

JOINT AUDIT AND SCRUTINY PANEL

THURSDAY 29 JULY 2021 at 2.00 PM
Via MS Teams

(separate pre-meeting for Panel Members at 1:30 pm)

Membership

Stephen Charnock (Chair)
Leslie Ayoola
Peter McKay
Philip Hodgson
Alan Franks

A G E N D A

1. Apologies for absence
2. Declarations of interest by Panel Members and Officers (see notes below)
3. To agree the minutes of the meeting held on 25 May 2021
4. Progress against Action Tracker
5. Victim Code Update – Report and Presentation
6. Final Accounts – Verbal Updates on Accounts for each of 2019-2020, 2020-2021 and 2021-2022
7. Audit and Inspection Update
8. Internal Audit Progress Report

9. Nottinghamshire Police Information Management – Freedom of Information and Data Protection Update
10. Performance and Insight Update Report to June 2021
11. Police and Crime Commissioner’s Update Report – 90 Day Plan
12. OPCC Publication Scheme Monitoring, Review and Assurance
13. Force Publication Scheme Monitoring Review and Assurance
14. Work Programme
15. Summary of Actions (verbal)

**MINUTES OF THE MEETING OF THE NOTTINGHAMSHIRE POLICE AND
CRIME COMMISSIONER JOINT AUDIT AND SCRUTINY PANEL HELD ON
TUESDAY 25TH MAY 2021 COMMENCING AT 10.00 AM VIA MS TEAMS**

MEMBERSHIP

(A – denotes absent)

Mr Stephen Charnock (Chair)

Mr Leslie Ayoola

Dr Phil Hodgson **A**

Mr Peter McKay

Alan Franks

ALSO PRESENT

Craig Guilford	Chief Constable, Nottinghamshire Police
Tim Chesworth	Nottinghamshire Police
Helen Henshaw	EY
Gary Morris	EY
Mark Lunn	Mazars
Mark Kimberley	Head of Finance, Nottinghamshire Police
Noel McMenamin	Democratic Services, Nottinghamshire County Council
Charlie Radford	Chief Finance Officer, NOPCC
Tim Wendels	Nottinghamshire Police

1) APPOINTMENT OF CHAIR

Stephen Charnock was appointed Chair of the Panel for the period May 2021 to April 2022.

2) WELCOME AND INTRODUCTIONS

The Chair led a round of introductions, and put on record his thanks to the previous Police and Crime Commissioner, Paddy Tipping, for his strong support for and co-operation with the Panel during his tenure.

3) APOLOGIES FOR ABSENCE

Caroline Henry, Police and Crime Commissioner, Dr Phil Hodgson, Kevin Dennis.

4) DECLARATIONS OF INTEREST BY PANEL MEMBERS AND ATTENDEES

None.

At this point, the Chair agreed to revise the agenda order so that the Panel received 2 presentations:

12) STRATEGIC RISK MANAGEMENT REPORT – FORCE AND OPCC - PRESENTATION

The Panel received a presentation from Tim Chesworth, IS Transformation Programme Manager, on Project Regain, the transition of Multi-Force Shared Service (MFSS) Services. The presentation, which was published with the agenda, detailed the drivers and challenges leading to the decision to take MFSS services back in-house, set out progress to date and the future timetables for delivery by April 2022, including key risks and mitigations.

Several points were made in the discussion which followed:

- The Panel was supportive and appreciative of the progress made to date in delivering Project Regain. However, while not wishing to detract from this crucial work-stream, as a scrutiny body the Panel wanted assurance that lessons from the original roll-out had been learnt;
- In particular, the Panel was concerned that ‘red flags’ had not paused the troubled project when significant issues had first arisen. The Chair undertook to discuss further with DCC Barber with a view to reporting back to a future Panel meeting;
- It was explained that the current Project Regain had full buy-in from the workforce, who had been kept up-to-date through regular briefings and communications.

RESOLVED 2021/015

That the presentation be noted, and that the Chair discuss the future consideration of ‘lessons learnt’ from the original MFSS programme with DCC Barber.

13) AUDIT AND INSPECTION UPDATE - PRESENTATION

The Panel received a presentation from Tim Wendels, Head of Estates and Facilities Management, on the internal audit report conducted in respect of Estates Management. The presentation, which was published with the agenda, highlighted the ‘Significant Assurance’ assessment of adequacy and effectiveness of internal controls and identified 2 recommendations relating to the way that performance indicators were calculated.

The Panel welcomed the Significant Assurance rating. During discussion, the Panel noted the move to the Ivanti system, which Mr Wendels believed would improve Key Performance Indicator reporting. It was also acknowledged that Estates management function would face significant challenges over the next 5

years, balancing the delivery of required accommodation uplift within financial constraints.

RESOLVED 2021/016

That the presentation be noted.

5) MINUTES OF THE MEETING HELD ON 24 FEBRUARY 2021

The minutes of the last meeting held on 24 February 2021, having been circulated to all members, were taken as read and were confirmed and signed by the Chair.

6) PROGRESS AGAINST ACTION TRACKER

The following progress was reported:

Action 035: Consideration of MFSS transfer back in-house – considered at this meeting, then completed and closed.

Action 040: Internal Audit – Estates Management – considered at this meeting, then completed and closed.

Action 041: Force Complaints and Misconducts to have an Appendix on best practice from Police College/resume of lessons learnt – incorporated in report considered at this meeting and taken forward in future reports – completed and closed.

Action 043: Change Programme Board Schematic for circulation – to be circulated following Strategic Futures Board Meeting on 28 May 2021

Action 046: Capturing ethnicity and numbers of young people in Custody Update reports – captured in report to this meeting and for inclusion in future reports – completed and closed.

7) EXTERNAL AUDIT OF THE ACCOUNTS 2019-2020 (ISA 260)

The Panel considered the report of the Chief Finance Officer, which provided the results of the review of the Statement of Accounts and supporting documentation for the financial years 2019-2020.

During discussion, a number of issues were raised and points made:

- There was widespread disappointment and frustration expressed in the meeting that a complete set of accounts was not yet available for sign-off. EY representatives stated that the unadjusted position of audit differences, detailed at Section 4 of the Audit Results report, had not yet been finalised in the absence of a final set of financial statements;

- The Chair, on behalf of the Panel, expressed the view that the value of this external audit round was diminished, given the amount of time that had elapsed, and was concerned about the knock-on effect on audit timescales more generally;
- It was reported that significant improvement had been achieved in terms of audit and accounting capacity at the Force, and that version control procedures were now embedded.

RESOLVED 2021/017

To note the present position.

8) FINAL STATEMENT OF ACCOUNTS AND ANNUAL GOVERNANCE STATEMENTS FOR 2019-2020

The appendices to the report were not available for consideration, and so the item was deferred.

9) INTERNAL AUDIT ANNUAL ASSURANCE REPORT

The appendices to the report were not available for consideration, and so the item was deferred.

10) DRAFT ANNUAL GOVERNANCE STATEMENTS FOR 2020-21

The Panel considered the report, which provided the unaudited annual governance statements for 2020-21, along with the PCC Chief Finance Officer's Narrative Statement, explaining what would be included in the final statements.

RESOLVED 2021/018

That Panel members review the draft Annual Governance Statements and provide any feedback to the Chief Constable and Police and Crime Commissioner by the end of June 2021.

11) TREASURY MANAGEMENT YEAR END REPORT

The Panel considered the report, which provided details of compliance with the Treasury Management Strategy and prudential indicators for 2020-21.

During discussion, Charlie Radford expressed the view that as uncertainty over COVID-19 and Brexit subsided, there could be some uplift as economic conditions settled over time. However, rates remained historically low as matters stood. In response to the Chair's question, Ms Radford advised that the OPCC was considered to have a robust strategy within the sector.

RESOLVED: 2021/019

That the Panel was assured that Treasury Management activity complied with the Treasury Management Strategy.

12) STRATEGIC RISK MANAGEMENT REPORT – FORCE AND OPCC

Having previously considered the presentation element of this item, the Panel considered the report, which provided an up-to-date picture of strategic risk management across the Force and the OPCC.

In response to concern expressed about the emergence of 2 new very high strategic risks, the Chief Constable expressed the view that the Force was confident about delivery of payroll transition arrangements, and that he had close personal involvement in addressing the issues raised by the internal audit on seized property. He also advised that the new Command and Control software was a better quality and specification than present provision, but was a more complex solution, which was reflected in the risk score;

The Panel commended the revised report format and put on record its thanks to the Force Assurance Lead and Corporate Development Manager.

RESOLVED: 2021/020

that the Panel noted the following:

- 1) The very high strategic risks on the Force's risk register – Internal Audit Report on Seized Property, MFSS transfer of payroll system to the new Fusion solution and issues relating to the new Command and Control software, detailed further at Appendix 3 to the report;
- 2) The reduction in the risk score associated with the General Data Protection Regulations following a recent internal audit;
- 3) The high risk on the OPCC risk register relating to the Public Sector Pensions.

13) AUDIT AND INSPECTION UPDATE

Having previously considered the presentation element of this item, the Panel considered the report, which provided an update on progress against recommendations arising from audits and inspections which had taken place in the final quarter of 2020-2021, along with a schedule of planned audit and inspection activity.

Several points were made during discussions:

- The Panel commended the revised format of the report and appendices, which helped it identify clearly the areas on which to focus;
- The point was made that the reference to HR implications under the Equality Implications of the cover report was potentially misleading

- It was explained that front-line officers had access to bodyworn cameras, and it was individual officers' responsibility to use the equipment appropriately;
- The Stop and Search inspection had had a number of positive outcomes, but there were still some areas where stop and search powers were disproportionately. There was consensus that a balance needed striking between continuing to perform well on knife crime in communities while using stop and search powers in a judicious intelligence-led way.

RESOLVED: 2021/021

To note the current status of audits and inspections carried out in the final quarter of 2020-21, and the schedule of forthcoming audits and inspections.

14) PERFORMANCE UPDATE REPORT

The Panel considered the report, which provided an update on progress in delivering the 2018-2021 Police and Crime Plan, including narrative on key performance indicators, in compliance with the Commissioner's statutory duties.

The Panel welcomed the overall positive assessment set out in the report. Several points were made during discussion:

- As lockdown measures eased, there would in due course be increases in issues relating to traffic, alcohol and the night-time economy;
- Domestic abuse rates were slightly down both locally and nationally, and there was good work being undertaken locally with victims of domestic violence;
- The spike in online fraud reflected both an increase in criminal activity during the pandemic but also in reporting online crime. This was historically an under-reported crime category because of feelings of embarrassment and shame among victims, so an increase in reporting was to be welcomed.

RESOLVED: 2021/022

That the report be noted, and that additional assurance was not required on any specific area of concern.

15) QUARTER 4 2020-21 CAPITAL OUTTURN

The Panel considered a report, providing the financial outturn position for capital for the financial year 2020-21.

The Panel welcomed the positive capital outturn given the difficulties of the previous 12 months. It was agreed that Panel members should be invited to visit the new custody suite and joint HQ at an appropriate time.

RESOLVED: 2021/023

That

- 1) the outturn position as detailed in the report be noted; and
- 2) the slippage recommendations at Appendix B to the report be endorsed.

16) QUARTER 4 2020-21 PROVISIONAL REVENUE OUTTURN

The Panel considered a report, providing the provisional financial outturn position for Revenue for the financial year 2020-21.

The Panel welcomed the very small overspend in what had been a very challenging year

RESOLVED: 2021/024

That the report be noted.

17) COMPLAINTS AND REVIEWS ASSURANCE REPORT

The Panel considered the report, which sought to provide assurance that Police complaints were being managed in line with legislation and statutory guidance.

RESOLVED: 2021/025

That the learning identified be noted, and that a follow-up report from the Head of the Professional Standards Directorate be considered at a future meeting of the Panel.

18) COMPLAINT AND MISCONDUCT INVESTIGATIONS

The Panel considered the report, which informed the Panel of changes to police complaints and misconduct legislation, and providing data on complaints and misconduct between 27 November 2020 and 22 April 2021.

Several points were made during discussion:

- The increased volume in complaints was welcomed, there had been an historic under-reporting of complaints. It was noted that timeliness in dealing with complaints was improving, while there had been a purge of long-outstanding 'legacy' cases;
- There was consensus that appropriate training for those responding to complaints could lead to more positive outcomes first time for complainants and the Force;

- The Panel welcomed findings indicating that there was no disproportionality in approach by the Force.

RESOLVED: 2021/026

That revisions be made to future reports to reflect ensure that scrutiny was provided to those key aspects of the complaints and misconduct system implemented by the 2020 legislation.

19) IOPC INVESTIGATIONS, RECOMMENDATIONS AND ACTIONS

The Panel considered the report, which informed the Panel of complaint and misconduct matters which had been referred by Nottinghamshire Police to the Independent Office for Police Conduct (IOPC) between 27 November 2020 and 22 April 2021, along with relevant recommendations and actions.

During discussion, the Chief Constable expressed the view that the Force had strong oversight of this area, and he welcomed the transparency around mandatory referrals, which helped underpin public confidence in the service the Force provided.

RESOLVED: 2021/027

That the Panel be assured both that Nottinghamshire Police was transparent in referring itself to the IOPC in relation to all instances meeting the relevant criteria as detailed in the report, and Nottinghamshire police considered and responded to IOPC recommendations.

20) PROFESSIONAL STANDARDS CONFIDENTIAL REPORTING PROCEDURE (WHISTLE-BLOWING)

The Panel considered the report, which informed and updated the Panel in respect of reporting and management of professional standards issues.

During a brief discussion, it was explained that a majority of referrals came from another member of staff rather than members of the public. Senior management ensured that referrals were appropriately assessed and processed via the appropriate channel.

RESOLVED: 2021/028

That the Panel be assured both that Nottinghamshire Police had appropriate processes in place in respect of professional standards confidential reporting, and that it actively sought information and intelligence from a variety of sources in order to prevent corruption.

21) BUSINESS CONTINUITY MANAGEMENT

The Panel considered the report, which informed and updated the Panel in respect of the Force Business Continuity Planning process, the critical functions identified by Heads of Department and details of the Business Continuity testing timetable.

The Force's business continuity planning had been tested strenuously during the pandemic, and plans continued to be under ongoing review. It was reported that levels of sickness absence were at an historically low level.

RESOLVED: 2021/029

That the identified list of Force Critical Functions at Appendix 1 to the report be approved.

22) CUSTODY RECORD REVIEW QUARTERLY REPORT

The Panel considered the report, which provided details in respect of the 48 custody record reviews undertaken during Quarter 4, 2020-21.

RESOLVED: 2021/030

That the outcomes identified in the report be noted, and that the continuation of custody record reviews and the publication of their outcomes be supported.

23) JOINT AUDIT AND SCRUTINY WORK PLAN 2020-2021

RESOLVED: 2021/000

that the Work Plan for 2020-2021 be noted and approved.

24) SUMMARY OF ACTIONS

RESOLVED 2021/000

To agree that the following actions be added to the action tracker:

Arising from MFSS Presentation – Chair to discuss with DCC Barber about a 'Lessons Learnt' report coming to a future meeting

Arising from Draft Annual Governance Statement 2020-21 item – Panel members to provide comments on drafts to Charlie Radford and Mark Kimberley by end June 2021

Arising from Capital Expenditure item – Panel members to visit the new custody suite and joint HQ in due course

The meeting concluded at 12.25pm

AUDIT & SCRUTINY PANEL MEETING

Actions arising from previous meetings and progress against action tracker

	ACTION	ALLOCATED TO	TIMESCALES FOR UPDATES	UPDATE
038	Arising from Internal Audit Report November 2020 meeting - Collaboration: Health and Safety – Update check on progress against recommendations	OPCC/Force	November 2021	Work plan has been revised to pick up updates. Presentation by the Lead Officer at November 2021 meeting
039	Arising from Internal Audit Report November 2020 meeting - Victims Code of Practice - Update check on progress against recommendations	OPCC/Force	July 2021	Work plan has been revised to pick up updates. Presentation at July 2021 meeting, then complete and close
043	Arising from Change Programme Outcomes presentation February 2021 – Request for Programme Board Schematic to show how Themes and Programmes correlate	Force	July 2021	For circulation to Panel members – NM to circulate to Panel Members at same time as July 2021 agenda pack – complete and close.
044	Arising from PCC Update February 2021 – Briefing Note for panel members on usage of POCA receipts	OPCC	July 2021	For circulation to Panel members – NM to circulate to Panel Members at same time as July 2021 agenda pack – complete and close.

045	Arising from Force Publication Scheme February 2021 – Update on use of website, with data from previous years to compare usage trends	Force	February 2022	For inclusion in future reports on Publication Scheme
047	Arising from MFSS item May 2021 – Chair to discuss with DCC Barber about a ‘lessons ‘Learnt’ report to a future meeting	Force/Chair	July 2021	Chair to advise
048	Arising from Draft AGS 20201 item May 2021 – Panel members to provide comments on drafts to Charlie Radford/Mark Kimberley by end June 2021	Panel Members	End June 2021	July 2021
049	Arising from Capital Expenditure item May 2021 – Panel members to have visit the new custody suite and joint HQ in due course	Force/Panel	To be determined	To be advised by Force when visits are appropriate/feasible

For Information	
Public	
Report to:	Joint Audit and Scrutiny Panel
Date of Meeting:	29th July 2021
Report of:	DCS Gary Hooks
Report Author:	DCS Gary Hooks
E-mail:	Gary.hooks@nottinghamshire.pnn.police.uk
Other Contacts:	CI James Wooley
Agenda Item:	05

*If Non Public, please state under which category number from the guidance in the space provided.

Victim Code Audit Update

1. Purpose of the Report

- 1.1 The purpose of this report is to update the Police and Crime Commissioner and the Joint Audit and Scrutiny Panel (JASP) in relation to results and response to the scheduled audit related to Victim Code Compliance undertaken in September 2020 by Mazars LLP.

2. Recommendations

- 2.1 It is recommended that the contents of this report are noted.

3. Reasons for Recommendations

- 3.1 The above recommendation is made to ensure that the Nottinghamshire Police and Crime Commissioner (PCC) and the Joint Audit and Scrutiny Panel are appraised of the audit outcome and remedial activity undertaken in relation to victim code compliance.

4. Summary of Key Points (this should include background information and options appraisal if applicable)

- 4.1 In December 2015, Mazars undertook an internal audit into force compliance with the victim code and reported limited assurance, issuing 10 recommendations. These comprised, two fundamental, six significant and two housekeeping matters.
- 4.2 As a result of the improvement activity undertaken, upon review through the 2020 audit, Mazars reported satisfactory assurance of the force performance; with seven of the 2015 recommendations being discharged and three being carried forward.
- 4.3 The 2020 audit identified six recommendations (including the three carried forward from 2015) comprising 3 significant and three housekeeping matters. These recommendations are detailed below and have all been remitted to the

Victim and Witness Assurance Group for implementation and are at various stages of progress as described.

- 4.4 The Victim and Witness Assurance Group, formed in April 2020, is a quarterly meeting chaired by DCS Gary Hooks with representatives from across the organisation and the OPCC. The group seeks to ensure that our service to victims and witnesses is continually improving and has been instrumental in delivering the requirements of the revised victim code.
- 4.5 The Victim Code requires that victims are invited to designate a preferred method and frequency of contact for updates. In 2015 this was found to be inconsistent with 40% failing to reflect any victim preference; in 2020 this had improved to 10%.

A housekeeping recommendation was raised for staff to be reminded of the requirement to invite victims to designate a preferred means and frequency of contact. Compliance with this requirement has now been introduced into the internal crime audit activity and will be reported on a quarterly basis as part of the Victim and Witness Assurance Group performance pack.

- 4.6 In 2015 a recommendation was made to monitor and improve the uptake of training to staff in relation to the Victim Code requirements, at that time there was no record of completion and therefore no assurance of the workforce understanding. The force now has mechanisms to monitor completion of mandatory training as referenced in the 2020 audit in which the completion rates were recorded as 82%.

As a result of the introduction of the new Victims Code a revised NCALT package has been released. Monitoring of completion rates will be reported quarterly as part of the Victim and Witness Assurance Group performance pack.

- 4.7 The victim code stipulates an entitlement for victims to receive a clear explanation of what to expect from the criminal justice process and signposting to relevant support services. In 2015 it was found that the provision of this information, in the form of a victim information pack, was not recorded in more than half of cases (44% compliance).

This had improved to 70% compliance in 2020 and it is anticipated that these cases, where this isn't recorded, are likely to be victims that have declined the provision of the victim information pack. Therefore, when enquiring with a victim, positive responses can be captured but refusals are not as there is no field to express the reason for refusal.

Work is underway to make changes to the system to allow opportunity to record those victims declining the Victim Information Pack so as to understand why victims are declining the offer and to also be more reassured about our compliance.

- 4.8 The 2020 audit recognised the ongoing activity by Corporate Communications in relation to surveying victims of crime but suggested that this endeavour be extended. However, it has been fed back that Mazars analysis failed to recognise several activities undertaken to secure feedback from victims.

Specifically, it only referenced two areas of survey (Domestic and Sexual abuse), omitting our activity on hate crime and Domestic Violence Disclosure Scheme (DVDS/Clare's Law) and the fact that our Research and Insight Team during 2019/2020 undertook in excess of 1200 surveys.

Notwithstanding the breadth of work undertaken, in response to the recommendation from the audit, we have engaged regionally with other forces to establish what further survey activity could be undertaken to enhance our response to victim satisfaction; and have found our approach to be at least equitable to the approach taken across the region, if not superior.

Further work is underway regarding the use of satisfaction data and how, through focus on particular crime categories or victimology, the force might better guide some further improvements in our approach.

- 4.9 There were two further housekeeping recommendations in the 2020 audit. The first related to undertaking an assessment of the changes to the 2021 victim code refresh and the second related to ensuring staff were appraised of the changes. Both have been discharged, the revised Victims Code is now embedded in practice and a comprehensive communications plan and mandatory training have been imposed.

- 4.9 Nottinghamshire Police are fully engaged with National and Regional colleagues and are working with the Ministry of Justice (MoJ) in order to meet data recording and reporting requirements following the introduction of the new Victims Code.

The force now has specified performance measures aligned to the requirements of the victim's code and Ministry of Justice (MoJ) requirements against which we perform well.

5 Financial Implications and Budget Provision

- 5.1 No financial or budgetary implications are anticipated.

6 Human Resources Implications

- 6.1 No Human Resources Implications identified.

7 Equality Implications

- 7.1 There are no equality implications identified as part of this report.

8 Risk Management

8.1 Work outlined in the report seeks to promote compliance with the Victim Code.

9 Policy Implications and links to the Police and Crime Plan Priorities

9.1 Compliance with the Victims Code links to the Police and Crime Plan themes of protecting and supporting victims and improving the trust and confidence in policing.

10 Changes in Legislation or other Legal Considerations

10.1 Amendments to the Victim Code were made in April 2021 and have been incorporated into the improvement activity and assured in existing practices.

11 Details of outcome of consultation

11.1 Not applicable as this report is for information only.

12. Appendices

12.1 Mazars Audit Report on Victim Code September 2021 Final Draft.

13. Background Papers (relevant for Police and Crime Panel Only)

13. None

NB

See guidance on public access to meetings and information about meetings for guidance on non-public information and confidential information.



OPCC for Nottinghamshire and Nottinghamshire Police

Final Internal Audit Report

Victims' Code of Practice

October 2020

Contents

- 01 Introduction
 - 02 Background
 - 03 Summary
 - 04 Areas for Further Improvement and Action Plan
 - 05 Follow up of Action Plan
- Appendices
- A1 Audit Information
 - A2 Statement of Responsibility

If you should wish to discuss any aspect of this report, please contact Mark Lunn, Internal Audit Manager, mark.lunn@mazars.co.uk or David Hoose, Partner, david.hoose@mazars.co.uk

Status of our reports

This report ("Report") was prepared by Mazars LLP at the request of the Office of the Police & Crime Commissioner for Nottinghamshire and Nottinghamshire Police and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The Report was prepared solely for the use and benefit of the Office of the Police & Crime Commissioner for Nottinghamshire and Nottinghamshire Police and to the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk

Please refer to the Statement of Responsibility in Appendix A2 of this report for further information about responsibilities, limitations and confidentiality.

01 Introduction

As part of the Internal Audit Plan for 2020/21 for the Office of the Police and Crime Commissioner for Nottinghamshire (OPCC) and Nottinghamshire Police, we have undertaken an audit of the controls and processes in place in respect of the Victims Code of Practice.

The specific areas that formed part of this review included: compliance to the code, preparedness for change, and lessons learned.

The fieldwork for this audit was completed whilst government measures were in place in response to the coronavirus pandemic (Covid-19). The fieldwork for this audit has been completed and the agreed scope fully covered. Whilst we had to complete this audit almost entirely remotely, we have been able to obtain all relevant documentation and/or review evidence via screen sharing functionality to enable us to complete the work.

We engaged with a number of staff members across the Force and OPCC during the review and are grateful for their assistance during the course of the audit.

02 Background

The Code of Practice for Victims of Crime forms a key part of the wider Government strategy to transform the criminal justice system by putting victims first, making the system more responsive and easier to navigate. Victims of crime should be treated in a respectful, sensitive and professional manner without discrimination of any kind. They should receive appropriate support to help them, as far as possible, to cope and recover and be protected from re-victimisation. It is important that victims of crime know what information and support is available to them from reporting a crime onwards and who to request help from if they are not receiving.

The Force utilises the Niche system for recording the actions required under the Victims Code of Practice (VCOP) and uses this for monitoring the levels of compliance at the Force.

Audit last completed a review of VCOP at Nottinghamshire in December 2015, where a limited level of assurance was provided. Ten recommendations were raised in total, of which two were fundamental, six were significant and the remaining two with a housekeeping priority. All recommendations that were raised in the last audit have been reviewed, with full details of the findings noted in both the **risk management** section and section 5 of the report.

Since the last audit, the Force have introduced a system, Niche, to record and maintain records for victims. The system, alongside the functionality embedded within it to achieve compliance to the VCOP, has been considered and tested as part of this review.

03 Key Findings

Overall Assurance on Adequacy and Effectiveness of Internal Controls	
	Satisfactory Assurance

Priority	Number of recommendations
1 (Fundamental)	0
2 (Significant)	3
3 (Housekeeping)	3
TOTAL	6

Examples of areas where controls are operating reliably

- The Force utilise a web form interface for Niche, which is a user-friendly method for creating a case for victims of crime.
- Audit performed a walkthrough of the Niche web form, confirming that it is suitably aligned to the requirements of the VCOP. It was also confirmed that the use of mandatory fields during input ensures that key data is captured.
- There is appropriate monitoring of performance / reporting against compliance to the VCOP to the Office of the Police and Crime Commissioner (OPCC) through Performance and Insight reports, in addition to the Force Performance Board.
- Daily Performance Reviews and Team Packs are in place to highlight non-compliance with the code to line managers of each Force unit.
- Forums are in place to review performance of the Force against the VCOP, including the Victim and Witness Assurance Group; the National Police Chiefs' Council (NPCC) Victim and Witness Group; and the East Midlands Criminal Justice Service (EMCJS) Victim and Witness Delivery Group.
- Audits are performed by the Corporate Development Team, reviewing 350 cases for the period April 2019 to April 2020. The audits focus on 13 key areas, with a compliance rate reported on each. Recommendations are also suggested from these findings to seek to improve performance for the Force.
- The intranet page for the Victims Code also contains other guidance for officers, covering areas such as giving evidence in court, in addition to how to correctly use the Niche system.

Risk Management

While there is a basically sound system of internal control, there are weaknesses which put some of the Organisation's objectives at risk. There is evidence that the level of non-compliance with some of the control processes may put some of the Organisation's objectives at risk.

As part of this review, a follow up of the recommendations raised in the December 2015 audit has been completed. The audit has found that improvements have been identified, as evidenced by closure of seven of the ten previously raised

recommendations. However, a number of recommendations have been deemed to be not implemented and therefore a new recommendation has been raised. This supports the audit opinion of a satisfactory assurance over the adequacy and effectiveness of controls in place for compliance with the VCOP.

For the three recommendations which audit were unable to confirm as implemented, they relate to the following:

- A recommendation was raised for the preferred method and frequency of contact to be established with each victim of crime. A sample test of 10 victim cases on the Niche system were reviewed, where it was confirmed that in one instance, the preferred method of contact was not established with the victim.
- It was recommended that all victims should be provided with the Victim Information Pack and / or referred to the information available on the Nottinghamshire Police Victim website. A sample test of 10 victim cases on the Niche system was completed, where in three instances, it could not be confirmed if the victim was provided with or offered the Victim Information Pack.
- A recommendation was raised for reports to be produced that details officers who are still to complete the Victims Code training, in addition to following up non-compliance. Audit were provided with the Victims Code E-learning completion rate at the time of the audit, with the compliance rate for Officers, PCSOs and Staff at 88%, 95% and 63% respectively. However, at the time of the audit a system for following up non-compliance had not yet been established.

The Force utilise guidance from the Ministry of Justice (MoJ), to support officers in complying with the Victims Code. This information is uploaded onto the intranet, enabling all officers to access this guidance. Audit observed that this guidance is directly that of the MoJ, with no specific documentation produced by the Force. Through discussions with management, it is understood that this was previously considered by the Force, but the decision was made to not proceed with this. Whilst audit acknowledge this, with the proposed changes that are due to be made to the VCOP, creating a condensed guidance document will serve well in ensuring that users are clearly aware of changes.

For the changes proposed to be made to the VCOP, Audit sought to confirm evidence of there being suitable governance over these. Whilst audit have been advised conversations have taken place in respect of the changes, this is not

currently on the action plan for the Victim and Witness Assurance Group. Therefore, a recommendation is being raised in this respect.

Through discussions with management it has been noted that the Corporate Communications team undertake surveys on victims. The purpose of the surveys are to understand the level of satisfaction of victims from the service that they have been offered. Results from the surveys undertaken are presented within the Performance and Insight reports that are published on the OPCC website. Audit reviewed the most recent report, for performance to March 2020, where it was noted that surveys are conducted on cases categorised as sexual offences or domestic abuse. The domestic abuse category does include crimes of a varying nature which have an element of domestic abuse to them. However, audit have been advised that there are approximately 800 crime types that are loaded onto the niche system. For the Force to better understand the satisfaction levels of the true population of victims, stratified sampling should be adopted for the surveys undertaken.

The level of assurance provided also considers the follow up work that has been undertaken as part of **section 5** of this report.

Value for Money

Value for Money (VfM) considerations can arise in various ways and our audit process aims to include an overview of the efficiency of systems and processes in place within the auditable area.

Through the use of the Niche web form, the Force have a format of highlighting the key aspects of cases that require completion by officers and collating these into one location. This creates efficiency for Officers when inputting this data.

Furthermore, it has been noted that the Force are introducing a mobile app version of the Niche interface. This will allow for Officers to input and create cases with greater flexibility, further improving the efficiency of Officers.

Sector Comparison

From our experience across our client base, we are seeing pressure on resources and higher service demands have resulted in challenges to the existing control environment. This often results in increased challenges to the decision making process where conflicting priorities exist and need to be balanced with effective risk management.

Areas of good practice were identified, including the compliance audits and the action plan in place for the Victim and Witness Assurance Group in place to monitor the levels of compliance and set actions to improve compliance.

Recommendations are made to further drive improvements in the process and to address the identified risks.

04 Areas for Further Improvement and Action Plan

Definitions for the levels of assurance and recommendations used within our reports are included in Appendix A1.

We identified a number of areas where there is scope for improvement in the control environment. The matters arising have been discussed with management, to whom we have made recommendations. The recommendations are detailed in the management action plan below.

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.1	<p>VCOP Guidance</p> <p><i>Observation:</i> The key document in place to provide guidance to Officers in relation to the Victims' Code of Practice is the Ministry of Justice issued guidance. This guidance is non-specific to the Force and is 104 pages in length.</p> <p>As Audit have observed, there is no condensed guidance document, produced by the Force to support officers. Through having a condensed guidance document available to Officers, it will support them in ensuring that the VCOP is adhered to, in addition to not having to refer to the lengthy guidance. Through discussions with management, it is understood that this was previously considered by the Force, but the decision was made to not proceed with this. Whilst audit acknowledge this, with the proposed changes that are due to be made to the VCOP, creating a condensed guidance document will serve well in ensuring that users are clearly aware of changes.</p> <p><i>Risk:</i> Officers are unaware of the requirements of the VCOP and therefore the Force is non-compliant with the code thus failing the victims' of crime.</p>	The Force should produce a condensed guide to the Victims' Code of Practice, following the introduction of the currently proposed changes.	3	<p>All Victims Code guidance, reference documents and user guides are on the VCOP Intranet site to support staff in understanding the Victims Code requirements and how to complete/update Niche records.</p> <p>A review of the intranet site will be undertaken consulting front line staff to its suitability and ease of use to define how it can be improved to make better use of the resources and prioritise/condense key guides.</p> <p>Action.</p> <p>This will be co ordinated by C/Insp Woolley and monitored via the Victims and Witness Assurance Group Meeting.</p>	<p>C/Insp Woolley</p> <p>Timescale:</p> <p>Review in 6 months. (April 2021)</p> <p>This will be dependent on the new Victims Code being published and subsequent required alterations.</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.2	<p>Action Plan</p> <p><i>Observation:</i> The Victim and Witness Assurance Group are a tactical level group who review the performance figures for VCOP compliance in depth. An action plan is also in place to track and monitor tasks for the Victim and Witness Assurance Group. The Group is chaired by the Head of Crime and Operations and meet every two months.</p> <p>Audit reviewed the action plan and it was noted that the proposed changes to be made to the Victims' Code of Practice, were not included.</p> <p>Given any changes to the code will impact upon the way Force deals with victims of crime this should be added to ensure appropriate preparations are being made.</p> <p><i>Risk:</i> The changes to the VCOP are insufficiently monitored and tracked.</p> <p>The Force is not prepared for the changes to the VCOP.</p>	<p>The proposed changes to the Victims' Code of Practice should be included within the action plan that is monitored by the Victim and Witness Assurance Group.</p>	3	<p>The proposed changes to Victims Code of Practice have been raised at the Victim and Witness Assurance Group.</p> <p>Will ensure V&W Assurance Group Minutes are documented to ensure this is recorded in future meetings.</p> <p>Action.</p> <p>C/Insp Woolley will ensure as from November 2020 V&W Meeting this will be documented and monitored</p>	<p>C/Insp Woolley</p> <p>Timescale: Completed November 2020</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.3	<p>Satisfaction Surveys</p> <p><i>Observation:</i> It has been noted that surveys are performed by the Corporate Communications team to assess the level of service received by victims from the Force.</p> <p>The current approach to surveys is that cases that are categorised as either sexual offences or domestic abuse will be selected and questions will be asked to understand their level of satisfaction. It has been noted that the domestic abuse category can include crimes of a varying nature, which have an element of domestic abuse to them.</p> <p>However, there are multiple other crime types (audit have been advised that there are approximately 800 crime types) and victims of these crimes are not being surveyed. Therefore, the satisfaction surveys are not completed to reflect the true satisfaction of all victims.</p> <p><i>Risk:</i> The Force are unaware of victim's views on the level of service received therefore are unable to identify any areas of concern.</p>	<p>For the Force to better understand the satisfaction levels of the true population of victims, stratified sampling should be adopted for the surveys undertaken.</p> <p>The results of the surveys can then be analysed to a greater degree by the Force, including: the level of satisfaction dependent on whether a positive / negative outcome was achieved for the victim; and the trends in satisfaction for different crime types.</p>	2	<p>The Force currently surveys Domestic Abuse, Sexual Offences and Hate Crime offences by Research and Insight Team.</p> <p>It is noted Nottinghamshire Police do not currently survey a wider category of crime types.</p> <p>Action.</p> <p>C/Insp Woolley.</p> <p>This will be reviewed and consultation with other Forces within the Region will commence to understand how this undertake in other areas and to establish best practices. This will be ongoing and monitored/reviewed via the V&W Assurance group.</p>	<p>C/Insp Woolley</p> <p>Timescale:</p> <p>Review in 6 months (April 2021)</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.4	<p>Preferred Method of Contact</p> <p><i>Observation:</i> Upon initial contact with victims, officers should establish their preferred method and frequency of contact, which should be recorded on the niche system.</p> <p>Audit performed a sample test of 10 victim cases on the Niche system, where it was confirmed that in one instance, the preferred method of contact was not established with the victim.</p> <p>Officers can submit the victim record on Niche, via a web form or directly into Niche. Audit observed that the web form fields are mandatory so therefore when inputting using this method this information should always be recorded. Therefore, this indicates that when victim records are created directly into Niche this is when the missing data could occur.</p> <p>This test was performed as part of the follow up section of the last audit, further detailed in section 5 of the report.</p> <p><i>Risk:</i> Failure to establish a victim's preferred method of contact resulting in updates being made in a format which is not accessible / understandable by the victim and non-compliance with the Victims Code of Practice.</p>	Officers should be reminded when inputting victims records directly onto Niche that they complete all required information including the preferred method.	3	<p>The Webform has mandated requirements, including the preferred method of contact. This has now been replicated in Niche as of October 2020.</p> <p>Action.</p> <p>Niche forms have been reviewed and as part of the annual niche upgrade the following are now mandated fields for officers:</p> <ul style="list-style-type: none"> • Preferred method of contact • Victim Services • Booklet Supplied • Required Update frequency • Priority Category • Officer Details 	<p>C/Insp Woolley</p> <p>Timescale: Completed. October 2020</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.5	<p>Victim Information</p> <p><i>Observation:</i> Victims are entitled to receive a clear explanation of what to expect from the criminal justice process. On the niche system, Officers are able to confirm that they have either provided the Victim with a Victim Information Pack (VIP) or referred them to the Nottinghamshire Police Victim website.</p> <p>Audit performed a sample test of 10 victim cases on the Niche system, where it was identified that in three instances it was not recorded why the victim was not provided with a victim information pack.</p> <p>This test was performed as part of the follow up section of the last audit, further detailed in section 5 of the report.</p> <p><i>Risk:</i> Failure to 'signpost' victims to appropriate victim support material resulting in lack of information for them in respect of the different provisions available. This could result in increased vulnerability of victims and non-compliance with the Victims Code of Practice.</p>	<p>All victims should be offered the Victim Information Pack and / or referred to the information available on the Nottinghamshire Police Victim website.</p> <p>In the instance that the victims have refused, the reason should be recorded on the Niche system.</p>	2	<p>Niche currently does record the reason for refusal of acceptance of the Victim Information Pack (VIP) or Signposting to the website.</p> <p>Action.</p> <p>C/Insp Woolley to review niche as it permits negative responses to the VIP not being offered at all. This is to be explored and appropriateness of positive response and documenting reasons why/when the VIP cannot be offered. This will require regional consultation due to amending Niche.</p>	<p>C/Insp Woolley</p> <p>Timescale:</p> <p>Review in 3 months (January 2021)</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility
4.6	<p>Training</p> <p><i>Observation:</i> A Victims Code E-learning module is available for Staff, Officers and PCSOs at Nottinghamshire to complete.</p> <p>At the last audit, the Force did not have a method in place to establish the completion levels of this training, or a process to follow up non-compliance.</p> <p>Audit were provided with the Victims Code E-learning completion rate at the time of the audit, with the compliance rate for Officers, PCSOs and Staff at 88%, 95% and 63% respectively. This confirms that the Force have established how to assess the level of compliance.</p> <p>However, a system to follow up non-compliance could not be suitably evidenced to audit.</p> <p>This test was performed as part of the follow up section of the last audit, further detailed in section 5 of the report.</p> <p><i>Risk:</i> Failure to monitor those officers who have not completed the mandatory e-learning for Victims Code resulting in a lack of assurance that officers have been adequately trained to ensure compliance with the Code.</p>	<p>A regime should be established as to how non-completion of the training module will be escalated by the Force.</p> <p>This could entail the Force sending regular updates to line managers details of any Staff or Officers with training that is overdue for completion.</p>	2	<p>Action.</p> <p>C/Insp Woolley to ensure all outstanding officers/Staff have been emailed to complete. This has commenced (Sept 20) is now subject to quarterly review of completion rates and officers being contacted to complete.</p>	<p>C/Insp Woolley</p> <p>Timescale:</p> <p>Completed October 2020</p>

05 Follow up of Action Plan

Definitions for the levels of assurance and recommendations used within our reports are included in Appendix A1. We identified ten areas for improvement in the control environment during the last audit, which we have followed up as part of this review, with our findings noted as per below.

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
4.1	<p>VCOP Working Sheet</p> <p><i>Observation:</i> A VCOP working sheet should be created for all cases where there is a victim and retained on the Crime Recording System (CRMS).</p> <p>Audit testing identified that the working sheet had not been created in two out of twenty-five cases. Therefore, compliance with the Victims Code of Practice could not be evidenced in these cases.</p> <p><i>Risk:</i> Failure to evidence that the victim has received all required information and related support, including the mandatory needs assessment, leading to no compliance with the Victims Code of Practice.</p>	<p>A VCOP working sheet should be maintained for each crime involving a victim. Officers should be reminded of the importance of creating and maintaining this working sheet which should be evidenced within the CRMS system.</p>	2	<p>Accepted in part</p> <p>Introduction of Niche in February 2016 will supersede the use of CRMS and thus the need for working sheets. A communication strategy is in the process of being written to reiterate current requirements and outline the significant changes which will take effect from February 2016</p> <p>The Force also produces a DPR report which contains details of those crimes where there has been no victim update for 22 days. These report figures are part of daily business in both pre-daily management meetings</p>		<p>Implemented</p> <p>Audit have confirmed that as Niche is now used to retain records in relation to the VCOP, the use of working sheets are now redundant. Through the fieldwork completed, it has been confirmed that the requirements that were previously mandatory as part of the working sheets are now adhered to through the use of the (Occurrence Evidential Log) OEL functionality.</p> <p>Audit performed a sample test of 10 victim cases, where it was confirmed in all instances OELs were in</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
				<p>(DMM) on localities and also in divisional daily management meetings (DMM). Furthermore they are presented as part of the divisional OPR performance packs for monitoring and corrective action</p> <p>Action:- Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order</p> <p>T/Chief Inspector Andy Goodall to ensure victim figures are available and presented as part of the divisional OPR performance packs for monitoring and corrective action</p>	<p>31/1/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>place and being used by officers.</p>

4.2	<p>Needs Assessment</p> <p><i>Observation:</i> All officers should carry out a dedicated needs assessment with each victim to establish the level of support they require. This is evidenced on the VCOP working sheet.</p> <p>In addition to the two cases identified in finding 4.1, one additional case was identified where the needs assessment part of the VCOP working sheet had not been completed by the responsible office.</p> <p><i>Risk:</i> Lack of identification of the support needs of the victim and subsequent failure to provide the required level of support resulting in increased vulnerability of victims and non compliance with the Victims Code of Practice.</p>	Needs assessments should be carried out with all victims of crime and results recorded on the VCOP working sheet within the CRMS system. This should then be used of the basis of support provision for the victim going forward.	2	<p>Accepted in part</p> <p>Introduction of Niche in February 2016 will supersede the use of CRMS and thus the need for working sheets. A communication strategy is in the process of being written to reiterate current requirements and outline the significant changes which will take effect from February 2016</p> <p>The Force also produces a DPR report which contains details of those crimes where there has been no victim update for 22 days. These report figures are part of daily business in both pre-daily management meetings (DMM) on localities and also in divisional daily management meetings (DMM). Furthermore they are presented as part of the divisional OPR performance packs for</p>	<p>31/1/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>Implemented</p> <p>Audit have noted that the completion of needs assessments is now automated through use of the Niche web form. Through completion of certain fields relating to the victim, there is auto-population of a field that defines whether a victim is to be considered as a priority or non-priority. Audit have been advised that the determination for whether a victim is considered a priority victim is based upon home office guidance which has been configured within the Niche system. Audit performed a walkthrough of the web form to confirm that this configuration is responsive to the inputs entered on to the web form.</p> <p>Audit performed a sample test of 10 victims cases, where it was confirmed that in all</p>
-----	--	---	---	---	--	--

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
				<p>monitoring and corrective action</p> <p>Action:- Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order</p> <p>T/Chief Inspector Andy Goodall to ensure victim figures are available and presented as part of the divisional OPR performance packs for monitoring and corrective action</p>		<p>instances the needs of the victim had been assessed, with a priority assigned to their case.</p>

4.3	<p>Preferred Method of Contact</p> <p><i>Observation:</i> Upon initial contact with victims, officers should establish their preferred method and frequency of contact which should be recorded on the VCOP working sheet.</p> <p>Audit testing identified that in ten out of twenty-five cases the contact section of the working sheet had not been completed and therefore there was no evidence that the preferred method and frequency had been established.</p> <p><i>Risk:</i> Failure to establish a victims preferred method of contact resulting in updates being made in a format which is not accessible/ understandable by the victim and non compliance with the Victims Code of Practice.</p>	Preferred method and frequency of contact should be established with each victim of crime to enable them to be updated on the progress of any ongoing investigation. This should be recorded on the VCOP working sheet and evidence maintained that updates have been provided in line with this request.	2	<p>Accepted in part</p> <p>Introduction of Niche in February 2016 will supersede the use of CRMS and thus the need for working sheets. A communication strategy is in the process of being written to reiterate current requirements and outline the significant changes which will take effect from February 2016</p> <p>The Force also produces a DPR report which contains details of those crimes where there has been no victim update for 22 days. These report figures are part of daily business in both pre-daily management meetings (DMM) on localities and also in divisional daily management meetings (DMM). Furthermore they are presented as part of the divisional OPR performance packs for monitoring and corrective action</p>	<p>31/1/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>Not Implemented</p> <p>Audit performed a sample test of 10 victim cases on the Niche system, where it was confirmed that in one instance, the preferred method of contact was not established with the victim.</p> <p>Refer to 4.4</p>
-----	---	---	---	--	--	---

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
				<p>Action:- Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order</p> <p>T/Chief Inspector Andy Goodall to ensure victim figures are available and presented as part of the divisional OPR performance packs for monitoring and corrective action</p>		

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
4.4	<p>Victim Information</p> <p><i>Observation:</i> Victims are entitled to receive a clear explanation of what to expect from the criminal justice process. The VCOP working sheet requires officers to confirm they have either provided the Victim with a Victim Information Pack (VIP) or referred them to Nottinghamshire Police Victim website.</p> <p>Audit testing identified that in fourteen out of twenty-five cases the officer had not confirmed this information had been provided or the referral had been made.</p> <p><i>Risk:</i> Failure to 'signpost' victims to appropriate victim support material resulting in lack of information for them in respect of the different provisions available. This could result in increased vulnerability of victims and non compliance with the Victims Code of Practice.</p>	<p>All victims should be provided with the Victim Information Pack and/ or referred to the information available on the Nottinghamshire Police Victim website. Confirmation that this information has been communicated should be recorded on the VCOP working sheet within the CRMS.</p>	1	<p>Accepted</p> <p>Action: Review and update the Victim Information Pack in line with the new amendments. Outline amendments in Communication Strategy and publish on internet. Confirm changes via Weekly Order</p>	<p>31/1/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>Not Implemented</p> <p>Audit performed a sample test of 10 victim cases on the Niche system, where it was confirmed that in three instances, it was not confirmed if the victim was provided with or offered the Victim Information Pack.</p> <p>Refer to Rec 4.5</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
4.5	<p>Victim Information Pack (VIP)</p> <p><i>Observation:</i> Victim Information Packs are available to provide a guide to all the services and support available to victims from reporting through to trial.</p> <p>A 'Right to Review' procedure has recently been introduced by the Force (enabling victims to request a review of a decision not to prosecute), however this was not detailed in the VIP to ensure victims are aware of this.</p> <p>In addition, the Force offers 'Restorative Justice'. This is the process of bringing together victims with those responsible for the crime, to find a positive way forward. Although this was listed as an 'out of court' disposal in the VIP, there was no detail included to inform them how they can take part, in line with the Code of Practice.</p> <p><i>Risk:</i> Failure to inform victims of all support available to them resulting in an ineffective service provision, increased risk of re-victimisation and non compliance with the Victims Code of Practice.</p>	<p>The VIP should be reviewed and updated to incorporate the Right to Review procedure and information in respect of participation of the Restorative Justice scheme. (It is noted that a further update to the Victims Code of Practice is due later in 2015 and therefore it is practical to await this publication prior to review and update of the VIP to establish whether any additional areas require review).</p>	2	<p>Accepted</p> <p>Action: Review and update the Victim Information Pack in line with the new amendments. Outline amendments in Communication Strategy and publish on internet. Confirm changes via Weekly Order</p>	<p>31/3/2016</p> <p>T/Ch Inspector Andy Goodall</p>	<p>Implemented</p> <p>Audit reviewed the Victim Information Pack (VIP), that was most recently updated in August 2019. Through review of the VIP, it has been confirmed that there is inclusion of the Right to Review procedure, including the instances in which a review can be requested; how a review will be conducted; in addition to how to request the review. Audit also confirmed that there is inclusion of details regarding the Restorative Justice Scheme, including the purpose of the scheme and how this can be obtained by the victim.</p>

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
4.6	<p>Victim Updates</p> <p><i>Observation:</i> When a victim is updated on the progress of the case this is recorded on the CRMS system. For the purpose of performance monitoring, an 'Aggrieved Updated' box should be ticked to acknowledge this update. Where the box is not ticked, this creates a report to management that the update may be overdue.</p> <p>Audit testing identified that in six out of twenty-five cases, updates had been made to the victim but the Aggrieved Updated box had not been ticked.</p> <p><i>Risk:</i> Where acknowledgement of updates is not recorded in the CRMS this creates both unnecessary records on performance management information and additional checks carried out by officers.</p>	<p>Officer should be reminded that when updates are provided to victims, acknowledgement should be made within the 'aggrieved updated' box on CRMS to support the update and prevent this being escalated via performance management information.</p>	2	<p>Part Accepted</p> <p>Introduction of Niche in February 2016 will supersede the use of CRMS and thus the need for ticking an 'Aggrieved Updated' box. A communication strategy is in the process of being written to reiterate current requirements and outline the significant changes which will take effect from February 2016</p> <p>Action:- Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order</p>	<p>31/1/2016</p> <p>T/Ch Inspector Andy Goodall</p>	<p>Implemented</p> <p>Audit have noted that since the implementation of the Niche system, in particular the use of the OELs have resulted in officers not requiring to perform this action. To confirm, the 'Aggrieved Updated' box no longer exists and where victims are updated on their case, this is captured within the OELs.</p>

4.7	<p>Victim Personal Statement (VPS)</p> <p><i>Observation:</i> Under the Victims Code, all victims should be given the opportunity to make a VPS to explain how the crime has affected them. This may then be read out in court if the defendant is found or pleads guilty.</p> <p>Audit testing on three cases, where the victim had given a statement and therefore should have been offered a VPS, identified that this offer had not been recorded on the CRMS system for two of these cases.</p> <p>It was acknowledged however that these cases were still ongoing and a VPS may be taken at a later date. In addition, the right to a VPS is included in the Victim Information Pack.</p> <p><i>Risk:</i> Failure to offer a VPS statement resulting in lack of opportunity for the victims to explain how they have been personally affected and failure to comply with the Victims Code of Practice.</p>	The offer/ availability of a VPS to the victim should be clearly communicated and acknowledged within the VCOP working sheet.	3	<p>Accepted in part</p> <p>Introduction of Niche in February 2016 will supersede the use of CRMS and thus the need for ticking an 'Aggrieved Updated' box. A communication strategy is in the process of being written to reiterate current requirements and outline the significant changes which will take effect from February 2016</p> <p>Action:- Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order</p>	<p>31/1/2016</p> <p>T/Ch Inspector Andy Goodall</p>	<p>Implemented</p> <p>Through a walkthrough undertaken of the Niche system, it has been confirmed that officers are able to record if an offer has been made for the victim to offer a Victim Personal Statement (VPS). For a case where the victim has offered a VPS, it was confirmed that the offer of this had been suitably captured within the system.</p>
4.8	Victim Needs Assessment			Accepted		Implemented

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
	<p><i>Observation:</i> Following a Victims Needs Assessment it should be evidenced within CRMS that the victim has been provided with the required level of support.</p> <p>Audit sample testing on five cases where the victim had been assessed as having 'priority needs' identified that in one case there was a lack of information recorded in CRMS to confirm that proactive victim support was ongoing. The victim in question was deemed vulnerable by disability. Although they had been routinely referred to the Victim Support service, and a letter was evidenced requesting the victim should contact the force if they require any further support, there was no evidence they had been visited for ongoing support and assessments or proactively referred to a specialist agency.</p> <p><i>Risk:</i> Failure to evidence proactive referral to specialist agencies or provision of support for victims who have been assessed as having priority needs, leading to increased risk of re-victimisation and non compliance with the Victim Code of Practice.</p>	<p>All victims should be considered for referral to specialist agencies in addition to Victim Support Services. These referrals and proactive support provided should be evidenced within the CRMS system.</p>	2	<p>Action: Work to be undertaken to identify specialist agencies able to provide additional support to victims. This to be communicated via the Communication Strategy and reiterated in a Weekly Order</p> <p>T/Chief Inspector Andy Goodall to ensure Niche incorporates the requirement to record any specialist referrals</p>	<p>31/1/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>Audit performed a sample test of 10 victim cases on the Niche system, where it was confirmed that in all instances, the victim was informed of the existence of specialist agencies for which referrals could be made.</p>

4.9	<p>Training</p> <p><i>Observation:</i> At the previous audit a recommendation was made to formally monitor key training relating to the Victims Code and reminders sent on a periodic basis to those individuals who have not completed the training.</p> <p>The management response to this recommendation was that compliance is monitored with regular reports being produced and completion/ non completion reports sent to BCU/ Department Leads.</p> <p>At the time of the current audit information was requested to confirm the number of officers who were required to complete this training but had not yet done so. It was found that the system for recording e-learning progress could only provide information on those officers who had completed the training rather than 'non-completers'. The Learning & Development Team were working to resolve this, however, given this information was not available, testing could not be undertaken to confirm that compliance was being monitored given that non completion reports are not being issued.</p> <p><i>Risk:</i> Failure to identify and monitor those officers who have not completed the mandatory e-learning for Victims Code resulting in a lack of assurance that officers have been adequately trained to ensure compliance with the Code.</p>	The reports detailing officers who are still to complete the Victims Code training should be located and the system for following up on non compliance established to provide assurance that all officers are adequately trained to ensure compliance with the Code.	1	<p>Accepted</p> <p>Action:- T/Chief Inspector Andy Goodall to contact EMCHRS and ensure they provide 6 monthly updates on who has completed Compliance with the Code Training. This to be circulated to Heads of Department for appropriate action</p>	<p>30/6/2016</p> <p>T/Chief Inspector Andy Goodall</p>	<p>Not Implemented</p> <p>Audit were provided with the Victims Code E-learning completion rate at the time of the audit, with the compliance rate for Officers, PCSOs and Staff at 88%, 95% and 63% respectively.</p> <p>Management have advised that Officers/Staff who have not completed the training have been emailed. However, it has been noted that the previously proposed recommendation of establishing a system to follow up non-compliance cannot be suitably evidenced.</p> <p>Refer to Rec 4.6</p>
-----	---	--	---	--	--	---

	Observation/Risk	Recommendation	Priority	Management response	Timescale/ responsibility	Follow up findings – September 2020
4.10	<p>Referral to Specialist Agencies</p> <p>Observation: Following a victim needs assessment, victims are automatically referred to Victim Support Services. However, there could be instances where they require more specialised support, particular those with a 'priority' outcome following their assessment.</p> <p>The audit identified that officers make referrals based on their experience and knowledge; however there is no documented guidance/ list of agencies currently available for reference and to ensure consistency on the level/ quality of referrals by individual officers.</p> <p>It is acknowledged that the number of agencies/ organisations is continually changing, however it is deemed good practice to provide this guidance to officers to ensure consistency in the level/ quality of referrals by individual officers.</p> <p><i>Risk:</i> Officers may be unaware of all available specialist support provisions resulting in priority needs victims not receiving the highest quality of support that is available to them.</p>	<p>Consideration should be given to documenting guidance for officers in respect of a list of available specialist organisations/ agencies to which victims can be referred to.</p>	3	<p>Accepted</p> <p>Action: Work to be undertaken to identify specialist agencies able to provide additional support to victims. This to be communicated via the Communication Strategy and reiterated in a Weekly Order</p>	<p>31/3/2016</p> <p>T/Ch Inspector Andy Goodall</p>	<p>Implemented</p> <p>Audit reviewed a hard copy document, that serves as the directory of key local and national support services. A review of the document confirmed that this serves to provide officers with guidance for services that victims can be referred to. For greater resilience, audit have suggested to management that this should be stored electronically on the intranet. However, the initial recommendation proposed has been met, therefore this recommendation is now deemed to be implemented.</p>

A1 Audit Information

Audit Control Schedule	
Client contacts:	Charlotte Radford, OPCC Chief Finance Officer Mark Kimberley, Force Chief Finance Officer Chief Inspector James Woolley Chief Superintendent Gary Hooks Nicola Wade, OPCC Head of Commissioning
Internal Audit Team:	David Hoose, Partner Mark Lunn, Internal Audit Manager Moosa Bahadur, Senior Internal Auditor
Finish on Site \ Exit Meeting:	25 th September 2020
Draft report issued:	30 th September 2020
Management responses received:	16 th October 2020
Final report issued:	16 th October 2020

Scope and Objectives

Our audit considered the following risks relating to the area under review:

Compliance

- Policies and procedures have been put in place to support officers in complying with the Code. Such guidance should include, but not be limited to, guidance in respect of:
 - Needs assessments
 - Crime reporting work sheets
 - Referral mechanisms
 - Communications with the victim
 - Personal statements
 - Complaints procedures
- Systems are in place to ensure that actions taken for victims of crime are captured and are done so in line with the expectations laid out within the VCOP.
- There is appropriate monitoring of compliance with the VCOP including both qualitative and quantitative measures.
- There are appropriate forums in place within Nottinghamshire Police and the OPCC to review Force compliance to the code and action plans put in place to address areas of improvement.
- There is effective management and performance information available in respect of compliance with the Code and this information is utilised to put action plans in place to address areas of improvement.

Preparedness for Change

- There is appropriate governance over the proposed changes to systems in relation to VCOP.
- The Force has effective plans in place based on accurate management information and are correctly aligned to the proposed changes.

Lessons Learned / Feedback

- The OPCC utilises service user feedback to inform and improve both police and wider partnership services for Victims on an ongoing basis.
- The Force utilises feedback received in respect of the Victims it deals with and takes action to address areas of concern / takes opportunities to improve.

The objectives of our audit were to assess the adequacy and effectiveness of internal controls in operation with a view to providing an opinion on the extent to which risks in this area are managed. In giving this assessment it should be noted that assurance cannot be

Scope and Objectives
<p>absolute. The most an Internal Audit Service can provide is reasonable assurance that there are no major weaknesses in the framework of internal control.</p> <p>We are only able to provide an overall assessment on those aspects of VCOP that we have tested or reviewed. Testing has been performed on a sample basis, and as a result our work does not provide absolute assurance that material error, loss or fraud does not exist.</p>

Definitions of Assurance Levels		
Assurance Level	Adequacy of system design	Effectiveness of operating controls
Significant Assurance:	There is a sound system of internal control designed to achieve the Organisation's objectives.	The control processes tested are being consistently applied.
Satisfactory Assurance:	While there is a basically sound system of internal control, there are weaknesses which put some of the Organisation's objectives at risk.	There is evidence that the level of non-compliance with some of the control processes may put some of the Organisation's objectives at risk.
Limited Assurance:	Weaknesses in the system of internal controls are such as to put the Organisation's objectives at risk.	The level of non-compliance puts the Organisation's objectives at risk.
No Assurance	Control processes are generally weak leaving the processes/systems open	Significant non-compliance with basic control processes leaves the

	to significant error or abuse.	processes/systems open to error or abuse.
--	--------------------------------	---

Definitions of Recommendations	
Priority	Description
Priority 1 (Fundamental)	Recommendations represent fundamental control weaknesses, which expose the organisation to a high degree of unnecessary risk.
Priority 2 (Significant)	Recommendations represent significant control weaknesses which expose the organisation to a moderate degree of unnecessary risk.
Priority 3 (Housekeeping)	Recommendations show areas where we have highlighted opportunities to implement a good or better practice, to improve efficiency or further reduce exposure to risk.

A2 Statement of Responsibility

Status of our reports

We take responsibility to the Office of the Police & Crime Commissioner for Nottinghamshire and Nottinghamshire Police for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, re-interpretation amendment and/or modification by any third party is entirely at their own risk.

Registered office: Tower Bridge House, St Katharine's Way, London E1W 1DD, United Kingdom. Registered in England and Wales No 0C308299.

Victims Code of Practice (VCoP)



- Internal Audit commissioned by OPCC
- Purpose
 - Audit of controls and processes
 - Victim Code Compliance
 - Preparedness for change
 - Lessons learned



Previous Audit : December 2015

Outcome: Limited Assurances

Ten Recommendations:

- Two Fundamental
- Six significant
- Two Housekeeping

September 2020 Audit:

Outcome: Satisfactory Outcome

Six Recommendations:

- Three Significant Recommendations
- Three Housekeeping Recommendations

Mazars 2020 Recommendations: Significant

Observation: Satisfaction Surveys

Requirement: Limited crime type range and sample size used, not providing a true reflection.

Action undertaken:

- Nottinghamshire Police Insight & Research Team completed:
- Over 1200 surveys last year covering:
- Domestic Abuse, Sexual Offences, Hate and DVDS (Clare's Law)
- Nottinghamshire Police Information Compliance Audit completed:
- Over 350 specific Victim Code audits completed – MoJ recommend 120 surveys
- Regional Forces consulted – no standard approach, varying practices and data collations
- On going review and development via V & W Assurance Group (including partners)
- Mazars have been updated and feedback *“Notts in a position of strength in having oversight of victim satisfaction levels”*



Mazars 2020 Recommendations: Significant

Observation: Training
Recommendation: A regime of non-completion of Ncalt training module

Action undertaken:

- Current completion compliance:
 - 88% Police Officers
 - 95% PCSO
 - 63% Police Staff Investigators
- New Ncalt Victim Code package went live in April 21.
 - Monthly compliance report completed on dept/team level
 - Quarterly monitoring at V & W Assurance Group



Mazars 2020 Recommendations: Significant

Observation: Victim Information

Recommendation: All victims should be offered Victim Information Pack (VIP), where the VIP is not supplied reason to be recorded.

Action undertaken:

- Webform and Niche mandated fields have now been updated to include reasons why VIP not supplied.



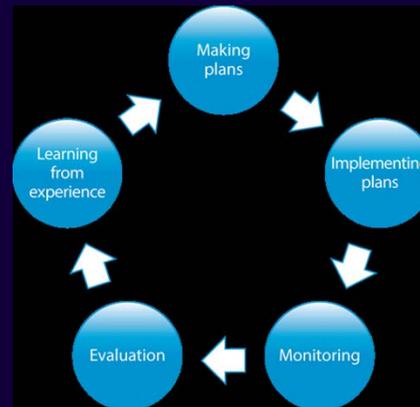
Mazars 2020 Recommendations: Housekeeping

Observation: Action Plan

Recommendation: Proposed changes to Victims Code to be monitored by Victims & Witness Assurance Group.

Action undertaken:

- All proposed changes and actions undertaken monitored/recorded at V&W Group



Mazars 2020 Recommendations: Housekeeping

Observation: Victim Code/VCOP Guidance
Recommendation: The Force to produce condensed Victim Code guidance

Action undertaken:

- Feedback sought from frontline officers:
- Internal and External Websites refreshed
- Revised Communications strategy undertaken
- New Force Victims Branding



Mazars 2020 Recommendations: Housekeeping

Observation: Preferred Method of contact

Recommendation: Officers to be reminded of requirements.
When entering onto Niche to complete all required information

Action undertaken:

- Webform mandated fields have now been replicated in Niche. The following are mandatory fields:
- Preferred method of contact
- Victim Services Offer
- Victim Information Booklet supplied
- Required Update Frequency
- Priority Category
- Officer Details
- All Changes communicated via Intranet bulletins



Victims Code of Practice (VCoP)

Next Steps?

- Working with National and Regional Police colleagues on VCOP developments
- Working with partners CPS, Probation, Courts to ensure compliance
- National Niche development to improve recording
- Summer training plan for all front line staff and officers
- Future communications strategy to support Victims Code
- Making better use of technology (Victims Code App)



For Information	
Public/Non Public	Public
Report to:	Joint Audit and Scrutiny Panel (JASP)
Date of Meeting:	29 July 2021
Report of:	Deputy Chief Constable
Report Author:	Amanda Froggatt, Corporate Development Manager Laura Spinks, Force Assurance Lead
E-mail:	amanda.froggatt@nottinghamshire.pnn.police.uk
Other Contacts:	
Agenda Item:	07

Audit and Inspection Update

1. Purpose of the Report

- 1.1 To provide the Joint Audit and Scrutiny Panel (JASP) with an update on progress against recommendations arising from audits and inspections which have taken place during Quarter 1, 2021/22.
- 1.2 To inform the Board of the schedule of planned audits and inspections.

2. Recommendations

- 2.1 That the Panel notes the status of audits and inspections carried out over the last quarter.
- 2.2 That the Panel review Appendices 1 and 2 and if required request further detail which will be reported at the next meeting.

3. Reasons for Recommendations

- 3.1 To enable the Panel to fulfil its scrutiny obligations with regard to Nottinghamshire Police and its response to audits and inspections.
- 3.2 To provide the Panel with greater scrutiny opportunities and to reach more informed decisions.
- 3.3 To provide the Panel with the opportunity to shape the focus and data inputs for future HMICFRS inspections.

4. Summary of Key Points

Audit and Inspection Action Updates

- 4.1 The actions referred to in this report are the result of recommendations made by Nottinghamshire Police's internal auditors and external inspectorates, including HMICFRS.
- 4.2 With regards to HMICFRS inspections (Appendix A) there are 39 open recommendations across the various HMICFRS reports. There are 10 closed recommendations. These closed recommendations have been reviewed by HMICFRS and they have assessed the Force's evidence as suitable to close and show it as complete.
- 4.3 Of the remaining 39 open recommendations, 7 have been assessed by the HMICFRS as requiring reality testing. This will be undertaken during the Integrated PEEL Inspection. HMICFRS will then confirm whether they are happy to close them.
- 4.4 In relation to internal audits, which have been undertaken by Mazars, there are 60 open recommendations.
- 4.5 There are currently 0 actions which have exceeded their target date.

Recent Inspection Activity

Date of Inspection	Inspection Area	Date Report Received	Final Grading	Status
October 2020	Covid-19 Policing Inspection	April 2021	N/A	Recommendations entered onto 4Action
March 2021	Fraud Inspection	-	N/A	Awaiting report
March 2021	Neurodiversity in the Criminal Justice System	-	N/A	Awaiting report
April 2021	Policing of Vigils	April 2021	N/A	No recommendations. For information only

Forthcoming HMICFRS Inspections

Date of Inspection	Inspection Area	Status
July 2021	Integrated PEEL Inspection – Serious and Organised Crime	Confirmation received force will be inspected July 2021. Timetable agreed.
September 2021	Integrated PEEL Inspection – Armed Policing Inspection	Confirmation received force will be inspected September 2021. Work in progress.
September 2021	Integrated PEEL Inspection – Victim Service Agreement	Confirmation received force will be inspection September. Work in progress.
November 2021	Integrated PEEL Inspection – Counter Corruption	Confirmation received force will be inspection November. Timetable awaiting sign off. Documents submitted, data currently being collated. Deadline for data 1 st October 2021.

Publications

Date of Publication	Inspection Area	Status
February 2021	Stop and Search	Report published. Recommendations sent out for management update
March 2021	Policing Protests	Report published. Recommendations sent out for management update
March 2021	Roads Policing	Report published. Recommendations sent out for management update

June 2021	Policing Domestic Abuse during the Covid Pandemic	Report published. Error identified in report which has been brought to the attention of HMICFRS. Recommendations sent out for management update
-----------	---	---

4.5 Recent and Forthcoming Audits

Recent Audit Activity

Date of Audit	Auditable Area	Date Report Received	Final Grading	Status
February 2021	Risk Management	February 2021	Limited Assurance	Circulated for management comments, report not agreed
April 2021	Wellbeing	April 2021	Limited Assurance	Circulated for management comments, report not agreed

Forthcoming Audits

Date of Audit	Auditable Area	Status
June 2021	Performance Management	Audit currently being undertaken
June 2021	Firearms Licensing	Audit currently being undertaken
Unknown	Core Financials	N/A
Unknown	Procurement	N/A
Unknown	Business Change	N/A
Unknown	MFSS Transfer	N/A
Unknown	Health and Safety	N/A
Unknown	Information Services	N/A
Unknown	Partnerships	N/A
Unknown	Workforce Planning	N/A
Unknown	Information Assurance	N/A

5. Financial Implications and Budget Provision

- 5.1 If financial implications arise from recommendations raised from audits, inspections and reviews, these implications are considered accordingly. Where an action cannot be delivered within budget provision, approval will be sought through the appropriate means.

6. Human Resources Implications

- 6.1 There are no direct HR implications as a result of this report. HR implications resulting from specific actions will be managed on a case by case basis.

7. Equality Implications

- 7.1 There are no direct HR implications as a result of this report. HR implications resulting from specific actions will be managed on a case by case basis.

8. Risk Management

- 8.1 Some current actions involve the completion of formal reviews of specific business areas. It is possible that some or all of these reviews will identify and evaluate significant risks, which will then be incorporated into the Force's risk management process.

9. Policy Implications and links to the Police and Crime Plan Priorities

- 9.1 Any policy implications will be subject to current policy development process.

10. Changes in Legislation or other Legal Considerations

- 10.1 There are no direct legal implications as a result of this report.

11. Details of outcome of consultation

- 11.1 Following receipt of a final audit or inspection report a member of the Governance and Planning team consults with the appropriate Lead Officer and other stakeholders to plan appropriate actions in response to each relevant recommendation, or to agree a suitable closing comment where no action is deemed necessary.
- 11.2 All planned actions are added to the action planning system, 4Action, for management and review until completion.

12. Appendices

12.1 Appendix A – Overview of HMICFRS inspection recommendations.

12.2 Appendix B – Overview of Mazars internal audit recommendations.

HMICFRS INSPECTIONS CURRENT OVERVIEW

Date	Title	Recommendation	Total Number Outstanding	Total Number Closed
27 Nov 2018	Policing and mental health: Picking up the pieces STATUS – Evidence submitted to HMICFRS for review. The reason that one recommendation remains open is that HMICFRS will reality test when they undertake their Integrated PEEL Inspection in September 2021.			
		<p>By December 2019, forces should develop a better understanding of their mental health data, and the nature and scale of their demand. All forces should carry out a 24-hour snapshot exercise, using the new national definition of mental ill-health in Recommendation 1. This would help them see where their mental health demand is concentrated and identify any gaps in their data. The NPCC mental health lead should set out how the data was collected during the Welsh forces snapshot exercise.</p> <p>This exercise will help forces understand the strain on the service by assessing the combination of demand and workload. This will then help forces when establishing and reporting mental health demand in their force management statements (FMSs).</p> <p>The force took part in the NPCC '24-hour snapshot' exercise and have forwarded the substantial information to the NPCC for the national analysis.</p>	1	0
10 April 2019	Stalking and harassment: An inspection of Sussex Police commissioned by the police and crime commissioner, and an update on national recommendations in HMICFRS 2017 report STATUS – Evidence submitted to HMICFRS for review. One recommendation remains open as HMICFRS will reality test when they undertake their Integrated PEEL Inspection in September 2021.			

Appendix A

		<p>Within six months chief constables should ensure that forces record stalking or harassment crimes if appropriate when victims report breaches of orders.</p> <p>Within six months the National Police Chiefs Council (NPCC) lead and the CPS lead should consider whether they can do more to inform police officers and lawyers of the importance of treating breaches of orders as evidence of a wider pattern of offending, and when and in what circumstances officers and lawyers should treat this as further evidence of stalking or harassment.</p> <p>Within six months chief constables should ensure that officers are aware of the importance of treating breaches of orders, where appropriate, as part of a wider pattern of offending, and ensure that force policy and guidance help officers to do this.</p>	1	0
17 July 2019	<p>The poor relation: The police and Crown Prosecution Service's response to crimes against older people</p> <p><u>STATUS</u> – Evidence submitted to HMICFRS for review. Two recommendations remain open, which will be reality tested when HMICFRS undertake their Integrated PEEL Inspection in September 2021.</p>			
		<p>Within six months, chief constables should make sure that victim needs assessments are always completed.</p>	2	0
		<p>Within three months, chief constables should conduct analysis of the current and future demand for adult safeguarding, including the gap in knowledge that may exist from those cases where referrals aren't made because of errors or omissions. This analysis should be incorporated into force management statements (FMSs).</p>		

27 Sep 2019	Shining a light on betrayal: Abuse of position for a sexual purpose STATUS – Evidence submitted to HMICFRS for review. The force will undergo a Counter Corruption and Vetting Inspection in November 2021. The 2 recommendations listed below will be reality tested to ensure compliance.			
		By April 2020, all forces that haven't yet done so should make sure they have enough people with the right skills to look proactively for intelligence about those abusing their position for a sexual purpose, and to successfully complete their investigations into those identified.	2	0
		<p>By April 2020, all forces that haven't yet done so should:</p> <ul style="list-style-type: none"> • record corruption using the national corruption categories; • produce a comprehensive annual counter-corruption strategic threat assessment, in line with the authorised professional practice; and • establish regular links between their counter-corruption units and those agencies and organisations who support vulnerable people. <p>Where forces are yet to implement an effective ICT monitoring system that allows them to monitor desktop and handheld devices, they should do so as soon as reasonably practicable.</p> <p>By September 2020, all forces should have completed a review of their use of encrypted apps on police ICT systems to understand the risk they pose and to take any necessary steps to mitigate that risk.</p>		
23 Jan 2020	Joint Inspection - Evidence Led Domestic Abuse Prosecutions			
		Police should ensure that investigations and decisions to take no further action in domestic abuse cases receive the same robustness of supervisory oversight as other domestic abuse cases.	0	5

Appendix A

		Police forces should ensure that training, messaging and guidance is clear that evidence led cases should benefit from the same quality of investigation, early gathering of evidence and supervisory oversight as other domestic abuse cases, particularly in cases where the victim does not support police action. Domestic abuse champions should reinforce this message.		
		Police forces with domestic abuse champions should raise awareness of the role and seek to utilise them to maximum effect.		
		The police should review training plans to ensure that all appropriate staff, both frontline officers and investigators, are trained how to handle domestic abuse cases.		
		Police supervisors and Crown Prosecution Service legal managers should maximise opportunities to share examples of good work and successful outcomes with their teams.		
27 Feb 2020	National Child Protection Inspections 2019 thematic report			
		We recommend that chief constables on those forces not yet inspected by the NCPI or JTAI take steps to identify and implement good practice and the learning highlighted from these programmes. This may include engaging with those forces who have been inspected, direct contact with the HMICFRS child protection lead or participating in a regional or national learning event.	0	3
		We recommend that chief constables should review performance management and quality assurance approaches to ensure that assessments of the nature and quality of decision making are routinely made. The purpose of this would be to reinforce the understanding that compliance with policy or process is only one part of effective practice.		
		We recommend that chief constables take steps to reduce the unnecessary criminalisation of children. Such steps could include (but		

Appendix A

		don't need to be limited to) considering fully a child's circumstances when making decisions; more effective use of legislation to discontinue prosecutions not in the public (or child's) interest; the development of more effective non-criminal justice pathways for vulnerable children who commit lower level crimes.		
28 Feb 2020	A joint thematic inspection of Integrated Offender Management			
	<u>STATUS</u> – Evidence submitted to HMICFRS for review. The reason three recommendations remain open is that HMICFRS will reality test these when they undertake their Integrated PEEL Inspection in September 2021.			
		Ensure that service users are kept informed, as much as possible, about the benefits of inclusion in IOM, the support available and the monitoring and information-sharing ramifications of IOM supervision.	3	1
		Analyse training needs and ensure that all staff receive sufficient training to enable them to fulfil their duties. Training in public protection, safeguarding children and working with vulnerable adults should be prioritised.		
		Improve the quality and accuracy of recording in IOM cases, in particular, the activity relating to public protection.		
		Define their IOM operating model and produce practice guidance that sets out clearly what is required by each agency at every stage of the IOM supervision process.		

9 Mar 2020	Counter-terrorism policing - An inspection of the police's contribution to the government's Prevent programme <u>STATUS</u> – Evidence submitted to HMICFRS for review. Awaiting feedback.			
		With immediate effect, the NPCC national Prevent lead and each force Prevent lead should review the attendance of force representatives at Channel panels so that police are correctly represented by decision makers who can contribute to managing risk.	1	0
9 July 2020	A call for help - Police contact management through call handling and control rooms in 2018/19 <u>STATUS</u> – Evidence submitted to HMICFRS for review. All recommendations will be reality tested when HMICFRS undertake their Integrated PEEL Inspection in September 2021.			
		Each force where there is a vulnerability desk should make sure it makes a positive contribution to initial safeguarding	7	0
		We expect forces to invest in technology and work with each other to use it to form and improve their risk assessments, their responses, and their investigations to keep the public safe		
		Each force must be sure it effectively assesses risk at all points of contact with the public and the community. It should use the assessment to provide the best response to vulnerability		
		Each force should make sure its staff are trained, supervised, and supported to be effective in their control room roles; this should include assessing the effect of better terms and conditions and career development for control room staff		
		We expect all forces to make sure the service they provide to their communities meets the new national contact management strategy. We will assess how well forces adopt the contact management principles and practise as well as the learning standards during PEEL 2020/21		

Appendix A

		We expect to see all 43 forces get involved in the single online home and the social media projects		
		We expect the police service during 2020 to make sure that it has agreed a standard for how quickly forces respond to 999 calls. The absence of a national set of agreed response times for emergency calls means it is hard to make meaningful comparisons		
		We expect the police service during 2020 to make sure it has effective national guidelines, quality assurance and assessment in place for resolution without deployment		
July 2020	PEEL spotlight report: The Hard Yards Police to police collaboration			
	<u>STATUS</u> – Awaiting methodology from National Police Chiefs Council, College of Policing and Home Office - currently delayed due to Covid-19.			
		If forces haven't yet implemented an effective system to track the benefits of their collaborations, they should use the methodology created by the NPCC, the College of Policing and the Home Office.	1	0
July 2020	Roads Policing: Not optional - An inspection of roads policing in England and Wales			
	<u>STATUS</u> – Evidence submitted to HMICFRS for review. Awaiting feedback.			
		With immediate effect, chief constables should make sure that appropriate welfare support is provided to specialist investigators and family liaison officers involved in the investigation of fatal road traffic collisions.	8	1
		With immediate effect, in forces where Operation Snap (the provision of digital video footage by the public) has been adopted, chief constables should make sure that it has enough resources and process to support its efficient and effective use.		

Appendix A

		With immediate effect, chief constables should satisfy themselves that the resources allocated to policing the strategic road network within their force areas are sufficient. As part of that process they should make sure that their force has effective partnership arrangements including appropriate intelligence sharing agreements with relevant highways agencies.		
		With immediate effect, chief constables should make sure that their force (or where applicable road safety partnerships of which their force is a member), comply with (the current version of) Department for Transport Circular 1/2007 in relation to the use of speed and red-light cameras.		
		With immediate effect, chief constables should make sure: <ul style="list-style-type: none"> • their force has enough analytical capability (including that provided by road safety partnerships) to identify risks and threats on the road network within their force area. • that information shared by partners relating to road safety is used effectively to reduce those risks and threats; and • There is evaluation of road safety initiatives to establish their effectiveness. 		
		With immediate effect, chief constables should make sure that roads policing is included in their forces strategic threat and risk assessments, which should identify the areas of highest harm and risk and the appropriate responses.		
		The awareness and understanding of the changes in the Professionalising Investigation Programme within police forces is an area for improvement.		
		The efficient and effective exchange of all collision data with other relevant bodies is an area for improvement.		

		Force-level support to national roads policing operations and intelligence structure is an area for improvement.		
8 Dec 2020	Pre-charge bail and released under investigation: striking a balance			
	<u>STATUS</u> – Evidence submitted to HMICFRS for review. Awaiting feedback.			
		Forces should record whether a suspect is on bail or RUI on the MG3 form when it is submitted to the CPS. This should be regularly checked and any changes in bail or RUI provided to the CPS. The CPS should work with the police to ensure this information is provided.	2	0
		Forces should develop processes and systems to clearly show whether suspects are on bail or RUI. This will help them to better understand the risk a suspect pose to victims and the wider community and will help to increase safeguarding.		
17 Dec 2020	Safe to share - Report on Liberty and Southall Black Sisters super-complaint on policing and immigration status			
	<u>STATUS</u> – Evidence submitted to HMICFRS for review. Awaiting feedback.			
		<p>Recommendation 1. To chief constables: As an interim measure, pending the outcome of recommendation 2, where officers only have concerns or doubts about a victim's immigration status, we recommend that they immediately stop sharing information on domestic abuse victims with Immigration Enforcement. Instead, police officers should link the victim to a third party that can provide advice and assistance, as set out in recommendation 4 (on the creation of safe reporting pathways).</p> <p>This applies where police officers have doubts about a victim's immigration status, not where they have evidence that an offence has been committed. The College of Policing will immediately develop guidance for the police service to clarify this aspect of practice.</p>	4	0

		<p>Notes to recommendation 1 This recommendation to stop information sharing only applies to victims of domestic abuse. The College of Policing guidance will also clarify the difference between insecure and uncertain status and immigration offending. Any sharing of information should be done in compliance with Information Commissioners Office (ICO) guidance. Third party could include a local or national specialist victim support organisation or another individual/organisation that can act as an intermediary and advocate on the victim's behalf in communications with Immigration Enforcement as required.</p>		
		<p>To chief constables: With reference to recommendation 1, and in consultation/collaboration with local or national specialist organisations, chief constables should take steps to ensure that all migrant victims and witnesses of crime are effectively supported through safe reporting pathways to the police and other statutory agencies. They should:</p> <ul style="list-style-type: none"> • ensure there is a proper policy and practice framework in place for officers to work within; • develop victim and witness support policies that reflect the characteristics of the safeguarding protocol set out in recommendation 3, and: draw on all relevant national guidance with particular reference to the Code of Practice for Victims of Crime and data protection legislation; are developed in partnership with and include pathways to the relevant specialist organisations for supporting victims and witnesses with insecure immigration status; are clear about the circumstances in which information will be shared by police with immigration enforcement; provide clarity about the purpose of sharing information at different points of the pathway; and explicitly recognise the importance of telling victims, witnesses and supporting agencies whether information will be shared with Immigration Enforcement, and if so, when and in what circumstances. 		

Appendix A

		<ul style="list-style-type: none"> • promote understanding among police officers and staff to differentiate between responses to victims of modern slavery/human trafficking and victims of domestic abuse; • promote awareness within their forces of any existing pathways to specialist organisations for supporting victims with insecure immigration status; • ensure the policy and practice framework is adopted by all officers and staff who come into contact with victims of crime who have insecure immigration status; and • promote police engagement in regular outreach community work, as highlighted as good practice in this report. 		
		<p>To chief constables and police and crime commissioners (or equivalents):</p> <p>With reference to recommendation 1, pending the developments outlined in other recommendations and in consultation/collaboration with local or national specialist organisations, chief constables and police and crime commissioners should take steps, through the appropriate channels, to promote migrant victims and witnesses confidence in reporting crimes to the police through safe reporting pathways, without fear of prioritised immigration control.</p>		
		<p>To all recipients of recommendations from this investigation:</p> <p>Provide an update to Her Majesty’s Chief Inspector of Constabulary on progress in implementing these recommendations within six months of the date of publication of this report.</p>		

10 Feb 2021	An inspection of the effectiveness of the Regional Organised Crime Units <u>STATUS</u> – Evidence submitted to HMICFRS for review. Awaiting feedback.			
		By February 2022, the chief constable with the lead for SOC in each region, with the chief officers of the affected forces, should ensure that a chief officer is appointed with responsibility for each ROCU, as far as practicable working autonomously of force responsibilities.	2	0
		By February 2022, chief officers responsible for SOC in each region, with the chief officers of the affected forces, should make sure that systems are in place for senior investigating officers (SIOs) and lead responsible officers (LROs) to work effectively together.		
26 Feb 2021	Disproportionate use of police powers - A spotlight on stop and search and the use of force <u>STATUS</u> – Evidence currently being collated by Superintendent for submission to HMICFRS.			
		With immediate effect, forces should ensure that all stop and search records include detail of the self-defined ethnicity of the subject. When this information is refused by the subject, the officer-defined ethnicity code should be recorded.	6	0
		By July 2021, forces should ensure they have effective external scrutiny processes in place in relation to the use of force. Forces should take account of feedback and update the scrutiny panel and the community on the action taken.		

Appendix A

		By July 2021, forces should ensure they have effective internal monitoring processes on the use of force, to help them to identify and understand disproportionate use, explain the reasons, and implement any necessary improvement action.		
		<p>By September 2021, forces should:</p> <ul style="list-style-type: none"> • ensure that officers record on body-worn video (when this is available) the entirety of all stop and search encounters, including traffic stops and use of force incidents. • have a structured process for regularly reviewing and monitoring internally a sufficient sample of body-worn video footage to identify and disseminate learning and hold officers to account when behaviour falls below acceptable standards; and • provide external scrutiny panel members with access to samples of body- worn video footage showing stop and search encounters and use of force incidents, taking account of the safeguards in the College of Policing’s Authorised Professional Practice. 		
		By July 2021, forces should ensure that communication skills are reinforced as part of the programme of continuing professional development for officers and staff, and that supervisors are supported to routinely and frequently debrief officers on these skills using body-worn video footage.		
		By July 2022, forces should ensure that officers and staff have effective communication skills, in line with the National Policing Guidelines on Conflict Management. This should be in addition to existing training on conflict Management and de-escalation.		

INTERNAL Audits 2020/21

Date	Title	Recommendations	Total Number Outstanding	Total Number Closed
Sep 2020	Victims' Code of Practice September 2020			
		The Force should produce a condensed guide to the Victims' Code of Practice, following the introduction of the currently proposed changes.	16	0
		The proposed changes to the Victims' Code of Practice should be included within the action plan that is monitored by the Victim and Witness Assurance Group.		
		For the Force to better understand the satisfaction levels of the true population of victims, stratified sampling should be adopted for the surveys undertaken. The results of the surveys can then be analysed to a greater degree by the Force, including: the level of satisfaction dependent on whether a positive / negative outcome was achieved for the victim; and the trends in satisfaction for different crime types.		
		Officers should be reminded when inputting victims records directly onto Niche that they complete all required information including the preferred method.		
		All victims should be offered the Victim Information Pack and / or referred to the information available on the Nottinghamshire Police Victim website. In the instance that the victims have refused, the reason should be recorded on the Niche system.		

Appendix B

		<p>A regime should be established as to how non-completion of the training module will be escalated by the Force.</p> <p>This could entail the Force sending regular updates to line managers details of any Staff or Officers with training that is overdue for completion.</p>		
		<p>A VCOP working sheet should be maintained for each crime involving a victim. Officers should be reminded of the importance of creating and maintaining this working sheet which should be evidenced within the CRMS system.</p>		
		<p>Needs assessments should be carried out with all victims of crime and results recorded on the VCOP working sheet within the CRMS system. This should then be used based on support provision for the victim going forward.</p>		
		<p>Preferred method and frequency of contact should be established with each victim of crime to enable them to be updated on the progress of any ongoing investigation. This should be recorded on the VCOP working sheet and evidence maintained that updates have been provided in line with this request.</p>		
		<p>All victims should be provided with the Victim Information Pack and/or referred to the information available on the Nottinghamshire Police Victim website. Confirmation that this information has been communicated should be recorded on the VCOP working sheet within the CRMS.</p>		
		<p>The VIP should be reviewed and updated to incorporate the Right to Review procedure and information in respect of participation of the Restorative Justice scheme. (It is noted that a further update to the Victims Code of Practice is due later in 2015 and therefore it is practical to await this publication prior to review and update of the VIP to establish whether any additional areas require review).</p>		

Appendix B

		Officer should be reminded that when updates are provided to victims, acknowledgement should be made within the 'aggrieved updated' box on CRMS to support the update and prevent this being escalated via performance management information.		
		The offer/ availability of a VPS to the victim should be clearly communicated and acknowledged within the VCOP working sheet.		
		All victims should be considered for referral to specialist agencies in addition to Victim Support Services. These referrals and proactive support provided should be evidenced within the CRMS system.		
		The reports detailing officers who are still to complete the Victims Code training should be located and the system for following up non-compliance established to provide assurance that all officers are adequately trained to ensure compliance with the Code.		
		Consideration should be given to documenting guidance for officers in respect of a list of available specialist organisations/ agencies to which victims can be referred to.		
Oct 2020	Estates Management Oct 2020			
		The Force should ensure that where SR's are cancelled that these SR's do not feature in the KPI calculation and instead these are reported as a separate figure to identify the number of SR's cancelled each month.	3	0
		The Force should report non-compliance with the SLA in the month in which the SR falls non-compliant, as opposed to amending historical data. This will ensure that the Force maintain the integrity of the reported KPI figure.		

Appendix B

		<p>The Force should consider introducing a suite of KPI's to effectively monitor the performance of the Estates and Facilities department. Furthermore, this will enable the Force to demonstrate value for money from the expenditure incurred in fulfilling the Capital and Planned Maintenance Programme. This suite of KPI's could include but not be limited to:</p> <ul style="list-style-type: none"> • Monitoring the number of repairs completed right the first time by contractors fulfilling SR's. • Recording and reporting on the results of customer satisfaction surveys for newly built and recently refurbished projects and; <p>Monitoring the number of SR's received for newly built or recently refurbished projects in the first 12 months following completion.</p>		
Dec 2020	Workforce Planning December 2020			
		<p>The Force should review and update the People Strategy to include reporting arrangements and decision making processes in place at the Force; a defined individual responsible for the People Strategy; and version control of the document.</p>	2	0
		<p>The Force should complete a mapping exercise and produce a centralised log of all key roles across the organisation, including non-leadership roles which are critical or specialised.</p> <p>Alongside this exercise, individuals who are able to assume these positions in a short / medium / long term capacity should be highlighted.</p>		
Jan 2021	Information Assurance Follow up January 2021			
		<p>As intended, the organisation must continue to liaise with NPRIMT in relation to the GIRR accreditation process.</p>	2	0

Appendix B

		Now the force has more resource in place to manage the process the force should look in the longer term to return to an annual cycle of compliance rather than an ongoing pattern of late submissions for the variety of frameworks it is required to comply with.		
Feb 2021	Core Financial Systems Assurance Feb 2021			
		OPCC should ensure that the most up-to-date version of the Financial Regulations is published on their website.	7	0
		The Force should request that MFSS update sales invoice credit notes and adjustments process maps to include version control and approval processes.		
		Force should update sales invoice process documentation and guidance notes in respect of changes in working practices.		
		The Force should request that MFSS ensure that all reconciliations are completed and reviewed in a timely manner, i.e. within 1 month of the period end.		
		The Force should liaise with MFSS to ensure that historic balances are investigated and cleared down.		
		The Force should request that MFSS seek authorisation from the Force when looking to perform reconciliations more than one month after the period end and provide notice to the Force when this is unarranged.		

Appendix B

		<p>The Force should liaise with MFSS to ensure that appropriate performance data is provided with regards payroll processing. This could include, but not be limited to, the following:</p> <ul style="list-style-type: none"> • No. of overpayments & underpayments. • Value of overpayments & underpayments. • Reasons for overpayment i.e. late notification by Force, MFSS missed SLA for Payroll Date etc. 		
Feb 2021	Debt Management Feb 2021			
		<p>The Force should ensure that Debt Recovery processes are documented in a policy/procedure document. This requires the Force to liaise with MFSS to ensure that processes are aligned.</p>	2	0
		<p>The Force should ensure that MFSS issue invoices with the correct payment terms, therefore ensuring that recovery actions are being carried out at the correct timings.</p>		
Feb 2021	GDPR Follow Up February 2021			
		<p>The Force should continue to address the issues identified in the ICO Controllers Checklist, all of which are currently in some level of implementation.</p>	2	0
		<p>We continue to support the approach being taken to complete the Information Asset Register and this should look to be completed as soon as is practical and how the National Enabling Programme progresses.</p>		

Appendix B

Feb 2021	Risk Management February 2021			
		The Force should ensure that a thorough review is undertaken of the Force's departmental risk registers, so that risks that are inherent to the respective departments are identified and scored, as stated in the Risk Management Strategy.	6	0
		The Force should ensure that all risk registers are complete and that appropriate controls are recorded for each risk. Where risk controls are being reviewed, the Force should ensure that interim controls are in place to effectively monitor risks.		
		The Force should ensure that further training is provided to users of the JCAD system to ensure that appropriate controls are recorded to mitigate the risks identified.		
		Furthermore, the Force should ensure that where controls and other risk mitigation activities are inserted that these are reviewed to ensure their appropriateness.		
		The Force could consider introducing guidance for users of the JCAD system, which outlines a criterion for controls and risk mitigation activities.		
		<p>The Force should ensure the meeting minutes for the Organisational Risk, Learning, Standards, and Integrity Board are well documented, which demonstrate at the very least:</p> <ul style="list-style-type: none"> • The registers presented; • The risks discussed; and <p>The decisions reached / action plans devised.</p>		

Appendix B

Feb 2021	Seized Property February 2021			
		Policies and Procedures in relation to seized property should be updated to reflect the current adopted process since implementation of Niche in February 2016.	9	0
		Policies and Procedures should be made available for Staff and Officers to view on the intranet.		
		Officers within the Force should be provided with Niche training in relation to the continuity of property management, including the checking in and out of property from temporary storage. Consideration should be made as to how to record the training attendance for all Officers.		
		The Archives and Exhibits team at stores should reject acceptance of any items which do not have a property reference attached.		
		A log should be maintained of instances where property has not been correctly labelled. Through use of this log, individuals responsible for the failures should be held accountable.		
		The Force should regularly perform reconciliations of locations for property that is held against records maintained on the Niche system. Where it is identified that property is not in the location stated on Niche, Niche should be updated to reflect that it is in the Officers' possession.		
		The Force should review and streamline the C17 form. Where a C17 form has not been completed correctly, this should be recorded and referred to the Officer responsible.		

Appendix B

		Access to the Temporary Stores should be restricted to only police officers or the Archive & Exhibit Team who require access. Those who do not have a job-related purpose should have their access to these areas removed.		
		In the interim period, the Force should consider if audit trail access for individuals entering the stores is available. This data could be analysed to show an inappropriate access.		
April 2021	Wellbeing April 2021			
		The Force should ensure that policies, procedures, and guidance notes are reviewed regularly; and, that this is noted in the document control sections even if no updates are made.	4	0
		The Force should ensure that the review of policies, procedures and guidance notes is monitored regularly, either by the Strategic Wellbeing Board or within the HR function.		
		The Force should ensure that data is included in the decision-making process for wellbeing, which will ensure that the need for initiatives can be clearly evidenced. Force should also look at performing data analysis to identify areas of need at a detailed level and assist in providing resources for wellbeing to the areas that could be most impacted or are in the most need.		
		Management information should be produced to demonstrate the impact and delivery of third-party services and internal projects and/or programmes, with this being presented to the relevant governance boards.		

Appendix B

April 2021	Complaints Management April 2021			
		The OPCC should remind staff of the importance of issuing terms of references to complainants.	7	0
		The fix for the system issue should be sought, so that closed complaints can be accurately updated on the Centurion system.		
		OPCC staff should ensure that records are closed on Centurion in a timely manner.		
		The sample testing performed should include review of whether a term of reference was issued to the complainant.		
		The OPCC should ensure that all communication made with complainants are logged and recorded on the Centurion system.		
		The PSD team should communicate to complaint handlers the importance of maintaining complete records for complaints on the Centurion system. This can be approached by both circulating bulletins and informing the team of issues through presentations.		
		The PSD team should perform regular reviews over cases managed outside of schedule 3 to ensure that they are correctly administered.		

For Information / Consideration	
Public/Non Public*	Public
Report to:	Joint Audit and Scrutiny Panel
Date of Meeting:	29 July 2021
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	Mark Lunn
Agenda Item:	08

INTERNAL AUDIT PROGRESS REPORT

1. Purpose of the Report

- 1.1 To provide members with an update on progress against the Internal Audit Annual Plan for 2021-22 and the findings from audits completed to date.

2. Recommendations

- 2.1 Members are recommended to consider the report and where appropriate make comment or request further work in relation to specific audits to ensure they have adequate assurance from the work undertaken.

3. Reasons for Recommendations

- 3.1 This complies with good governance and in ensuring assurance can be obtained from the work carried out.

4. Summary of Key Points

- 4.1 The attached report details the work undertaken to date and summarises the findings from individual audits completed since the last progress report to the panel.

5. Financial Implications and Budget Provision

- 5.1 None as a direct result of this report.

6. Human Resources Implications

- 6.1 None as a direct result of this report.

7. Equality Implications

- 7.1 None as a direct result of this report.

8. Risk Management

- 8.1 None as a direct result of this report. Recommendations will be actioned to address the risks identified within the individual reports and recommendations implementation will be monitored and reported within the audit and inspection report to this panel.

9. Policy Implications and links to the Police and Crime Plan Priorities

- 9.1 This report complies with good governance and financial regulations.

10. Changes in Legislation or other Legal Considerations

- 10.1 None

11. Details of outcome of consultation

- 11.1 Not applicable

12. Appendices

- 12.1 Appendix A – Internal Audit Progress Report 2021-22

Note: Draft Internal Audit Annual Report also attached



Police & Crime Commissioner for
Nottinghamshire & Nottinghamshire Police
Internal Audit Progress Report

Presented to JASP: 29th July 2021

mazars

Contents

01 Summary	3
02 Current progress	4
03 Performance	5
A1 Plan overview	6
A2 Reporting Definitions	7
A3 Summary of Reports	8
A4 Statement of Responsibility	21
Contacts	22

Disclaimer

This report (“Report”) was prepared by Mazars LLP at the request of the Nottinghamshire Police and the Officer of the Police and Crime Commissioner (OPCC) for Nottinghamshire and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The Report was prepared solely for the use and benefit the Nottinghamshire Police and the Officer of the Police and Crime Commissioner (OPCC) for Nottinghamshire and to the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification by any third party is entirely at their own risk. Please refer to the Statement of Responsibility in Appendix A1 of this report for further information about responsibilities, limitations and confidentiality.

01 Summary

The purpose of this report is to update the Joint Audit & Scrutiny Panel (JASP) as to the progress in respect of the Operational Plan for the year ended 31st March 2021, which was considered and approved by the JASP at its meeting on 24th February 2020. It will also provide an update on the progress in respect of the Operational Plan for the year ended 31st March 2022, which was considered and approved by the JASP at its meeting on 24th February 2021.

The Police and Crime Commissioner and Chief Constable are responsible for ensuring that the organisations have proper internal control and management systems in place. In order to do this, they must obtain assurance on the effectiveness of those systems throughout the year and are required to make a statement on the effectiveness of internal control within their annual report and financial statements.

Internal audit provides the Police and Crime Commissioner and Chief Constable with an independent and objective opinion on governance, risk management and internal control and their effectiveness in achieving the organisation's agreed objectives. Internal audit also has an independent and objective advisory role to help line managers improve governance, risk management and internal control. The work of internal audit, culminating in our annual opinion, forms a part of the OPCC and Force's overall assurance framework and assists in preparing an informed statement on internal control.

Responsibility for a sound system of internal control rests with the Police and Crime Commissioner and Chief Constable and work performed by internal audit should not be relied upon to identify all weaknesses which exist or all improvements which may be made. Effective implementation of our recommendations makes an important contribution to the maintenance of reliable systems of internal control and governance.

Internal audit should not be relied upon to identify fraud or irregularity, although our procedures are designed so that any material irregularity has a reasonable probability of discovery. Even sound systems of internal control will not necessarily be an effective safeguard against collusive fraud.

Our work is delivered in accordance with the Public Sector Internal Audit Standards (PSIAS).

02 Current progress

2020/2021

Since the last meeting of the JASP, we have issued three final reports in respect of Seized Property, Wellbeing, Complaints Management and Collaboration: Budgetary Control. One report remains in draft form in respect of Risk Management where we are awaiting management comments to finalise the report. Further details are provided in Appendix A3.

The impact of the Covid-19 lockdown(s) has posed several challenges to the internal audit process and the move to remote auditing has caused some initial delays in setting dates when the audits will be carried out. Both parties have worked hard to ensure the audits could be completed and Mazars have regularly communicated with the Force and OPCC, which has enabled us to deliver the audit plan albeit later than the 31st March 2021.

2021-2022

The audit plan was approved at the February meeting of the JASP and we can confirm that planning work has begun in regard to the delivery of this plan. We are pleased to inform the committee that the draft reports for Firearms Licensing & Performance Management have been issued.

The process for Collaboration audits was discussed at a meeting of all five Force Audit Committee Chairs with an intention to improve the speed of delivering final reports to audit committees. Actions have been taken and these will be monitored for the collaboration audits completed in 2020/21 and learning taken forward into 2021/22. Further to the last update provided to the committee a detailed and focused collaboration audit plan for 2021/22 has been drafted, circulated to regional CFO's for comment and is on the agenda to be approved at the next regional CFO meeting in July.

The Plan in Appendix A1 has been updated to include the status of each audit to date.

03 Performance

The following table details the Internal Audit Service performance for the year to date measured against the key performance indicators that were set out within Audit Charter.

Number	Indicator	Criteria	Performance
1	Annual report provided to the JASP	As agreed with the Client Officer	N/A
2	Annual Operational and Strategic Plans to the JASP	As agreed with the Client Officer	Achieved
3	Progress report to the JASP	7 working days prior to meeting.	Achieved
4	Issue of draft report	Within 10 working days of completion of final exit meeting.	100% (11/11)
5	Issue of final report	Within 5 working days of agreement of responses.	100% (10/11)
6	Follow-up of priority one recommendations	90% within four months. 100% within six months.	Achieved
7	Follow-up of other recommendations	100% within 12 months of date of final report.	N/A
8	Audit Brief to auditee	At least 10 working days prior to commencement of fieldwork.	100% (11/11)
9	Customer satisfaction (measured by survey)	85% average satisfactory or above	-% (-/-)

A1 Plan overview 2020/2021

Audit area	Proposed Dates	Draft Report Date	Final Report Date	Target JASP	Comments
Core Financial Systems	Q3	February 2021	May 2021	May 2021	
Workforce Planning	Q1	November 2020	December 2020	Feb 2021	
Victims Code of Practice	Q1	September 2020	October 2020	November 2020	
Estate Management	Q2	October 2020	November 2020	November 2020	
Wellbeing	Q4	February 2020	July 2021	May 2021	
Debt Recovery	Q3/4	February 2021	May 2021	May 2021	
Seized Property	Q3	February 2021	May 2021	May 2021	
Business Change	Q3			n/a	C/fwd. into 2021/22 Plan
Complaints Management	Q4	April 2021	July 2021	May 2021	
Risk Management	Q4	February 2021		May 2021	Draft Report Issued 17 th February 2021
IT Security: Follow Up	Q3	January 2021	February 2021	Feb 2021	
GDPR: Follow Up	Q3	January 2021	February 2021	Feb 2021	

A2 Reporting Definitions

Assurance Level	Control Environment
Substantial Assurance	There is a sound system of internal control designed to achieve the Organisation's objectives. The control processes tested are being consistently applied.
Adequate Assurance	While there is a basically sound system of internal control, there are weaknesses, which put some of the Organisation's objectives at risk. The level of non-compliance with some of the control processes may put some of the College's objectives at risk.
Limited Assurance	Weaknesses in the system of internal controls are such as to put the Organisation's objectives at risk. The level of non-compliance puts the College's objectives at risk.
No Assurance	Controls are generally weak leaving the system open to significant abuse and/or we have been inhibited or obstructed from carrying out or work.

Recommendation Priority	Description
1 (Fundamental)	Recommendations represent fundamental control weaknesses, which expose the Organisation to a high degree of unnecessary risk.
2 (Significant)	Recommendations represent significant control weaknesses which expose the Organisation to a moderate degree of unnecessary risk.
3 (Housekeeping)	Recommendations show areas where we have highlighted opportunities to implement a good or better practice, to improve efficiency or further reduce exposure to risk.

A3 Summary of Reports

Below we provide brief outlines of the work carried out, a summary of our key findings raised, and the assurance opinions given in respect of the final reports issued since the last progress report in respect of the

Collaboration: Budgetary Control

Overall Assurance Opinion	Significant
---------------------------	-------------

Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	-
Priority 3 (Housekeeping)	-

Since 2015/16 all Forces in the East Midlands have agreed to allocate internal audit time to provide assurance over the collaborative arrangements that are in place across the region. Over the first two years Internal Audit have undertaken high level reviews of the governance arrangements within most of the regional collaboration units. However, starting in 2018/19 thematic reviews have been carried out by audit, and have been carried out across a sample of regional collaboration units to provide each Force with assurance over key areas including Risk Management and Strategic Financial Planning.

As part of this review, we have carried out an audit of the process in place across the region in respect of Budgetary Control within a sample of collaboration units agreed by the CFOs – East Midlands Special Operations Unit – Serious Organised Crime (EMSOU-SOC), East Midlands Police Legal Services (EMPLS) and East Midlands Specialist Ops Training (EMSOT). The specific areas that formed part of this review included:

- Responsibility for creation, review and sign off of the budgets are defined and controls are in place to ensure these responsibilities are discharged effectively.
- The budget planning process includes liaison with key staff at the collaboration unit and appropriate assumptions are made as part of the planning process.
- There is a consistent timeline in place for the creation of and subsequent approval of the collaboration units' budget.
- Budget management procedures are in place to ensure consistent and effective budget management across the collaboration units, including virements and underspends.
- Efficiency Savings are incorporated into the budget, responsibilities for delivery of savings are agreed and understood.
- Regular communication and review with budget holders to ensure financial performance is aligned with overall budget management and monitoring procedures.
- Appropriate actions are put in place to address shortfalls and variances with individual budget holders/
- Regular monitoring is undertaken to enable timely management information to be produced to assess performance and accuracy of the unit's financial position.
- Reports on financial performance are submitted in a timely manner to the relevant forum, including the relevant regional forces. Any agreed actions are fed back to relevant units and monitored for completion.

We have identified no areas where there is scope for improvement in the control environment.

Seized Property

Overall Assurance Opinion	No
Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	-
Priority 3 (Housekeeping)	-

Our audit considered the following risks relating to the area under review:

Policies, Procedures and Training

- Policies and procedures are in place to ensure that cash / property detained is dealt with in accordance with relevant legislation and the Force's policies and procedures.
- Suitable training is provided to officers and staff to ensure they are aware of requirements when dealing with seized property.
- An appropriate insurance policy for the handling, retention and movement of cash / property is in place.

Receiving and Recording

- Cash is counted in a secure and controlled environment, with an appropriate level of independent verification.
- Cash / property initially seized or received is accurately recorded on the property system in line with relevant procedures.
- Appropriate mechanisms are in place to accurately record the movement and disposal of cash / property.

Security Arrangements

- Cash / property is stored securely, with restricted and controlled access to nominated officers and staff.
- Cash / property is transported securely by the appropriate number of authorised officers or staff in line with procedural and insurance requirements.

Disposal of Property

- Physical cash / property is only retained by the Force for the necessary period of time.
- Cash / property is disposed of in an appropriate manner and evidence of the reasons for, and method of, disposal is retained for confirmation.
- Authorised officers or staff provide approval for the disposal of cash / property in line with relevant procedures.

Property Management

- An appropriate safe audit regime is in place to identify breaches of agreed procedure and confirm cash / property stored.
- Mechanisms for monitoring the cash / property stored and disposed of are in place.

Operation Eliminate (Mercury)

- The Force has considered measures to reduce the property backlog at Nottinghamshire.
- A suitable action plan is in place for the key tasks and activities associated with Operation Eliminate.
- Suitable reporting is made on progress against this Operation to a forum or Board.
- The Force has considered processes to implement in the future to maintain a lower level of held and stored property.

We have raised three priority 1 (fundamental) recommendations and four priority 2 (significant) recommendations where improvements are required,

Recommendation 1 (Priority 1)

The Archives and Exhibits team at stores should reject acceptance of any items which do not have a property reference attached.

A log should be maintained of instances where property has not been correctly labelled. Through use of this log, individuals responsible for the failures should be

	held accountable.
Finding	<p>Where property is seized, a property number is created on the Niche system, which is also physically recorded on the item with a sticker / label. This is then left at the temporary store, if required the item is then moved to a main store. by the Archives and Exhibits team.</p> <p>Audit performed an onsite review, identifying a number of instances where property had not been marked with a property reference number. This included one item of property at the Southern Main Store, three items at the green location at the Mansfield temporary store, and 17 items at the red location at the Mansfield temporary store.</p> <p>Risk: Property does not have an audit trail and items cannot be located when required.</p> <p>Unrecorded items within the stores could be misappropriated</p> <p>The Force are subject to reputational damage.</p>
Response	<p>Recommendation agreed.</p> <p>Although the recommendation is agreed, the full implementation would require an adjustment in policy and processes. All property is recovered as per current policy from the green and red shelves (immediate (G) and 14 days (R) periods) in order to prevent loss and to safeguard the ongoing management of the item. Rejecting the item at the collection point would increase risk to the item therefore the current process should stand.</p> <p>The idea of rejection however is a valid point and maybe the introduction of exhibits without 'P' reference numbers displayed should be placed back into the officer's possession once held at main stores. An email to the officer requiring them to complete the instruction would encourage better practice and introduce improvements in both input and instructional training.</p>
Responsibility / Timescale	<p>Rob Spry</p> <p>Oct 21</p>

Recommendation 2 (Priority 1)	<p>The Force should regularly perform reconciliations of locations for property that is held against records maintained on the Niche system.</p> <p>Where it is identified that property is not in the location stated on Niche, Niche should be updated to reflect that it is in the Officers' possession.</p>
Finding	<p>When property is moved between stores or to a different location, this should be recorded by the Officer on the Niche system.</p> <p>Audit performed an onsite review, identifying the following instances where there were discrepancies between the Niche system and the physical stores.</p> <p>At the Mansfield Temporary Store, a full reconciliation was performed over all locations recorded on the Niche system. It was identified that 873 out of 1098 items (79.5%) were not present at the store. In addition to this, 49 out of the 225 (21.7%) items present were recorded with an incorrect location within the store.</p> <p>At the Southern Main Store, a sample test was performed, where a total of three items were noted to not be in the location as stated on the Niche system.</p> <p>Risk: The Niche system does not accurately reflect where property is held.</p> <p>The Force systems do not hold data that is accurate.</p>

Response	<p>Recommendation agreed.</p> <p>Most of the discrepancies occur through initial input (officer's error) and although the statistics are high from the audit, it is recognised by A&E SLT that this particular store is not a true reflection with other outer main store (OMS) locations. This recommendation relates to training and development of officers as documented in 4.2.</p> <p>Placing items into police possession because they have been incorrectly inputted will cause additional work for both A&E staff and front line police officers slowing down business as usual processes and creating further backlogs of work without rectifying the real issues raised within this area.</p> <p>Not recovering the items will increase capacity at OMS locations again creating the risk of misplacement or loss of exhibit.</p> <p>Red shelves have been reviewed and the 28 day holding has been reduced to 14 days for better management. This has already proven successful with improved performance and management input of exhibits. A better management log would be to record discrepancies and email the officer responsible with advice for learning/development and inform them that a record is to be kept for monitoring to assist in the prevention of further errors occurring.</p>
Responsibility / Timescale	<p>Rob Spry</p> <p>Oct 21</p>

Recommendation 3 (Priority 1)	<p>The Force should ensure that regular reconciliations of the safe are performed, to highlight any errors/missing items.</p> <p>In the instance where property cannot be located appropriate actions should be taken to identify its whereabouts.</p> <p>For items of a high value or risk, appropriate action should be taken to escalate the issue and ensure items are located in a timely manner.</p>
Finding	<p>Audit reviewed the drugs safe, identifying one item (P1900341559) which was stated on the Niche system to be in the safe, but was not present when the safe was inspected.</p> <p>It was noted that it was recorded as being in the safe on Niche since 11.03.2020, however was confirmed on 12.03.2020 as not being in this location.</p> <p>At the time of the audit, this property item could not be located.</p> <p>No updates have been made to the Niche system since then.</p> <p>Risk: Property is unaccounted for.</p> <p>The Force are unaware of where seized drugs is held.</p> <p>The Niche system is not accurate.</p>
Response	<p>Recommendations agreed.</p> <p>Safe audits are completed weekly at all safe locations across the force area. Staff record any discrepancies and both staff members will sign the audit/collection sheets to state items are missing.</p> <p>In terms of the specified missing exhibit listed, this is a matter that has been fully investigated by the head of department. The resulting case has been referred to PSD and the officer has now been managed via an improvement Reflective practice review. She is undertaking internal drug submission training and has been</p>

	scheduled into a training day at the central drugs store as part of their rehabilitation – learning development. It is anticipated that this learning practice will be introduced to improve the overall training and knowledge of officers failing this process.
Responsibility / Timescale	Rob Spry Oct 21

Recommendation 4 (Priority 2)	<p>Policies and Procedures in relation to seized property should be updated to reflect the current adopted process since implementation of Niche in February 2016.</p> <p>Policies and Procedures should be made available for Staff and Officers to view on the intranet.</p>
-------------------------------	--

Finding	<p>A procedure document that outlines the correct steps to be taken, for recording items of property placed in stores and any subsequent movement once the item within the store, would provide clarity on the correct process to be followed.</p> <p>As part of the last two audits (October 2017 and July 2019), recommendations have been raised in relation to updating the policies and procedures in place for property management, especially to reflect the introduction of Niche which was implemented in February 2016.</p> <p>Management advised that this has not yet been completed.</p> <p>Risk: Where guidance is not reviewed and updated on a regular basis, staff may adopt inaccurate, ineffective and / or outdated working practices.</p>
---------	--

Response	<p>The existing policies involving the business makes references to out-of-date legacy systems (Fox, CMS & IMS) incorporated with modern systems (Niche). This is displayed on the intranet for users to read as guidance notes. The records are now under review and will be addressed to reflect up-to-date SOP's. The intranet site has already been reviewed and the current management have agreed a restructure of the information displayed and layout to be reduced to a more appropriate and proportionate library. The Central manager has been tasked to oversee the restructure and new layout. Feedback will be sought from users and the interface area will be monitored for Q&A's by staff for advice and queries.</p> <p>Since the implementation of Niche systems A&E management feel that most errors occur from the initial seizure stage which is rectified by A&E staff and that the current procedures and Niche systems (4&5) for ongoing management of the exhibits and records are robust and reliable.</p> <p>Head of Finance: We can have some reliance on the A&E staff would lend me to a grade 2; with the proviso that this is not a situation that can in the longer term become the 'norm' and that earlier compliance needs to be achieved within the next 12 months otherwise these would become a level 1's.</p>
----------	---

Responsibility / Timescale	Rob Spry Oct 21
----------------------------	--------------------

Recommendation 5 (Priority 2)	<p>Officers within the Force should be provided with Niche training in relation to the continuity of property management, including the checking in and out of property from temporary storage.</p> <p>Consideration should be made as to how to record the training attendance for all Officers.</p>
-------------------------------	---

Finding	<p>Following the last two audits performed (in October 2017 and July 2019), recommendations have been raised in relation to providing Niche training to Officers. Training provided to the Officers should result in greater compliance to the property management system.</p> <p>Management have advised that this has not yet been delivered.</p> <p>Sample testing performed by Audit identified instances of incorrect management of property and insufficient updates made on the Niche system, as highlighted within this report.</p> <p>Risk: Where officers are not provided with appropriate training, there is a risk of property not being appropriately tracked and checked in and out at the appropriate locations. Property may then go missing. This also questions the integrity of the underlying records held on the Niche system.</p>
Response	<p>Training of police staff has been discussed with A&E management whereby it was agreed that most errors are caused by officers. It was also agreed that misplacement or loss of an exhibit is often blamed on the processes, and accusations are relatively common when dialogue has begun between officer and A&E staff. In nearly all circumstances items are located and rectified identifying an officer's input error as the cause of the issue.</p> <p>Training has been discussed and all methods are being explored to determine an overall improvement in this field. It has been identified that without training school input other ideas including property champions, Sergeant and tutor training is paramount to re-enforce the problem. NCALT packages can be implemented as a supplement to learning however the learning area is better delivered by practical delivery as mistakes have not been reduced by online learning.</p> <p>Additionally, working in tandem with A&E staff, including stores visits and probationer input days (training days) to be incorporated in the future as well as instructional and presentational videos to be created.</p> <p>Errors are often rectified by A&E staff when items into the property arena and corrected, however it is recognised that the volumes of mistakes is high and this review is an accurate reflection of the problem.</p> <p>Head of Finance: We can have some reliance on the A&E staff would lend me to a grade 2; with the proviso that this is not a situation that can in the longer term become the 'norm' and that earlier compliance needs to be achieved within the next 12 months otherwise these would become a level 1's.</p>
Responsibility / Timescale	<p>Rob Spry Oct 21</p>

Recommendation 6 (Priority 2)	<p>The Force should review and streamline the C17 form.</p> <p>Where a C17 form has not been completed correctly, this should be recorded and referred back to the Officer responsible.</p>
Finding	<p>Where drugs are sent for storage at a store, a completed C17 form should accompany this. This form highlights whether or not the drugs are to be retained or destroyed. This is then actioned by the Archives and Exhibits Officer, with the Niche system updated.</p> <p>Testing performed by Audit noted from 92 completed C17 forms, in 5 instances no signature had been made by the Officer checking in the drugs and completing the form.</p>

	<p>Audit also observed drug property being received at the Central store on the day of the onsite visit. It was noted that 5 of the 17 pieces of property had no completed C17 form present.</p> <p>When there is a missing C17 form or the form has no signature of confirmation from the Officer, this property is retained by the A&E team.</p> <p>Risk: The Force retain drugs which are not required.</p> <p>The volume of property held by the Force grows unsustainably.</p>
Response	<p>Recommendation agreed.</p> <p>New simplified C17 has been implemented and online for officer's use. This is already improving quality of submissions and a new pilot by Head of Department has started with selected sergeants at Broxtowe and West Bridgford. Their respective officer's submissions are being quality assured and under a four-week review to monitor that correct procedures are being implemented. A recent review (week one) has showed 100% compliance. This has increased disposal capacity reducing the risks and current holding.</p> <p>A new initiative is being investigated to streamline the automated property management system. This includes aligning a Bar Code APP with property wizard function to enable officers to work agilely and away from police premises. This new digital process will automatically place inputted items into Police officer's possession until they scan the items into the new location via the app scanner (QR) This will auto-correct all exhibits eradicating the necessity to place items into officer's possession.</p>
Responsibility / Timescale	<p>Rob Spry</p> <p>Oct 21</p>

Recommendation 7 (Priority 2)	<p>Access to the Temporary Stores should be restricted to only police officers or the Archive & Exhibit Team who require access. Those who do not have a job-related purpose should have their access to these areas removed.</p> <p>In the interim period, the Force should consider if audit trail access for individuals entering the stores is available. This data could be analysed to show an inappropriate access.</p>
Finding	<p>As part of the last two audits (October 2017 and July 2019), a recommendation was raised in relation to access to the Temporary Stores.</p> <p>Whilst it was noted that access is restricted via a key or an access pass, depending on the store location, it was confirmed access via an access pass is not restricted to only police officers. Any member of police staff may access a temporary store if they hold an access pass. Therefore, access to these stores are not restricted and may be entered by personnel with no requirement to use the facility.</p> <p>This recommendation has not been implemented. Management advised that work in this area is ongoing to determine the best method of ensuring security within Temporary Stores.</p> <p>Risk: Where access to temporary stores is not restricted, there may be unwarranted and inappropriate access to property storage. There is also a risk that property may go missing / stolen where access is not restricted.</p> <p>Items are misappropriated and the Force incur reputational damage.</p>
Response	<p>Recommendation agreed.</p>

Responsibility / Timescale

This refers to outer main stores known as OMS locations. These are controlled by corresponding neighbourhood Inspectors (NPI's) who have jurisdiction over the stores.

Some identified stores have utility facilities inside and require access by water/electric companies etc therefore cannot accommodate full restricted access. Consideration has been sought to remove these stores and further exploration is required to understand the business needs to fulfil its obligation against the risks raised.

Swipe access is already in place which is auditable and can be requested should any risk measures require investigating.

Other staff including PCSO's Wardens and Front counter staff are required to place items not OMS locations. This requirement is in place for RTO's for staff to complete the return to owner process

Rob Spry
Oct 21

We raised one priority 3 recommendations of a more housekeeping nature relating to:

Progress of Operation Eliminate

Meetings for the RRD working group should be documented and consideration should be made for performance indicators to be introduced.

Management accepted the recommendations and confirmed implementation.

Wellbeing

Overall Assurance Opinion	Satisfactory
----------------------------------	---------------------

Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	1
Priority 3 (Housekeeping)	1

Our audit considered the following risks relating to the area under review:

- Clearly defined Governance arrangements are not in place resulting in ineffective and inefficient arrangements.
- There is an inconsistent line of reporting between the four individual boards and the Wellbeing Leadership Board resulting in ineffective decision making.
- The Wellbeing Strategy and Policies & Procedures are not aligned with strategic aims and do not provide clear direction.
- Implementation plans are not robust, aligned with strategic objectives and take into account future need.
- Robust recording, monitoring and analysis processes of Wellbeing data are not in place resulting in ineffective action plans and feedback shared at governance meetings; and,
- Issues are not identified promptly and are not evaluated appropriately leading to repeated issues in Wellbeing projects/works.

In reviewing the above risks, our audit considered the following areas:

- Governance.
- Strategy & Policies.
- Implementation Plans.
- Feedback and Monitoring; and
- Lessons Learned

We raised one priority 2 (Significant) recommendation the finding, recommendation and response is detailed below:

Recommendation 1 (Priority 2)	<p>The Force should ensure that data is included in the decision-making process for wellbeing, which will ensure that the need for initiatives can be clearly evidenced.</p> <p>Force should ensure that data analysis carried out to identify areas of need at a detailed level and assist in providing resources for wellbeing to the areas that could be most impacted or are in the most need, is clearly presented to Wellbeing Governance bodies</p> <p>Management information should be produced to demonstrate the impact and delivery of third-party services and internal projects and/or programmes, with this being presented to the relevant governance boards.</p>
Finding	<p>Review of Data</p> <p>Forces hold or have access to data directly related to the wellbeing of their employees, or that can be used to assist in the allocation of wellbeing resources.</p>

	<p>This includes data such as absences, Trauma Risk Management (TRiM) data, intranet post engagement and responses to staff surveys.</p> <p>This data can be reviewed to identify areas of risk and trends; provide evidence for the efficacy of implemented programmes and projects; and, ensure that data being monitored is timely and accurate.</p> <p>Discussion with management and examination of minutes/agenda packs for all wellbeing governance groups has found that the regular review of wellbeing data is not being carried out. We did see that the Wellbeing Pulse Survey from November 2020 was discussed.</p> <p>Data Analysis</p> <p>The data discussed above can also be analysed to provide greater insight into the specific areas, divisions, locations and teams that may be at greater risk of negatively affected wellbeing. These specific employees can then be allocated greater resources through increased training, wellbeing sessions and/or health surveillance activities. Alternatively, it may indicate an issue that is wider than Wellbeing that should be presented to the wider operational leadership.</p> <p>Discussion with management and examination of minutes/agenda packs for all wellbeing governance groups has found that data analysis exercises are not being carried out.</p> <p>Management Information</p> <p>Both of the above points would then be reported to governance groups through management information reports. Additionally, management information may be presented from third-party service suppliers for wellbeing, such as Employee Assistance Programmes and Occupation Health. This information provides senior management oversight of initiatives being implemented, but also insight into the efficacy and value for money in the commissioning of third-party services related to wellbeing.</p> <p>Discussion with management and examination of minutes/agenda packs for all wellbeing governance groups has found that the management information is not currently being produced and/or presented in these meetings.</p> <p>Risk: Initiatives and actions recommended by Wellbeing Groups and the Wellbeing Leadership Board are not guided by the latest data and are not effective.</p> <p>Data analysis exercises are too limited in scope and/or reporting to be impactful and good value for money.</p> <p>Failure to target specific areas of concern in regard to Wellbeing across the Force.</p> <p>Resources to support wellbeing fail to deliver value for money.</p>
Response	<p>We will adjust the way we capture data and ensure that this is presented at the most appropriate governance meeting.</p> <p>We will also ensure that external data collection is also shared through the appropriate governance meeting.</p>
Responsibility / Timescale	<p>Head of People Services</p> <p>31st December 2021</p>

We also raise one Priority 3 recommendation of a more housekeeping nature:

Review of Policies and Procedures

The Force should ensure that policies, procedures and guidance notes are reviewed regularly



Complaints Management

Overall Assurance Opinion	Satisfactory
---------------------------	--------------

Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	3
Priority 3 (Housekeeping)	2

Our audit considered the following risks relating to the area under review:

Governance Arrangements

There are effective governance arrangements in place for the investigation and resolution of complaints that includes defined roles and responsibilities, senior oversight and reporting arrangements.

There are clear procedures in place that support the complaints handling process and these are in line with the Police Reform Act 2002, Police (Complaints & Misconduct) Regulations 2012 and any other relevant legislation and good practice.

Processing of Complaints & Appeals

There is a mechanism for accurately recording complaints information and adequate information is collected from the complainants.

Complaints are correctly assessed and dealt with in accordance with the relevant legislative and procedural requirements.

The complaints management process meets the objective of addressing the concerns of the complainants and/or satisfies them that they have been listened to and treated fairly, even if the outcome is not what they were seeking.

Performance Reporting

There are key performance indicators and internal targets in place for the complaint's management process.

There are processes in place to review closed complaints cases to confirm they have been completed accurately and correctly.

Robust performance information is produced that enables the Force and OPCC to effectively manage the complaints process and provide assurance that complaints have been handled in line with requirements.

We raised three priority 2 (Significant) recommendation the finding, recommendation and response is detailed below:

Recommendation 1 (Priority 2)	The sample testing performed should include review of whether a terms of reference was issued to the complainant
Finding	Dip sampling is performed by the OPCC over complaints that are processed by the Force. The dip sampling considers various aspects of the statutory guidance and assesses the compliance to this, as part of the complaint's management process.

	<p>Through review of the testing schedule used by the OPCC in the dip sampling of Force complaint cases, it was noted that there was no consideration of whether the complainant was provided with a terms of reference by the Force.</p> <p>Therefore, the dip sampling performed does not focus on all relevant aspects of complaint management in line with statutory guidance.</p> <p>Risk: The dip sampling does not accurately reflect compliance against statutory guidance.</p>
Response	The OPCC has now included terms of references as a point of review within complaint investigation dip samples.
Responsibility / Timescale	Immediate.

Recommendation 2 (Priority 2)	The OPCC should ensure that all communication made with complainants are logged and recorded on the Centurion system.
Finding	<p>The centurion system is the complaints management system where all information is retained. Details of communication held with the complainant should be input on to the system.</p> <p>Audit reviewed all four closed complaints managed by the OPCC since January 2020, noting that in one instance the conversations between the complainant and the OPCC were by telephone, however no details / notes were made on the Centurion system of this.</p> <p>Risk: Insufficient records are maintained in respect of complaints.</p>
Response	The conversation was followed up via e-mail however it is accepted that there wasn't a separate record of the telephone conversation. The OPCC will ensure all communication with complaints is logged separately on the system.
Responsibility / Timescale	Immediate

Recommendation 3 (Priority 2)	The PSD team should communicate to complaint handlers the importance of maintaining complete records for complaints on the Centurion system. This can be approached by both circulating bulletins and also informing the team of issues through presentations.
Finding	<p>The centurion system is the complaints management system where all information is retained. Details of communication held with the complainant should be input on to the system.</p> <p>Audit performed sample testing over 10 complaints managed by the Force, where it was identified that in one instance the details of the telephone conversations held between the Force and the complainant had not been recorded on the Centurion system.</p> <p>Risk: Insufficient records are maintained in respect of complaints.</p>
Response	This particular complaint case had phone conversations mentioned on the case record but there was no evidence of what the conversations were about.



To improve this process, CMU and CCU will be reminded about the importance of recording telephone conversations with complainants, agents etc. All future phone conversations will be recorded on a file note within the Centurion record. All staff have received an Email about this and had a team briefing with their supervisor.

Team meetings will take place with DCI Sanders and I with the team twice a year to update them and talk through concerns and ideas for improvements. This is on top of daily leadership contact at morning briefings.

Immediate

We also raise one Priority 3 recommendation of a more housekeeping nature:

OPCC Complaints Closure - On closure of a complaint with the complainant, the status should be updated on the Centurion system to reflect this. Audit identified that all of the four cases determined as closed by the OPCC were still recorded with an open status at the time of the Audit. It was noted that this was due to a system issue which management were working on a fix for.

Response - All OPCC colleagues have now been given the correct permissions to ensure closed complaints are accurately updated in a timely matter.

A4 Statement of Responsibility

We take responsibility to Nottinghamshire Police and the Office of the Police and Crime Commissioner for Nottinghamshire for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely on any part of the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk.

Registered office: Tower Bridge House, St Katharine's Way, London E1W 1DD, United Kingdom. Registered in England and Wales No 0C308299.

Contacts

David Hoose

Partner, Mazars

david.hoose@mazars.co.uk

Mark Lunn

Internal Audit Manager, Mazars

mark.lunn@mazars.co.uk

Mazars is an internationally integrated partnership, specializing in audit, accountancy, advisory, tax and legal services*. Operating in over 90 countries and territories around the world, we draw on the expertise of 40,400 professionals – 24,400 in Mazars' integrated partnership and 16,000 via the Mazars North America Alliance – to assist clients of all sizes at every stage in their development.

*where permitted under applicable country laws.

www.mazars.co.uk

mazars



Police & Crime Commissioner for
Nottinghamshire & Nottinghamshire Police

Joint Audit and Scrutiny Panel

Draft Internal Audit Annual Report

Prepared by: Mazars LLP

Date: July 2021

Contents

- 01 Introduction
- 02 Audit Opinion
- 03 Internal Audit Work Undertaken in 2020/21
- 04 Internal Audit Plan 2020/21 vs Budget
- 05 Benchmarking
- 06 Performance of Internal Audit

Appendices

- A1 Definitions of Assurance

Disclaimer

This report ("Report") was prepared by Mazars LLP at the request of Nottinghamshire Police and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The Report was prepared solely for the use and benefit of Nottinghamshire Police and to the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, re-interpretation, amendment and/or modification. Accordingly, any reliance placed on the Report, its contents, conclusions, any extract, re-interpretation, amendment and/or modification by any third party is entirely at their own risk. Please refer to the Statement of Responsibility in this report for further information about responsibilities, limitations and confidentiality.





01 Introduction

This draft Internal Audit Annual Report for 2020/21 is being presented to JASP to show the current status of the report. It is noted that one audit is still to be finalised and therefore once this report is finalised this report will be updated accordingly and the final Internal Audit Annual Report for 2020/21 provided. Please note therefore that all items within this report are subject to change before final issue.

Mazars LLP are the appointed internal auditors to the Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police. This report summarises the internal audit work undertaken by Mazars in 2020/21, the scope and outcome of work completed, and incorporates our annual statement on internal controls assurance.

Despite the restrictions imposed as a result of Covid-19, the Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police retained a full scope internal audit service for 2020/21 which, based on the work we have undertaken, enabled us to provide the enclosed Annual Opinion on the Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police arrangements for risk management, control and governance.

As a result of the government restrictions from March 2020, we were unable to conduct internal audit engagements on site. We therefore undertook visits during 2020/21 remotely. In some cases, this has impacted on the scope of work undertaken. Detail of this has been provided where applicable in Section 02.

The report should be considered confidential to the Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police and not provided to any third party without prior written permission by Mazars.

Scope and purpose of internal audit

The purpose of internal audit is to provide the Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police, through the Joint Audit and Scrutiny Panel (JASP), with an independent and objective opinion on risk management, control and governance and their effectiveness in achieving Police & Crime Commissioner for Nottinghamshire & Nottinghamshire Police's statutory objectives and strategic aims.

Internal audit provides the Police and Crime Commissioner and Chief Constable, through the Joint Audit and Scrutiny Panel (JASP), with an independent and objective opinion on governance, risk management and internal control and their effectiveness in achieving the organisation's agreed objectives. Internal audit also has an independent and objective advisory role to help line managers improve governance, risk management and internal control. The work of internal audit, culminating in our annual opinion, forms a part of the OPCC and Force's overall assurance framework and assists in preparing an informed statement on internal control.

Our work is conducted in accordance with Public Sector Internal Audit Standards (PSIAS).

The report summarises the internal audit activity and, therefore, does not include all matters which came to our attention during the year. Such matters have been included within our detailed reports to the JASP during the course of the year.

Performance against the Internal Audit Plan

The Plan for 2020/21 was considered and approved by the JASP on 2nd April 2020. In total the Plan was for 140 days, including 16 days of Audit Management. There was also provision for 8 contingency days included in the Plan, should these days be required.

The impact of the Covid-19 lockdown(s) has posed several challenges to the internal audit process and the move to remote auditing has caused some initial delays in setting dates when the audits will be carried out. Both parties have worked hard to ensure the audits could be completed and Mazars have regularly communicated with the Force and OPCC, which has enabled us to deliver the 2020/21 internal audit plan in a timely manner.

However, in a number of instances changes have had to be made to the internal audit plan that was agreed for 2020/21 and this resulted in the audit of Business Change not taking place during 2020/21. This audit has been deferred into the 2021/22 internal audit plan. Moreover, 3 of the 10 allocated Collaboration Audit days have also been deferred into the 2021/22 internal audit plan as only two of the three scheduled audits were able to take place.

The audit findings in respect of each of our finalised reviews, together with our recommendations for action and the management response, were set out in our detailed reports, which have been presented to the JASP over the course of the year. In addition, we have presented a summary of our reports and progress against the Plan within our Progress Reports to each JASP.

A summary of the reports we have issued is included in Appendix A1. The appendix also describes the levels of assurance we have used in assessing the control environment and effectiveness of controls and the classification of our recommendations.

Acknowledgements

We are grateful to all members of the JASP, the OPCC Chief Executive, the Chief Officers of both the Force and the OPCC and other staff throughout Nottinghamshire Police for the assistance provided to us during the year.



02 Audit Opinion

Scope of the Internal Audit Opinion

In giving our internal audit opinion, it should be noted that assurance can never be absolute. The most that the internal audit service can provide to Nottinghamshire is a reasonable assurance that there are no major weaknesses in governance, risk management and internal control processes.

The matters raised in this report are only those which came to our attention during our Internal Audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

In arriving at our opinion, we have taken the following matters into account:

- The results of all audits undertaken as part of the plan;
- Whether or not any 'Critical', 'Highly Important' or 'Significant' recommendations raised have not been accepted by Management and the consequent risks;
- The extent to which recommendations raised previously, and accepted, have been implemented;
- The effects of any material changes in Nottinghamshire's objectives or activities;
- Matters arising from previous reports to Nottinghamshire;
- Whether or not any limitations have been placed on the scope of internal audit;
- Whether there have been any resource constraints imposed upon us which may have impinged on our ability to meet the full internal audit needs of Nottinghamshire; and
- The proportion of Nottinghamshire's internal audit needs have been covered to date.

Further detail on the definitions of our opinions raised in our reports can be found in Appendix A1.

Reliance Placed on Third Parties

Internal audit has not placed any reliance on third parties in order to assess the controls operated by OPCC for Nottinghamshire & Nottinghamshire Police. Our opinion solely relies on the work we have performed and the results of the controls testing we have undertaken.

COVID-19

During the year, we have consulted and informed management through regular liaison with the Force & OPCC CFO's and the Joint Audit & Scrutiny Panel(JASP) about changes to the plan and internal audit reviews to take account of the impact of Covid-19 on the organisation and the changing risk landscape. There was an impact on our ability to conduct a number of audits in the Plan over the period, as highlighted above.

During 2020/21, the Covid-19 pandemic impacted on the provision of internal audit services as follows:

- Our fieldwork testing and interviews were conducted remotely, specifically via video conferencing, screen sharing and email, with no onsite testing completed due to national restrictions.
- Our interaction with management and attendance at JASP has been via video conferencing, again due to national restriction; and
- Our ability to complete all audits in the original plan.

Internal Audit Opinion

On the basis of our internal audit work, our opinion on the framework of governance, risk management, and control is **Moderate** in its overall adequacy and effectiveness. This opinion is provided on the basis that some improvements are required to enhance the adequacy and effectiveness of the framework of governance, risk and management and control.

Certain weaknesses and exceptions were highlighted by our internal audit work, in particular no assurance opinion in regards to Seized Property and limited assurance opinions during the period in respect of Risk Management and IT Information Assurance.

These matters have been discussed with management, to whom we have made recommendations, several of which are categorised as Priority 1 and Priority 2. All of these have been, or are in the process of being addressed, as detailed in our individual reports, and summarised in Section 04.

In reaching this opinion the following factors were taken into particular consideration:

Corporate Governance

In respect of Corporate Governance, while not directly assessed as part of the Plan, this was informed by consideration of this area through our individual assignments including where relevant. Governance is a consideration in all our audit engagements and we did not find any wholesale issues with governance across our audit plan.

Risk Management

In respect of Risk Management we have undertaken a Risk Management audit, at the time of writing the final report is still to be confirmed. In addition to this our opinion was informed by consideration of risk management aspects through our individual assignments including reporting within our 'risk management' thematic as well as observing reports and discussion around the Force's and OPCC's Risk Management including the Risk Register at each JASP meeting with no significant issues arising.

During the course of delivering the 2020/21 audit programme, a key element of each audit scope was to evaluate the control environment and, in particular, how key risks were being managed. As summarised in the 'Internal Control' section below, we were able to place reliance on the systems of internal control and the manner in which risks were being managed by the Force and OPCC.

Internal Control

Of the 11 audits undertaken in the year where a formal assurance level was provided, 2 received a significant level of assurance and 7 audit received a satisfactory level of assurance. However, 1 audit received no assurance and 2 audits received a limited level of assurance. Whilst, overall more audits have received higher levels of assurance this year the issue of a no assurance report and the areas in which limited assurance have been provided this shows some improvements are required to enhance the adequacy and effectiveness of the framework of governance, risk management and control.

We have made a total of 36 new recommendations during the year at the Force and OPCC, 5 recommendations were categorised as Priority 1, 18 as Priority 2 and 13 were Priority 3. A summary of the new Priority 1 and 2 recommendations from this year are included in Section 04 of this report.



03 Internal Audit Work Undertaken in 2020/21

The Internal Audit Plan was for a total of 140 days, with all reviews able to be completed. The audit findings in respect of each review, together with our recommendations for action and the management responses are set out in our detailed reports. In accordance with the approach set out within the internal audit plan, we undertook eleven specific audit reviews, supported by two IT audit reviews and two collaboration audit reviews. The results of this work (to date) are summarised below:

Ref	Audit area	Assurance level	Recommendations				Accepted	Not Accepted
			F	S	H	Total		
01.20/21	Workforce Planning	Satisfactory	-	1	1	2	2	-
02.20/21	Victims Code of Practice	Satisfactory	-	3	3	6	6	-
03.20/21	Estates Management	Significant	-	-	2	2	2	-
04.20/21	Wellbeing	Satisfactory	-	1	1	2	-	-
05.20/21	Debt Management	Satisfactory	-	1	1	2	2	-
06.20/21	Seized Property	No Assurance	3	4	1	8	8	-
	Seized Property – Operation Eliminate	Satisfactory						
07.20/21	Core Financials	Significant	-	-	-	-	-	-
08.20/21	Complaints Management	Satisfactory	-	4	2	6	-	-
09.20/21	Risk Management [Draft]	Limited	1	2	1	4	-	-
10.20/21	IT: Information Assurance Follow Up	Limited	1	-	-	1	1	-
11.20/21	IT: GDPR Follow Up	Satisfactory	-	1	1	2	2	-
12.20/21	OPCC Supplier Review	N/A	-	1	-	1	1	-
	Total		5	18	13	36	24	-

04 Audits with Limited or Nil Assurance 2020/21

Audit area	Assurance level	Summary of Key Findings
Seized Property	No Assurance	<p>Three Priority 1 Recommendations:</p> <p>1 - The Archives and Exhibits team at stores should reject acceptance of any items which do not have a property reference attached. A log should be maintained of instances where property has not been correctly labelled. Through use of this log, individuals responsible for the failures should be held accountable.</p> <p>2 -The Force should regularly perform reconciliations of locations for property that is held against records maintained on the Niche system. Where it is identified that property is not in the location stated on Niche, Niche should be updated to reflect that it is in the Officers' possession.</p> <p>3 - The Force should ensure that regular reconciliations of the safe are performed, to highlight any errors/missing items. In the instance where property cannot be located appropriate actions should be taken to identify its whereabouts. For items of a high value or risk, appropriate action should be taken to escalate the issue and ensure items are located in a timely manner.</p> <p>Four Priority 2 Recommendations:</p> <p>4 - Policies and Procedures in relation to seized property should be updated to reflect the current adopted process since implementation of Niche in February 2016. Policies and Procedures should be made available for Staff and Officers to view on the intranet.</p> <p>5 - Officers within the Force should be provided with Niche training in relation to the continuity of property management, including the checking in and out of property from temporary storage. Consideration should be made as to how to record the training attendance for all Officers.</p> <p>6 - The Force should review and streamline the C17 form. Where a C17 form has not been completed correctly, this should be recorded and referred back to the Officer responsible.</p> <p>7 - Access to the Temporary Stores should be restricted to only police officers or the Archive & Exhibit Team who require access. Those who do not have a job-related purpose should have their access to these areas removed. In the interim period, the Force should consider if audit trail access for individuals entering the stores is available. This data could be analysed to show an inappropriate access.</p>

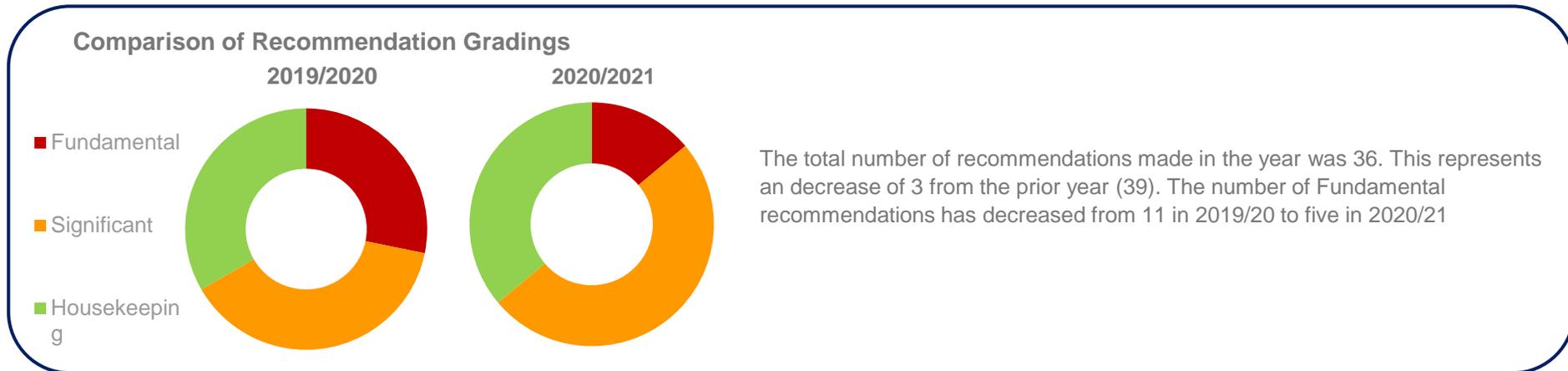
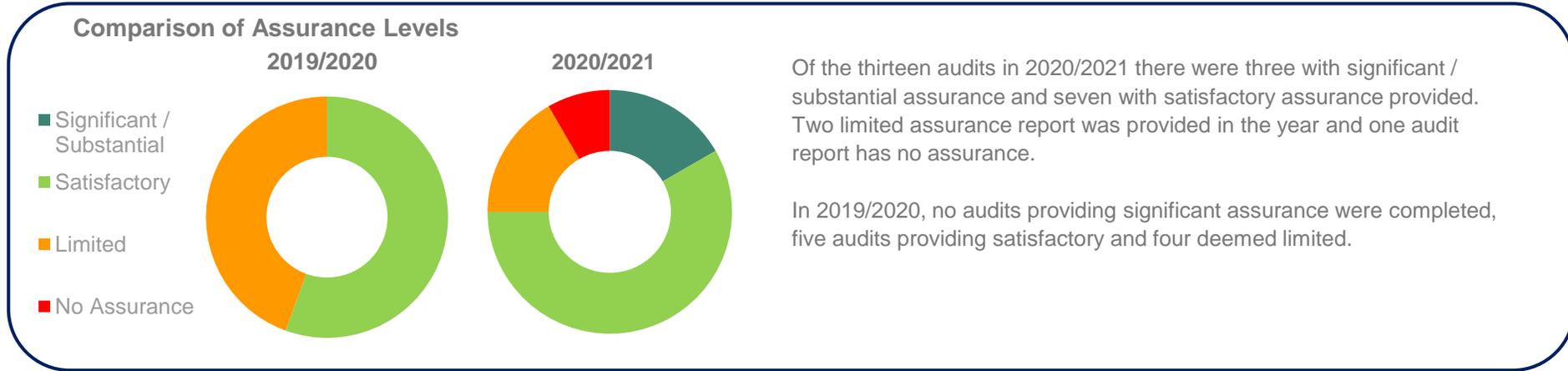
Audit area	Assurance level	Summary of Key Findings
Risk Management (Draft)	Limited	<p>Priority 1 Recommendation:</p> <p>The Force should ensure that a thorough review is undertaken of the Force's departmental risk registers, so that risks that are inherent to the respective departments are identified and scored, as stated in the Risk Management Strategy.</p> <p>Two Priority 2 Recommendations:</p> <p>1 - The Force should ensure that all risk registers are complete and that appropriate controls are recorded for each risk. Where risk controls are being reviewed, the Force should ensure that interim controls are in place to effectively monitor risks.</p> <p>2 - The Force should ensure that further training is provided to users of the JCAD system to ensure that appropriate controls are recorded to mitigate the risks identified. Furthermore, the Force should ensure that where controls and other risk mitigation activities are inserted that these are reviewed to ensure their appropriateness. The Force could consider introducing guidance for users of the JCAD system, which outlines a criterion for controls and risk mitigation activities</p>
IT Information Assurance	Limited	<p>Priority 1 Recommendation:</p> <p>As intended, the organisation must continue to liaise with National Police Information Risk Management Team (NPRIMT) in relation to the GIRR accreditation process.</p> <p>Now the force has more resource in place to manage the process the force should look in the longer term to return to an annual cycle of compliance rather than an ongoing pattern of late submissions for the variety of frameworks it is required to comply with</p>

05 Internal Audit Plan 2020/21 vs Actual

Audit area	Planned days	Actual Days	Difference	Status
Workforce Planning	9	9	-	
Victims Code of Practice	8	8		
Estates Management	8	8		
Core Financials	27	27		
Seized Property	7	7		
Debt recovery	6	6		
Risk Management	8	8		
Wellbeing	8	8		
Complaints Management	7	7		
Business Change	8	-	8	Deferred into 21/22 Plan
IT Security: Follow Up	10	10		
GDPR: Follow Up	5	5		
Contingency	8	4	4	OPCC Supplier Review Added
Total	114	102	-	

05 Benchmarking

This section compares the Assurance Levels (where given) and categorisation of recommendations made at Nottinghamshire Police.



06 Performance of Internal Audit

We have provided some details below outlining our scorecard approach to our internal performance measures, which supports our overall annual opinion.

Compliance with Professional Standards

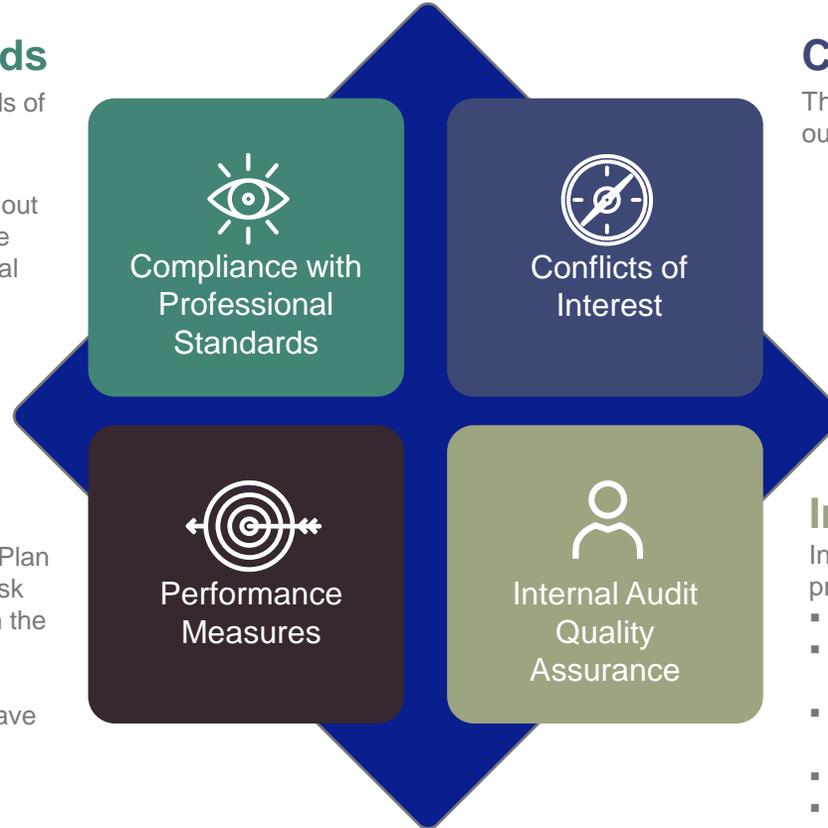
We employed a risk-based approach to determining the audit needs of the Force & OPFC at the start of the year and use a risk-based methodology in planning and conducting our audit assignments.

In fulfilling our role, we abide by the three mandatory elements set out by the Institute of Internal Auditors. Namely, the Code of Ethics, the Definition of Internal Auditing and the Standards for the Professional Practice of Internal Auditing.

Performance Measures

We have completed our audit work in accordance with the agreed Plan and each of our final reports has been reported to the Audit and Risk Committee. We have received positive feedback on our work from the Audit and Risk Committee and staff involved in the audits.

Regular planned discussions on progress against the Audit Plan have taken place with the Audit and Risk Committee.



Conflicts of Interest

There have been no instances during the year which have impacted on our independence and/or lead us to declare any interest.

Internal Audit Quality Assurance

In order to ensure the quality of the work we perform, we have a programme of quality measures which includes:

- Supervision of staff conducting audit work;
- Review of files of working papers and reports by Managers and Partners;
- Annual appraisal of audit staff and the development of personal development and training plans;
- Sector specific training for staff involved in the sector;
- Issuance of technical guidance to inform staff and provide instruction regarding technical issues; and
- The maintenance of the firm's Internal Audit Manual.

Appendices

A1 Definitions of Assurance



A1 Definitions of Assurance

Assurance Gradings

We use categories to classify our assurance over the processes we examine, and these are defined as follows:

Assurance level	Definition
Substantial	Our audit finds no significant weaknesses and we feel that overall risks are being effectively managed. The issues raised tend to be minor issues or areas for improvement within an adequate control framework.
Adequate	There is generally a sound control framework in place, but there are significant issues of compliance or efficiency or some specific gaps in the control framework which need to be addressed. Adequate assurance indicates that despite this, there is no indication that risks are crystallising at present.
Limited	Weaknesses in the system and/or application of controls are such that the system objectives are put at risk. Significant improvements are required to the control environment.

Recommendation Gradings

To assist management in using our reports, we categorise our recommendations according to their level of priority, as follows :

Recommendation Level	Definition
Priority 1 (Fundamental)	Recommendations represent fundamental control weaknesses, which expose the organisation to a high degree of unnecessary risk.
Priority 2 (Significant)	Recommendations represent significant control weaknesses which expose the organisation to a moderate degree of unnecessary risk.
Priority 3 (Housekeeping)	Recommendations show areas where we have highlighted opportunities to implement a good or better practice, to improve efficiency or further reduce exposure to risk.

Annual Opinion Gradings

We use categories to classify our assurance over the processes we examine, and these are defined as follows:

Assurance level	Definition
Significant	The framework of governance, risk management and control is adequate and effective.
Moderate	Some improvements are required to enhance the adequacy and effectiveness of the framework of governance, risk management and control.
Limited	There are significant weaknesses in the framework of governance, risk management and control such that it could be or could become inadequate and ineffective.
Unsatisfactory	There are fundamental weaknesses in the framework of governance, risk management and control such that it is inadequate and ineffective or is likely to fail.

Contact us

David Hoose

Director, Mazars

David.Hoose@Mazars.co.uk

Mark Lunn

Manager, Mazars

Mark.Lunn@Mazars.co.uk

Mazars LLP

Tower Bridge House

St Katharine's Way

London E1W 1DD

We take responsibility to Nottinghamshire Police for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or reply for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk.

Registered office: Tower Bridge House, St Katharine's Way, London E1W 1DD, United Kingdom. Registered in England and Wales No 0C308299.

For Information	
Public	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	29th July 2021
Report of:	Deputy Chief Constable
Report Author:	Pat Stocker – Information Management Lead
E-mail:	pat.stocker@nottinghamshire.pnn.police.uk
Other Contacts:	lehan.fielding7194@nottinghamshire.pnn.police.uk
Agenda Item:	09

Nottinghamshire Police Information Management - Freedom of Information and Data Protection Information Requests update for January to May 2021.

1. Purpose of the Report

- 1.1 To provide the Audit and Scrutiny Panel with data on the legislative compliance for Information Requests under the Freedom of Information Act and Data Protection Act legislation for January to May 2021

2. Recommendations

- 2.1 For Members to note the monitoring statistics for January to May 2021 in relation to information requests processed by Nottinghamshire Police in line with Freedom of Information and Data Protection legislation.
- 2.2 A further paper will be provided to the Audit & Scrutiny Panel in Q1 2022 providing end of year metrics for both Freedom of Information and Data Protection Information Requests.

3. Reasons for Recommendations

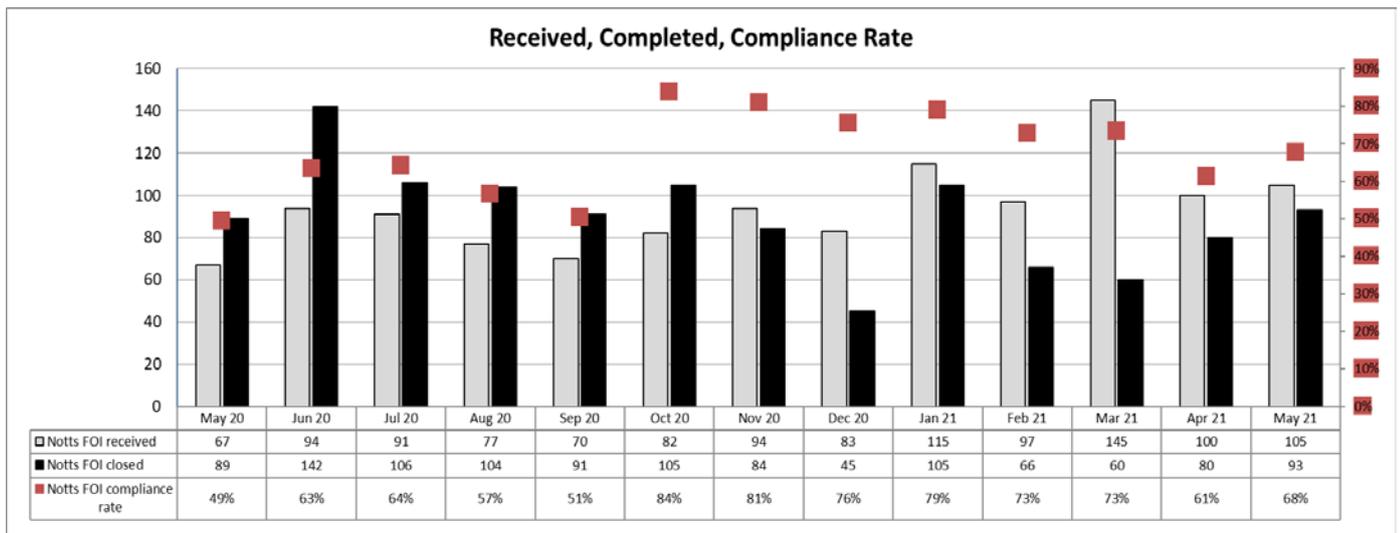
- 3.1 To enable the Audit and Scrutiny Panel to fulfil its scrutiny obligations to oversee and consider Freedom of Information and Data Protection Subject Access Request (SAR) Compliance.

4. Summary of Key Points

- 4.1 Nottinghamshire Police as a public authority has a legal responsibility to respond to information requests received and processed in line with Freedom of Information Act (FOIA) and Data Protection legislation. These requests are processed and completed by the Information Request Team
- 4.2 The legislative deadlines for the Acts are:-
- Freedom of Information 20 working days
 - Data Protection Subject Access 1 calendar month from receipt of request

4.3 Table 1 – FOI Completion Figures from May 2020 to May 2021

The Force monitors compliance and provides quarterly statistics for Freedom of Information to the NPCC Central Referral Unit based in Hampshire. Since September 2019 compliance figures in respect of FOI and Subject Access requests have been provided to the Information Commissioners Office for performance monitoring purposes and are published on the ICO website.



Current Demand Levels: FOI

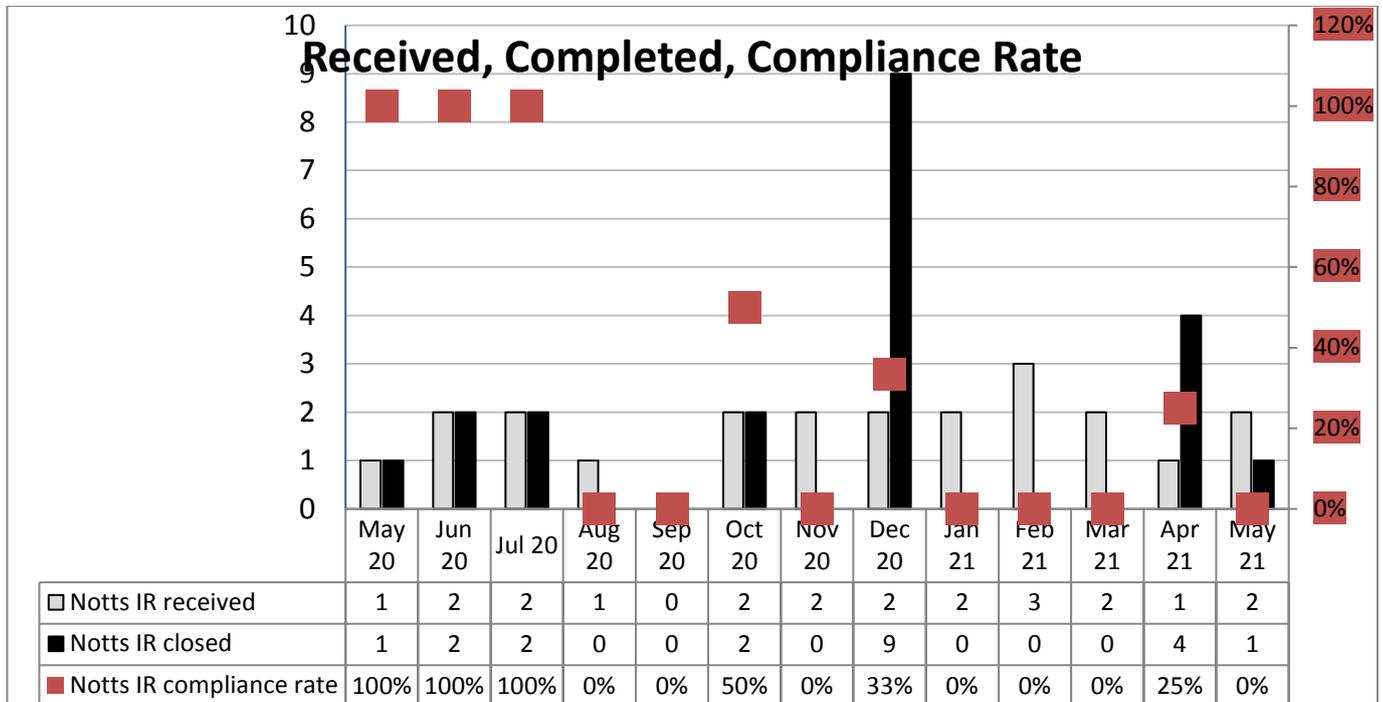
- During the Covid period we assigned one dedicated Information Request Officer to address our lowest compliance level recorded in April 2020, this has worked well but we are conscious of the single person dependency this has created leading to differences in compliance levels due to a standard levels of absences relating to sickness, leave & training
- We continue to work to reduce the backlog and improve our compliance rating closer to the Police Mean rate of 73%. Figures compiled for June 2021 show that our FOI compliance rate is currently 85% although we have made 29% fewer FOI disclosures overall in June when compared to May.

4.4 Table 2 – FOI Internal Review Completion Figures from May 2020 to May 2021

All requestors have the right to an internal review if they are unhappy with the handling of a request for information, made under the FOIA. This could be because:

- an exemption was applied, meaning the request (or a part of it) was denied;
- the 20 working day deadline was not met;
- a full response was not provided; or
- the request was otherwise not handled correctly.

Unlike FOI requests, there is no statutory time frame for carrying out internal reviews, but we aim to provide a full response within 20 working days



Current Demand Levels: Internal Reviews

- The number of internal reviews remain small in comparison to the number of FOI requests received each month which is a good indicator that the majority of FOI requestors are satisfied with the responses they receive.

4.5 Table 3 – SAR Completion Figures from May 2020 to May 2021

The Force monitors compliance and provides quarterly statistics for Freedom of Information to the NPCC Central Referral Unit based in Hampshire. Since September 2019 compliance figures in respect of FOI and Subject Access requests have been provided to the Information Commissioners Office for performance monitoring purposes and are published on the ICO website.



Current Demand Levels: Subject Access Request

- From May 2020 we have introduced a robust triage and allocation process to the Information Request Officers this seems to be working well.
- We continue to find that requests are becoming more complex and voluminous in nature due to increased social awareness of GDPR and right of access provisions.
- We are finding the differences in compliance levels across the year are mainly the result of standard levels of absences relating to sickness, leave & training.
- We continue to work to reduce the backlog and maintain a compliance rating close to the Police Mean rate of 80%. Figures compiled for June 2021 show that our SAR compliance rate is currently 68%.

4.6 Table 4 - Other types of Information Requests

Category	Description	Time scale
Court Orders*	Court orders which can be received from any court in the UK and Ireland for Child Care, Private and Family Proceedings.	Can be required immediately or within days due to the threat, risk & harm of the case
CCrims Checks & Annex D's	2013 Protocol and Good Practice Model - Disclosure of information to Local Authorities on closed cases of alleged child abuse and linked criminal and care directions hearings into the Family Justice System.	Can be required immediately or within days due to the threat, risk & harm of the case
Insurance	Validation of details in relation to crimes for insurer to settle claim	30 working days
Home Office	UK Border Agency and Immigration requiring confirmation and details of Police involvement for those wishing to stay in the country	40 calendar days
Housing Confirmation	Local and Social housing requiring confirmation of the reason given by the person who has presented to them as homeless.	10 working days
Housing General	As above but require more specific detail	40 calendar days
Insurance Appendix E	Insurance companies requiring information in relation to a claim that they believe is fraudulent	40 calendar days
NHS	General Medical Council, Nursing Midwifery Council require details of a registered practitioner who has been involved with the police to consider their fitness to practice	20 working days
Legal proceedings	Private legal proceedings such a personal injury claims	20 working days
Other Police Forces	Request from other forces for information held by Nottinghamshire Police	No set timescale as soon as is practicable
Schedule 2, Part 1, Paragraph 2: Crime and Taxation	Requests from other prosecuting bodies such as DWP, local authorities and RSPCA	20 working days

Current Demand Levels: Court Orders*

Between January and May 2021 Nottinghamshire Police received 221 Court Orders. The majority of all Court Orders received are responded to within the order deadline as they are prioritised over other types of request. We have seen a steady increase in Court orders year after year which is reflected nationally.

Requests for Court orders are always prioritised due to the risk of delays on cases being managed through the Family Court system if timely checks are not completed. This prioritisation impacts on the corresponding delays to the other types of request such as FOI's and Subject Access requests.

5 Financial Implications and Budget Provision

5.1 There are no direct financial implications for this year

6 Human Resources Implications

6.1 There are no direct HR implications for this year

7 Equality Implications

7.1 There are no equality implications

8 Risk Management

8.1 Any risks relating to the FOI/DP function are identified on the Information Management Risk Register and managed locally. The Senior Information Risk Owner (DCC Barber) monitors all relevant risks via the Information Management Board

9 Policy Implications and links to the Police and Crime Plan Priorities

9.1 Links to Police and Crime Plan 2018 – 2021:

9.1.1 **Transforming Services** and Delivering Quality Policing: The benefits of providing a good service to the public by responding to external DP and FOI requests fully and on time will support the Commissioners pledge to improve confidence and satisfaction in policing services. It will also reduce complaints to both the Information Commissioners office and PSD and reduce the resources required to respond to this failure demand.

9.1.2 **Demand for Service:** As stated in the PCP 2018-2021 “Calls for service to the Force remain significantly higher than average and are increasing in Nottinghamshire against the backdrop of reduced Police officer and staff capacity. The service also records more incidents than an average force” The higher demand recorded in Nottinghamshire aligned with the records management issues that sees the Force retaining data for longer periods, especially those relating to IICSA and UCPI, also increases the amount of data that needs to be searched on and returned when queried leading to additional time to read and redact requests appropriately.

9.1.3 **Governance & Accountability** As stated in the PCP 2018-2021 “To discharge this accountability the Commissioner and senior officers must put in place proper procedures for the governance and stewardship of the resources at their disposal” Both Data Protection and FOI legislation identify roles and responsibilities accountable for the legislative compliance against the Acts. The Information Commissioner would assess the governance processes in place if the Force was to come under their scrutiny following an event such as a number of complaints or a data breach.

10 Changes in Legislation or other Legal Considerations

10.1 The General Data Protection Regulations (GDPR) including the Data Protection Act 2018 became law in the UK from 25 May 2018.

10.2 An extension to the FOI Act is currently being debated in Parliament which seeks to add to the authorities who are subject to FOI legislation. The bill would include Social Housing and Children’s Safeguarding Boards (amongst others). It would also make information held by contractors acting on behalf of public authorities subject to FOI Act. If the changes to the Contractors information are implemented this could significantly add to FOI demand already in place. A second reading of the Bill is being heard in Parliament on a date to be announced.

11 Details of outcome of consultation

11.1 No consultation took place in preparing this report

12. Appendices

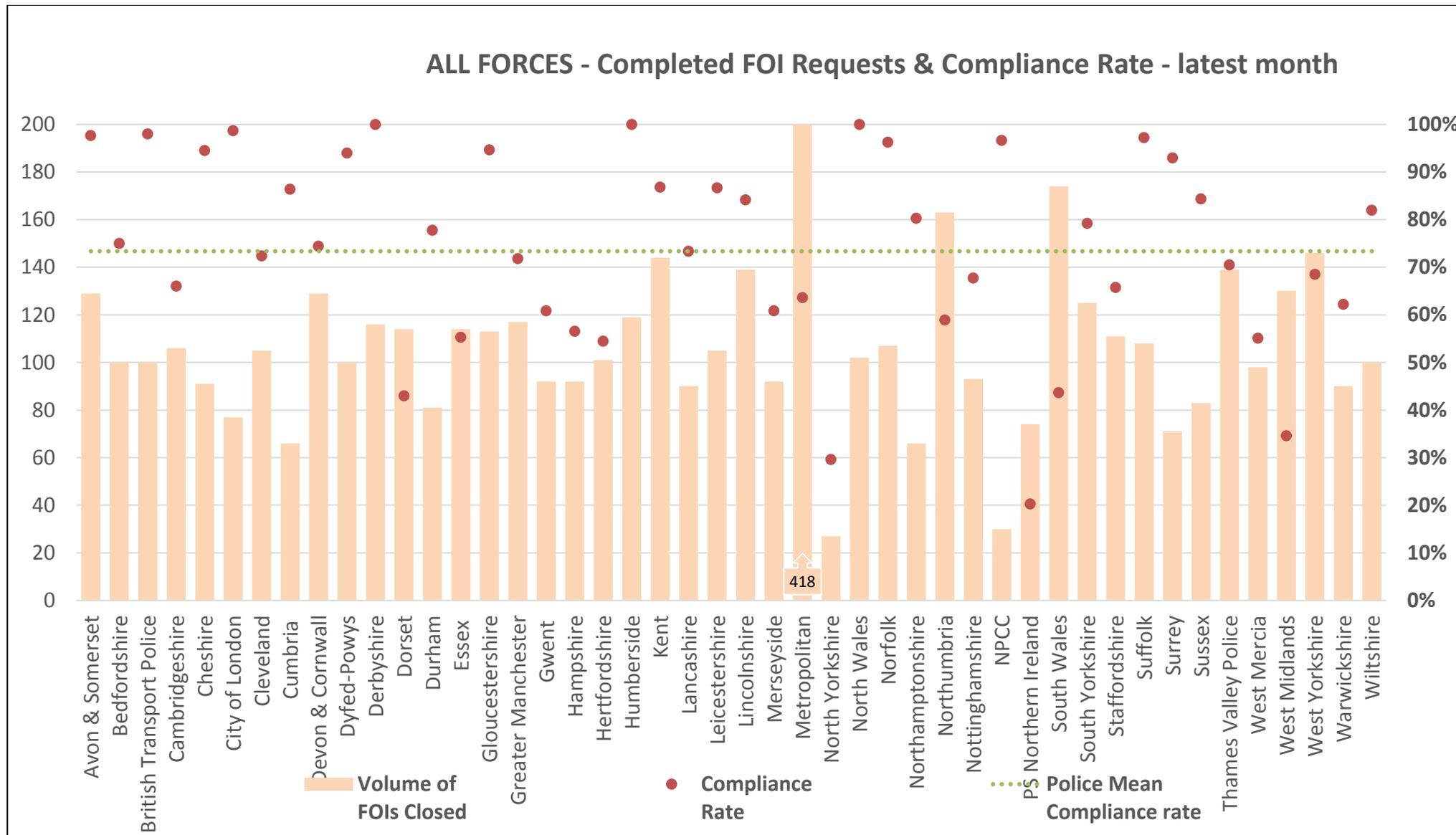
12.1 Appendix 1 – National Figures: Volume of FOI Requests completed in May 2021 & compliance rate per Force

12.2 Appendix 2 – National Figures: Volume of Subject Access requests completed in May 2021 & compliance rate per Force

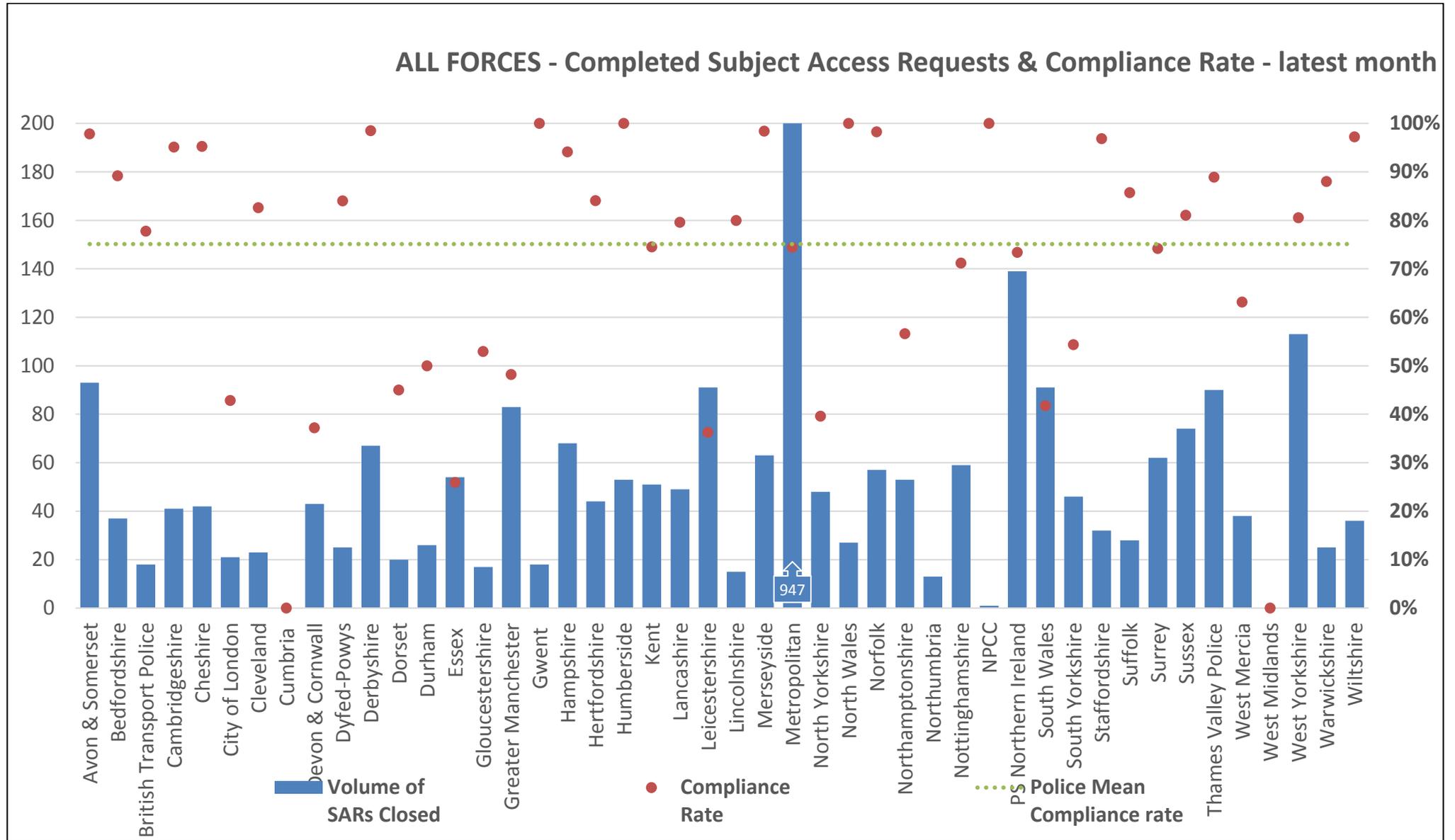
13. Background Papers (relevant for Police and Crime Panel Only)

13. No background papers have been provided

Appendix 1: National Figures: Volume of FOI Requests completed in May 2021 & compliance rate per Force



Appendix 2: National Figures: Volume of Subject Access requests completed in May 2021 & compliance rate per Force



For Information	
Public	Public
Report to:	SR&P/OPCC
Date of Meeting:	29th July 2021
Report of:	CC Guilford
Report Author:	Suzanna Daykin Farr
E-mail:	Suzanna.daykin@nottinghamshire.pnn.police.uk
Other Contacts:	Christopher.harris12732@nottinghamshire.pnn.police.uk
Agenda Item:	10

*If Non Public, please state under which category number from the guidance in the space provided.

Performance & Insight Report – update to June 2021

1. Purpose of the Report

- 1.1 The purpose of this report is to inform the Police & Crime Commissioner of the key performance headlines for Notts Police in the 12 months to June 2021.

2. Recommendations

- 2.1 It is recommended that the contents of this report are noted.

3. Reasons for Recommendations

- 3.1 To ensure that the Police & Crime Commissioner is aware of current performance in line with the Police and Crime Commissioner and Force priorities, as set out in the Police and Crime Plan.

4. Summary of Key Points (this should include background information and options appraisal if applicable)

- 4.1 An Executive Summary in the attached report provides an overview of performance across the four Police and Crime Plan strategic themes. Trend information is represented as a percentage, and volume change is included where possible to give a representation of the monthly trend over the last two years; broken down by quarters. Additional narrative provides narrative where required, particularly in respect of performance exceptions.

5. Financial Implications and Budget Provision

- 5.1 Financial performance monitoring is highlighted under Theme 4; Transforming Services and Delivering Quality Policing.

6. Human Resources Implications

- 6.1 Human resources implications are evaluated against overall Force performance and demand. Any resource changes required as result are managed by the Force as appropriate. Further detail is provided in Theme 4B: Achieving Value for Money – Budget and Workforce.

7. Equality Implications

7.1 Equality, diversity and human resources are considered throughout each area of Force business. Any exceptions arising in this area of business will be discussed in the Performance Report.

8. Risk Management

8.1 There are no risk management implications arising from this report. Performance is monitored on a regular basis through the provision of management information for all key areas of business, and any exceptional performance is identified, assessed and responded to through the appropriate governance structure.

9. Policy Implications and links to the Police and Crime Plan Priorities

9.1 There are no policy implications arising from this report.

10. Changes in Legislation or other Legal Considerations

10.1 There are no changes in legislation or other legal considerations that are relevant to this report.

11. Details of outcome of consultation

11.1 The figures included in this report, are covered in more detail in each of the individual Performance and Insight Reports and are monitored through: Operational Performance review, Force Performance Board and the Force Executive Board meetings on a monthly basis.

12. Appendices

12.1 Appendix A: included at the end of the Performance and Insight Report to provide further insight and data sources, including any information supplied outside of the Nottinghamshire Police Management Information Team.

13. Background Papers (relevant for Police and Crime Panel Only)

13. N/A

NB: See guidance on public access to meetings and information about meetings for guidance on non-public information and confidential information.



NOTTINGHAMSHIRE POLICE AND CRIME PLAN PERFORMANCE AND INSIGHT REPORT 2021/22

QUARTER 1: PERFORMANCE TO JUNE 2021 (Version 1.1)

Interim update 16 July 2021

Guidance notes:

1. The following performance indicators are aligned to the four strategic priority themes of the Nottinghamshire Police and Crime Plan 2018-21. The framework will be revised and updated to reflect the 2021-24 Police and Crime in September 2021.
2. Wherever possible, performance information is provided for a 12 month rolling period compared to the equivalent 12 months of the previous year. This provides a more stable indication of trends over time. Where information provided is for an alternative period, this is stated.
3. Additional insight is included in the report in order to provide context in relation to performance exceptions only.
4. Data sources are specified at Appendix A, including details of any information supplied outside of the Nottinghamshire Police Management Information team.
5. This report includes findings from the PCC's quarterly Police and Crime Survey. Coronavirus restrictions in place during 2020-21 resulted in minor delays to the fieldwork programme, however the full quota of resident surveys was achieved during the year in compliance with Market Research Society guidelines.

Performance exceptions:

Performance exceptions, both positive and negative, are indicated within the report by the following markers:-

- Positive exception: Significant improvement in latest quarter, or improving trend over three successive quarters
- Negative exception: Significant deterioration in latest quarter, or deteriorating trend over three successive quarters

Summary of Key Performance Headlines and Exceptions

Theme 1: Protecting Vulnerable People from Harm – Pages 3 to 4

- Safeguarding referrals continue to increase (by 16% in the last 12 months), largely attributed to improved training and better Partnership working in relation to CSE, PPNs and Knife crime.
- Mental Health related incidents have also continued to decrease over the last 12 months, however, this trend is expected to change over the summer.
- Online crime continues to rise again this quarter with on-going issues related to phishing/scam emails.
- Action Fraud data has been included in this report for the first time to give a better understanding alongside recorded Fraud offences; both continue to see increases.
- Police recorded Child Sexual Exploitation (CSE) offences have seen further increases; this is reflected as a positive due to on-going work to improve accuracy and the benefits of the CSE Perpetrator Matrix.

Theme 2: Helping and Supporting Victims – Pages 5 to 6

- Domestic Abuse recorded offences have seen a small increase this quarter.
- VCOP compliance has seen continued improvements again this quarter.
- Adult and Child sexual offences continue to see reductions against the previous 12 months.

Theme 3: Tackling Crime and Anti-social Behaviour – Pages 7 to 10

- Knife Crime and Possession of Weapons have seen further reductions over the last 12 months.
- Alcohol ASB has seen a downward trend over the past 12 months.
- The IOM re-offending risk has further improved this quarter to 75.9%
- The Police and Crime Survey reflected that Community Cohesion continues to show improvements.
- ASB incidents has seen further increases in the last 12 months.

Theme 4: Transforming Services and Delivering Quality Policing – Pages 11 to 13

- The Police and Crime Survey has seen public satisfaction improvements in 'dealing with issues that matter' and 'police doing a good job'.
- PSD timeliness for complaint resolution has further reduced by over 57 days in the past 12 months.
- Calls for Service: 999 and 101 have seen increases this quarter.
- NCRS compliance has remained stable this quarter.

Theme 1: Protecting Vulnerable People from Harm

Theme 1A: More Vulnerable People Safeguarded and Protected

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
1A.1	Adult and Child Safeguarding Referrals	Increase	7,390	7,752	7,888	8,105	+16.0%	+1,182
1A.2	Missing persons	Monitor	2,713	2,541	2,473	2,288	-6.3%	-170
1A.3	Missing: No apparent risk	Monitor	2,838	2,817	2,732	2,590	-4.9%	-139
1A.4	Mental health-related incidents	Monitor	19,330	18,775	17,853	16,923	-14.3%	-2,758

Safeguarding Referrals

Safeguarding referrals continued to increase in Nottinghamshire during 2021, having risen by 16.0% over the last year. This positive trend provides the force and partner agencies with confidence that improvements are being made in the identification and recording of safeguarding concerns, enabling agencies to take appropriate safeguarding actions to minimise the risk of harm. Improved training and better partnership working in relation to CSE, PPNs and Knife crime are believed to have impacted upon this positive trend.

Missing Person Reports

Missing Person reports have increased during the latest quarter, following reductions during the COVID lockdown period. Average monthly reports rose from 191 to 212 during the April to June 2021 period as COVID restrictions were further eased. This compares to an average of 241 per month prior to the Coronavirus lockdown (January to March 2020).

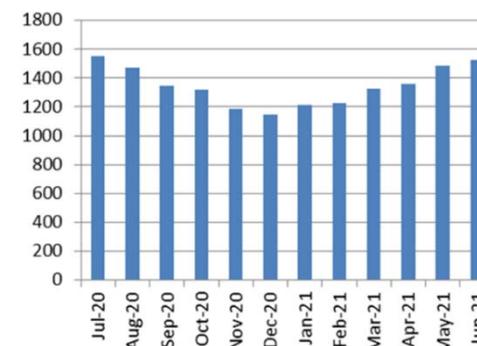
The Team continue to work collaboratively on safeguarding issues and invest in new technology to assist in tracing missing people by processing telephone data more effectively. The MFH Team continue to gather information and learning from recent force inspections. Positively, social distancing practices have also led to increased 'attendance' at (online) meetings and improved information sharing.

Reports of 'Missing with no apparent risk' increased in the latest quarter against an overall reduction of 4.9% in the previous 12 months. As expected, the relaxation of COVID restrictions have impacted upon demand in both MISNAR¹ and Missing Reports

Mental Health-Related Incidents

The last 12 months have seen a monthly average of 1,381 police recorded mental health reports compared to an average of 1,611 the previous 12 months. Incidents have continued to fall in the latest quarter. Despite this downward trend, the Mental Health Team note an increase in demand during June and July 2021 which are likely to continue with the removal of most COVID restrictions in July.

Police recorded Mental Health Incidents by month (Nottinghamshire)



¹ Missing No Apparent Risk

Theme 1: Protecting Vulnerable People from Harm

Theme 1B: Improved Response to Serious and Emerging Threats

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
1B.1	i) Fraud Offences	2,883	2,851	2,925	2,998	● 3,368	+16.8%	+485
	ii) Action Fraud	1,130	2,970	4,942	7,182	● 7,412	+556%	+6,282
1B.2	Online Crime	3,900	4,123	4,137	4,240	● 4,324	+10.9%	+424
1B.3	Drug Trafficking and Supply Offences	945	936	935	993	970	+2.6%	+25
1B.4	Police recorded Child Sexual Exploitation	468	428	434	477	● 492	+5.1%	+24
1B.5	Police recorded Modern Slavery offences	134	140	134	156	150	+11.9%	+16

Fraud offences & Action Fraud

Police recorded fraud offences have increased by 16.8% over the last year impacted, in part, by the volume of reports created by the Fraud triage assistants including NACL qualifiers on Niche. The PCC's Police and Crime Survey also highlights a rise in the proportion of residents having experienced online fraud over the last year. Action Fraud referrals have seen a five-fold increase over the last year.

Online crime

Online crimes represent a significant challenge to the force and a growing demand on resources. Recorded offences have increased by a further 10.9% over the last year impacted, in part, by a greater transition to online activity during the period of Coronavirus restrictions. There has also been a national increase in the number of online phishing and scam emails relating to Covid-19, Track and Trace and HMRC.

Drug Trafficking and Supply Offences

The number of recorded drug trafficking and supply offences increased by 2.6% in the year to June 2021, largely impacted by the Operation Reacher programme. Between Mar-Jun 2021, the programme undertook 219 drug seizures, made 479 arrests, seized over £210k cash and seized 103 weapons. The PCCs Police and Crime survey highlights reductions in public concern about drug use and dealing over the last year alongside reductions in the level and frequency with which residents experience it.

Modern Slavery

The number of modern slavery offences recorded by police increased by 11.9% in the year to June 2021 reflecting on-going improvements in proactivity, training and awareness of the issue. The force's dedicated Modern Slavery and County Lines Team continues to take a proactive approach to identifying offences and ensuring survivors are protected and offenders are brought to justice.

Child Sexual Exploitation

Police recorded CSE offences have been increasing during 2021, impacted in part by improvements in data quality following production of the 2020 CSE Profile. Searches are now undertaken on a weekly basis to improve data quality (correcting or if necessary removing data qualifiers as required), particularly among offences recorded by officers outside of SEIU. A further CSE Profile will be produced in 2021.

The removal of further Coronavirus restrictions is likely to result in an increase in reports and referrals to the police and MASH as contact between professionals, victims and vulnerable people increases.

Theme 2: Helping and Supporting Victims

Theme 2A: Improved Reporting and Response to Domestic and Sexual Violence and Abuse

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
2A.1	Police recorded domestic abuse crimes	Monitor 15,096	14,979	14,243	13,988	14,077	-6.8%	-1,019
2A.2	Domestic abuse repeat victimisation rate	Monitor 33.8%	33.4%	33.6%	34.1%	33.6%	-0.2% pts	n/a
2A.3	Domestic abuse: Positive Outcome Rate	Monitor 13.2%	13.3%	13.4%	12.9%	12.2%	-1.0% pts	n/a
2A.4	% Domestic abuse victims satisfied (overall)	Monitor 88.7%	88.6%	89.3%	88.5%	88.2%*	-0.5% pts	n/a
2A.5	Serious sexual offences: Adult	Monitor 1,335	1,313	1,231	1,181	1,216	-8.9%	-119
2A.6	Serious sexual offences: Child	Monitor 1,227	1,142	1,081	1,008	1,195	-2.6%	-32
2A.7	Sexual Offences: Positive Outcome Rate	Monitor 8.3%	8.4%	8.2%	7.9%	7.4%	+0.9% pts	n/a

Domestic Abuse

This quarter has seen a small increase against the previous quarter and an overall 6.8% reduction over the preceding 12 months. This trend is likely to have been affected by Coronavirus restrictions in place during 2020/21, with fewer opportunities for victims to come forward to report victimisation and reductions in night-time economy related activity. With restrictions easing, increases are now expected.

The proportion of victims that are repeats has remained stable during the year while positive outcome rates have dropped to 12.2%.

Levels of satisfaction with the police among survivors of domestic abuse have reduced marginally in the latest 12 months; Ease of Contact and Actions taken are the main drivers of reduced satisfaction. Previous issues with Kept Informed satisfaction have improved this quarter after the Force devised an audit to review numerous crimes for VCOP compliance in keeping victims informed.

* NB: Survey data is current up to June 2021 based on surveys undertaken in March 2021.

Sexual Abuse

Both Adult and Child Serious Sexual Offences continued to see decreases of 8.9% and 2.6% respectively in the year ending June 2021. However, both categories saw slight increases against the previous quarter.

Both Adult and Child offences dropped markedly during Covid restrictions and lockdowns. The current quarter increase could be reflective of offences starting to rise now that restrictions are easing.

The positive outcome rate has reduced to 7.4% this quarter, however, the 12-month overview still reflects a small positive increase.

Theme 2: Helping and Supporting Victims

Theme 2B: Victims Receive High Quality and Effective Support Services

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year		
							%	Actual	
2B.1	Victims Code of Practice Compliance	Monitor	91.4%	91.7%	92.9%	93.9%	● 94.2%	+2.9% pts	n/a
	Victim Services: New Referrals	Monitor	10,135*	10,126	10,126*	11,920	Pending	+17.6%	+1,785
2B.2	Victim Services: Closed Cases	Monitor	3,524*	3,113	3,113*	3,534	Pending	+/- 0%	+10
2B.3	% Improved ability to cope and recover	Monitor	79.0%*	72.2%	72.7%*	67.8%	Pending	-11.2% pts	n/a
2B.4	% crimes resolved via community resolution	Monitor	9.5%	8.9%	9.3%	9.8%	11.0%	+1.5%	n/a

Victims Code of Practice

The Victims Code of Practice (VCOP) requires that a VCOP assessment is made and recorded for every victim of a crime, and that victim services are offered to victims as part of this assessment. In order to be VCOP compliant, every victim-based crime should have a completed VCOP recorded and the officer should record that victim services have been offered.

Improvements in compliance have continued to be made over the past year (+2.9% points), likely to have been affected by continued robust screening of rape and serious sexual offence (RASSO) offences and VCOP compliance. For Adult and Child public protection compliance, stringent reviews have been put in place since June 2020. Overall, compliance in these two areas have improved as more teams have been included in the mandatory review process while maintaining high compliance.

Victim Services

Victim services data to 30 June 2021 will be available in early August.

PCC Commissioned Victim Services received 11,920 new referrals in 2020/21, of which 619 were supported by new providers receiving additional Ministry of Justice funding for domestic and sexual abuse support in wake of the Coronavirus pandemic.

Of the 3,534 closed cases receiving an outcome assessment in 2020/21, 67.8% reported improvements in their ability to recover and cope with aspects of daily life as a result of the support provided. This marks an 11.2% pt reduction in positive outcome rates since March 2020 which has remained stable throughout the pandemic. This reduction should be viewed in the context of the changing profile of victimisation and service provision, with some providers having reported an increase in levels of anxiety and complexity among presenting service users.

Community Resolution

The proportion of crimes resulting in community resolution has been increasing steadily since September 2020 with further increases seen in the latest quarter.

Theme 3: Tackling Crime and Anti-Social Behaviour

Theme 3A: People and communities are safer and feel safer

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year		
							%	Actual	
3A.1	Victim-based crime: Total	Monitor	83,791	79,894	74,716	69,656	73,427	-12.4%	-10,364
3A.2	Victim-based crime: Rural areas	Monitor	10,718	10,458	9,769	9,489	9,859	-8.0%	-859
3A.3	Victim-based crime: Urban areas	Monitor	72,279	69,315	64,848	61,132	64,316	-11.0%	-7,963
3A.4	Average Crime Severity: Force-wide	Monitor	158.23	162.07	156.71	155.69	153.41	-3.1%	-4.82
3A.5	Average Crime Severity: Priority areas	Monitor	164.52	165.69	165.24	165.76	161.84	-1.63%	-2.68
3A.6	Residents reporting experience of crime	Monitor	17.5%	16.9%	16.1%	16.4%	16.6%	-0.9% pts	n/a
3A.7	% residents feeling safe in area by day	Monitor	89.9%	90.1%	89.7%	89.5%	89.5%	-0.4% pts	n/a
3A.8	% residents feeling safe in area after dark	Monitor	62.7%	64.0%	63.1%	62.5%	61.0%	-1.7% pts	n/a
3A.9	% reporting drug use / dealing as an issue	Reduce	37.5%	32.1%	32.0%	30.5%	30.6%	-6.9% pts	n/a

Police recorded crime

Police recorded crime, decreased by 10,364 offences in the year to June 2021, impacted by decreases post June 2020 coinciding with the stringent Coronavirus restriction measures in place. Notable reductions were seen in Robbery (-24.7%), Vehicle Offences (-29.2%) and Burglary (-31.4%). Reductions in police recorded crime continue to be more pronounced in the urban areas of the force which recorded an 11.0% reduction in the latest 12 month period.

Latest findings from the Police and Crime Survey indicate that self-reported experience of crime (excl. fraud and cyber) fell from 17.5% to 16.6% during the year. The proportion of residents experiencing serious acquisitive crime and criminal damage has reduced year on year since June 2019.

Crime Severity

The average crime severity score of offences recorded by police (based on weightings via the ONS Crime Harm Index) has reduced in the latest quarter and in the 12m comparison by 3.1%. Trends in crime severity will be monitored over the coming months as rates and trends of recorded crime during lockdown restrictions become clearer.

The 23 Priority Areas have seen a slight decrease in overall crime severity over the last year. Bilsthorpe, Lowdham & Villages and Arboretum again recorded the highest severity scores in the 12 months to June 2021 (214.82/205.00).

Resident concerns regarding drug use and dealing

The proportion of residents citing drug use and dealing as an issue they would like to see the police and other partners do more to tackle in their area has continued to fall in the last 12 months. This coincides with extensive targeted enforcement activity linked to Operation Reacher.

Feelings of safety

The proportion of residents reporting that they feel very or fairly safe in their area during the day and after dark has decreased marginally over the previous 12 months. This may, in part, have been affected by changes in lifestyles and activity as a result of the Coronavirus restrictions in place.

Theme 3: Tackling Crime and Anti-Social Behaviour

Theme 3B: Fewer People Commit Crime and offenders are supported to rehabilitate

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
3B.1	Violent knife crime	Monitor 736	768	721	707	719	-2.3%	-17
3B.2	Violent knife crime: Positive outcomes	Monitor 27.2%	26.3%	28.0%	29.1%	28.1%	+0.9% pts	n/a
3B.3	Gun crime	Monitor 149	165	151	161	170	+14.1%	+21
3B.4	Possession of weapons offences	Monitor 1,099	1,084	1,019	1,005	1,063	-3.3%	-36
3B.5	Stop and Searches	Monitor 5,377	5,103	4,952	5,109	4,942	-8.1%	-435
3B.6	Stop and Search: Positive outcomes	Monitor 39.9%	39.6%	39.3%	39.0%	38.9%	-1.0% pts	n/a
3B.7	Alcohol-related violence	Monitor 15.4%	15.6%	14.7%	13.9%	13.9%	-1.6% pts	n/a
3B.8	Alcohol-related ASB	Monitor 7.8%	7.5%	6.5%	5.8%	6.0%	-1.8% pts	n/a

Violent Knife Crime

The number of police recorded violent Knife Crimes has fallen by 2.3% over the previous year, continuing the downward trend seen since 2018. The proportion of offences resulting in a positive outcome increased by 0.9% over the same 12 month period.

Gun Crime

Recorded gun crime has increased by 14.1% over the last year, following notable reductions seen between January and May 2020. Nationally, there was a downward trend in firearm discharges throughout 2020, with little overall impact to the nature of the firearms market.²

Stop Searches

There has been a reduction in the number of stop searches conducted in the 12 months to June 2021. This is possibly attributable to the Covid-19 pandemic and fewer people on the roads and fewer stops conducted.

Positive Outcomes improved steadily in 2019, although, small reductions have been seen throughout 2020 and in the 12 months to June 2021. The consistent level of positive outcomes is primarily associated with targeted intelligence led operations that derive from local commanders identifying a specific crime issue in a given location that can be addressed through on-street proactive policing activity. The force continues to work with communities in our use of these powers.

Possession of Weapons

Police recorded Possession of Weapons offences decreased by 3.3% in the year to June 2021 reflecting the continued positive proactive work of Op Reacher and neighbourhood community teams in taking more weapons off the streets; 104 weapons were seized during the March to June 2021 period.

Alcohol-related violence and ASB

The force is working to develop an accurate picture of alcohol-related crime via use of an alcohol marker on the Niche crime recording system. Alcohol-related violence continues to see steady reductions over the past two years. Alcohol-related ASB has also seen a steady downward trend over the previous two years.

² NABIS – Annual Strategic Assessment 2020

Theme 3: Tackling Crime and Anti-Social Behaviour

Theme 3B: Fewer People Commit Crime and offenders are supported to rehabilitate

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year		
							%	Actual	
3B.9	IOM: Offenders subject to monitoring	Monitor	385	269	258	285	304	-21.0%	-81
3B.10	IOM: Offenders successfully removed	Monitor	61	93	70	80	96	+57.4%	+35
3B.11	IOM: Reduction in average re-offending risk	Monitor	-46.0%	-56.3%	-71.0%	-71.0%	 -75.9%	-29.9% pts	-
3B.12	Youth Justice First Time Entrants: City	Monitor	109	105	114	113	122*	-	-
3B.13	Youth Justice First Time Entrants: County	Monitor	116	117	102	108	97*	-	-
3B.14	Crimes with an identified suspect (average)	Monitor	3,095	3,120	3,023	2,791	2,721	-12.1%	-374
3B.15	Positive outcomes: All crime	Monitor	15.5%	15.2%	15.7%	15.6%	14.7%	-0.8% pts	n/a
3B.16	Positive outcomes: Victim-based crime	Monitor	11.9%	11.8%	12.2%	11.8%	10.8%	-1.1% pts	n/a

Integrated Offender Management (IOM)

A successful year for IOM despite the difficulties of the pandemic. All normal activity has continued throughout the crisis, including home visits, statutory appointments and enforcement actions. IOM has additionally managed the emergency prison releases through COVID, and ensured that all such releases were subject at proposal to thorough checks and then monitored throughout the period of their temporary licence.

The National IOM Review and guidance will move the strategic emphasis towards the reduction of re-offending as opposed to harm to help the government meet its target of reducing neighbourhood crime by 20%.

DVIOM Scheme

The DIVOM performance figures are mostly the same as previous submissions. The PPIT score is now reflected using Power BI. The average reduction in PPIT for IOM DV offenders between entry and exit from the scheme is 4.92 points; equating to a 31% reduction in PPIT risk. The PPIT is used in addition to the IOM matrix to identify DV perpetrators and is the current academic leading model for this type of cohort selection.

There is scope within the new operational guidance to continue the successful DIVOM programme and some of the successful work done with Nottinghamshire's scheme, but there will be an expectation, as a primary, to move back towards the more traditional SAC type offending. The new guidance has been circulated to Chief Officers.

Youth Justice – First Time Entrants

* 12 months to 31/05/21 (due to early iteration of this report)
The City shows an increase in FTE during the 12 months to the end of May 2021.

* 12 months to 31/05/21. The County shows a reduction of 17 people (-15%) of FTE during the 12 months to the end of May 2021.

Identified Suspects

The number of Niche crime outcomes with a named suspect saw an 12.1% decrease in the 12 months to June 2021.

Positive Outcomes: All Crime & Victim Based Crime

Positive outcome rates for both All Crime and Victim Based Crime have marginally decreased over the last 12 months.

Theme 3: Tackling Crime and Anti-Social Behaviour

Theme 3C: Build Stronger and More Cohesive Communities

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
3C.1	Police recorded hate occurrences	Monitor 2,395	2,404	2,343	2,242	2,366	-1.2%	-29
3C.2	Hate crime repeat victimisation rate	Monitor 14.3%	15.4%	17.3%	17.8%	17.3%	+3.0% pts	n/a
3C.3	% Hate crime victims satisfied (overall)	Monitor 83.7%	83.8%	85.9%	82.1%	81.0%*	-2.7%pts	n/a
3C.4	% feeling there is a sense of community	Monitor 57.3%	59.6%	61.3%	62.4%	63.2%	+5.9% pts	n/a
3C.5	% feeling different backgrounds get on well	Monitor 58.1%	61.4%	63.3%	64.8%	64.4%	+6.3% pts	n/a
3C.6	Anti-social Behaviour Incidents	Monitor 39,013	41,957	45,064	48,202	43,971	+12.7%	+4,958
3C.7	Anti-social Behaviour Incidents: % Repeats	Monitor 26.9%	27.6%	28.3%	29.5%	● 32.2%	+5.3% pts	+109
3C.8	% Residents experiencing ASB in the last year	Monitor n/a	65.1%	64.0%	64.4%	65.3%	n/a	n/a

Hate Crime (see Appendix A)

Recorded Hate Crime has remained relatively stable over the previous two years with a marginal decrease in the past 12 months. The proportion of hate crime victims that are repeat victims has continued to increase this quarter.

Victim Satisfaction rates for hate crime have seen a 2.7% point reduction over the last year, largely driven by a decline in satisfaction with Actions Taken.

NB: Hate Crime survey data to June 2021 reflects data from March 2021 surveys.

Community Cohesion

The proportion of residents feeling that their area 'has a sense of community' and that 'people from different backgrounds get on well' has increased over the last year.

Anti-social Behaviour

Police recorded ASB increased markedly over the last year, with a 12.7% increase in the 12 months to June 2021. The increase is primarily driven by the enforcement of COVID restrictions since March 2020. The proportion of reports involving repeat victims has seen an upward trend over the past few quarters. An overall increase of 5.3% pts has been seen in the past 12 months. New questions relating to residents' experience of ASB were included within the Police and Crime Survey in October 2019. The rolling 12 month profile shows no significant change in the proportion of residents experiencing ASB over the last year (64%-65%).

Theme 4: Transforming Services and Delivering High Quality Policing

Theme 4A: Further Improve Public Confidence in Policing

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
4A.1	Police are dealing with the issues that matter	Monitor 42.5%	44.0%	44.6%	45.5%	● 46.0%	+3.5 % pts	n/a
4A.2	Residents feeling the Police do a good job	Monitor 51.7%	53.4%	54.0%	54.9%	● 55.2%	+3.5 % pts	n/a
4A.3	Residents reporting confidence in the police	Monitor 57.8%	59.3%	59.8%	60.7%	60.3%	+2.5 % pts	n/a
4A.4	% residents satisfied with the police	Monitor 58.4%	58.7%	60.1%	60.8%	● 62.8%	+4.4 % pts	n/a
4A.5	PSD Recorded Complaints	Monitor 904	894	1,015	1,095	1,040	+15.0%	+136
4A.6	PSD Recorded Complaints: Timeliness (days)	Monitor 113	97.8	83.4	78.5	● 67.8	-40.0%	-45

Public Confidence in the Police

The majority of indicators of public confidence in the police are increasing – particularly since March 2020. While an increasing trend was evident prior to the emergence of the COVID-19 pandemic, it is likely that the emergence of and response to the pandemic have contributed to an acceleration of these trends since March 2020.

Satisfaction with Police

24.5% of respondents to the Nottinghamshire Police and Crime Survey reported having had contact with the police over the last year, of which 575 were reporting a crime/incident.

The proportion of those respondents reporting that they were very or fairly satisfied with the service they received has increased in the past year (61.6%). The proportion reporting dissatisfaction with the police meanwhile has fallen marginally from 23.0% to 21.2%.

PSD Recorded Complaints: Timeliness

Recorded complaints have seen a 15% increase over the last year, largely driven by changes to the Police (Conduct) Regulations in 2020 which saw the complaints system expanded to include elements not previously captured. This includes organisational issues and complaints that are repetitious, relate to historic matters or are vexatious.

The average timeliness for the resolution of PSD complaints has reduced from over 100 days to 67 days over the last year. This is due to the benefits now being seen of revised practices within PSD and a sustained overhaul of the Centurion system and historical complaints now being finalised.

Theme 4: Transforming Services and Delivering High Quality Policing

Theme 4B: Achieving Value for Money – Budget and Workforce

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year	
							%	Actual
4B.4	Staffing vs Establishment: Officers	98.66% 2,059.01/2,087	99.32% 2,071.81/2,087	101.80 2,124.48/2,087	*101.23% 2,112.62/2,087	PENDING		
4B.5	Staffing vs Establishment: Staff	99.84% 1,198.89/1,138.67	103.83% 1,186.41/1,142.67	103.34% 1,181.86/1,143.67	*103.22% 1,212.53/1,174.69	PENDING		
4B.6	Staffing vs Establishment: PCSOs	83.42% 166.83/200	80.85% 161.7/200	78.46% 156.91/200	103.57 155.36/150	PENDING		
4B.7	% Contracted days lost to Sickness: Officers	4.83% 19,628	4.21% 20,718	3.84% 15,980	3.55% 15,239	PENDING		
4B.8	% Contracted days lost to Sickness: Staff & PCSOs	4.80% 13,741	4.50% 14,426	4.38% 12,947	4.16% 12,314	PENDING		

Budget vs Spend: Revenue/Capital

Pending approval of Q1 reports

In terms of budget vs actual spend for the fourth quarter (Jan-Mar) 2020/21, the final outturn position was £221,724k versus a budget of £221,659k, representing an overspend of £65k.

The final outturn position for capital spend in 2020/21 was £30,369k versus a full year budget of £42,431k which is a difference of £12,062k. This is split as slippage of £8,636k and an under-spend of £3,426k.

Latest quarterly staffing and sickness data pending

Theme 4: Transforming Services and Delivering High Quality Policing

Theme 4C: Achieving Value for Money – Demand Management

	Aim	12 months to Jun 2020	12 months to Sep 2020	12 months to Dec 2020	12 months to Mar 2021	12 months to Jun 2021	Change over last year		
							%	Actual	
4C.1	Calls for Service: 999	Monitor	187,415	184,039	177,403	169,685	190,329	+1.6%	-2,914
4C.2	Abandoned Call rate: 999	Monitor	0.64%	0.86%	0.90%	0.48%	0.57%	-0.07% pts	n/a
4C.3	Calls for Service: 101	Monitor	698,577	666,530	631,628	579,874	601,377	-13.9%	-97,200
4C.4	Abandoned Call rate: 101	Monitor	3.5%	10.9%	7.7%	6.0%	4.6%	+1.1% pts	n/a
4C.5	Response times: Grade 1 Urban	Monitor	77.6%	76.0%	75.0%	77.7%	77.5%	-0.1% pts	n/a
4C.6	Response times: Grade 1 Rural	Monitor	71.6%	70.8%	69.4%	72.6%	73.7%	+2.1% pts	n/a
4C.7	Response times: Grade 2	Monitor	53.2%	50.7%	51.6%	58.1%	57.1%	+3.9% pts	n/a
4C.8	Compliance with NCRS	Monitor	96.1%	97.2%	97.4%	97.6%	97.0%	+0.9% pts	-

Calls for Service: 999 and 101

999 calls have seen increases over the last two years. Reductions were seen in the 12 months to March 2021, but since the easing of restrictions, calls have increased by 21,000 in the latest quarter. Abandoned call rates for 999 remain extremely low.

Calls to the 101 non-emergency service have fallen during the year (-13.9%). Abandoned call rates for the 101 service, have been increasing steadily, the latest quarter saw a decrease when compared to the previous quarter but a small increase when compared to the previous 12 months.

Response Times within Target

Response times are now available from SAFE and have been updated. Response times for Grade 1 Rural and Grade 2 have seen increases in the current 12 month period when compared to the previous 12 month period, with the majority of calls being responded to within target times. These improvements are partly a reflection of better recording of State 6 on the SAFE system, and more officers being available to respond as a consequence of the officer uplift.

Compliance with NCRS

NCRS compliance remains strong due to the robust first contact and crime management processes in place, which has been maintained throughout Covid via agile working. With no noticeable drop in performance compliance is estimated to be in the region of 97%.

For Consideration	
Public/Non Public*	Public
Report to:	Joint Audit and Scrutiny Panel
Date of Meeting:	July 2021
Report of:	Caroline Henry Police and Crime Commissioner
Report Author:	Dan Howitt
E-mail:	Daniel.howitt13452@nottinghamshire.pnn.police.uk
Other Contacts:	N/A
Agenda Item:	11

POLICE AND CRIME COMMISSIONER'S UPDATE REPORT – 90 DAY PLAN

1. PURPOSE OF THE REPORT

This report provides the Joint Audit and Scrutiny Panel with an update on progress made by the Nottinghamshire Police and Crime Commissioner in developing and implementing her Police and Crime Plan objectives since taking office in May 2021. This is primarily focused on objectives set as part of the Commissioner's 90 Day Plan.

2. RECOMMENDATIONS

- 2.1 The Panel is invited to note the progress made to date - scrutinise the contents of this report, seek assurance on any specific areas of concern and request further information where required and within the scope of their role.

3. SEEKING VIEWS ON THE POLICE AND CRIME OBJECTIVES 2021-24

- 3.1 Commissioner Henry was formally elected on 8 May 2021 on a pledge to 'work tirelessly to tackle the problems that concern ordinary people across the county', to 'level up policing across the area' and to 'put the resources where they're going to achieve real results'. Central to that manifesto were core pledges to put residents at the heart of our policing priorities, strengthen the approach to crime prevention, enable the Chief Constable to increase front line offer numbers and improve the response to drug use and dealing and serious violence in our communities.
- 3.2 The Commissioner has set a vision to 'make Nottinghamshire one of the safest places to live and work' and outlined a number of provisional objectives which, subject to feedback from communities and key stakeholders, will set the structure and content of the police and crime plan for 2021-24. These include:-

PEOPLE, PREVENTION, RESOURCES AND JUSTICE

Putting victims and residents at the heart of our policing priorities by:-

- Listening to local communities and improving police and partnership responses to the issues of greatest community concern
- Continuing to improve services for victims of crime, particularly those with experience of domestic or sexual abuse
- Strengthening relationships between the police and local communities, particularly among young people and diverse communities.

Stopping crime before it happens and protecting people from harm by:-

- Developing and investing in crime prevention initiatives and early intervention approaches that deal with the causes rather than consequences of crime
- Building on the work of Nottinghamshire's Violence Reduction Unit and its partner agencies to further reduce knife crime and other serious violence
- Supporting further improvements in education and diversionary projects that steer young people away from crime.

Investing in policing and making the best use of our resources by:-

- Providing resources to increase police officer numbers and holding the Chief Constable to account for increasing the visibility and accessibility of those officers
- Ensuring that our resources are distributed fairly and equitably across Nottinghamshire on the basis of where they are needed most
- Ensuring that Nottinghamshire Police have the right skills, people and equipment to tackle the challenges of policing in the 21st Century

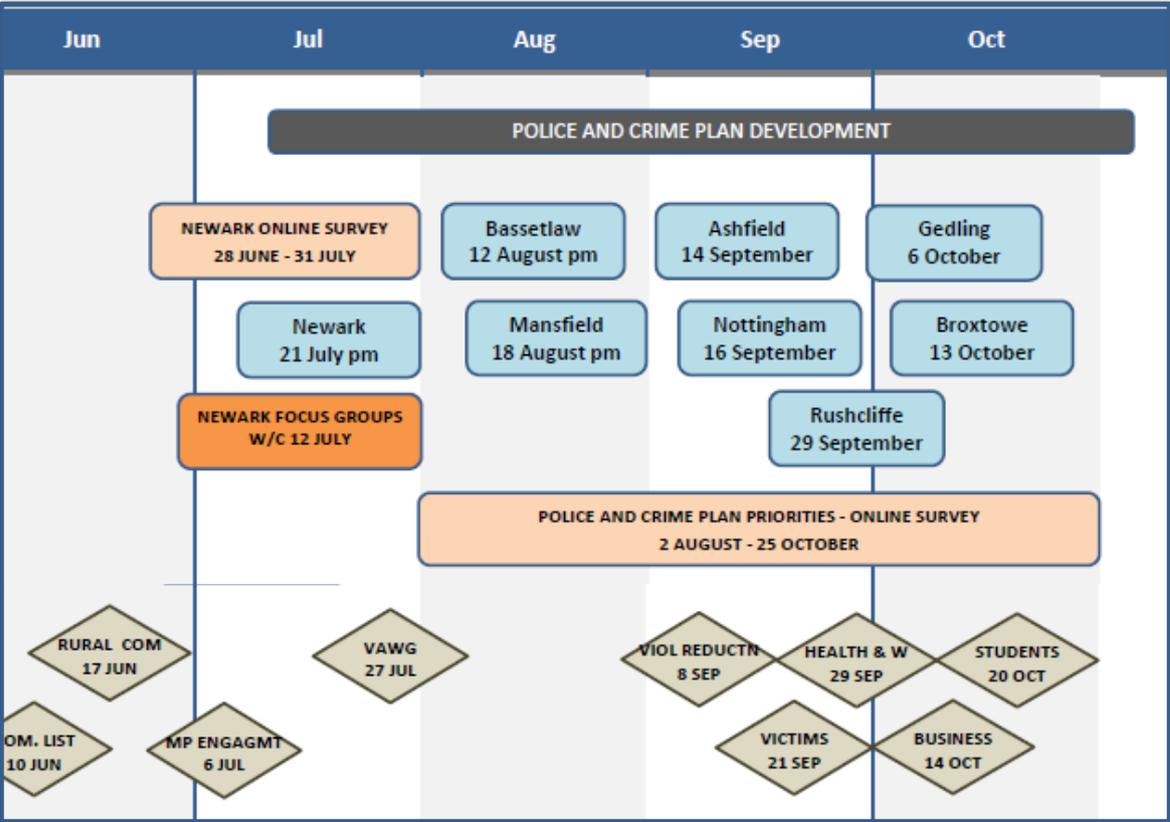
Reducing reoffending and bringing more offenders to justice by:-

- Working with partner agencies to tackle the drivers and impact of offending, particularly drug related crime and anti-social behaviour
- Working with the police and criminal justice partners to improve the efficiency and effectiveness of the CJS
- Working with local, regional and national partners to tackle and reduce the harm caused by serious and organised crime.

In delivering against these priorities, the Commissioner is also committed to fulfilling her wider cross-cutting responsibilities to:-

- Have regard to national priorities for policing set by the Home Secretary, which include terrorism, serious and organised crime, cyber-crime and child sexual exploitation
- Promote equal opportunities and community cohesion between diverse communities and work to eliminate discrimination, harassment and victimisation
- Safeguard and promote the welfare of children

- 3.3 Listening to the issues and concerns of local people is central to the Commissioner’s approach. As such, the Commissioner has committed to undertaking an extensive programme of listening events throughout the summer before finalising her plan in autumn 2021. The listening events aim to:-
- Raise awareness of the PCC role and proposed priorities
 - Seek the views of residents and stakeholders on the proposed priorities
 - Listen to and better understand the main crime, policing and community safety-related issues affecting local residents and stakeholders.
- 3.4 The Commissioner’s engagement programme will include a focus on diverse and harder to hear communities alongside ongoing work to better understand and address important concerns such as use of force and disproportionality in service outcomes.
- 3.5 A range of thematic stakeholder engagement events have also been scheduled during the June to October period which include priority themes such as violence against women and girls (VAWG), violence reduction, rural crime, victims, young people, students and the business community.



3.6 Commissioner Henry stated “I want everyone in Nottinghamshire to have had the opportunity to inform and influence the priorities our plan for policing. This is your police service, these will be your priorities. Wherever you live, I’ll always be listening to you”.

4. Taking Action: The Commissioner's 90 Day Plan

- 4.1 The Commissioner has set out a number of immediate actions that will be undertaken during her first 90 days in office – each of which is aligned to the proposed ambitions of her broader plan. Progress in achieving the ambitions of the 90 day plan will be reported to the September Police and Crime Panel.
- 4.2 The PCC is making significant progress in delivering against her 90 day plan, which has included:-
- 4.3 **Consultation in decision to re-locate Newark Police Station to a shared facility with Newark and Sherwood District Council:** The Commissioner has taken a multi-disciplinary approach to seeking the views of local residents on plans to relocate Newark Police Station to a shared facility. This has included:-
- An online public survey (28 June – 31 July 2021) promoted via social media channels which has reached over 37,700 individuals in the Newark area
 - Two focus groups (14 July 2021) commissioned to provide a more in depth insight into the views and perceptions of 24 local residents on the plans
 - A live-streamed community event (21/07/21) open to residents in person and via online social media channels. This provided an opportunity for residents to share and discuss their views on the proposals with the PCC, with representation from the Chief Constable and other local leaders.

The findings from this comprehensive engagement exercise will be used to inform plans for the future of Newark Police Station over the coming months.

- 4.4 **Digital consultation and engagement:** The Commissioner has piloted the use of social media based digital engagement techniques to better maximise visibility of and participation in OPCC consultation and engagement activity – including the Commissioner's Police and Crime Priorities consultation and the Newark engagement exercise. Lessons learned from this approach will be used to improve the reach and profile of future engagement activity and secure better value for money in delivering against this core statutory duty.
- 4.5 **Serious violence reduction:** The Commissioner is now Chair of the Violence Reduction Board which provides strategic leadership and coordination of serious violence reduction activity across the City and County. Commissioner Henry met with the Home Office, VRU and Grip teams in early June to discuss the continued reductions in knife crime across Nottinghamshire and the work planned by the VRU in partnership with the Force to continue this momentum. Key initiatives include hotspot policing, focussed deterrence on high risk individuals, provision of high quality youth work for those being impacted by violence, trauma informed approaches and supporting communities to build resilience.

Since being in post, the Commissioner has approved additional investment in the Next Gen Programme delivered by the Children's Society, which provides intensive support to young people with multiple complex needs who are at risk of, or already involved in serious violence. As part of this programme, the Children's Society are working in partnership with the VRU to identify and implement system change opportunities to reduce risk factors, specific to the education sector. The Commissioner has supported bids to the Home Office and Youth Endowment Fund to enable the augmentation of custody provision for 10 – 25 year olds in the City and County. Both bids are in the final stages, if successful, investment in custody based provision will increase by £2.25m over 4 years. This is expected to reduce the number of children and young people being first time entrants to the criminal justice system and will have a significant impact on recidivism rates. Funding announcements are expected imminently.

- 4.6 **Domestic and Sexual Violence Support:** Commissioner Henry has invested new Ministry of Justice funding of £1.8m into local domestic abuse and sexual violence support services. This includes family court support across the city and county, specialist counselling for domestic abuse and sexual violence survivors, FGM support and 17 new specialist Independent Domestic Violence Adviser (IDVA) and Independent Sexual Violence Adviser (ISVA) posts, many of which are for specific groups such as male survivors, BAME survivors and children and young people.
- 4.7 **Engaging Young People in crime prevention:** As Chair of the Strategic Violence Reduction Board, Commissioner Henry has approved the VRU's Youth Charter which has been produced by young people from the City and County to set out their vision and expectations for high quality youth work provision. The Commissioner met with VRU Community and Youth Ambassadors on 23rd July to discuss their role in supporting violence reduction as part of a public health approach in communities.
- 4.8 Commissioner Henry will launch of the second phase of the #stopviolence social media campaign in September 2021 which has been co-produced by young people impacted by serious violence and focuses on themes such as knife carrying, county lines, sexual exploitation and bullying. To date the campaign has reached over 395,000 young people in the City and County. The Commissioner is due to launch an innovative youth work programme which the VRU and National Youth Agency have collaborated on in recent months. The aim of the programme is to increase the quality standards of youth work for those working with our most at-risk young people. Young people have co-produced a Youth Charter which sets out their expectations and vision for youth work, it will reaffirm the commitment of the NOPCC, NNVRU and partners in the

statutory and third sector to improve outcomes for young people and support them in reaching their full potential.

- 4.9 The Commissioner has also awarded a grant to the Nottinghamshire Youth Commission to continue to undertake peer-led engagement with young people across Nottinghamshire in 2021/22. The youth Commission have developed plans to consult on the priorities of the police and crime plan, undertake youth engagement on opportunities for crime prevention and explore options for closer working with the Violence Reduction Unit.
- 4.10 **Identifying and securing funding opportunities:** The Commissioner's office has successfully secured £862k of Safer Streets Round 2 funding for work to tackle acquisitive crime in Nottingham and Mansfield. In addition, she intends to bid both for Safer Streets Round 3 funding in July 2021, which focuses on making public spaces safer for women and the Night Time Economy Fund expected to be launched at the end of June.
- 4.11 The VRU has submitted two bids for co-funding from the Youth Endowment Fund (YEF) and Home Office Serious Violence Intervention Fund for a total value of £3.8m. Funding will be confirmed at the end of June and if successful will provide 4 years of funding for provision to support children and young people in custody during a 'teachable moment'. The VRU is also exploring opportunities such as the MoJ Prison Leavers fund which is seeking innovative approaches to support resettlement of offenders, with bids due in August; and the Youth Endowment Fund "a supportive home", aiming to keep children safe from involvement in violence, particularly where children live in homes where there is conflict or domestic abuse, alcohol or substance misuse or where other family members are involved in crime.
- 4.12 **Reviewing opportunities to drive further efficiencies in in order to direct more resources to the front line:** The force continues to make good progress in driving efficiency challenges of £2.5m in 2021-22 with benefits being delivered via IT Systems, rationalisation of estates and the ongoing impact of changes to working practices as a result of Covid-19. Particular programmes of activity include the continuing review of fleet provision, implementing the new payroll/finance and HR systems and strategic programmes in relation to the National Enabling Programme (NEP), Digital Investigation Programme and Digital Public Contact.
- 4.13 Further efficiency savings of £2.7m are planned in 2022/23 which include savings in relation to MFSS (£0.5m), the HQ new build (£0.4m) and transport operation / financing (£0.4m). The current MTFP indicates that up to £9m efficiencies are likely to be realised by 2025-26. These plans allow the force to

achieve uplift and maintain the significantly increased frontline resourcing and to invest in service development in line with the PCC's aims

- 4.14 In July 2021, the Commissioner also announced the successful negotiation on the lease of Phoenix House in Mansfield which has led to savings of around £60k per year over the next 10 years. The savings will be reinvested into policing.
- 4.15 **Review of the OPCC structure and functions:** Commissioner Henry has agreed the scope and remit of an independent review of OPCC functions, roles and responsibilities, which will be commissioned during the summer and complete by autumn 2021. Work is underway to recruit to vacant posts strengthen capacity where needed in relation to Business Support, Executive Support, Contracts and Commissioning and Complaints. This will enable the OPCC to enhance its efficiency and effectiveness in these important areas. In May 2021, Commissioner Henry took the decision not to appoint a Deputy Commissioner until mandated to do so and not claim expense payments in her role. This is expected to save annual OPCC costs of over £78,000 per year.
- 4.16 **Tackling drug-related offending:** The Commissioner has given her support to use the Late Night Levy underspend to double the number of Operation GUARDIAN deployments in Nottingham city centre to two per month. The tactic is highly visible and demonstrably effective in reducing violence. The two commissioned substance misuse treatment providers, Clean Slate (Framework) in the City and Change Grow Live in the County, continue to work closely with Nottinghamshire Police, the courts and Nottinghamshire Probation Service to ensure that there is a direct route into treatment for those within the Criminal Justice system. The latest findings from the Commissioner's Police and Crime Survey show that the proportion of residents feeling that drug use and dealing is an issue in their area has continued to reduce over the last quarter alongside reductions in the frequency with which communities report experiencing the problem.
- 4.17 **Criminal justice:** The Commissioner has actively participated in the East Midlands Criminal Justice Board and highlighted key Criminal Justice-related issues and challenges facing Nottinghamshire among regional partners and MPs. The Commissioner also continues to receive 1:1 briefings from local criminal justice leads both within and external to the police force and is developing actions as part of her police and crime plan to support the delivery of more efficient and effective criminal justice services. The courts backlog remains the most critical issue of concern, however HMCTS, the Witness Care Unit and Victim Advocates report an improving picture.

5. Decisions

- 5.1 The Commissioner has the sole legal authority to make a decision as the result of a discussion or based on information provided to her by the public, partner organisations, members of staff from the Nottinghamshire Office of the Police and Crime Commissioner (NOPCC) or Chief Constable. The Commissioner's web site provides details of all significant public interest decisions.¹

6. Human Resources Implications

- 6.1 None - this is an information report.

7. Equality Implications

- 7.1 Equality assessment will be undertaken in respect of key decisions and activities taken forward as part of the police and crime plan and subsequent annual delivery plans.

8. Risk Management

- 8.1 Risks to performance are identified in the main body of the report together with information on how risks are being mitigated.

9. Policy Implications and links to the Police and Crime Plan Priorities

- 9.1 This report provides Members with an update on performance in respect of the Police and Crime Plan.

10. Changes in Legislation or other Legal Considerations

- 10.1 The OPCC undertakes routine horizon scanning in order to track emerging legislation, government publications, audits and inspection findings, significant consultations and relevant research findings. This is considered as part of the PCC's weekly briefing schedule in order to help inform local strategic planning and decision making.

11. Details of outcome of consultation

- 11.1 None – For information only

¹ <http://www.nottinghamshire.pcc.police.uk/Public-Information/Decisions/Decisions.aspx>

12. Appendices

A. None

13. Background Papers (relevant for Police and Crime Panel Only)

PCC 90 Day Plan – Live tracking document: To be presented to Police and Crime Panel in September 2021.

For any enquiries about this report please contact:

Kevin Dennis, Chief Executive of the Nottinghamshire Office of the Police and Crime Commissioner Kevin.dennis@nottinghamshire.pnn.police.uk
Tel: 0115 8445998

Dan Howitt, Head of Strategy and Assurance of the Nottinghamshire Office of the Police and Crime Commissioner daniel.howitt13452@nottinghamshire.pnn.police.uk
Tel: 0115 8445998

For Information	
Public/Non Public*	Public
Report to:	Joint Audit and Scrutiny Panel
Date of Meeting:	29 July 2021
Report of:	Police & Crime Commissioner
Report Author:	Business Support Manager
E-mail:	Katy.owen@nottinghamshire.pnn.police.uk
Other Contacts:	
Agenda Item:	12

*If Non Public, please state under which category number from the guidance in the space provided.

Publication Scheme Monitoring, Review and Assurance

1. Purpose of the Report

- 1.1 The purpose of this report is to provide the Joint Audit and Scrutiny Panel (the Panel) with assurance that the Nottinghamshire Office of the Police and Crime Commissioner is working in full compliance of the Freedom of Information (FOI) Act 2000 and The Elected Local Policing Bodies (Specified Information) Order 2011.
- 1.2 The FOI Act 2000 provides public access to information held by public authorities. It does this in two ways:
- Public authorities are obliged to publish certain information about their activities; and
 - Members of the public are entitled to request information from public authorities.
- 1.3 The Elected Local Policing Bodies (Specified Information) Order 2011 (“the 2011 Order”) specifies information which must be published by a Police and Crime Commissioner.¹

2. Recommendations

- 2.1 That the panel notes the report.

3. Reasons for Recommendations

- 3.1 The Panel have a responsibility to ensure that the Commissioner and Chief Constable discharge their legal obligations and responsibilities.
- 3.2 The public also hold Commissioners to account through being able to benchmark their performance and vote accordingly in elections. To help the public fulfil this role there are a number of separate pieces of information that Commissioners

¹ [Elected Local Policing Bodies \(Specified Information\) Order 2011](#)

must publish to comply with The Elected Local Policing Bodies (Specified Information) Order 2011 such as data on salaries and contracts.

- 3.3 The CoPaCC monitors police governance in the United Kingdom.
- 3.4 Each year the CoPaCC team undertakes a review of England and Wales Police and Crime Commissioners' compliance with The Elected Local Policing Bodies (Specified Information) Order 2011.
- 3.5 The Nottinghamshire Office of the Police and Crime Commissioner was awarded the OPCC Transparency Quality Mark every year between 2015 - 2019. Unfortunately, due to a delay with the audit on the 2018/19 accounts, the PCC was not awarded the Transparency Quality Mark in 2020.
- 3.6 Confirmation of the CoPaCC Transparency Quality Mark Award 2021 can be found via the Nottinghamshire Office of the Police & Crime Commissioner's website.

<https://policinginsight.com/news/transparency-twenty-seven-opccs-recognised-for-excellence/>

4. Summary of Key Points

- 4.1 The Office of the Police and Crime Commissioner received 25 requests for information between the period of 1 January – 30 June 2021. Details of the requests are published on the Police and Crime Commissioner's website.
- 4.2 92% of the requests for information were responded to within the 20 working day deadline.
- 4.3 The Office of the Police and Crime Commissioner is fully compliant with the Elected Local Policing Bodies (Specified Information) Order 2011. The information is detailed on the Police and Crime Commissioner's website via the follow website address:

<http://www.nottinghamshire.pcc.police.uk/Get-in-touch/Freedom-of-Information/Publication-Scheme.aspx>
- 4.4 The Order is reviewed by the Business Support Manager on at least a quarterly basis to ensure information is up to date and accurate.

5. Financial Implications and Budget Provision

- 5.1 None

6. Human Resources Implications

- 6.1 None

7. Equality Implications

7.1 None

8. Risk Management

8.1 None

9. Policy Implications and links to the Police and Crime Plan Priorities

9.1 None

10. Changes in Legislation or other Legal Considerations

10.1 None

11. Details of outcome of consultation

11.1 None

12. Appendices

12.1 None

13. Background Papers (relevant for Police and Crime Panel Only)

13. N/A

For Information	
Public/Non Public*	
Report to:	Audit and Scrutiny Panel
Date of Meeting:	29th July 2021
Report of:	Deputy Chief Constable
Report Author:	Pat Stocker – Information Management Lead
E-mail:	Pat.stocker@nottinghamshire.pnn.police.uk
Other Contacts:	lehan.fielding7194@nottinghamshire.pnn.police.uk
Agenda Item:	13 -

Force Report on Monitoring, Review and Assurance of the Publication Scheme January to May 2021

1. Purpose of the Report

1.1 The purpose of this report is to update the Audit & Scrutiny Meeting on the current Force position in relation to NPCC & ICO Publication Scheme requirements as listed within the relevant definition document.

1.2 **Appendix A** is an NPCC updated National Policing Guide to Police Publication Scheme Compliance document regarding force publication scheme compliance, this specifies the minimum forces should be publishing, and has been updated following consultation with the NPCC FOI Steering Group, this was received in Force in April 2021.

1.3 The guidance states:

Section 19 and 20 FOIA 2000 requires all forces to publish certain information as outlined in the Definitions Document for Police Forces and the subsequent Model Publication Scheme produced by the Information Commissioners Office.

This document seeks to add clarity to the definitions for the types of information required to be published and also ensures that each force has a corporate approach to the publications which reduces public confusion.

Forces are encouraged to publish more information than the minimum standards require whenever possible. Schemes are monitored by the ICO and non-compliance is likely to attract regulatory action.

Please note, information is not required to be published which:

- *Is not held by the force.*
- *Is exempt under the FOIA or EIR, or if it is prohibited by any other enactment.*
- *Is archived, out of date or otherwise inaccessible; or,*
- *To do so would be impractical or resource-intensive to prepare the material for routine release. **

**Not having resources to manage a publication scheme is not a defence to non-compliance. This exclusion is focussed on some of the types of information being too resource intensive, for example because they are stored in the wrong format and rendering them suitable for publication is an expensive process.*

2. Recommendations

- 2.1 The Audit & Scrutiny Meeting is asked to note the contents of this paper
- 2.2 A further paper will be provided to the Audit & Scrutiny Panel in Q1 2022 providing end of year metrics for both the Force Website and Publication Scheme compliance.

3. Reasons for Recommendations

- 3.1 To provide awareness of the current position of Nottinghamshire Police in terms of the Publication Scheme requirements

4. Summary of Key Points (this should include background information and options appraisal if applicable)

- 4.1 The purpose of the Publication Scheme is to let the public know what information is “readily available” from Nottinghamshire Police. By readily available we mean that the information is available on our website, can be obtained from us upon request by letter, e-mail or telephone call, can be purchased from us or can be found in another location e.g. PCC’s website or hard copy in a local library
- 4.2 Classes of information as defined in the 2021 NPCC Guidance document:

LAWFUL REQUIREMENT – WHAT THE ICO POLICE SECTOR DEFINITIONS DOCUMENT SAYS	MINIMUM STANDARDS TO ENSURE COMPLIANCE
Who We Are and What We Do	DPA issues are the largest consideration in this section. Staff should clearly understand via policies and procedures when their personal data may be placed in the public domain. Application of exemptions is case by case basis.
What We Spend and How We Spend It	All of the items listed may be subject to exemption/redaction to protect commercial and law enforcement interests where appropriate (e.g. purchase of covert equipment). PCC’s have statutory obligation to publish substantial amounts of financial information. Wherever possible the force should consider links to their website as an alternative to publishing.
What Our Priorities Are and How We Are Doing	Strategies and plans, performance indicators, audits, inspections and reviews
How We Make Decisions	Decision making process and records of decisions
Policies and Procedures	All policies should be suitable for publication on the force website. However, a case-by-case review of procedures must be undertaken to protect law enforcement and health and safety considerations

Lists and Registers	Applies to currently maintained lists and registers.
Services Provided by the Police Force	Information about the services provided by the police force, produced for the public and businesses.

- 4.3 We aim to publish as much information as possible about our work through the scheme, except where it would not be in the public interest to do so, for example, because it might prejudice law enforcement or the health and safety of our staff, or our ability to secure best value from local policing because information is commercially sensitive.
- 4.4 With the publication of this updated document we intend to pull together the work we are currently doing with our Corporate Communications Department on the Digital Public Contact Project (Single Online Home national project) including improvements to our FOI processes, to ensure that we meet the new guidance and improve our compliance with the Publication Scheme requirements.
- 4.5 We continue to publish FOI responses and monitor the Force Website traffic to inform of any areas of interest or concern and the latest website traffic figures are published below

Webpage stats for **Jan – May 2021**

Website area	Number of page views
Total page views	1,984,973
Your area	35,414
News and appeals	News: 1,019,469 Appeals: 44,268
Advice	98,455
Contact	36,152
Careers	181,589
About	4,954
Information	Landing page: 6,856 Data protection: 755 Freedom of information: 585

Figures represent total pageviews for each section with the exception of the about us page which is solely the landing page.

4 Financial Implications and Budget Provision

5.1 None

5 Human Resources Implications

6.1 None

6 Equality Implications

7.1 None

7 Risk Management

8.1 None

8 Policy Implications and links to the Police and Crime Plan Priorities

9.1 None

9 Changes in Legislation or other Legal Considerations

10.1 None

10 Details of outcome of consultation

10.7 No consultation took place when preparing this report

12. Appendices

12.1 **Appendix A:** NPCC National Policing Guide to Police Publication Scheme Compliance.

13. Background Papers (relevant for Police and Crime Panel Only)

13. None

NB See guidance on public access to meetings and information about meetings for guidance on non-public information and confidential information.

NATIONAL POLICING GUIDE TO POLICE PUBLICATION SCHEME COMPLIANCE V5.0

Commencing January 2021 onwards

Section 19 and 20 FOIA 2000 requires all forces to publish certain information as outlined in the [Definitions Document for Police Forces](#) and the subsequent [Model Publication Scheme](#) produced by the Information Commissioners Office.

This document seeks to add clarity to the definitions for the types of information required to be published and also ensures that each force has a corporate approach to the publications which reduces public confusion. Forces are encouraged to publish more information than the minimum standards require whenever possible. Schemes are monitored by the ICO and non compliance is likely to attract regulatory action.

Please note, information is not required to be published which:

- **Is not held by the force.**
- **Is exempt under the FOIA or EIR, or if it is prohibited by any other enactment.**
- **Is archived, out of date or otherwise inaccessible; or,**
- **To do so would be impractical or resource-intensive to prepare the material for routine release.***

*Not having resources to manage a publication scheme is not a defence to non compliance. This exclusion is focussed on some of the types of information being too resource intensive, for example because they are stored in the wrong format and rendering them suitable for publication is an expensive process.

LAWFUL REQUIREMENT – WHAT THE ICO POLICE SECTOR DEFINITIONS DOCUMENT SAYS	MINIMUM STANDARDS TO ENSURE COMPLIANCE	SCHEDULE	GUIDANCE NOTES
Who We Are and What We Do	DPA issues are the largest consideration in this section. Staff should clearly understand via policies and procedures when their personal data may be placed in the public domain. Application of exemptions is case by case basis.		
Force structure	Map of the force area with the ability to identify the geographical area covered by each Safer Neighbourhood Team. Do not include details of sensitive units		Provide a link to Police.UK which details maps of force areas, including neighbourhood.
	Organisational Chart showing Chief Officers areas of responsibility and the generic Department titles, e.g. Finance, ICT, Scientific/Forensic Services	Updated when changes occur	
	Officer and police staff approved establishment numbers at force level		Provide a link to Police Workforce
Profiles of Chief Officer, Deputy CC or Deputy Commissioner, Assistant CC or Assistant Commissioners & Divisional or Area Commanders.	Photograph and brief career outline. All senior officers down to head of BCU/OCU/Borough/Dept as per Force Structure above. Details of how they can be contacted must be included.	Updated within 3 months of changes occurring	Should be links within force structure to this information if possible.

Identity of senior civilian staff	<p>Senior police staff are defined as Heads of Department as listed in the force structure. Minimum details to include name, post title, brief outline of role and duties. This must include as a minimum HR, Legal Services, Finance, Corporate Communications, Estates and Facilities and Procurement or Equivalent Post.</p> <p>Any senior staff in a public facing role should have photographs published.</p> <p>Details of how they can be contacted must be included.</p> <p>Senior staff defined as all those earning over £58,200.</p>	Updated when changes occur	<p>PCC publish the job title, responsibilities and salary of each senior employee (and name if they consent) under The Elected Local Policing Bodies (Specified Information) Order 2011.</p> <p>Links to PCC information would save force publication.</p>
Location of police stations (including mobile units) and public opening hours	<p>Addresses and opening hours</p> <p>Mobile police stations – dates, times, location</p> <p>Surgeries and shared buildings.</p>	Updated when changes occur	Provide a link to Police.UK which shows a force map and forces station details..
Contact details	<ul style="list-style-type: none"> • Emergency and non-emergency telephone numbers • Text number for general enquiries • Email address for general enquiries • Postal Address for general enquiries • Social Media pages • Contact details for local Safer Neighbourhood Team (or equivalent) • How to report a crime • How to make a complaint • Firearms Licensing • Freedom of Information requests • Subject Access requests • Online reporting procedures 	All updated when changes occur	
Relationships with other authorities	<p>List the authorities/agencies, the force's relationship and where possible provide a link to a relevant web-site. Examples are:</p> <ul style="list-style-type: none"> • Crime & Disorder Reduction Partnerships • Crimestoppers • Local Criminal Justice Board • Local Safeguarding Childrens Boards • MAPP • Casualty Reduction Partnership • PCC 	Updated when changes occur	If terms of reference for the arrangements are produced, these should also be published.
Arrangements for special constables and civilian volunteers	Link to force's information/recruitment pages, including eligibility, training and how to apply.	Updated when changes occur	
Sponsorship arrangements with business	<p>Link to force policy on sponsorship arrangements (policies and procedures).</p> <p>List any private company who provides sponsorship, what that sponsorship entails, and its monetary value.</p>	Updated when changes occur	The Income Generation Guide provides the most up to date guidance available.

What We Spend and How We Spend It	All of the below may be subject to exemption/redaction to protect commercial and law enforcement interests where appropriate (e.g. purchase of covert equipment).		PCC's have statutory obligation to publish substantial amounts of financial information. Wherever possible the force should consider links to their website as an alternative to publishing.
Annual Statement of accounts	Copy of audited accounts*	Previous 3 financial years published within 3 months of being audited.	
Force budget (as agreed by PCC or Board)	Details of income and expenditure at force level, with information concerning any precept impact.	Current and previous 2 financial years	The PCC publish the forces budget and a link to this can be supplied.
Expenditure	<p>Details of expenditure over £500, including costs, supplier and transaction information (monthly).</p> <p>Care should be taken to ensure details of sensitive information is withheld, for example Special Branch or covert equipment.</p> <p>Guidance specifies this as monthly. However, PCC's publication is quarterly. Forces are strongly urged to consider whether producing monthly would be too resource intensive.</p>	Current and previous 2 financial years.	Link to PCC website who are required, via Specified Information Order to publish force spending over £500.
Procurement procedures	<p>Force policy and procedure on procurement (link to policies and procedures)</p> <p>Link to any sites where your force advertises contracts for tender (BLPD)</p>	Updated when changes occur	Link to any sites where your force advertises contracts for tender (BLPD)
Details of contracts currently being tendered (that exceed £10,000)	<p>Link to sites where your force advertises contracts for tender or framework solutions.</p> <p>Forces are required to publish contracts and invitations to tender when they exceed £10,000</p>	Current information provided	Provide a link to BLPD or relevant website used by your force.
Contracts.	<p>Publish contracts and invitations to tender that exceed £10,000. A list of those under £10,000 should also be published to include value, identity of parties and purpose of contract.</p> <p>PCC is obliged to publish: 'A copy of each contract with a value exceeding £10,000. A copy of each invitation to tender. A list of every contract with a value not exceeding £10,000 including the value of the contract, the identity of every other party to the contract and the purpose of the contract'</p>	Updated within 3 months of contract being awarded.	<p>A link to the PCC website, if published, would satisfy this requirement.</p> <p>Ensure any sensitive operational or commercial information is redacted in line with S31/43.</p>
Expenses paid to or incurred by the Chief Officer, Deputy and Assistant Chief Constables or Commissioners.	<p>All Chief Officers and Police Staff listed as Senior Police Staff. Senior police staff are defined as Heads of Department as listed in the force structure, and such it is considered suitable for them to be named.</p> <p>Only relates to personal spend when on official business. Will include amount</p>	Published quarterly – last four quarters to remain	<p>PCC is only required to publish their own expenses.</p> <p>Nothing should be published that endangers officers, such</p>

	<p>claimed for re-imbursement and spend on corporate credit card. Should be broken into categories headed: Travel (can be broken down by first class and general travel at forces discretion), Accommodation, and Subsistence.</p> <p>Should be total amount spent in each category by month with clear indication as to whether the published amounts include VAT.</p>		<p>as regular hotels stayed at or specific repetitive journeys.</p> <p>Any amounts repaid by the staff member should be clearly indicated</p>
Pay and Grading Structure.	<p>The figure of £58,200 is a reflection of the PCC Statutory Instrument requirements</p> <p>As a minimum, forces should publish salary (in £5k bands) and job title of all senior staff earning over £58,200. For all other police staff and officers' grades/ranks and salary scales should be published.</p> <p>A full list of allowances available such as housing, CRTP (even though these are being phased out), overnight, mutual aid, London weighting etc. should also be produced.</p> <p>Bonus payments or benefits such as vehicle allowance or healthcare provided to senior staff should also be provided.</p> <p>The 'pay multiple'-the ratio between the highest paid salary and the median average salary of the whole authorities workforce.</p>	Updated within 3 months of changes occurring	<p>Does not include overtime or allowances per person.</p> <p>Because it is regularly asked under FOI, forces should consider publishing the highest amount of overtime earned in any financial year.</p>
Evaluation of police use of resources.	Any reports additional to the Annual Statement of Accounts, evaluating how the force spends its budget, including formal evaluation of resources.	Reports covering the last 3 financial years	Link can be given to any HMIC reports.
Support for the provision of Police Community Support Officers	<p>Your annual budget and source for the funding of PCSOs.</p> <p>Home Office ring-fenced funding, local authority schemes where another agency, public body or private company have provided funding for the provision of PCSOs.</p>	Current and previous 2 financial years	
Financial regulations	List of regulations police forces are subject to. (Confer with Finance Depts.)		Consider link to PCC website
What Our Priorities Are and How We Are Doing	Strategies and plans, performance indicators, audits, inspections and reviews		
Strategic Plan	Force Strategic Plan/Business Plan	For current and previous 2 financial years	
Annual Policing Plan	Annual Policing Plan/Force Control Strategy		
Area Policing Plans	Policing plans/Control Strategies to OCU/BCU/Borough level.		
Chief officer's Annual Report	Chief Officer's Annual Report		
Police performance assessments	<p>Assessment of performance against the policing plan and performance indicators for current and 2 previous financial years.</p> <p>HMIC Reports</p>	<p>For current year, quarterly reports as soon as possible after completion</p> <p>For previous financial years,</p>	Link to force reports on HMIC website is recommended.

		the end-year assessment	
Police force statistics	Information and statistics that indicate force performance, used in is force management decision making, including crime statistics Link to Police.uk Link to Crime Statistics and ONS Crime in England and Wales Any other statistical information produced by the force that is suitable for public release.*	Current & previous 2 financial years. Current within 3 months of being produced.	Links to HO and other relevant bodies. Links to PCC website performance pages. Where numbers are low care must be taken not to identify individuals.
Neighbourhood policing arrangements	Links to Safer Neighbourhood Policing Teams areas of force website.	Updated as changes occur	
Reports from independent custody visitors	Copies of reports.	Current & previous 2 financial years.	Link to PCC website if published
Monitoring record of 'Stop and Account'	Statistical breakdown by district to include number of stops under PACE and ethnicity monitoring.	Minimum annually	Ensure publication of the use of terrorist related powers conforms with the currently agreed levels of disclosure
Data Protection Impact Assessments In full or summary format.	Copies of assessments should be provided	Current and previous 2 financial years.	Some content may be sensitive, i.e.may raise community tension or reveal personal data. Forces can redact accordingly or consider non publication of those that would be too resource intensive.
How We Make Decisions	Decision making process and records of decisions		
Agenda and minutes for the senior decision making committee	NPCC executive meetings and senior management team meetings of those departments listed in the organisational chart. Minutes from Neighbourhood Policing Team Meetings which highlight significant changes in Neighbourhood policing, For example . The above is the minimum required but forces are encouraged to publish as many meeting minutes as possible, where decisions are made that effect the public. Care should be taken to ensure any information that may damage the operation of policing are not revealed.	Current and 2 previous financial years. Within 3 months of being agreed at subsequent meetings.	Further guidance can be found on the ICO website Only open sessions should be published with agenda and existence of closed sessions included. Subsequent requests for these will be dealt with on a case by case basis.
Feedback from public consultation and surveys	Public opinion surveys, customer satisfaction surveys and any other public feedback reports. Published results should not include personal data.	Published as reports become available	

Policies and Procedures	All policies should be suitable for publication on the force website. However, a case-by-case review of procedures must be undertaken to protect law enforcement and health and safety considerations		
For the conduct of police force business For the provision of policing services	Policies are why we do things and procedures are how we do them. Policy and procedures falling into these three categories should be available, and published subject to any adverse impact on operational policing. This will include any developed in combination with other public authorities. Sensitive information should be removed before publishing, to allow for as much information to be published as possible. Force Equality Schemes and how forces handle requests for information, should published.	Updated within 3 months of changes occurring.	Links to The College of Policing APP can be considered Remember there is no requirement to show where redactions are, simply remove from the published article.
About recruitment and employment of staff	Information concerning the recruitment and employment of staff, i.e. recruitment pages, health and safety, conduct		Link to HR pages
Records management and personal data policies	Policies should include: Requirements under the Code of Practice for the Management of Police Information; Information Security; Records Retention, Destruction and Archiving; Data Protection Compliance and Data Sharing.	Updated within 3 months of changes.	
Fileplans-or any other business classification scheme used for the management of information.	There is no requirement to create information. If a fileplan exists then it should be published, subject to removal of any sensitive parts.		A fileplan is for the management of records. It is a records management tool which is referenced within section 9.3 of s46 FOIA Codes of Practice .
Customer service standards and complaint procedure	Forces should provide the following information: <ul style="list-style-type: none"> • How to Make a complaint. • What procedures will be followed. • How requests for information will be handled. • Response Times • Any survey or analysis of performance in this area. 	Updated as changes occur	Provide link to IPOC website.
Charging regime and policies	Any service for which the public are charged, including the rates and how they are calculated, e.g. road traffic collision reports, subject access requests, police officer interviews/statements, and any local charging regimes. Details regarding the charges in relation to the re-use of datasets should be laid out, including how this is calculated and whether the charge is made under the Re-use Fees regulations or under other legislation.	Updated as changes occur	Note, public authorities cannot charge a re-use fee if it makes the datasets available for re-use under the Open Government licence.
Lists and Registers	Applies to currently maintained lists and registers.		
Information held in registers by statute	Currently there are no registers that the police service is required to publish by statute.		
Asset registers	Copy of any current Asset Register.	Currently	Be aware of what PCC may

	<p>This relates to tangible physical assets excluding information. Some details may be sensitive and should obviously be removed.</p> <p>ICO expect details of buildings and land to be provided. Care should be taken to exclude sensitive sites.</p>	Maintained Registers only.	publish in relation to <£500/£10000.
Information asset register	<p>If in existence it should be published.</p> <p>If not any information which outlines the types of information held should be provided.</p>		<p>The IAR holds details of the assets, systems and applications used for processing or storing personal data across your organisation.</p> <p>ICO guidance is available</p>
CCTV	Location of any overt CCTV Cameras sites in public places operated by the force.	Updated as changes occur.	Only includes systems operated by force employees, not other systems the force may have access to. Does not include police buildings.
Register of interests	<p>The Force Register of Business Interests, to include the type of business and the number of staff registering this type of interest, but not to a level that would identify individuals.</p> <p>Do not include business names, locations, or staff names and use generic groupings/headings, e.g. children's entertainer, consultancy.</p>	Updated at least annually	Subsequent requests for more detail will need to be assessed on a case by case basis.
Register of gifts and hospitality (senior personnel)	<p>All persons whose expenses are published should be included in this section. Must include details of any gifts, given or received; details of any hospitality afforded and by which organisation. Gifts and hospitality decline should also be included.</p> <p>Forces should publish an entire force register with names removed and replaced by ranks or police staff grades for all non senior personnel.</p>	Updated at least annually	As per force policy definition of what constitutes a gift. If recorded in register it should be published.
FOI disclosure log	<p>Information provided in response to FOI and EIR requests should be available. Disclosure logs are considered as good practice.</p> <p>There is no requirement to publish full refusal notices. Information identifying the applicant should be removed.</p>	Updated at least quarterly and be for previous 2 years.	<p>A time delay of a minimum of five working days between sending a response to the applicant and publishing it, allows for any errors.</p> <p>However, uploading to sites such as WDTK does not allow this protection, therefore, responses must be thoroughly quality assured before publication to reduce the risk of inadvertent disclosure.</p>

Services Provided by the Police Force	Information about the services provided by the police force, produced for the public and businesses.		
Advice and guidance for the general public	This should include electronic versions of leaflets, guidance and newsletters produced for the public and/or local businesses.	Current up to date versions only.	
Firearms and explosives licensing, firearms dealers licensing, abnormal loads escort, keyholder services	How applications can be made for these services.	Updated as changes occur	
Police college or learning centre	Details of any external training provided		Provide link to College of Policing .
Ceremonial duties			
Museum			
Local campaigns	Details of campaigns such as drink drive or burglary reduction for example	Remove once campaign ended	
Details of the services for which the police force is entitled to recover a fee together with those fees.	Policing of events and the fees charged – link to ACPO policy and any local arrangements. Forces would be expected to publish details of events for which they have provided policing resources in excess of 300 officers, excluding VIP and Royalty protection, royal visits and security at sensitive locations such as military establishments. Would include community events such as football matches, fairs & fetes, processions.	Within 3 months of event completion and for previous 2 financial years.	

For Information	
Public/Non Public	Public
Report to:	Joint Audit and Scrutiny Panel (JASP)
Date of Meeting:	29th July 2021
Report of:	DCC Barber Charlie Radford, Chief Finance Officer OPCC
Report Author:	Laura Spinks
E-mail:	laura.spinks@nottinghamshire.pnn.police.uk
Other Contacts:	
Agenda Item:	14

Joint Audit and Scrutiny Panel Proposed Work Plan 2021

1. Purpose of the Report

- 1.1 The purpose of this report is to present the proposed work plan for the Joint Audit and Scrutiny Panel for 2021.

2. Recommendations

- 2.1 That Joint Audit and Scrutiny Panel members note the report and attached appendix and agree the contents.
- 2.2 That members of the Joint Audit and Scrutiny Panel note the key themes identified to accompany each of the Force Audit and Inspection reports.

3. Reasons for Recommendations

- 3.1 To enable the Panel to fulfil its scrutiny obligations with regard to Force activity.

4. Summary of Key Points

- 4.1 The proposed workplan has been discussed with members and prepared based on the business planning cycle for both the OPCC and Nottinghamshire Police.
- 4.3 The proposed Joint Audit and Scrutiny work plan has been prepared in consultation with the Chief Finance Officer in order to fulfil our statutory obligations with regards to reporting in these areas of business.

5. Financial Implications and Budget Provision

- 5.1 There are no financial / budget implications arising from this report.

6. Human Resources Implications

- 6.1 There are no direct HR implications as a result of this report.

7. Equality Implications

7.1 There are no direct HR implications as a result of this report. HR implications resulting from specific actions will be managed on a case by case basis.

8. Risk Management

8.1 There are no risk management issues arising from this report.

9. Policy Implications and links to the Police and Crime Plan Priorities

9.1 Any policy implications will be subject to current policy development process.

10. Changes in Legislation or other Legal Considerations

10.1 There are no direct legal implications as a result of this report.

11. Details of outcome of consultation

11.2 The proposed work plan has been produced in partnership between the Force and the OPCC.

12. Appendices

12.1 Appendix 1: Proposed Joint Audit and Scrutiny Work Programme

29 JULY 2021 at 2pm DRAFT ACCOUNTS MEETING			
	Statement of Accounts – Verbal Update	Annually	OPCC – Charlie Radford Force – Mark Kimberley
	Internal Audit Progress Report	Each Meeting	Mazars – Mark Lunn
	Update on actions from audits, inspections and reviews (Includes Internal audit, External Audit, HMICFRS, AGS improvements) Key theme for Force Audit Report – Victims Code	Each meeting	OPCC - as required Force – Laura Spinks
	OPCC Report on Compliance with Freedom of Information Requests and the Specified Information Order	6-Monthly	OPCC – Katy Owen
	Force Assurance Report on Compliance with Freedom of Information and Data Protection Requests	6-Monthly	Force – Pat Stocker
	Force Report on Monitoring, Review and Assurance of the Publication Scheme	6-Monthly	Force – Pat Stocker
	PCC Update Report	Each Meeting	OPCC – Phil Gilbert

30 SEPTEMBER 2021 at 10am TBC FINAL ACCOUNTS MEETING			
	Final Force Statement of Accounts 20/21	Force	Force – Mark Kimberley
	Final Group Statement of Accounts 20/21 (OPCC and Force AGS to be incorporated)	OPCC	OPCC – Charlie
	External Audit ISA260 Report	Annually	EY

	Internal Audit Progress Report	Each Meeting	Mazars – Mark Lunn
	External Audit Plan	Annually	EY

30 NOVEMBER 2021 at 10am CHAIR TOPIC

	Internal Audit Progress Report	Each Meeting	Mazars – Mark Lunn
	Summary set of Accounts for Publication	Annually	OPCC – Charlie Radford
	Review of OPCC Risk Management arrangements Review of Force Risk Management arrangements Key Theme for Risk – To be Advised	6-Monthly	OPCC – Kevin Dennis Force – Laura Spinks
	Update on actions from audits, inspections and reviews (Includes Internal audit, External Audit, HMICFRS, AGS improvements) Key theme for Force Audit Report – Health and Safety	Each meeting	OPCC - Where appropriate Force – Laura Spinks
	Annual Audit Letter – External Audit	Annually	Ernst and Young
	PCC Update Report	Each Meeting	OPCC – Phil Gilbert
	PCC Report on Complaints, Investigations, New and Open Cases	6-Monthly	Force – Lisa Gilmour
	Force Report on Complaints and Misconduct, Investigations, New and Open Cases	6-Monthly	Force – Supt PSD
	Force Report on IOPC Investigations, Recommendations and Actions	6-Monthly	Force – Supt PSD
	Force Report of Whistle Blowing and Anti-Fraud and Corruption Policies and Review of Compliance.	6-Monthly	Force – Supt PSD
	Draft JASP Work Plan for 2022/23	Annual	Force – Laura Spinks

Review of key areas to support Corporate Governance arrangements: *(review of requirements to be finalised and then prioritised. Areas to be identified for reports or internal audits and will be informed by assurance mapping)*

Sources of assurance to include:

- Effectiveness of partnerships
- Monitor the application of the pension schemes
- Review of delegated powers
- Review Register of Interests
- Financial Management/Financial Systems
- Legislative change
- Scheme of delegation
- Annual report from PSD on their activity - i.e. no of dismissals final letters and nature of the event
- By exception report on Insurance Claims covering Public Liability, Employer's Liability, Motor Liabilities including Costing and Lessons Learned
- By exception report on Outcomes of Public Finance Initiative Contracts