

CREATION AND REVIEW OF FORCE POLICIES AND PROCEDURES PROCEDURE

Official



NORFOLK
CONSTABULARY



SUFFOLK
CONSTABULARY

CREATION AND REVIEW OF FORCE POLICIES AND PROCEDURES

Owning Department: Strategic Business and Operational Support (SBOS)

Department SPOC: Corporate Governance Officer/Policy and Assurance Officers

Governing Policy: Creation and Review of Force Policies and Procedures

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1. Procedure Aim

- 1.1 The aim of this procedure is to ensure that a properly structured set of policies and procedures exists giving clear and concise guidance on a given subject area.
- 1.2 Policies and procedures are subject to corporate governance standards and are subject to regular audit reviews. This procedure outlines the processes that must be followed in order to meet those standards and audit requirements.
- 1.3 This procedure should be read alongside the relevant policy, as stated on the front of the document.

2. Development of New Policies and Procedures

- 2.1 The Central Policy Unit (CPU) must be contacted as soon as the need for a new policy or procedure has been identified (and appropriately authorised as outlined in the policy).
- 2.2 The CPU will allocate the new policy to the appropriate Policy and Assurance Officer who will liaise with the Policy Owner and consider if a policy is the most appropriate way for the information to be documented, e.g. it may be more appropriate for it to be detailed in some other way, such as a departmental Standard Operating Procedure (SOP).
- 2.3 If a policy is required, the Policy Owner will draft the policy and/or procedure with the assistance and guidance of the Policy and Assurance Officer.

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- 2.4 The Policy Owner is responsible for identifying and clarifying issues which may impact on the implementation of the policy/procedure, such as:
- Training;
 - Financial implications;
 - Health and Safety;
 - Information Compliance;
 - Information Security.
- 2.5 All policies and procedures will be drafted using the policy or procedure templates which are available from the policy intranet site here.
- 2.6 Where appropriate and feasible, flowcharts and diagrams should be used to display a process. The preferred software package to be used for this is Microsoft Visio. Flowcharts should be simple and easy to follow with minimal amounts of text. All flowcharts should be accompanied by an explanation of the process being shown.
- 2.7 During development, due regard must be given to the need to eliminate discrimination, advance equality of opportunity and foster good relations, as per the requirements of the Equality Act 2010. All policies must be assessed for equality impact using the Equality Impact Assessment (EIA) form. Advice on EIAs can be obtained from the Constabularies' Diversity Unit/specialists.
- 2.8 All policies will be risk assessed using the Policy Risk Scoring Matrix to determine "risk" level, which will determine the review period (see section 11). This must be completed by the Policy Owner, and quality assured by the Policy and Assurance Officer.
- 2.9 All policies and procedures must be given the appropriate protective marking under the Government Security Classification (GSC) scheme. Details can be found in the joint Government Security Classification Scheme policy. The Policy and Assurance Officer, in consultation with the Policy Owner, will be responsible for applying the appropriate marking.
- 2.10 Once the policy and procedures have been drafted, the Policy and Assurance Officer will quality assure them for plain English, correct and consistent terminology, clarity, format, and ensuring the content meets accessibility standards and is written in a way that supports understanding.

3. Review of Existing Policies and Procedures

- 3.1 The CPU will contact Policy Owners six months ahead of a review date and will maintain regular contact with department SPOCs regarding their policies/procedures.

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- 3.2 The CPU must be contacted as soon as possible in the event of a review being required before the scheduled review date.
- 3.3 Once the policy and procedures have been reviewed, the Policy and Assurance Officer should quality assure them as per 2.10.
- 3.4 The review process is outlined in more detail in section 11.

4. Consultation on Policies and Procedures

Consultation Process for Policies not owned by HR

- 4.1 Any new/reviewed policies/procedures which are not owned by HR must be submitted for consultation to a mandatory list of consultees, which includes the staff associations, UNISON, heads of departments, staff support networks and diversity specialists. The list is maintained by the CPU and can be made available on request. The Policy Owner and Policy and Assurance Officer should consider whether any additional stakeholders are required to be consulted with for each policy, taking account of the Government Security Classification.
- 4.2 The Policy and Assurance Officer will be responsible for organising the consultation for all policies and associated procedures. Consultation is carried out on an online portal where any feedback provided can be viewed by others. A minimum of three weeks is given for responses to be received. Where appropriate, facilitated workshops may be used.
- 4.3 The consultation process also forms part of the Equality Impact Assessment process, i.e., any responses received during consultation which relate to equality will be documented in the EIA.

Consultation Process for Policies owned by HR

- 4.4 HR will facilitate consultation with UNISON, Police Federation and other key stakeholders as required.
- 4.5 Once the policy/procedure content is agreed as per 2.4 above, the policy/procedure is circulated by the CPU to the rest of the consultation group for comment as per 4.2 above.
- 4.6 The consultation process also forms part of the Equality Impact Assessment process, i.e., any responses received during consultation which relate to equality will be documented in the EIA.

5. Outcomes of Consultation

- 5.1 All comments and feedback received during the consultation period must be considered and the Policy and Assurance Officer will liaise with the Policy Owner to decide whether any amendments are required as a result of the feedback. If no action is to be taken in response to a comment, a justifiable reason needs to be given as to why.

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- 5.2 Any comments or feedback received which relate to equality issues/concerns must be documented in the Equality Impact Assessment form along with any actions that have been taken to overcome the issues/concerns raised.

6. Second Consultation

- 6.1 Where comments/issues have been raised during the first consultation stage which have resulted in the policy being amended, the Policy and Assurance Officer will summarise all the consultation comments received, along with the amendments made as a result of them on the Consultation Response and Action Form template. This will be emailed to the Police Federations, UNISON and Superintendents' Association representatives along with the amended policy for the second consultation period, which lasts two weeks.
- 6.2 Any comments/issues received must be considered by the Policy and Assurance Officer in liaison with the Policy Owner and the relevant consultee(s) and, if necessary, the policy should be amended. If significant changes are made to the policy at this stage, consideration should be given to reviewing the EIA.
- 6.3 Once all issues/comments have been resolved, confirmation must be sought from the Policy Owner that they are content with the document. This will be via email for audit trail purposes.
- 6.4 In cases where a 'failure to agree' arises and an issue cannot be resolved, the policy will need to be submitted to the relevant Joint Negotiating Consultative Committee (JNCC) (as per Section 7) for discussion.

7. Joint Negotiating and Consultative Committee

- 7.1 All joint Force policies must be submitted to the joint Force Joint Negotiating and Consultative Committee (JNCC) for final ratification. Single force policies will be submitted to the appropriate Norfolk/Suffolk only JNCC meetings for final ratification.
- 7.2 JNCC (individual and joint) meetings are held on a quarterly basis, are chaired by a Chief Officer and include the following attendees: Police Federation, Superintendents' Association and UNISON representatives from both/the respective (as appropriate) Constabularies. At the meetings the attendees have the opportunity to make any final representations if necessary, otherwise the policies will be ratified.
- 7.3 Where no representations are made, the policy can be progressed to the next stage (as outlined in sections 8 and 9 below).
- 7.4 Where representations are made, reasons should be given as to why and amended terms/wording suggested. The Policy and Assurance Officer will work with the Policy Owner to make the necessary amendments.

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- 7.5 Once the amendments have been made, the policy will need to be re-submitted to JNCC again, unless an alternative process is stipulated, e.g. where it was agreed at the JNCC meeting that the policy can be published providing the suggested amendments are made.
- 7.6 The outcome of the JNCC meeting will be documented in the meeting minutes.
- 7.7 Where policies are required to be considered outside of a scheduled JNCC meeting by exception, e.g. urgent policies, the outcome will be documented in the minutes of the next meeting and approval to progress any policy “by exception” will be approved by key stakeholders.

8. Legal Services Approval

Joint and Norfolk-only policies

- 8.1 Once a joint or Norfolk-only policy/procedure is ready to be submitted to JNCC, it will be sent to Norfolk Legal Services Department for legal review/sign off.
- 8.2 Legal Services will review the policies/procedures for legal compliance and consistency and, if clarification or amendments are required, the Policy and Assurance Officer will discuss them with the Policy Owner and any necessary amendments made. For HR owned policies, Legal Services will usually liaise with the Policy Owner/author direct.

Note: If significant changes are required then further consultation may be necessary, at the discretion of the Policy Owner and Policy and Assurance Officer.

- 8.3 When Legal Services confirm that the policy is legally compliant, the Head of Legal Services will sign the document(s) off and return to the CPU.
- 8.4 Suffolk-only policies/procedures are not reviewed/signed off by Norfolk Legal Services. Where legal review is required, this will be at the discretion of the policy owner and carried out by the Constabulary’s approved external provider.

9. Publication

- 9.1 Following JNCC ratification, policies/procedures can be published.
- 9.2 Where a policy/procedure has received JNCC ratification but is awaiting Legal Services sign-off, it can be published as ‘Interim’ if agreed with the Policy Owner.
- 9.3 The Policy and Assurance Officer will be responsible for advising personnel in both Constabularies when new or revised policies and procedures are published via an announcement in Force Orders.

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- 9.4 Policy and Assurance Officers will consider, in consultation with the Policy Owner, whether the policy/changes to a policy is/are of such significance that additional methods of updating officers/staff are required, for example an intranet news item.
- 9.5 Once approval has been received from Legal Services, the 'Interim' document will be replaced with the fully signed-off version (i.e. any reference to 'Interim' is to be removed).
- 9.6 Once approval has been received from Legal Services, any policies which are classified as 'Official' under the GSC are required to be published on the Constabularies' external internet sites along with the EIA.

10. Audit

- 10.1 The CPU will retain an audit trail for each policy and procedure which will include publication and review dates as well as any significant decisions that were made during the development or review.
- 10.2 A copy of the email authorising all policies and procedures to be published will be kept within the audit trail for all policies and procedures.

11. Review

- 11.1 All policies will be risk scored using the policy risk scoring matrix to determine the review period:

High = 2 years

Medium High = 3 years

Medium Low = 3 years

Low = 4 years

- 11.2 However, a shorter period can be given if the Policy Owner deems it necessary or if legislation changes are expected, for example. The Policy and Assurance Officer will be responsible for initiating the review by contacting the Policy Owner. Upcoming review dates will be highlighted/discussed during the Policy and Assurance Officers' regular contact with departments.
- 11.3 The EIA and risk matrix should be reviewed in line with the policy review timeline.
- 11.4 Where amendments are required to a policy or procedure before the review date, the Policy Owner should contact the CPU. Depending on the scale of the amendment(s), consideration should be given to initiating a full review early.
- 11.5 Once a policy or procedure has been reviewed/amended, the process for consultation, sign-off and agreement/approval, must be followed. However, where only minor changes are made, e.g. a sentence re-worded

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or a change in terminology, consideration should be given to whether the full process is required, e.g. full consultation may not be necessary, or agreement below JNCC level may be more appropriate.

- 11.6 The decision as to whether the full process is required should be made by the Policy and Assurance Officer in liaison with the Policy Owner. Consideration should always be given to any previous amendments that have been made and the process that was followed then, e.g. making lots of minor changes over a period of time could ultimately result in a significant change.
- 11.7 Where no changes are required, or only minor updates are needed (and where the full review process is not deemed necessary), the policy/procedure can be republished with updated review dates.
- 11.8 During the review process, consideration should always be given to whether the policy or procedure is still required or whether they can be amalgamated with others.
- 11.9 Where imminent changes are known which will impact on a policy, it is possible to extend a review date pending the changes coming into effect. (See section 12 – Extension of Review Date)

12. Extension of Review Date

- 12.1 Where a policy/procedure is due for review but there is reason for the review to be postponed, a review date extension request must be submitted to the relevant JNCC meeting to be approved.
- 12.2 The request should document the reasons for the extension, the period of extension being requested (maximum of 12 months from the existing review date) and the date when the document was last reviewed.
- 12.3 Examples of reasons for extension requests would be:
 - Known legislation changes/Authorised Professional Practice (APP) updates expected soon.
 - Process changes to be trialled/implemented prior to policy being updated.
 - New ICT being procured which will impact on the updates required.

13. Withdrawal of a Policy

- 13.1 Where it is decided that a policy is no longer required or can be incorporated into another, and therefore can be withdrawn, the Policy and Assurance Officer will need to consider whether the withdrawal will impact on any other policies and take action as appropriate.
- 13.2 The Policy and Assurance Officer will be responsible for communicating when a joint policy has been withdrawn via an announcement in the relevant Constabularies' Force Orders.

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- 13.3 The Policy and Assurance Officer will be required to make a record of the withdrawal date and the name and role of who authorised the withdrawal onto the central policy spreadsheet.

14. Transfer of Ownership of a Policy

- 14.1 If a policy requires transfer from one Policy Owner to another, the two Policy Owners involved must agree to the transfer and advise the CPU that a change of ownership has occurred.
- 14.2 The Policy and Assurance Officer will be required to amend the policy and make a record of the transfer date and who authorised the transfer on the central policy spreadsheet.

PROCEDURE

15. Flowchart showing Policy and Procedure Process

Policy Process Flowchart

