Of the eight, we could cases; however, chasing was found in two deadline had been surpassed. Specifically: NY5210 - request received 30 April 2022 June 2020 (39 working days from receip and NY5294 - request received 18 May 2022 information 28 July 2020 (50 working day not held by OPFCC. We were provided with an example of a received to the trace been set to 11 December 2020 (the nineteen set to 11	d ahead of time where responses are e nor has the team been formally ceeding the 20 working day deadline. to an additional 20 working days must if the OPFCC is not recording the g day deadline for response that they Similarly, not notifying querents that ued within the required 20 working A corresponding management action se refer to Control 2. e responded to outside of the 20- d evidence chasing of progress in five cases to have occurred long after the 20, email to ACE chasing response 26 pt), outcome information disclosed; 0, first email to NYP requesting ays from receipt), outcome information cent request where the Office and o her Outlook calendar to review its cember 2020) from receipt (16 king system that the Review Date had	Low	We will create a pro forma letter for notifying querents of requests for extensions. To include reference to 'public interest test', Section 10(3). We will liaise with CDU to acquire their template. Implementation date 31 January 2021 Responsible owner Office and Volunteer Manager

Ref	Control	Adequate control design (yes/no)	complied with	Priority	Action for management

There is also a traffic light reminder in the tracking system which assigns a RAG rating to requests as per the following criteria:

- Red due today or due date has passed;
- Orange due within one week;
- Green due within two weeks; and
- Black due beyond two weeks.

Risk exposure	Root cause
The OPFCC is exceeding the 20- working day deadline for responses where there is legitimate cause but is not making the querent aware in due course of the need for an extension.	OPFCC is not proactively requesting extensions where applicable and making querents aware.

We noted in our review that currently there is no pro forma letter template for notifying querents of extensions. A template should be created as this will likely increase adherence to the extension request process, particularly notifying the querent in due time, for those requests where responses within the initial 20 working days is unachievable.

Risk exposure	Root cause
The rationale for exceeding the 20- working day deadline cannot be evidenced where legitimate.	Legitimate extensions to the 20- working day deadline are not being raised.

6	There is a Complaints procedure on the OPFCC FOI webpage. Users are also provided with information on how to raise a complaint on receipt of their response in the pro forma response letter templates. Responses to complaints received are due within 20 working days of receipt, as set internally.	Yes	No	It was confirmed with the Office and Volunt formal complaints received in the current ye issued to querent but that there had been of grievance had been received relating to an was that the information was not held by O Provision of a response had taken 109 wor 2020; response issued 20 October 2020). day following issue of the response (21 Oct Manager noted that no response to the que issued by the OPFCC but that a proposed had been drafted by the Office and Volunte via email on 29 October 2020 (6 working da Office and Volunteer Manager noted that th shared with the querent as they were waitin raise a formal complaint). The OPFCC should respond to any feedba and positive, so as to mitigate any potentia	ear on the back of FOI responses one instances where an informal FOI request, the outcome of which PFCC. king days (request received 18 May The querent emailed his grievance the tober 2020). The Office and Volunteer erent's follow up email had been OPFCC response to the grievance eer Manager and shared with the ACE ays from receipt of the grievance). The heir proposed response had not been ng on him to take further action (i.e. ck to FOI responses, both negative I reputational damage.	Low	We will introduce responses to informal complaints as standard, to mitigate risk of escalation to formal complaint / reputational damage. This procedure will be written into the FOI Process document. Implementation date 31 January 2021 Responsible owner Office and Volunteer Manager
				that on the back of the grievance received been incorporated into its processes, name monitoring mechanisms to prevent such ins	lessons learned from the case had ly the introduction of 'additional		
				Risk exposure	Root cause		
				Potential reputational damage due to a perceived lack of customer service.	Querent's grievances are not being acknowledged.	_	

Partially missing No control		scussion with the ACE and the Office and Volunteer appliance is regularly presented to the Police, Fire and Crime	Low	We will include in FOI reporting outcomes as well as sources (contac
The governance framework relating to the reporting of FOI requests and compliance with the FoIA is clearly documented.	business to draw the l rates for Fol requests the previous year both	nutes from the meeting that the ACE had raised an item of Panel's attention to the fact that as a result of compliance at both the OPFCC and NYP having dipped significantly in bodies had been monitored by the ICO at the beginning of OPFCC had since been removed from the ICO monitoring		type) of requests. To support this, we will add Outcome and Contact Type columns to the tracker/analysis spreadsheet.
The Office and Volunteer Manager, the ACEs, and the wider Complaints and		ed that a substantive item in relation to FOI performance is sentation at the next Police, Fire and Crime Panel meeting, ary 2021.		Implementation date 31 January 2021
Correspondence Team members have twice weekly 'scrum down'		at FOI compliance was presented at the 24 November 2020 meeting, a recording of which has been uploaded to the		Responsible owner
meetings where open FOI requests are discussed operationally. FOI compliance is reported through the NY OPFCC Police, Fire and Crime Panel as well as at Public	Currently, FOI reques received and the num within/outside of the 2 to FOI requests is cur number of requests ac of outcomes. Recordin Log spreadsheet will f	ts are reported quantitively to show the number of FOIs ber outstanding as well as the percentage responded to 0-working day deadline. No qualitative information relating rently provided, such as lessons learned, themes, nor is the cross the various contact types (sources), or the occurrence ing the aforementioned information in the Combined FOI acilitate reporting of these metrics, which will in turn ncy of the FOI process.		Office and Volunteer Manager
Accountability Meetings.	operationally at the tw and Volunteer Manag closed, any complaint ahead of a meeting he ACEs at which discus compliance data was	eer Manager noted that FOI requests are discussed ice weekly 'scrum-down' meetings, attended by the Office er and the ACEs, who would discuss any FOIs received, s, themes etc. We were provided with the papers shared eld between the Office and Volunteer Manager and the sion of proposed revisions to FOI process as well as FOI planned, as well as sharing of outcomes of earlier 'scum- he attendees post-meeting.		

Risk exposure	Root cause
Insufficient level of scrutiny of FoIA compliance by Committee/Board.	Information provided to Committee/Board does not allow for robust scrutiny.

Currently, the aforementioned governance framework is not documented. There is a risk that FOI compliance is not monitored and challenged at the appropriate fora nor is it presented with sufficient frequency. A corresponding management action has been raised to address this issue; please refer to Control 2

Risk exposure	Root cause
FoIA compliance is not being presented for review and challenge at the appropriate fora.	The governance framework is not documented.

APPENDIX A: SCOPE

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

Objective relevant to the scope of the review

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

Objective of the area under review

To review the controls and processes in place to capture and respond to Freedom of Information (FoI) requests are processed within statutory timeframes.

Scope of the review

Our review will focus on the following areas:

- Policies and procedures are in place, reflecting current operating practices.
- Fol requests are acknowledged and responded to in line with agreed response times. Sample testing will be conducted to confirm the timeliness of each stage of the process including:
 - > logging of requests including those made via social media;
 - > assignment of requests to individuals;
 - > initial response to a requestor within 20 days;
 - > where applicable notifying the requestor when a reasonable extension to the 20-day limit is required; and
 - > informing the requestor of the associated cost.
- Refusal to disclose information is supported by appropriate evidence.
- The internal review process is adhered to where the requestor raises a complaint. This will include selecting a sample of reviews to ensure that they are followed up in a timely manner.
- The reporting of compliance statistics within the organisation, and action plans put in place to address underperformance where applicable.

The following limitations apply to the scope of our work:

- We will not comment on the appropriateness of the decisions made by the Commissioner's office or confirm exemptions have been used appropriately and in accordance with the act.
- This review will not replicate an inspection performed by the ICO or guarantee future results.

- We will not confirm the organisation has dealt with all requests within the prescribed limit.
- We will not comment on any Fol cases or the outcome of any cases.
- Sample testing will be completed from the January 2020 onwards.
- We will not confirm full compliance with the act as testing will be completed on a sample basis.
- Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

APPENDIX B: FURTHER INFORMATION

Persons interviewed during the audit:

- Office and Volunteer Manager
- Interim Assistant Chief Executive and Deputy Monitoring Officer

Documentation reviewed during the audit:

- Combined FOI Log
- Draft OPFCC FOI Process V0.2 29.10.2020
- Police, Fire and Crime Panel minutes
- Freedom of Information and Subject Access Request Compliance presentation

FOR FURTHER INFORMATION CONTACT

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

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

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