



JOINT AUDIT AND SCRUTINY PANEL

THURSDAY 9 MARCH 2017 at 2.00 PM
FORCE HEADQUARTERS, SHERWOOD LODGE, ARNOLD,
NOTTINGHAMSHIRE NG5 8PP

Membership
Stephen Charnock (Chair)
Leslie Ayoola
John Brooks
Peter McKay
Philip Hodgson

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 previous meeting held on 15 December 2016
4. Business Continuity Management Report 2016-17
5. Publication scheme monitoring, review and assurance
6. Nottinghamshire Police Information Management, FOI and Data Protection update
7. Strategic Risk Management Report for Force and NOPCC quarter 4 2016-17
8. Audit and Inspection Report quarter 4 2016-17
9. External Audit Plan 2016-17
10. Internal Audit Annual Plan 2017-18

11. Internal Audit Progress Report – covering report needed
12. The Big Red Button
13. Police and Crime Act 2017
14. Work plan and meeting schedule

NOTES

- Members of the **public are welcome to attend** to observe this meeting
- For **further information** on this agenda, please contact the Office of the Police and Crime Commissioner on 0115 9670999 extension 801 2005 or email nopcc@nottinghamshire.pnn.police.uk
- A **declaration of interest** could involve a private or financial matter which could be seen as having an influence on the decision being taken, such as having a family member who would be directly affected by the decision being taken, or being involved with the organisation the decision relates to. Contact the Democratic Services Officer: alison.fawley@nottscc.gov.uk for clarification or advice prior to the meeting.

NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER
County Hall, West Bridgford, Nottingham, NG2 7QP

MINUTES
OF THE MEETING OF THE
NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER
JOINT AUDIT & SCRUTINY PANEL
HELD ON THURSDAY 15 DECEMBER 2016
FORCE HEADQUARTERS, SHERWOOD LODGE,
ARNOLD, NOTTINGHAMSHIRE NG5 8PP
COMMENCING AT 2.00 PM

MEMBERSHIP

(A - denotes absent)

Mr Stephen Charnock (Chair)
Mr Leslie Ayoola
Mr John Brooks
A Dr Phil Hodgson
Mr Peter McKay

OFFICERS PRESENT

Charlotte Radford	Chief Finance Officer, OPCC
Sue Fish	T/Chief Constable, Notts. Police
Mark Lunn	Mazars
Brian Welch	Mazars
Simon Lacey	KPMG (External Audit)
Liz Rogers	T/DCI PSD Notts Police
Natalie Baker-Swift	Governance & Business Planning Manager
Mark Kimberley	Head of Finance, Notts Police
Alison Fawley	Democratic Services, Notts. County Council

1) APOLOGIES FOR ABSENCE

Apologies for absence were received from Philip Hodgson, Paddy Tipping & Andrew Cardoza.

2) **DECLARATIONS OF INTERESTS BY MEMBERS AND OFFICERS**

None.

3) **MINUTES OF THE PREVIOUS MEETING**

The minutes of the last meeting held on 15 September 2016, having been circulated to all Members, were taken as read and were confirmed, subject to the following amendments, and were signed by the Chair:

- Peter McKay had declared an interest in item 10 Public Finance Initiative Contracts
- The Panel work plan and meeting schedule to be renumbered as item 16.

4) **FORCE IMPROVEMENT ACTIVITY**

Liz Rogers introduced the report which informed Panel Members of force improvement activity, lessons learned monitoring, and the response of the organisation to IPCC bulletins during the period April – September 2016.

Since the last reporting period no new strategic organisation learning points had been identified within PSD. Learning the Lessons Bulletin 27(appendix 1) had two key points of learning relevant to Nottinghamshire which had been shared with the relevant departments and were under consideration.

During discussion the following point was made:

- Learning was monitored and captured on the Centurion database and outcomes used to inform and track individual and team learning. It was difficult to use the system to quantify learning impact but improvements were noticeable in other areas for example a reduction in the number of complaints due to keeping victims better informed.

RESOLVED 2016/027

That the report be noted.

5) **IPCC INVESTIGATIONS**

Liz Rogers introduced the report which informed Panel Members in respect of complaint and conduct matters referred by Nottinghamshire Police to the IPCC with the relevant recommendations and actions for the period 1 April – 30 September 2016. An amendment was made to the finalised table to show that the correct number of finalised cases was 10. Twenty five cases had been referred to the IPCC during the period which was a reduction of 29% compared to the previous period.

During discussions the following points were raised:

- Mandatory referrals were to ensure absolute transparency and that the action by the officer was correct in the circumstances.
- Panel Members requested that more detail be given for the cases classified as miscellaneous.
- It would be helpful to know how many cases were carried over from the previous reporting period so that the actual number of open cases was known rather than the number of new cases.
- Compared to other forces nationally, Nottinghamshire do well regarding timescales for dealing with complaints. It was explained that difficulties occurred if other agencies were involved, for example CPS.

RESOLVED 2016/028

That the Panel had received assurance of the processes in place relating to IPCC investigations as detailed in the report.

6) PROFESSIONAL STANDARDS AND CONFIDENTIAL REPORTING PROCEDURE

Natalie Baker-Swift introduced the report which informed the Panel about the Professional Standards Confidential Reporting Procedure and outlined how the organisation in general and the Professional Standards Directorate (PSD) managed and dealt with members of staff who made reports concerning breaches of Professional Standards and in particular how they would be provided with support and confidentiality when appropriate and necessary.

During the period 1 April – 31 October 2016 49 referrals were made to the Counter Corruption Unit (CCU) through the Force's confidential reporting system which included Integrity Messenger, a digital reporting platform that allowed two way communication and preserved the anonymity of the person reporting and enabled rapport and confidence to be built and also a confidential telephone reporting system maintained by CCU and available to staff and officers. Some anonymous written communication was also received.

All referrals have been the subject of investigation and or immediate intervention,

RESOLVED 2016/029

That the Panel received assurance for the processes in place relating to confidential reporting as detailed in the report.

7) ASSURANCE MAPPING QUARTER 3

Natalie Baker-Swift introduced the report which provided the Panel with a dashboard view of assurance levels against potential risk to the achievement of Force objectives for quarter 3 2016-17.

The new approach had been agreed at the Force Executive Board (FEB) in January 2016 and provided a three lines of defence approach for assessing

risk. Assurance maps would be reviewed biannually and reported to the FEB and the Audit and Scrutiny Panel.

During discussion the following points were made:

- The new assurance maps were felt to be more focused and a useful tool that could be used to develop the Panel's agenda in future.
- A workshop session would be arranged for Panel members to look at the concept in more detail and provide training in how to use the tool to identify particular aims.
- Internal Audit and External Audit were supportive of the new approach.

RESOLVED 2016/030

- 1) That the levels of assurance against potential risks to the achievement of Force objectives as out lined in Appendix 1 to the report, be noted.
- 2) That the Panel considered recommendations concerning the future application of assurance mapping.

8) CORPORATE RISK MANAGEMENT POLICY AND PROCEDURE AND GOVERNANCE

Natalie Baker-Swift presented the Corporate Risk Management Policy and Procedure and outlined the strengthened governance arrangements around anticipating, capturing, reporting and managing organisational risks.

The policy was a simpler version of risk management and was more in line with that of other forces, particularly those in the tri force collaboration.

During discussions the following points were made:

- The new policy was still a work in progress but had been introduced as the previous policy was no longer fit for purpose.
- The policy would be developed so that strategies were in place for both risk and opportunity.
- The policy would balance between good governance and control whilst ensuring accountability.
- There was still work to do to ensure consistency across collaborations.

RESOLVED 2016/031

- 1) That the new Corporate Risk Management Policy and Procedure as detailed in Appendices 1 & 2 to the report, be noted.
- 2) That the strengthened governance arrangements as detailed in appendices C, D & E to the report be acknowledged.
- 3) That the addition of risk into the terms of reference of the Force Performance Board as outlined in appendix F to the report, be noted.
- 4) That the creation of a Force Organisational Risk and Learning Board and terms of reference as outlined in appendix G to the report, be noted.

9) EXTERNAL AUDIT – ANNUAL AUDIT LETTER 2015-16

Simon Lacey introduced the report which provided members with a copy of the Annual Audit Letter – the final stage in the Statement of Accounts 2015-16 process.

Mr Lacey confirmed that an unqualified conclusion had been issued for the Police and Crime Commissioner and the Chief Constable's arrangements to secure value for money. The Auditors had also issued an unqualified opinion on 29 September 2016 for the 2015-16 financial statements.

RESOLVED 2016/032

That the External Annual Audit Letter be recommended to the Police and Crime Commissioner and Chief Constable for approval.

10) AUDIT & INSPECTION REPORT QUARTER 2

Natalie Baker-Swift introduced the report which provided the Panel with an update on progress against recommendations arising from audits and inspections that had taken place during quarter two, 2016-17.

During discussions the following points were raised:

- The Panel requested that the report for appendix 2 be revised so that the information is presented in a more compact format.
- The backlog of work had been cleared.
- There were a number of actions with a target completion date of 31 December 2016 and Mrs Baker-Swift reported that at the time of writing the report she was comfortable with achieving the deadline and that no significant changes to this.

RESOLVED 2016/033

- 1) That the progress made against audit and inspection recommendations be noted.
- 2) That details of forthcoming audits and inspections be noted.

11) INTERNAL AUDIT PROGRESS REPORTS

Brian Welch introduced the report which provided the Panel with an update on progress made against the Internal Audit Plan for 2016-17 and the findings from audits completed to date. He also provided Members with an overview of activity undertaken to verify implementation of audit recommendations made as a result of 2015-16 audits.

During discussions the following points were raised:

- The status of the core financial systems audit had changed to final since the report had been written which brought the total of completed audits to five. A satisfactory opinion had been issued although there were still issues with MFS.
- Five collaborative audits would be undertaken in 2016-17 and the terms of reference were the same across the collaborations.
- A draft report on the effectiveness of the Audit & Scrutiny Panel had been released.

RESOLVED 2016/034

That the Panel had received assurance from the audits being undertaken and planned.

12) PANEL WORK PLAN AND MEETING SCHEDULE

The meeting schedule and work plan was discussed. Panel members were concerned that some finance items appeared to be missing from the agenda. Charlie Radford explained that she had issues with the new work plan and agreed to discuss with Kevin Dennis. The Chair requested that the programme be reviewed in line with assurance mapping.

RESOLVED: 2016/035

That the report be noted subject to a review of the detail of the work programme.

The Chair thanked Mrs Fish for her contributions to the Audit & Scrutiny Panel and wished her well for her retirement.

The meeting closed at 4.15pm

CHAIR

For Information	
Public/Non Public*	Public
Report to:	Joint Audit & Scrutiny Panel
Date of Meeting:	9th March 2017
Report of:	DCC
Report Author:	Andrew Burton, Risk and Business Continuity Officer
E-mail:	andrew.burton16158@nottinghamshire.pnn.police.uk
Other Contacts:	Natalie Baker – Swift, Corporate Governance & Business Planning Manager & Amanda Froggatt, Risk and Business Continuity Officer
Agenda Item:	04

BUSINESS CONTINUITY MANAGEMENT REPORT (2016/17)

1. Purpose of the Report

- 1.1 Present to the Audit and Scrutiny Panel a current update on the Force Business Continuity Planning process.
- 1.2 Inform the Panel that the Force Critical Functions are to be revised in line with the current risk environment.
- 1.3 Identify to the Panel that the Force Strategy, Departmental Template together with a formalised means by which critical functions are identified, along with supporting documentation have been revised and updated and are currently out for consultation
- 1.4 Reassure that the proposed approach incorporates effective guidance and governance arrangements recognising and incorporating regional/national good practice.
- 1.5 Taking account of the regional approach to Business Continuity give reassurance that the proposed approach will dovetail with any future regional collaboration in the tri Force programme.

2. Recommendations

- 2.1 That the Panel notes the proposed new business continuity approach within the Force and receives assurance as to the effectiveness of those arrangements and future plans for improvement.

3. Reasons for Recommendations

- 3.1 The existing Business Continuity approach and process are in need of revision to address and reflect the current risk landscape.
- 3.2 An efficient and effective risk / Business Continuity approach will enable the Force to be better equipped to deal with the disruption of Critical Functions.

- 3.3 To identify the time frame and resources required to enable Critical Functions to be recovered.
- 3.4 To identify any interdependencies, internally and externally that impact on Force Critical Functions ensuring that Contingency Plans are exercised and in place to address any potential disruption.
- 3.5 Improved governance arrangements will allow the Chief Officer Team, OPCC and other external bodies together with the public to be provided with assurance that Business Continuity is being managed effectively within the Force.

4. Summary of Key Points

- 4.1 The Policy and Procedure have been developed, taking account of consultation with internal and external colleagues who are involved in aspects of Business Continuity. They have also been drafted to meet the requirements of ISO BS22301 a recognised standard to identify and manage Business Continuity.
- 4.2 The revised documentation will enable the introduction of a more formalised review process and clarification of roles and responsibilities.
- 4.3 Key elements of the new Policy are:
 - To clearly identify Thematic and Departmental Critical Functions.
 - Ensure disruption preventative measures are embedded and tested.
 - To manage the consequence of any disruption.
 - To ensure continuation of Critical Functions.
 - Identify timescales and recovery levels in which they are to be recovered.
 - Identify roles and responsibilities of Business Continuity owners and managers, including identification of the Deputy Chief Constable as the owner of the policy.
 - To manage the return to normality, through where applicable, an identified Business Continuity Recovery Team.
- 4.4 Key elements of the revised Procedure are:
 - The use of an agreed Force wide Business Continuity template to apply to all appropriate Business areas of the Force.
 - Clearly defined stages in the Business Continuity process when Critical Functions are interrupted through loss of:
 - Staff
 - Accommodation
 - IT Systems
 - Communication
 - Vehicles
 - Stakeholders

- 4.5 It will result in Identified, documented and tested Business Contingency plans to address where Critical functions have been interrupted.
- 4.6 Key elements of the new governance arrangements include:
- 4.7 Identified Single Point of Contact (SPOC's) for each aspect of the business area together with establishing a:-

4.8 **Force Business Continuity Board (FBCB)**

The Board will:

Act as the governance body for all Business Continuity related issues.

- Approving strategies or plans produced on behalf of the FBCB.
- Achieving the Business Continuity objectives of the Force.
- Consider Business Continuity issues raised by the Force Business Continuity Coordinator.
- Monitoring and responding to changes in statutory requirements, minimum standards set by authoritative bodies and identified good practice.

The Chair of the FBCB will be the Deputy Chief Constable (DCC) or other person appointed by them.

Membership of the FBCB is decided by the DCC. It will include representatives of all Departments / Business Units who require planned Business Continuity arrangements including representatives from strategic partners where deemed appropriate. This Board to initially meet quarterly and then as directed by the DCC.

4.9 **Proposed Force Critical Functions (Business Continuity)**

- To maintain effective communications with the public
- To receive and respond to Emergency Calls providing an appropriate response to immediate incidents prioritising those at greatest risk due to vulnerability
- To continue to effectively investigate crime ensuring vulnerable individuals are quickly identified and receive a response appropriate to their needs
- Maintain the ability to deal with:
 - Major, Critical and Emergency Incidents
 - Serious Crime
 - Firearms Incidents
 - Serious Public Order
 - Fatal and Serious Road Traffic Collisions
- Ensure the health, safety & well-being of staff through the provision of effective training, equipment, support and governance to deal with operational challenges.

- To provide effective custody facilities and Critical Case Progression
- To deal effectively with all matters which impact upon community cohesion, or the credibility and reputation of the Force
- To provide effective command and control of incidents

Key documentation has been circulated to Heads of Department throughout the Force together with the Office of Police and Crime Commissioner (OPCC) in a period of consultation that concluded on the 8th February. SPOC's for each area have been identified, ensuring the updating and testing of the Plans on a regular basis co-ordinated by the Force Business Continuity Officer. Engagement has been made with Regional Forces and identified national good practice (South Yorkshire) to inform the approach

No testing of the Business Continuity Plans has been completed since the last report to the Audit Committee. Once the plans have been agreed, testing and exercising of the plans and approach will commence

5 Financial Implications and Budget Provision
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- 5.1 There are no direct financial implications associated with business continuity management within the Force. However, if the Force wishes to provide basic business continuity training to specific individuals the typical cost of introductory training is likely to be around £1,400.

6 Human Resources Implications

- 6.1 Professional support for Business Continuity Management is provided by one FTE (2 people) who also have the Risk portfolio and are based within Corporate Development
- 6.2 General responsibility for business continuity management forms an integral part of the job descriptions of individuals managing critical functions within the Force.

7 Equality Implications

- 7.1 There are no known equality implications associated with the implementation of business continuity management within the Force.

8 Risk Management

- 8.1 Business continuity management is closely linked to the management of risk. Whilst the Force will maintain business continuity plans for its critical functions in order to meet its statutory obligations, an awareness and assessment of current risks will enable those plans to take account of changing circumstances and will therefore lead to better and more effective business continuity plans.

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

- 9.1 See Section 4 above for an overview of current policy and proposed changes relating to business continuity management.
- 9.1.1 There is no specific reference to business continuity management in the Police and Crime Plan, although continuation of Critical Functions at a time of disruption is vital in achieving any objective

10 Changes in Legislation or other Legal Considerations

- 10.1 The Civil Contingencies Act 2004 places a statutory duty on all Category 1 responders (which includes the police) to maintain plans to ensure they continue to perform their functions in the event of an emergency, so far as is reasonably practicable. An emergency is defined as an event that threatens serious damage to human welfare, the environment or the security of a place in the United Kingdom. The qualification “so far as is reasonably practicable” means that in practice the Force is required to maintain plans for the continuity of its most critical functions to an acceptable level.
- 10.2 A review of the Force’s monthly Horizon Summary report has not identified any forthcoming changes in legislation that would affect current business continuity management arrangements.

11 Details of outcome of consultation

Consultation as detailed was completed on the 8th February 2017. The documentation has been revised where appropriate in light of this consultation before completion and submission of the documents.

12. Appendices

- Appendix 1: Business Continuity Departmental Plan Format
- Appendix 2: Business Impact Analysis (BIA)
- Appendix 3: Business Continuity Completion Guide
- Appendix 4: Business Continuity – Roles and Responsibilities
- Appendix 5: Business Continuity Strategy
- Appendix 6: Force Continuity Board Terms of Reference

BUSINESS CONTINUITY PLAN

Enter Department / Directorate Name
Enter Section name

Force Critical Functions

The Force has 8 Critical Functions which must be maintained:

- To maintain effective communications with the public
- To receive and respond to Emergency Calls providing an appropriate response to immediate incidents prioritising those at greatest risk due to vulnerability
- To continue to effectively investigate crime ensuring vulnerable individuals are quickly identified and receive a response appropriate to their needs
- Maintain the ability to deal with:
 - Major, Critical and Emergency Incidents
 - Serious Crime
 - Firearms Incidents
 - Serious Public Order
 - Fatal and Serious Road Traffic Collisions
- Ensure the health, safety & well-being of staff through the provision of effective training, equipment, support and governance to deal with operational challenges.
- To provide effective custody facilities and Critical Case Progression
- To deal effectively with all matters which impact upon community cohesion, or the credibility and reputation of the Force
- To provide effective command and control of incidents

Official

Plan details	
Plan Owner	
Plan Manager	
Plan Writer	
Date agreed by owner	
Version number	

See Business Continuity Management – Roles and Responsibilities

Plan review details			
Review period	6 Monthly		Annually
Date of next review			

Corporate Services review details	
Date to Business Continuity Manager	
Date reviewed by BCM	

All staff undertaking activities identified must be informed of this Business Continuity Plan. The document signatory is also responsible for exercising this plan to confirm that it is still fit for purpose. The Force Business Continuity Manager shall be informed of these exercises and any changes to the current plan in order to maintain a log to comply with the Civil Contingencies Act 2004.

Revision History

Version	Summary of Change	Changes made by	Date

Exercise History

Exercise date	Location	Type and nature of exercise	Date of debrief

Activation History

Date	Location	Type and nature of incident	Date of debrief

Storage of plans

Location
<p style="text-align: center;">Plan distribution list</p> <p style="text-align: center;">All – web link - detail Dept. /Business lead – Hard Copy BCM Coordinator – Emergency Planning Office Off-site hard copy – Secure Files</p>

Crisis Management Team Core Members

Department Name

Role	Position	Contact No.
Business Continuity Plan Owner Crisis Management Team Leader		
Deputy Crisis Management Team Leader Departmental Single Point of Contact (SPOC)		
CMT member		
CMT member		

See Initial response Check sheet Appendices A

See Business Continuity Management – Roles and Responsibilities

Once this plan is invoked the unit/department manager must ensure that a log is kept of any decisions made or actions taken.

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Appendices

- 1 Further Actions – SPOF identified and mitigation
- 2 Initial Response Check list
- 3 Business Continuity – Roles and Responsibilities

**About the Department
Section 1**

Department role

Staff resources day to day			
Police Officers		Police Staff	
Chief Inspector above		Managers	
Inspector		Staff	
Sergeant			
Constable			
Department core hours			

SECTION 1

Plan Introduction and Overview

1.1 Introduction

This Business Continuity plan was developed by the Force Business Continuity Coordinator in line with BS22301 and offers the required level of flexibility to allow the <Department> to develop a plan tailored to their own specific needs.

It sets out the basis for the co-ordinated and managed resumption, within acceptable recovery timeframes, of the Departments Critical Functions at <Location> and the tasks and actions to be undertaken.

It focuses on the recovery of the Critical Functions that were identified during the Business Impact Analysis undertaken for the Department.

It identifies the prioritisation for recovery of the Departments Critical Functions, the resources that they need and within what time frames they will be required.

1.2 Scope

The plan has been drawn up to deal with the disruption of Critical Functions caused by the loss of <Location> or other major incidents affecting the operations within that area. The tasks and actions are designed to restore the Critical Functions to an acceptable level of operation.

It considers short, medium and long-term strategies for recovering the Critical Functions according to agreed prioritisation and recovery time objectives, and communications with Stakeholders, service providers and suppliers during the period of business interruption.

It also identifies Single Points of Failure (SPOF), where there are no alternatives with a single supplier supplying goods and or services which are relied on to provide critical functions.

Finally, it considers the resumption of all other activities over time, Identifying the potential need to activate a Business Continuity Management (BCM) Recovery Team. This team would assess not only the impact on the immediate Department but also implications on the wider environment pulling together key departments to ensure sustained focused recovery.

It contains advice on how to:

- Activate this Business Continuity Plan
- Facilitate the decision-making process following an Incident alert or notification
- Analyse the impact of the incident at the time
- Recover the Critical Functions
- Relocate staff where necessary and set-up appropriate recovery facilities
- Manage the resources and equipment requirements necessary to recover all of the Departments Critical Functions over time, from the initial interruption through to the return to normal business.

To explore Departmental Business Continuity Plan Core Objectives and;

- To identify critical activities performed by the business area

- Ensure preventative measures are embedded and tested
- To manage the disruption
- To manage the consequence of any disruption
- To ensure continuation of Critical Activities.
- Identify timescales in which they are to be recovered
- The recovery levels needed for each critical activity
- The threshold/trigger for activation of the plan
- To manage a return to normality
- To ensure re-examination and updates to Departmental Business Continuity Plans following any crisis

1.3 Purpose

The primary objective of this plan is to manage the loss that may occur to the Critical Functions performed by <Department> at <Location> during any period of disruption.

1.4 When to Activate the BCM Plan

The trigger for the activation of this plan will be an incident which causes one or more of the following:

- Total or partial loss of the workplace
- Total or partial loss of personnel
- Total or partial loss of electrical power, computer systems, telephony or other resource, with no reasonable expectation of it being restored in the short term.

Any member of staff who reasonably believes that an incident has occurred whereby any of the trigger points shown above have, or are likely to occur, shall immediately notify their supervisor and / or the Force Incident Manager (FIM).

1.5 How to Activate the BCM Plan

This plan can be activated in one of two ways:

By a supervisor, or a member of the Department Management Team that has been affected by the incident.

By the Force Incident Manager, following consultation with a staff member in the absence of their supervisor, Management Team member, or Critical Incident Manager.

1.6 Activation during Working Hours.

The supervisor discovering, or receiving notification of the incident has the authority to activate the BCM plan immediately.

Where circumstances allow, the supervisor should immediately notify their Manager or other member of their Management Team, the Force Incident Manager and where appropriate the Critical Incident Manager, of the plans activation.

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If not already done, they will then consider activation of the plan and the setting up of the BCM Recovery Team.

Where applicable, the Silver or Gold Commander will be informed of the activation of the plan(s) and where appropriate, the mobilisation of the BCM Recovery Team(s).

1.7 Activation Out of Working Hours.

The supervisor discovering, or receiving notification of the incident has the authority to activate the BCM plan immediately.

Where circumstances allow, the supervisor should notify the Force Incident Manager and where appropriate the Critical Incident Manager, of the plans activation.

If not already done, they will then consider activation of the plan and the setting up of the BCM Recovery Team.

Where applicable, the Silver or Gold Commander will be informed of the activation of the plan(s), and the mobilisation of the BCM Recovery Team(s).

1.8 Activation of BCM Recovery Team

Where an incident has occurred that is likely to have an impact on the ability of a Department to deliver its Critical Functions, in addition to activating the BCM Plan, it may be necessary to initiate the BCM Recovery Team.

Every Department should have established a BCM Recovery Team.

Details of the team members responsible for this Department can be found at Section 3 below (Fig 1.0)

Remember:

It is far better to activate the BCM Recovery Team to monitor an incident and then if necessary stand them down, rather than take no action at all and lose valuable recovery time.

SECTION 2 – RESOURCES

ALL SECTIONS TO BE COMPLETED

2.1 Critical Functions

The Critical Functions identified for this Department are listed below in Priority order.

Critical Functions Priority List

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
1					

Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
2					

Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
3					

Minimum Service Required

No	Departmental critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month

Official

4					
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Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
5					

Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
6					

Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
7					

Minimum Service Required

No	Departmental Critical Function	Immediate 24 Hours	1 Day – 1 Week	1 Week - 1 Month	Beyond 1 Month
8					

Minimum Service Required

2.2 Staff Activation List

ALL staff will be contacted and kept informed of the situation. To enable information to be passed to them out of hours, managers need to have a contact system in place so that they can effectively cascade information.

The Business Impact Analysis process has identified the minimum level of service required to ensure that Critical Functions for this Department can be maintained.

To ensure that the minimum levels of service are maintained, a 'TIERED STAFF TEAM' system will be employed. The call out of staff should be prioritised in accordance with their individual role in supporting Critical Functions and their respective recovery times.

<u>Staff Team</u>	<u>Colour Code</u>	<u>Recovery Time Objective</u>
A		1hr-1Day
B		1Day-1Week
C		1Week -1Month
D		Beyond a Month

'A' Team

<u>Name</u>	<u>Contact Number</u>	<u>Skills Required</u>

Police Officers	Total Required	Skills Required
Chief Insp. & Above		
Inspector		
Sergeant		
Constable		
Police Support Staff		
Managers		
Staff		
PCSO		

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'B' Team

<u>Name</u>	<u>Contact Number</u>	<u>Skills Required</u>

Police Officers	Total Required	Skills Required
Chief Insp. & Above		
Inspector		
Sergeant		
Constable		
Police Support Staff		
Managers		
Staff		
PCSO		

'C' Team

<u>Name</u>	<u>Contact Number</u>	<u>Skills Required</u>

Police Officers	Total Required	Skills Required
Chief Insp. & Above		
Inspector		

Official

Sergeant Constable		
Police Support Staff		
Managers		
Staff		
PCSO		

'D' Team

<u>Name</u>	<u>Contact Number</u>	<u>Skills Required</u>

Police Officers	Total Required	Skills Required
Chief Insp. & Above		
Inspector		
Sergeant Constable		
Police Support Staff		
Managers		
Staff		
PCSO		

<u>STAFF</u> <u>Contingencies / Alternative Options</u>
<p>'A' Team</p> <p>This is a free type box for you to include any contingencies that you may have, to deal with the situation where the minimum number of staff required are not available. For example, this could include the use of staff from other Departments who possess the relevant skills, or allowing part of a function to be carried out temporarily by another Department, or an outside organisation.</p>

Official

'B' Team
C 'Team'
'D' Team

2.3 Alternative Accommodation (1)

In the event that the Department's usual place of work is not available, all staff will be given the details during initial contact, of the building they are to report to, together with any travel or access restrictions that may apply.

Alternative Location: 1
Building Name:

Address:	Floor
	Room
Contact Person	Phone No:
Alternate Contact:	24 Hour No: Other No.:

Security Considerations

2.3 Alternative Accommodation (2)

In the event that the Department’s usual place of work is not available, all staff will be given the details during initial contact, of the building they are to report to, together with any travel or access restrictions that may apply.

Alternative Location: 2
Building Name:

Address:	Floor
	Room
Contact Person	Phone No:
Alternate Contact:	24 Hour No: Other No.:

Security Considerations

<u>ACCOMODATION</u> Contingencies / Alternative Options
<p>If any members of staff are able to work from home, include details in this box. Check and confirm that the alterative location sites above, give you access to your resource requirements. May include a further Option for accommodation</p>

2.4 IT Systems Recovery Requirements

Official

The following IT systems, Software & Data will need to be recovered within the time periods shown.
 (Wherever possible, show the specific recovery time required e.g. within 1hour)

IT Systems	No	1-24 Hours	1 Day – 1 Week	1 Week -1 Month	1 Month +

IT SYSTEMS
Contingencies / Alternative Options
Think about local contingencies you can implement e.g. laptops instead of desktops / spare printers, spare equipment stored locally.

2.5 IT Software & Recovery Requirements

Software	1-24Hrs	1 Day – 1 Week	1 Week – 1 Month	1 Month +

**IT SOFTWARE
Contingencies / Alternative Options**

This is a free type box for you to include any alternative ways of providing your critical functions in the event of the IT systems or software required not being available. Think about contingencies that you could use, e.g. could you revert to manual methods of recording until the system is restored, is there another Department or outside organisation that has access to the same systems that you require.

2.6 IT Data Recovery Requirements

<u>Data Type & Location</u>	1-24Hrs	1 Day – 1 Week	1 Week – 1 Month	1 Month +

IT Data Recovery Requirements

This is a free type box for you to include any alternative ways of providing your critical functions in the event of the IT systems or software required not being available. Think about contingencies that you could use, e.g. could you revert to manual methods of recording until the system is restored, is there another Department or outside organisation that has access to the same systems that you require.

2.7 Airwave & Telephone Recovery Requirements

Official

The following Airwave and Telephone systems will need to be recovered within the time periods shown. (Wherever possible, show the specific recovery time required e.g. within 1hour)

<u>Airwave & Telephone</u>	1-24Hrs	1 Day – 1 Week	1 Week – 1 Month	1 Month +

<u>AIRWAVE & TELEPHONES</u> <u>Contingencies / Alternative Options</u>
<p>This is a free type box for you to include any alternative ways of providing your critical functions in the event of the IT systems or software required not being available. Think about contingencies that you could use, e.g. could you revert to manual methods of recording until the system is restored, is there another Department or outside organisation that has access to the same systems that you require.</p>

2.8 Other Documents Required

The following documents have been identified as being essential for the Department to maintain their Critical Functions e.g. Procedures Manual etc.

	Description	Location of Copy or Back UP
1		
2		
3		
4		
5		

2.9 Vehicle Requirements

The following type and number of vehicles are required within the time periods shown. Please show 'M' Marked' or 'U' Unmarked' and wherever possible, show the specific time they are required e.g. within 1hour.

<u>Vehicle Type</u>	No	<u>M' / 'U'</u>	1-24hrs	1Day -1 Week	1 Week – 1 Month	1 Month

<u>VEHICLES</u> <u>Contingency Options / Alternatives</u>
<p>This is a free type box for you to include any contingencies that you may have, should the minimum number and type of vehicles required, not be available. This could include where you might obtain alternative vehicles. For example, could they be hired? If they are specialist vehicles, could you make a reciprocal arrangement with a neighbouring District, or another Force?</p>

2.10 Specialist Equipment Recovery Requirements

Listed below, are details of the Specialist Equipment / Resources required by this Department.

<u>Specialist Equipment</u>	No	1-24 Hours	1 Day – 1 Week	1 Week -1 Month	1 Month +

Official

SPECIALIST EQUIPMENT
Contingencies / Alternative Options

This is a free type box to include alternative ways of providing your critical functions in the event of specialist equipment not being available. Consider where you could obtain this equipment from i.e. neighbouring Districts, alternative suppliers or other Forces.

2.11 Further Resource Recovery Requirements

The following Resources have been identified as being essential for the Department to maintain their Critical Functions.

Resources	No	1-24 Hours	1 Day – 1 Week	1 Week -1 Month	1 Month +
Mains Electricity					
Mains Gas					
Mains Water					

Additional Information / Comments



2.12 Stakeholders & Suppliers

Arrangements must be in place to ensure that all Stakeholders and Suppliers are made aware of, and kept up to date with the incident affecting the Department.

By keeping them informed you could protect the Force reputation, alleviate any fears they may have and at the same time ensure that supplies necessary to maintain your Critical Functions are sustained.

A supplier may have been affected by the same incident, and as such you must take steps to ensure that they can maintain their critical service to you.

Wherever possible an alternative source should be identified to ensure that any shortfall could be met.

2.12 A Internal Stakeholders

The following are a list of **Departments who rely on this Department** to provide them with a service:

Stakeholder	Service	Contact No	Mobile

2.12 B External Stakeholders

Stakeholder	Service	Contact No	Mobile

Official

2.12 C Internal Suppliers

The following are a list of Departments, which this Department relies upon to deliver goods or services.

Supplier	Service	Contact No	Mobile

2.12 D External Suppliers

Supplier	Service	Contact No	Mobile

2.13 Useful / Emergency Contact Numbers

Organisation / Department	Contact Name	Contact Number

2.15 Business Continuity Incident Log (Please Copy)

Summary of Incident

[Empty box for incident summary]

SECTION 3 – BCM RECOVERY TEAM

3.1 Introduction

Where an incident has occurred that is likely to have an impact on the ability of a Department to deliver its Critical Functions, in addition to activating the BCM Plan, it may also be necessary to activate the BCM Recovery Team.

3.2 Activating the BCM Recovery Team

A Management Team member, the Critical Incident Manager or the Force Incident Manager, have the authority to activate the Department BCM Recovery Team.

The Recovery Team will have a nominated Team Leader and Deputy. Contact details appear in the table shown at section 3.5 below. A list of all Department Team Leaders and Deputies contact details will be held by the Force Incident Manager.

It will be the responsibility of each Department to ensure that these details are kept up to date.

Where applicable, the Silver and/or Gold Commander will be informed of the activation of the BCM plan(s), and the mobilisation of the BCM Recovery Team(s).

Remember

It is far better to activate the BCM Recovery Team to monitor an incident and then if necessary stand them down, rather than take no action at all and lose valuable recovery time.

3.3 Action Upon Notification

Having received notification of an incident, the BCM Recovery Team leader or their Deputy shall:

- a. Make a decision on the invocation of the Business Continuity Plan
- b. If the Plan has already been invoked the Recovery Team Leader will analyse the impact of the incident, and
- c. Where appropriate, activate the Recovery Team and cause each team member to be contacted.

3.4 Information for Recovery Team Members

The contact details and area of individual responsibility for each team member can be found in the table shown at section 3.5 below.

The information passed to team members, should include the following:

- A brief description of the incident
- Any immediate actions that need to be taken
- The time, date and location of the Recovery Team meeting place

3.5 BCM Recovery Team Personnel

Name	Role	Responsibility	Contact Number
	Command / Management Team Member	Recovery Team Leader	
	Business Manager	Business Continuity & Health & Safety Co-ordinator	
	Personnel Manager	HR Issues	
	Finance	Financial Issues	
	Admin Officer	Administration Issues	
	Department SPOC	Specific Department Advice & Guidance	
	Force Business Continuity Co-ordinator	BCM Advice & Guidance	
	Health & Safety Representative	Health & Safety Issues	
	Corporate Communications	Communications Issues	
	FM Representative	Facilities Management issues	
	ISD Representative	ISD issues	
	VFM Representative	Vehicle Fleet issues	
	SCM Representative	Supply Chain issues	

Note:

- Contact will be made with the respective Heads of Corporate Communication's, SCM, ISD and Health & Safety for them to nominate an individual from their team to assist the Recovery Team.
- Please see Section 3.7 below for a full description of the Recovery Team members, Roles & Responsibilities.

3.6 Recovery Team - Roles and Responsibilities

The Role of the Recovery Team is to:

- Assess the Impact of the Event or Occurrence on the Department and its Critical Functions
- Prioritise Departmental Critical Functions
- Prioritise the allocation and distribution of resources
- Delegate authority
- Determine recovery timescales, in line with Recovery Time Objectives (RTO's).

3.7 Team Members - Roles and Responsibilities

Recovery Team Leader:	
Role: Manage and direct the Recovery Team's activities.	Responsibilities: <ul style="list-style-type: none">▪ Formation and management of the Recovery Team▪ Safety of staff, contractors and the public▪ Liaise with and carry out any strategic instructions from the Operational Silver / Gold▪ Manage the tactical recovery of the Department Critical Functions and other activities▪ Ensure that all staff welfare issues are being dealt with appropriately▪ The assignment of roles and responsibilities to Recovery Team staff▪ Ensure the recording of all budget spend in respect of recovery Level of authority: <ul style="list-style-type: none">▪ Decision making in respect of tactical recovery▪ Budget spend in respect of recovery activities

Human Resources Coordinator:	
Role: Advise the Recovery Team on all HR related issues.	Responsibilities: <ul style="list-style-type: none"> ▪ Manage all staff welfare issues and liaise with Corporate HR. ▪ Liaison with Occupational Health ▪ The resolution of HR related issues
Finance Coordinator:	
Role: Advise the Recovery Team on all Finance related issues.	Responsibilities: <ul style="list-style-type: none"> ▪ The management of remuneration issues during business interruption
Administration Officer:	
Role: Assist the Business Manager with clerical and administrative duties	Responsibilities: <ul style="list-style-type: none"> ▪ Perform clerical and administrative duties on behalf of the Recovery Team, including the formal recording of minutes, agendas etc
Health & Safety Coordinator:	
Role: Provide Specialist Health and Safety advice to Recovery Team	Responsibilities: <ul style="list-style-type: none"> ▪ Dynamic risk assessments ▪ Management of Health and Safety issues at any alternative recovery location, including recovery site induction and evacuation procedure
Corporate Communications Coordinator:	
Role: Provide media advice & guidance to the Team Leader.	Responsibilities: <ul style="list-style-type: none"> ▪ Maintain a link between the team and the Corporate Communications Department.
Facilities Management Coordinator:	
Role: Liaise with Facilities Management during an incident and report back to the Recovery Team on all Facilities Management issues relating to the recovery.	Responsibilities: <ul style="list-style-type: none"> ▪ The FM co-ordinator will manage the provision of alternative working accommodation for staff, where previously identified sites are unavailable ▪ Ensure that the appropriate alternative accommodation has the facilities required to support business recovery.

I.T and Communications Coordinator:	
<p>Role: Manage all I.T. and Communications related issues during business interruption</p>	<p>Responsibilities:</p> <ul style="list-style-type: none"> ▪ Management of IT issues from activation to return to normal ▪ Manage the interface between the Department and the IT Recovery Team. ▪ Log and manage any telephony issues
Vehicle Fleet Management Coordinator:	
<p>Role: Provide the team with a direct link to Vehicle Fleet Management Department.</p>	<p>Responsibilities:</p> <ul style="list-style-type: none"> ▪ Provide advice & guidance to the Recovery Team on vehicle & fuel related issues.
Supply Chain Management Coordinator:	
<p>Role: Provide the team with a direct link to the Supply Chain Management Department.</p>	<p>Responsibilities:</p> <ul style="list-style-type: none"> ▪ Provide advice & guidance to the Recovery Team on supply chain issues such as stock items and/or emergency suppliers.

Appendices 1 – SPOF identified and mitigation

Have any Single Points of Failure (SPOF) been identified?				
Activity No	What is the nature of the SPOF?	Is this issue being tolerated or mitigated	Mitigation details	Date to be reviewed?

The only (single) source of a service/activity i.e. there is no alternative, whose failure would lead to the total failure of a key business activity and/or dependency

Appendices 2 – Initial Response Check List

Initial Response Check list
First person aware
Confirm severity of crisis
Ensure any emergency action required is carried out; for instance evacuation or calling emergency services.
Open incident log
Notify head of department
Head of department
Set up meeting with department senior managers
Initial meeting
Agree who should form the Crisis Management Team
Agree support required from executive level
Confirm roles and responsibilities
Assess what is known about the incident so far
Agree plan based on current information
Agree when the group will next communicate and how
Consider communication with the following as appropriate:- <ul style="list-style-type: none"> • Executive/senior management • Emergency services and authorities • Corporate Communications • Internal staff • External partners • Visitors – on site or en-route • Human Resources • Health and Safety • Security • Estates department • External agencies or stakeholders • Customers of each team • Suppliers to each team • Neighbouring buildings
Review meetings
Latest updates from each participant and time scales
Identify outstanding issues
Establish if the initial incident is under control
Assess invocation of business continuity plan
Incident management rules
Execute the plan as agreed. Do not deviate from it, without consultation. If the plan is changed, communicate this to all affected persons/parties.

Official

Business Continuity
Business Impact Analysis (B.I.A.)

Department

Date Completed

Contact Details

1. Overview –Description of Department Functions:

OFFICIAL

2. Department Critical Function(s)

The impact of a disruption to the Critical Function(s) of this Department, and the impact of time on each of those Functions:

Critical Function	Summary of Activities	Specific Impact of Disruption	Impact over time (H.M.L.)					Justification / Consequences	
			1 Hr	3 Hrs	1 Day	3 Days	1 Week		1 Month
		Loss of Life/ serious injury							
		Criminal activities							
		Legal implications							
		Loss of public confidence							
		Other							
		Support to FMCF's							

OFFICIAL

Critical Function	Summary of Activities	Specific Impact of Disruption	Impact over time (H.M.L.)					Justification / Consequences	
			1 Hr	3 Hrs	1 Day	3 Days	1 Week		1 Month
		Loss of Life/ serious injury							
		Criminal activities							
		Legal implications							
		Loss of public confidence							
		Other							
		Support to FMCF's							

OFFICIAL

Critical Function	Summary of Activities	Specific Impact of Disruption	Impact over time (H.M.L.)					Justification / Consequences	
			1 Hr	3 Hrs	1 Day	3 Days	1 Week		1 Month
		Loss of Life/ serious injury							
		Criminal activities							
		Legal implications							
		Loss of public confidence							
		Other							
		Support to FMCF's							

OFFICIAL

Critical Function	Summary of Activities	Specific Impact of Disruption	Impact over time (H.M.L)					Justification / Consequences	
			1 Hr	3 Hrs	1 Day	3 Days	1 Week		1 Month
		Loss of Life/ serious injury							
		Criminal activities							
		Legal implications							
		Loss of public confidence							
		Other							
		Support to FMCF's							

OFFICIAL

Critical Function	Summary of Activities	Specific Impact of Disruption	Impact over time (H.M.L)						Justification / Consequences
			1 Hr	3 Hrs	1 Day	3 Days	1 Week	1 Month	
		Loss of Life/ serious injury							
		Criminal activities							
		Legal implications							
		Loss of public confidence							
		Other							
		Support to FMCF's							

3. Timelines re - Criticality

Time scales by which we should aim to restore the Department Critical Function(s).

Critical Function	Minimum service required	Times within which the minimum level of service is required.	Justification for decision.

4. Key Dependencies.

Critical Function	Internal Dependencies	External Dependencies

Business Continuity Completion Guide

Completion Guide

Critical Functions Priority List

- This section will be based on information you have supplied in the Business Impact Analysis document.
- The Functions shown will be placed in 'Priority Order'.

Staff Activation List

- The four teams shown are time specific. Staff that are required to re-instate a Critical Function immediately or within 24hrs, will be shown in the A Team. Functions re-instated between 1Day and 1Week, the B Team and so on.
- Where individual staff member details cannot be shown i.e. duty groups, please enter the rank / grade & minimum number of staff required, together with any specific skills needed.

Alternative Accommodation

- Identify at least one alternative office or building that you could move to, that would allow you to get your department operating again.

Remember – If you have twenty staff, but only need five of them straight away to support a critical function, there is a significant difference in the size of premises that you need to identify.

I.T. Equipment & Systems Recovery Requirements

- Show the type of I.T equipment & systems that you need to be recovered and how many.
- In the time band columns, please specify the minimum re-instatement time for each item e.g. within 1hour. ISD will need to prioritise their efforts when bringing equipment & systems back on line, so a realistic assessment by you will assist in this process.

I.T Software Recovery Requirements

- Show the I.T Software that you need to be recovered.
- In the time band columns, please specify the minimum re-instatement time for each piece of software e.g. within 1 hour. ISD may need to prioritise their efforts when re-instating Software, so a realistic assessment by you will assist in this process.

IT Data Recovery Requirements

- Show the I.T Data that you need to be recovered and it's location on the system
- In the time band columns, please specify the minimum re-instatement time for each piece of Data e.g. within 1 hour. ISD may need to prioritise their efforts when re-instating Data, so a realistic assessment by you will assist in this process.

Airwave & Telephone Recovery Requirements

- Show the number of Airwave sets and telephones, including mobiles that you require.
- In the time band columns, please specify the minimum re-instatement time for each piece of equipment e.g. within 1 hour. ISD may need to prioritise their efforts when re-instating Airwaves & Telephones, so a realistic assessment by you will assist in this process.

Other Documents Required

- Some Departments may need to have reference to hard copies of documents e.g. procedures manuals, policy & guidance, other plans. Consider copying these documents and placing them at an alternative location.

Vehicle Requirements

- Show the type and number of vehicles that are absolutely necessary for your Department to operate and whether or not they need to be 'marked' or 'unmarked'.
- Where possible, show a specific minimum recovery time. If our vehicle fleet is seriously affected by an incident, we may need to prioritise the distribution of vehicles, so an accurate and realistic assessment by you will assist in this process.

Specialist Equipment Recovery Requirements

- Show Details of Specialist Equipment and number of items needed
- Again be specific regarding the minimum recovery times required

Further Resources Recovery Requirements

- The list shown is not exhaustive, please feel free to add any further resources that you will require

Internal Stakeholders

- These are police staff members, groups, Departments who **rely on you** to provide them with some level of service

External Stakeholders

- These are people, groups, or other agencies outside Nottinghamshire Police, who **rely on you** to provide them with some level of service

Internal Suppliers

- These are police staff members, groups, Departments who **you rely upon** to provide you with some level of service

External Suppliers

- These are people, groups, or other agencies outside Nottinghamshire Police, who **you rely upon** to provide you with some level of service.

Grab Bag

- You are required to have a grab bag situated at your alternative accommodation site, which would contain those things you and your staff would need to work with when they arrive there (stationery, CD/Floppy disc or hard copies of essential documents).

Business Continuity Management

Roles and Responsibilities

Force Business Continuity Board (FBCB)

The Board will:

Act as the governance body for all Business Continuity related issues.

- Approving strategies or plans produced on behalf of the FBCB.
- Achieving the Business Continuity objectives of the Force.
- Consider Business Continuity issues raised by the Force Business Continuity Coordinator.
- Monitoring and responding to changes in statutory requirements, minimum standards set by authoritative bodies and identified good practice.

The Chair of the FBCB will be the Assistant Chief Constable (ACC) or other person appointed by them.

Membership of the FBCB is decided by the ACC. It will include representatives of all Departments / Business Units who require planned Business Continuity arrangements including representatives from strategic partners where deemed appropriate.

Force Business Continuity Coordinator

The Force Business Continuity Coordinator will:

- Continue to develop and lead on a Corporate Business Continuity Management Strategy for the Force, to ensure compliance with the requirements of the Civil Contingencies Act 2004 as far as practicable.
- Provide support to Departments in establishing, developing and maintaining effective Business Continuity Plans.
- Provide a schedule for the testing and exercising of Business Continuity Plans, to ensure that they are up to date, relevant and fit for purpose.
- Act as the Force Business Continuity SPOC for all internal and external audits.
- Provide a personal response to incidents where necessary to provide Business Continuity advice and guidance.
- Ensure that the Force Policy on Business Continuity is disseminated throughout the Force.
- Ensure that BCM Plans are communicated to other Nottinghamshire Category 1 Responders, to dovetail with their own.
- Ensure that other identified stakeholders are kept informed of our BCM status and resilience.

Departmental Business Continuity Leads will

- Support & Develop Business Continuity Management process within their individual business areas.
- Act as the overall Business Continuity single point of contact (SPOC) for the relevant Department.
- Ensure that a Business Continuity SPOC is established and maintained for each unit within the relevant Department.
- In conjunction with the Force Business Continuity Coordinator, take responsibility for the test and exercise of Business Continuity Plans for their Department, to ensure that they are up to date, relevant and fit for purpose.
- Raise awareness of Business Continuity Planning, ensuring that staff know of the BCM plans that cover their area of work and what is expected from them during any form of disruption.
- Identify a member of staff to discharge these functions in their absence
- Ensure that a skills audit is completed and regularly reviewed for staff within each business area.

Business Continuity Plan Owners

- Departmental heads will own the BCM arrangements for their respective function(s) and they will work through their nominated Single Points of Contact (SPOC) and the Force BC Lead Officer to establish practical and effective BCM.
- They will be responsible for involving their staff and operators in the development of BCM, and to ensure that BCM is constantly developed, progressed and maintained. This BCM ownership will be included in the post profile of current post-holders to ensure accountability and progress is maintained.

Business Continuity Plan Writers

- Each Department will nominate a Business Continuity Plan Writer working to the SPOC. The SPOC will assist and advise managers/plan writers on the production of Business Continuity Plans, warning and informing, ensuring all levels of staff are made aware of Business Continuity and how it may affect them, and facilitating the testing and reviewing of plans. Plan Writers will also ensure all plans are readily accessible for use in any emergency.

Initial assessor

- In the event of a MAJOR BUSINESS INTERRUPTION or MAJOR CIVIL PROTECTION ISSUE the 'Initial Assessor' will review current circumstances and assess the potential need for the implementation of BCM arrangements (Initial Response Check List). The Initial assessor will normally be a Chief Officer or Senior Management Team (SMT) member in order to feed directly into the CMT; however to provide flexibility during spontaneous disruption, or out of normal operating hours, the most appropriate person at the time (Inspector, Force Control Room) will perform this

role and CMT members will, as soon as is possible, validate any decision made re BCM arrangements.

Crisis Management Team (CMT)

- Crisis Management Team is the name given to the pre-identified management team, who will make up the initial CMT for the force or affected Department. The CMT will proactively scope potential force, divisional, departmental issues, and provide a pre-determined management response in order to coordinate any pre-planned or spontaneous implementation of BCM measures.
- Irrespective of its location or command level, the CMT will comprise of key force Departmental decision makers, who will have the appropriate knowledge and authority to make decisions and implement the actions required for response and recovery, subject to the complexity of the emergency / crisis, others representing their particular fields of specialisation may be co-opted into the team if required.
- Members of CMT's will have regular, formal, and structured meetings to monitor divisional, departmental and force issues in respect of BCM. This will provide a strong tactical / strategic platform from which to ensure the delivery and maintenance of both proactive and reactive BCM capabilities at departmental and force levels.

Divisional / Departmental Crisis Management Teams

- Divisions and departments will identify key Senior Management Team (SMT) personnel to form the initial CMT for the affected division or department. The CMT will proactively scope potential Departmental BCM issues, and provide a pre-determined management response in order to coordinate any pre-planned or spontaneous implementation of BCM measures.
- The CMT will operate at Bronze 'tactical' level in the command structure (but will not be referred to as 'bronze' to prevent any confusion with any existing emergency response) and as such each Department should pre-identify its CMT members in order that they can be referred to as a responsible management function in the respective division / department BC plans.
- In order to maintain effective communication and response during major disruption, Departmental CMT managers will attend Force CMT (Silver) meetings and be responsible for the implementation of response and recovery processes.

Force Crisis Management Team (FCMT)

- If a situation occurs whereby the events are a major business interruption or major civil protection issue, a 'Silver' level FCMT based at force HQ (or other central location) will be activated and the BCM response and recovery will be directed by a member of the Chief Officer Team and others representing their particular fields of specialisation.

- The Crisis Management team will be led by a member of the Chief Officer Team and will convene at a frequency and time as directed.

The group comprises of the following post holders:

- Superintendent Force Operational Support
- Inspector Force Operational Support (Planning)
- Force Business Continuity Lead

Dependent on the type of incident, the group may also include representatives from the following departments:

- Corporate Development & Finance
- Corporate Communications
- Demand Management
- Emergency Planning
- Estates & Facilities
- Human Resources
- Information Technology

SPOC from any division or department affected by the business interruption

Recovery Management Team (RMT)

- Depending on the size and scale of the event / incident affecting the organisation the CMT has the option of creating a dedicated Recovery Management Team (RMT). The role of the RMT will be to deal solely with short and long term recovery strategies and their implementation, allowing the CMT to concentrate on dealing with the implementation of BCM arrangements

Recovery

- Once a decision has been made to implement BCM arrangements, the Force or Departmental CMT will coordinate the activities required to minimise disruption and ensure service delivery. Simultaneously with BCM arrangements the FCMT will be required to provide clear direction on the short and long-term recovery objectives.
- Depending on the circumstances, the FCMT have the option to create a dedicated Recovery Management Team (RMT) so that the FCMT can concentrate on dealing

with the implementation of BCM arrangements, and the RMT can solely deal with short and long-term recovery.

Legislative Compliance

- This document has been drafted to comply with the general and specific duties in the Race Relations (Amendment) Act 2000, Data Protection, Freedom of Information Act, European Convention of Human Rights and other legislation relevant to the area of policing such as, Employment Act 2002, Equality Act 2010, Employment Regulations Act 1999 and the Civil Contingencies Act 2004.

ISO 22301:2012:

What is ISO 22301 Business Continuity Management?

- ISO 22301 is the international standard for Business Continuity Management, and builds on the success of British Standard BS 25999 and other regional standards. It's designed to protect your business from potential disruption. This includes extreme weather, fire, flood, natural disaster, theft, IT outage, staff illness or terrorist attack. The ISO 22301 management system lets you identify threats relevant to your business and the critical business functions they could impact. And it allows you to put plans in place ahead of time to ensure your business doesn't come to a standstill.

What are the benefits of ISO 22301 business continuity management?

- Identify and manage current and future threats to your business
- Take a proactive approach to minimizing the impact of incidents
- Keep critical functions up and running during times of crises
- Minimize downtime during incidents and improve recovery time
- Demonstrate resilience to customers, suppliers and for tender requests

Management of Police Information (MoPI)

These instructions do not fall within MoPI

Freedom of Information Act 2000

- Exemptions do not apply to this instruction under the Freedom of Information Act 2000
- Race Relations (Amendment) Act 2000 and Diversity Impact Assessment

- The Act creates a statutory requirement for all Functions and Policies (Including Procedural Instructions) to be impact assessed for their level of relevance to the General Duty.

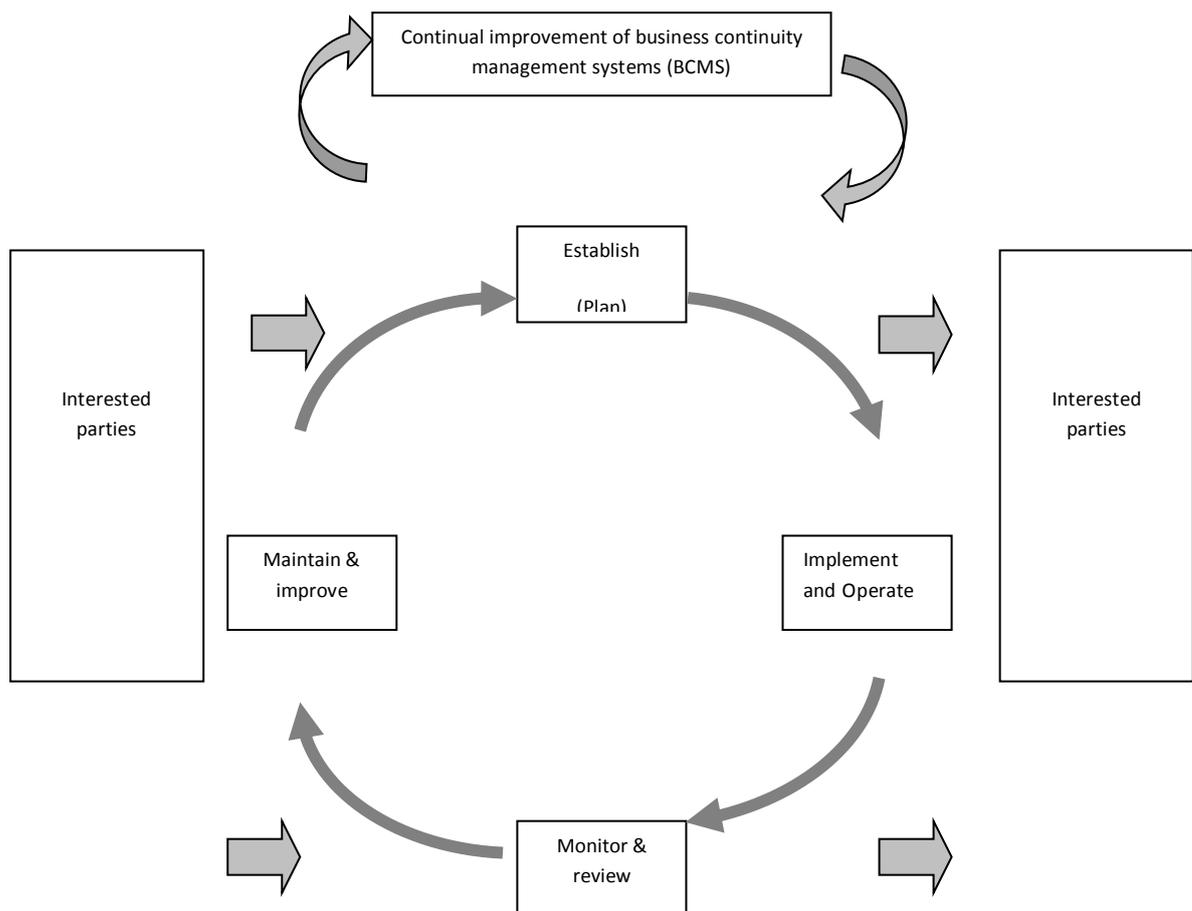
Review:

These instructions and their associated Diversity Impact Assessment were last reviewed on....

The date for the next review of these instructions and their associated Diversity Impact Assessment is:

The PDCA Model Applied To BCMS Processes

In line with ISO 22301 the force will apply the “Plan-Do-Check-Act” model to planning, establishing, implementing, operating, monitoring, reviewing, maintaining and continually improving the effectiveness of the organisation’s Business Continuity Management Systems (BCMS).



Explanation of PDCA model

<u>Plan</u> <u>(Establish)</u>	Establish business continuity policy, objectives, targets, controls, processes and procedures relevant to improving business continuity in order to deliver results that align with the organisation's overall policies and objectives.
<u>Do</u> <u>(Implement & operate)</u>	Implement business continuity policy, objectives, targets, controls, processes and procedures
<u>Check</u> <u>(Monitor & review)</u>	Monitor and review performance against business continuity policy and objectives; report the results to management for review, and determine and authorise actions for remediation and improvement.
<u>Act</u> <u>(Maintain & improve)</u>	Maintain and improve the BCMS by taking corrective action, based on the results of management review and reappraising the scope of the BCMS and business continuity policy and objectives.

Nottinghamshire Police

Business Continuity

Strategy

Aims:

To provide the framework within which the Force can comply with its statutory duties as a category 1 responder under the Civil Contingencies Act 2004 and the Business Continuity requirements of the organisation and all interested parties, by introducing a business continuity management system (BCMS) that aligns with ISO 22301:2012.

This process provides Nottinghamshire Police with the means to anticipate, prevent, mitigate, respond to, and recover from disruptions; whatever their source and whatever aspect of the organisation's business they affect.

Through this strategy Nottinghamshire Police will aim to:

- Maintain prioritised Force Critical Functions within accepted timescales (See Force Critical Functions).
- Ensure that the service to the public and public safety is maintained during an unscheduled event, emergency or any disruption to the critical activities of the Force.
- Comply with the statutory obligations under the Civil Contingencies Act 2004 and adhere to all other relevant legislation.
- Develop and maintain BCM in line with ISO 22301 (HMIC Standards).
- Progress BCM with regard to externally and internally identified risks, threats and situations including those arising from the Local Resilience Forum Community Risk Register and police regionalisation and collaboration where the impact of disruption may fall on one or all of the participating forces.
- Continue to effectively engage with other interested parties, responders, partners, agencies and other dependents to develop effective BCM.
- Mitigate loss of revenue / unnecessary expenditure.
- Ensure the Force retains its major incident response capability.
- Protect the reputation of Nottinghamshire Police and the Police Service.

Objectives:

The objectives of this strategy are:

- To help deliver effective corporate governance.
- To ensure that BCM positively supports decision making in the strategic business planning framework by identifying key issues that could affect the delivery of Nottinghamshire Police's critical functions in the event of an emergency or other disruption to service provision.
- To identify key roles and ensure that clear leadership responsibilities are known and understood throughout the Force.
- To further embed BCM into the culture and strategic business planning framework of the Force.
- To explain the internal processes which deliver BCM within the organisation.
- For BCM to be supported at all levels by both officers and staff, and be seen as the responsibility of all.
- To identify mechanisms for continuously developing resilience for all aspects of each operational function through proactive research, planning, exercise and training.
- To provide a structured framework for the recovery of functions and services following a disruption of any kind.
- To ensure that BCM is a continuing strand of planning, delivering and reviewing services.
- To ensure BCM is embedded in police procedures and internal reviewing processes.

Business Continuity Management (BCM) Process:

BCM is a process, which enables a structured framework, through which organisational functions and activities constantly develop resilience through awareness, training and exercise.

- Identify and agree a list of the Critical Functions completed by the Force (including those undertaken by other agencies on behalf of the Force)

- To identify key roles and ensure that clear leadership responsibilities are known and understood throughout the Force.
- Produce and maintain appropriate performance indicators and guidelines regarding acceptable minimum standards of performance related to Critical Functions.
- Agree the maximum tolerable period of disruption for each Function.
- Produce plans which will ensure Critical Functions can be maintained or recovered to acceptable minimum standards within the agreed maximum tolerable period of disruption for each activity.
- To further embed BCM into the culture and strategic business planning framework of the Force.
- To provide a structured framework for the recovery of functions and services following a disruption of any kind.
- To ensure that BCM is a continuing strand of planning, delivering and reviewing services.

Prioritisation:

A force wide view will be taken when assessing the priority and criticality of each function; all interested parties and key interdependencies, with both internal and external functions / services, will be taken into account to ensure that functions are given the correct priority status.

Nottinghamshire Police

Business Continuity

Terms of Reference

Force Business Continuity Board (FBCB)

The Board will:

Act as the governance body for all Business Continuity related issues.

- Approving strategies or plans produced on behalf of the FBCB.
- Achieving the Business Continuity objectives of the Force.
- Consider Business Continuity issues raised by the Force Business Continuity Coordinator.
- Monitoring and responding to changes in statutory requirements, minimum standards set by authoritative bodies and identified good practice.

The Chair of the FBCB will be the Deputy Chief Constable (DCC) or other person appointed by them.

Membership of the FBCB is decided by the DCC. It will include representatives of all Departments / Business Units who require planned Business Continuity arrangements including representatives from strategic partners where deemed appropriate.

For Information	
Public/Non Public*	Public
Report to:	Joint Audit and Scrutiny Panel
Date of Meeting:	09 March 2017
Report of:	Police & Crime Commissioner
Report Author:	Business Support Manager
E-mail:	Katy.owen@nottinghamshire.pnn.police.uk
Other Contacts:	
Agenda Item:	5

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

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

- 3.3 The CoPaCC monitors police governance in the United Kingdom.
- 3.4 The CoPaCC team undertook a review of England and Wales Police and Crime Commissioners' compliance with The Elected Local Policing Bodies (Specified Information) Order 2011.
- 3.5 In November 2016 the Nottinghamshire Office of the Police and Crime Commissioner was informed that a Quality Mark had been awarded as the CoPaCC review confirmed a high level of performance.
- 3.6 Appendix A, the CoPaCC Transparency Quality Mark Certificate provides assurance to the Panel that the information required to be published by the Commissioner is available and easily accessible to members of the public.

4. Summary of Key Points

- 4.1 The Office of the Police and Crime Commissioner received 45 requests for information between the period of 1 January – 31 December 2016. Details of the requests are published on the Police and Crime Commissioner's website and are detailed in Appendix B.
- 4.2 87% of the requests for information were responded to within the 20 working days deadline.
- 4.3 For the same period in 2015, the Office of the Police and Crime Commissioner received 46 requests for information.
- 4.4 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>
- 4.5 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

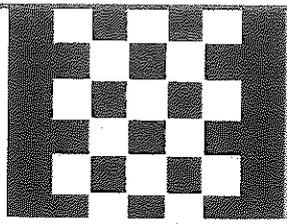
11. Details of outcome of consultation

11.1 None

12. Appendices

12.1 Appendix A CoPaCC Transparency Quality Mark Certificate

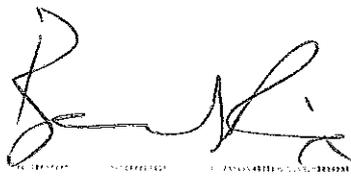
Appendix B Nottinghamshire Police & Crime Commissioner Freedom of Information requests January – December 2016.



OPCC Transparency Quality Mark 2016/17

Office of the
Police and Crime Commissioner for

Nottinghamshire



Bernard Rix
CEO, CoPaCC

Supported by:



APPENDIX B

**FREEDOM OF INFORMATION REQUESTS RECEIVED
01 January - 31 December 2016**

Request Reference	Request Subject (Keywords)
009306/16	Statistics on alleyway in Chilwell
009151/16	Request for personal information - Not for publication
009030/16	Scottish motorists
008825/16	Fixed Penalty Notices
008456/16	Force Contract with Cheshire Police
008407/16	Corporate Communications
007881/16	Community Remedy
007641/16	Personal Request for Information - Not for Publication
007558/16	Dog-on-dog attacks
007493/16	Sexual offences
007281/16	Software and expenditure information request
007215/16	Forensic Science
006657/16	Copier Paper
006129/16	Transparency Requirements
005975/16	Chief Constable Contract
005974/16	Police Restructure
005973/16	EDL demonstration
005902/16	Crime and Disorder Reduction Grant
005754/16	Police Corruption
005456/16	Restructure of Police Force
005231/16	101 Non Emergency Number
004651/16	ERP Systems Information
004553/16	Personal Request for information - Not for publication
004124/16	Nottingham City Police
003736/16	Government funding for Restorative Justice in the years 2012/14 & 2015/16
003558/16	PCC Departures
003272/16	Financial Position
002967/16	Number of Chief Constable Complaints
002941/16	Integrated Restorative Justice Service tender (2014/S 217-384168)
002908/16	Interpretation of Budget Figures
002759/16	Beechwood Care Home
002650/16	Nottinghamshire Public Priorities
002503/16	Late Night Levy - Street Pastors
002388/16	Strategic Alliance
001555/16	Scheme for the medical treatment of Retired Police Dogs
001391/16	Grants
001280/16	Officer Numbers, Police Station Closures and Ministerial Visits
001278/16	Chambers
000830/16	Victim support services
000721/16	Police & Crime Commissioner's Diary
000713/16	Real-terms reductions in the income received by the force from the Home Office
000667/16	Media/communications/public relations services
000577/16	Precept
000344/16	human trafficking and/or modern slavery
000178/16	Funding for CSPs

For Information	
Public	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Deputy Chief Constable
Report Author:	Pat Stocker – Information Management Lead
E-mail:	pat.stocker@nottinghamshire.pnn.police.uk
Other Contacts:	Julie Mair – Head of Corporate Development
Agenda Item:	6

Nottinghamshire Police Information Management, Freedom of Information and Data Protection update.

1. Purpose of the Report

- 1.1 To provide the Audit and Scrutiny Panel with data on the legislative compliance of the Freedom of Information Act 2000 and Data Protection Act 1998.

2. Recommendations

- 2.1 Members note the monitoring statistics for 2015 and 2016 in relation to information requests processed by Nottinghamshire Police in line with Freedom of Information and Data Protection legislation.

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 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 Disclosure Team
- 4.2 The legislative deadlines for the Acts are:-
- Freedom of Information 20 working days
 - Data Protection Subject Access 40 calendar day
- 4.3 In the calendar year 2016 the Force has received 1239 valid Freedom of Information Act requests and 284 valid Data Protection Subject Access requests for local information from Force systems.

	2014	2015	2016
Valid FOI's Received/Assigned	1003	1135	1239
Invalid FOI's Received/Not assigned	70	50	7
Total FOI	1073	1185	1246
Valid SAR's Received/Assigned	221	281	284
Invalid SAR's Received/Not assigned	143	45	78
Total SAR	364	326	362

- 4.4 Based on the above figures (as recorded on our Cyclops system), this represents an increase in assigned FOI requests received between 2015 and 2016 as 9.16% and an increase in assigned SAR's received between 2015 and 2016 as 1.06%. Overall there is a total increase in FOI requests received between 2015 and 2016 of 5.15% and in total SARDS received between 2015 and 2016 of 11.04%.
- 4.5 The Information Disclosure team is responsible for receiving, validating and recording requests for information under both the FOIA and DPA. This includes Court Orders served upon the Force. The team is responsible for interrogating the relevant Force systems in order to research records available in relation to requests, manually review each record and judge its appropriateness for disclosure in line with the Acts mentioned above.
- 4.6 Any exemptions prohibiting disclosure are applied by the Disclosure officer based on expert knowledge of the Acts. Any exempt information is redacted from disclosure and reasoned arguments recorded. Any public interest arguments are conducted by the relevant Disclosure Officer and recorded accordingly.
- 4.7 Following the Corporate Development restructure in May 2016 the Information Disclosure team comprises of:
- 3 permanent FTE staff members including 1 Manager and 2 disclosure officers dealing with FOIA and DPA.
 - 2 further staff members who facilitate timely and consistent disclosure of information and documents from the police, into the Family Justice System (transferred from the County MASH Team)
 - A further business case agreed an additional support member of staff for the Information Management Team and a 6 month secondment for a further Disclosure Officer, it is hoped that the recruitment process for both posts will be completed shortly.

Freedom of Information

- 4.8 The Force monitors compliance and provides quarterly statistics for Freedom of Information to the ACPO Central Referral Unit based in Hampshire. These statistics are collated from all Forces including Police Scotland and the Metropolitan Police Service.

Regional and national statistics are produced and circulated to all Forces on a quarterly basis.

Results for Nottinghamshire can be seen in the attached charts at Appendices 1 & 2.

Data Protection

4.9 The Information Disclosure team processes Subject Access requests received under Section 7 of the DPA 1998 for information held by Nottinghamshire Police.

Results for Nottinghamshire can be seen in the attached charts at Appendix 3.

Court Orders

4.10 The Information Disclosure Team also have the responsibility for disclosures to Court orders which can be received from any court in the UK and Ireland for Child Care, Private and Family Proceedings. In 2016 Nottinghamshire Police received 401 valid Court orders for disclosure; this is an increase of 29.35% on the number of orders received in 2015.

Results for Nottinghamshire can be seen in the attached charts at Appendix 4

Other types of Information requests

4.11 The Information Disclosure Team also have the responsibility for many other types of disclosure, all of which have to comply with the principles of the FOIA and DPA legislation but may have different timescales. (See table below)

Table of Data Protection General Requests

Category	Description	Time scale
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.	5 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	40 calendar days
Legal proceedings	Private legal proceedings such a personal injury claims	40 calendar days
Police	Request from other forces for information held by Nottinghamshire Police	No set timescale as soon as is practicable
Section 29 of the DPA	Requests from other prosecuting bodies such as DWP, local authorities and RSPCA	40 calendar days
Request total 2015	415	
Request total 2016	522	

Income Generation from Information requests

4.12 The Information Disclosure Team generate income from some types of information request. (See table below)

Income £	2014	2015	2016
SAR	£1,530.00	£2,180.00	£2,060.00
Court	£15,812.76	£17,877.67	£12,576.70
Insurance	£11,219.50	£13,128.25	£13,376.61
Private/Civil	£3,875.95	£5,782.70	£7,086.00
DP Gen	£197.10	£2,364.20	£2,402.00
Total	£32,635.31	£41,332.82	£37,501.31

Figures compiled from Cyclops – additional income received electronically (i.e. via BACs) is recorded in Finance

Current Risks and Mitigations

4.13 There are a number of risks relating to the wider Information Management Team identified on the Corporate Development Department Risk Register that are being managed locally and the SIRO has been made aware of the current situation. One of the risks relates to the current DP/FOI workload and is reported below.

Extract from the Corporate Development Departmental Risk register see Appendix 5.

5 Financial Implications and Budget Provision

5.1 There are no direct financial implications

6 Human Resources Implications

6.1 There are no direct human resource implications

7 Equality Implications

7.1 There are no equality implications

8 Risk Management

8.1 Not meeting the Forces legislative obligations under the Acts.

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

9.1 N/A

10 Changes in Legislation or other Legal Considerations

- 10.1 The General Data Protection Regulations (GDPR) will apply in the UK from 25 May 2018. The NPCC Data Protection portfolio led by Ian Readhead is expected to provide the national steer for Police Forces on the new requirements.
- 10.2 The Information Management area has also been identified as an area for review as part of the Tri-Force Collaboration initiative.

11 Details of outcome of consultation

11.1 Information Management in relation to Freedom of Information and Data Protection compliance is monitored through the Force Information Assurance Board (FIAB)

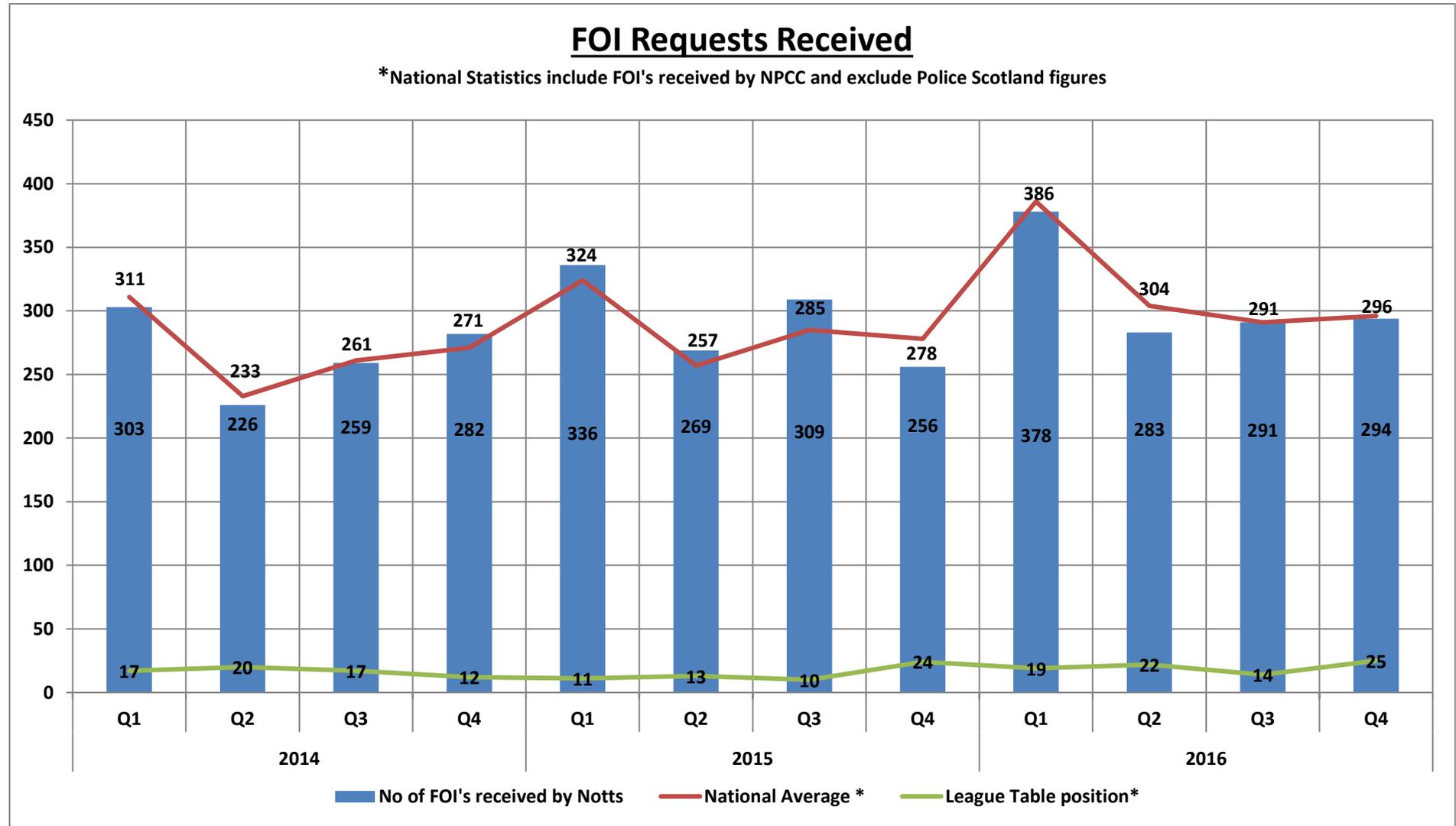
12. Appendices

- 12.1 Appendix 1 – FOI Requests Received
- 12.2 Appendix 2 – FOI Requests Closed
- 12.3 Appendix 3 – Subject Access requests
- 12.4 Appendix 4 – Court Orders
- 12.5 Appendix 5 – Extract from Corporate Development Departmental Risk register

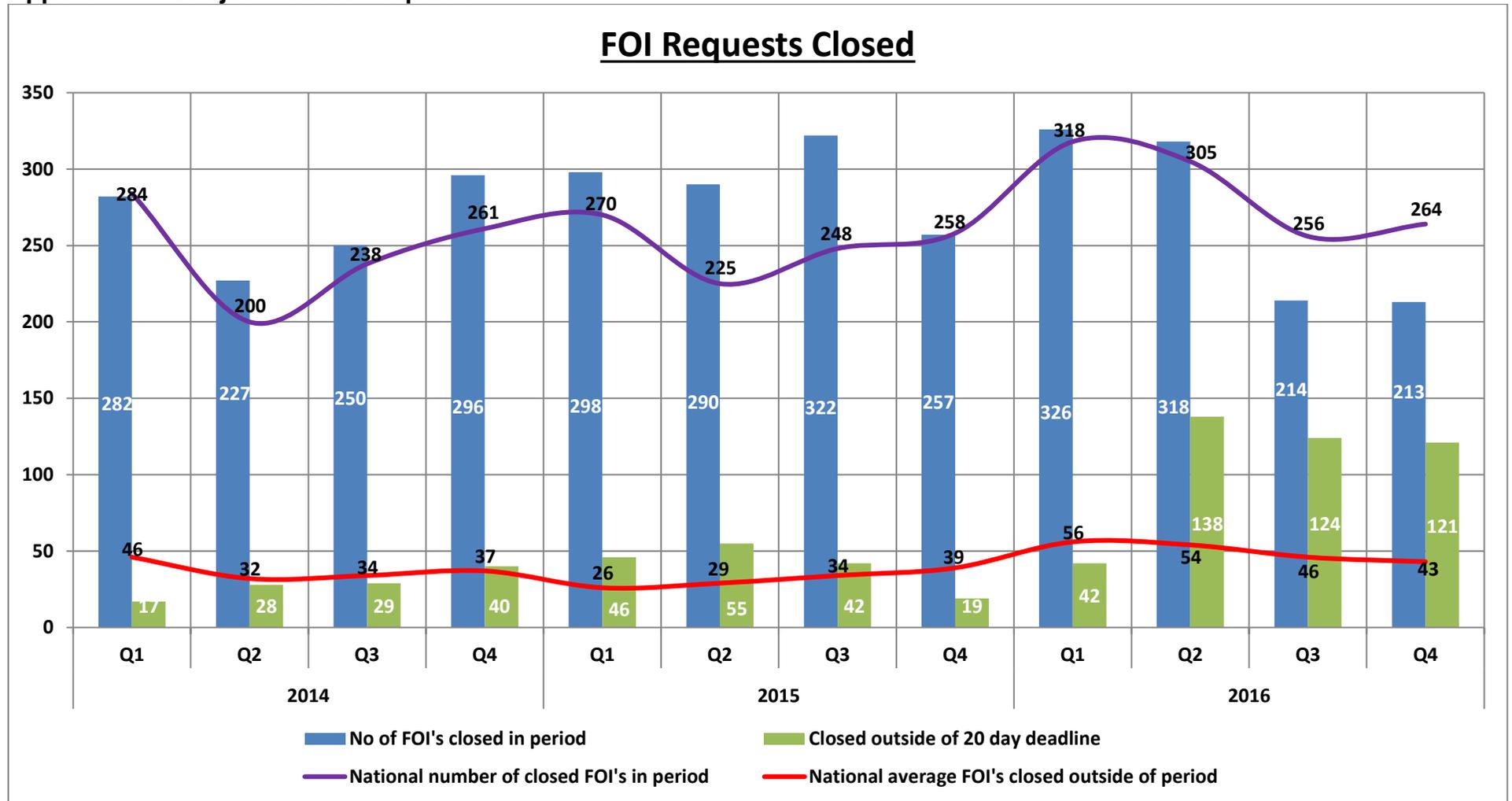
13. Background Papers (relevant for Police and Crime Panel Only)

13. No background papers have been provided

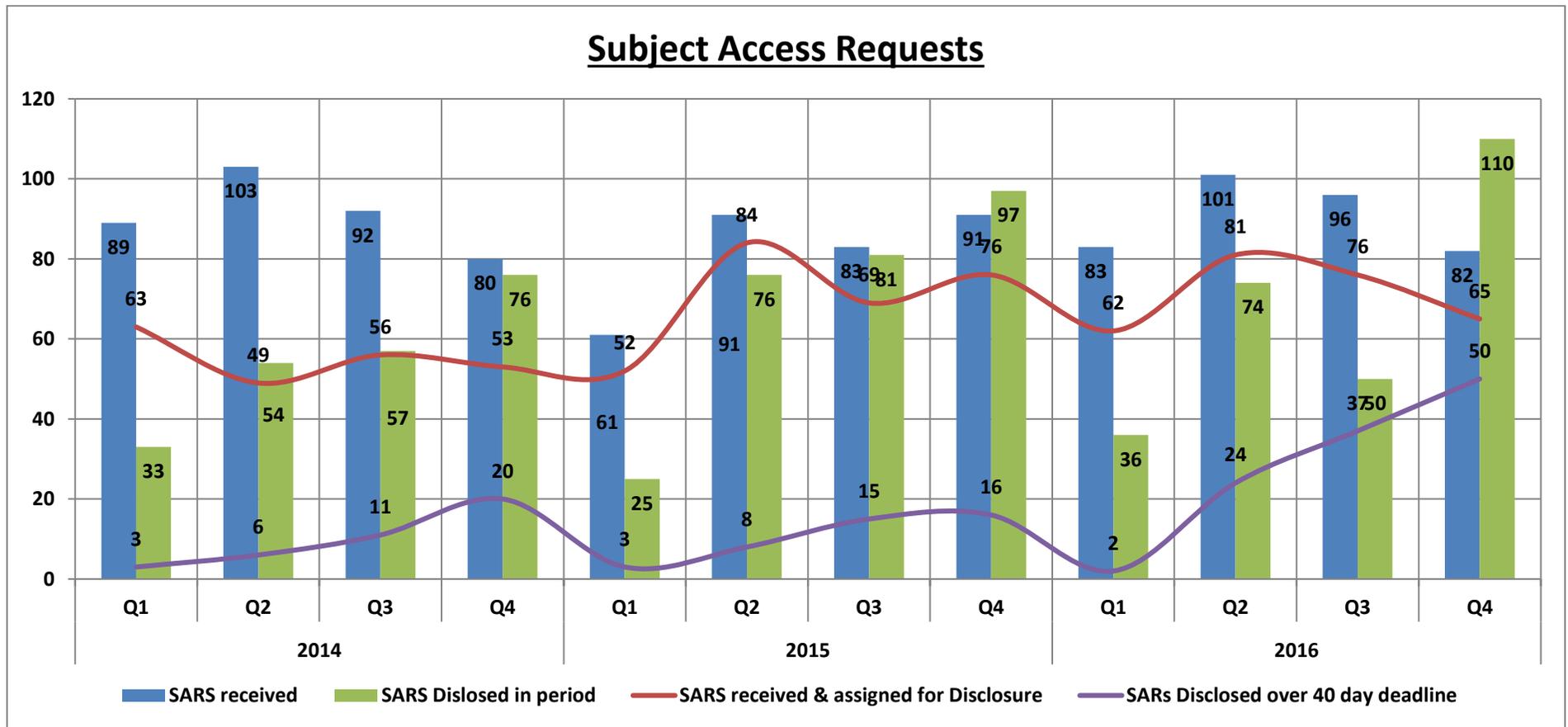
Appendix 1: Freedom of Information Act Requests



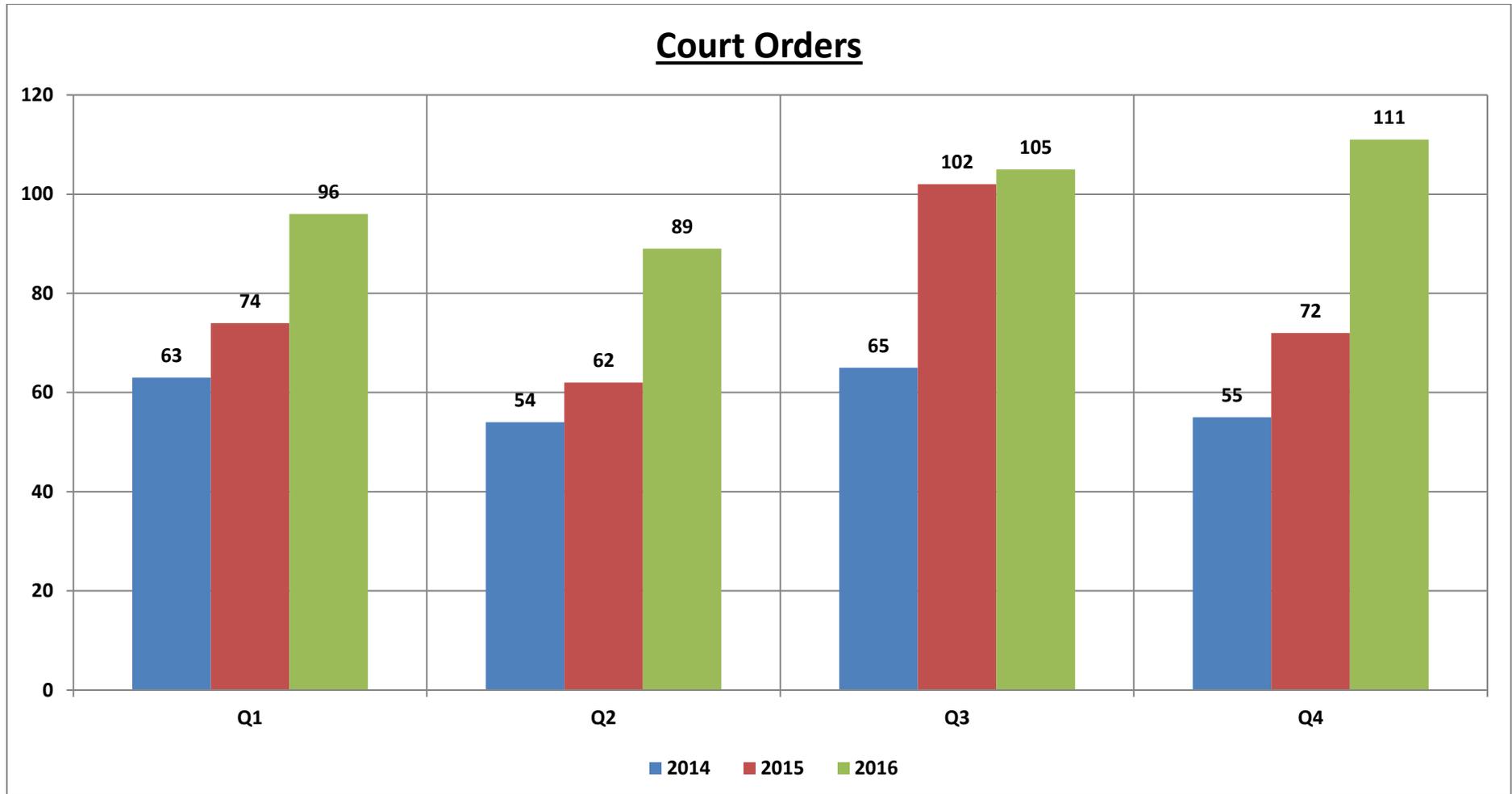
Appendix 2 – Subject Access Requests



Appendix 3 – Subject Access Requests



Appendix 4 – Court Orders



Appendix 5 – Extract from Corporate Development Departmental Risk register

Identifier	Category	Risk description	Owner / Manager	Proximity	Likelihood	Impact	Rating	Trend	Response plan	Risk rating confidence
CD002	Performance / Service delivery	<p>A variety of events have led to a backlog of DP and FOI requests within the IM Team, namely:</p> <ul style="list-style-type: none"> • Promotion of staff as a result of the restructure leading to a recruitment process and reduction in trained resources within the Disclosure team • Recruitment delays • A number of outstanding historical and complex SAR requests that have come to light since the restructure that had not been dealt with – predominantly involving the searching of the email archive system and subsequent issues with this system <p>Leading to:</p> <ul style="list-style-type: none"> • An increase in complaints and potential for further scrutiny by the ICO – in the last 6 months 3 x ICO complaints and 3 x PSD complaints have been received relating to Data Protection requests. • Potential for non-compliance with legislative requirements 	Information Management Lead	Now	VH(4)	M(2)	M(8)	↔	<ul style="list-style-type: none"> • The team are currently utilising the Data Protection & Information Sharing Officer and the Compliance Auditor roles full time to undertake disclosure work • In September 2016 it was agreed in that an additional resource would be brought in for 6 months to help reduce the backlog and we are in the process of recruiting an individual via Brook Street Agency • The team has informed the Information Commissioners Office on the legislative delays 	

For Information	
Public/Non Public*	Public
Report to:	Force Executive Board
Date of Meeting:	9th March 2017
Report of:	Julie Mair, Head of Corporate Development
Report Author:	Amanda Froggatt, Risk and Business Continuity Officer
E-mail:	amanda.froggatt@nottinghamshire.pnn.police.uk
Other Contacts:	Natalie Baker- Swift, Corporate Governance & Business Planning Manager
Agenda Item:	07

Strategic Risk Management Report for Force and NOPCC, Quarter 4, 2016/17

1. Purpose of the Report

- 1.1 To provide the Joint Audit and Scrutiny Panel (JASP) with an up to date picture of strategic risk management across the Force and OPCC.

2. Recommendations

- 2.1 JASP notes the current approach to strategic risk management and considers the assurance that this report provides as to the effectiveness of those arrangements within the Force and OPCC.
- 2.2 JASP acknowledges the closure of the Force's risk relating to the use of Regulation A19. At the Court of Appeal the Force were found to have acted lawfully and the officers' cases were not successful.
- 2.3 JASP notes the proposed new risk relating to the Emergency Services Network, which is a replacement for the current system used by emergency services. The project continues to be managed, with direct links to the OcIP and national programme. Slippage from December 2017 to no earlier than June 2018 has been declared.
- 2.4 JASP acknowledges the second new risk relating to issues around the quality of data input into Force systems. More investigative work is to be undertaken led by the Superintendent in Corporate Development and a detailed paper will be fed into the Data Quality Board on the way forward.

3. Reasons for Recommendations

- 3.1 A Strategic Risk Report is provided to the JASP quarterly in order to keep the Board informed as to the level of strategic risk within the Force and NOPCC and provide assurance as to the effectiveness of risk management arrangements.

4. Summary of Key Points

Risk management policy and process

- 4.1 The Force and the NOPCC previously agreed a joint policy for the management of risk, in line with the Cabinet Office approved Management of Risk (M_o_R) approach.
- 4.2 Due to the recent restructure within Corporate Development and the creation of the Corporate Governance and Business Planning Team, the current risk management arrangements within the Force and NOPCC have been reviewed to see whether they are fit for purpose. The proposed way forward was presented to JASP in December 2016.

5 Financial Implications and Budget Provision

- 5.1 There are no direct financial implications as a result of this report. Financial implications as a result of each risk will be assessed and managed on an individual basis.

6 Human Resources Implications

- 6.1 Providing professional advice on risk management is the responsibility of the Corporate Governance and Business Planning team.
- 6.2 General responsibility for managing risk forms an integral part of the job descriptions of individuals throughout the Force.

7 Equality Implications

- 7.1 There are no known equality implications associated with the implementation of the Risk Management Policy.
- 7.2 Where a particular risk is identified that could have an impact on the Force's equality objectives that risk will be assessed and managed in line with the Risk Management Policy.

8 Risk Management

- 8.1 One of the main aims of the Risk Management Policy is to achieve consistent application of risk management principles and techniques across all areas of the Force and NOPCC.
- 8.2 If the Force and NOPCC do not practice effective risk management within their decision making there is a risk of non-compliance with the principles set out in the Joint Code of Corporate Governance.

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

- 9.1 An understanding and appreciation of strategic risk is important in determining the priorities in the Police and Crime Plan, and subsequently informing the development of effective strategies, policies and plans to address those priorities. It is expected that the implementation of the Risk Management Policy will lead to improved understanding of strategic risk and therefore impact positively on the achievement of Police and Crime Plan objectives.

10 Changes in Legislation or other Legal Considerations

- 10.1 Where potential changes in legislation or other legal considerations represent a significant threat or opportunity for the Force or the NOPCC these are evaluated and managed in line with the Risk Management Policy.

11 Details of outcome of consultation

- 11.1 Each Strategic Risk has been assessed with the relevant risk owner and the DCC and Chief Executive of the NOPCC, respectively.

12. Appendices

Appendix 1 – Force Strategic Risk Register, 2016/17 Quarter 4

Appendix 2 – NOPCC Strategic Risk Register, 2016/17 Quarter 4



Force Strategic Risk Register

Business area	Force
Responsible officer	Deputy Chief Constable (DCC)
Period	Quarter 4, 2016/17

URN	Category	Risk description	Risk Owner(s)	Proximity	Probability	Impact	Rating	Trend	Response plan	Risk rating confidence
NPF0017		<p>Reduction of MOSOVO and increase in the number of RSOs following Operation Hera resulting in failure to comply with offender management via MAPPA controls and inability to meet CSOD disclosure requests and ARMS assessments.</p> <p>Update: Update: The remodelled business case is complete and incorporates Public Protection. It was presented to FEB on Monday 30th January and gives a clear indication of future growth.</p> <p>Short Term Plan – There is a high workload within the team but this is being managed through officers working extra hours. Visits and assessments are being done and the frequency of visits is currently being met. (See attached paper)</p> <p> MOSOVO RISK.docx</p>	Head of Public Protection	Daily	Very high (4)	Very high (4)	Very high (16)		<p>Work commenced and agreed by ACPO under Op Kalends ensure other agencies can assist and have an impact on RSO management.</p> <p>Ensure effective intelligence structure to ensure on-going support for management of archived offenders under Op Kalends</p> <p>Recruitment process or change management process to select / backfill into identified vacancies within MOSOVO</p>	Substantial

NPF0019	Operational efficiency and effectiveness	<p>The Force has produced a Police officer reduction profile to 2020. This profile shows officers leaving through retirement and natural leavers. This profile enables the force to meet its reducing financial budgets. However, there is a risk that by reducing officer numbers and not replacing officers as they leave the force will not be able to operate effectively.</p> <p>The rate of leavers is exceeding the anticipated glide path and whilst it provides confidence in meeting financial targets it presents a risk in terms of operational effectiveness</p> <p>Update: At FEB on the 20th January the Chief Officer Team approved a Local Policing Structure for 31st March 2018 which will have 1493 FTE Police Officers subject to financial affordability.</p> <p>We know from projections that the natural number of officers we will have within Local Policing is 1421.7 FTE.</p> <p>There is a gap of 71.3 FTE Police officers that we need to identify funding to enable this happen. We have more than 1493 officers within Local Policing and there are already plans to recruit 64 police officers during the next 12 months.</p>	DCC Torr/Supt Corporate Development	Daily	Very high (4)	Very high (4)	Very high (16)		<p>Prepare business case outlining how areas will operate within targeted establishment</p> <p>New cohort of 14 officers will commence training in November 2016</p> <p>Recruitment of police officers is proposed in April 2017</p>	Reasonable
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NPF0019	Operational efficiency and effectiveness	<p><i>The meeting asked for the plan to be finalised by the 28th February 2016 and this will include a plan on how the 71.3 officers will be replaced over the next financial year ensuring that we provide sufficient officers to staff the operating model.</i></p> <p><i>The risk is presently stable but will increase if we are not able to resolve the future shortfall in officer numbers. There is a Business case progressing for the Crime Systems team to reduce its sergeants from 6 to 2 and also to lose a constable post, although this will add cost through civilianisation it will enable local policing to retain an additional 5 FTE police posts. This will happen in the first half of the 2017 – 2018 financial year.</i></p>	DCC Torr/Supt Corporate Development	Daily	Very high (4)	Very high (4)	Very high (16)		<p>Prepare business case outlining how areas will operate within targeted establishment</p> <p>New cohort of 14 officers will commence training in November 2016</p> <p>Recruitment of police officers is proposed in April 2017</p>	Reasonable
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NPF0022	Operational efficiency and effectiveness	<p>The force is struggling to resource incidents, grade 2 and 3, relating to vulnerability, with potentially some incidents having to wait longer than they should.</p> <p>Update: This risk is being managed through the Vulnerability Gold meeting chaired by ACC Prior. The next meeting is on Friday 2nd February 2017 and the outstanding DUI's for Domestic Abuse are managed through the daily management meeting. The Uniform Operations Command are also considering an approach used by the West Midlands Police to more effectively allocate incidents to appropriate teams. A visit is planned for 2nd February to give an insight into how this works.</p> <p>Rapid Improvement Event – this has now taken place, several work streams were identified and these are now being progressed by Public Protection. The Business Improvement Team are currently working on a Service Specification which will give an early indication of demand as work flows through the organisation. There will be a requirement for future pieces of work to further understand demand and capture the details of impact on system and process. This is a long term piece of work and will be progressed through our Quality of Service Framework and Priority Based Budgeting.</p>	ACC Operations	Daily	Very high (4)	Very high (4)	Very high (16)		<p>Short Term – Domestic Abuse team within Public Protection reviewed the domestic jobs and all other jobs were looked at by the CRIM team and actioned appropriately.</p> <p>Long Term – Business Improvement Team are looking at demand and resourcing of jobs</p>	Substantial
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NPF0011	Compliance	<p>Design of custody cell basins, water dispensers and air vent grilles does not meet requirements of APP as they create a potential ligature point, which may result in a detained person being placed in a non-compliant cell and may endanger life of a detained person.</p> <p>Update: FMB have approved the option to build a new Bridewell. An interim business case went to FEB on 30th January. A project team will now be formalised and a full business case written to outline options for the new build.</p>	Head of EMCJS / Head of Custody (North)	Daily	Very high (4)	Medium (2)	Medium (8)		<p>Prepare business case for replacement works (Assets dept)</p> <p>Complete installation of replacement fixtures (Assets dept)</p> <p>Feasibility study being progressed and examining what other forces do</p> <p>Wash basins at Bridewell and Mansfield have been replaced with Home Office approved basin.</p>	Substantial
NPF0003	Finances	<p>The Force's appeal against the employment tribunal ruling on use of Reg A19 fails, resulting in the award of compensation to c100 former officers.</p> <p>Update: The Forces appeal against the adverse finding was successful, but the officers appealed against the decision of the Employment Tribunal. The cases will be heard by the Court of Appeal on 31st January 2017. A decision is not anticipated, however, for a few weeks after the hearing. 2017.</p> <p>Confirmation received cases at the Court of Appeal were not successful. The Force acted lawfully in its use of Reg A19.</p>	DCC / Head of East Midlands Police Legal Services	Jan 2017	Medium (2)	Very high (4)	Medium (8)		<p>Appeal process (EMPLS)</p> <p>Contingent liability in accounts for 2015/16 (NOPCC)</p>	Reasonable

NPF0014	Crime and community safety	<p>Due to a shortage of trained pursuit TAC advisors, and inability to provide training through EMOpSS to increase capacity, a vehicle pursuit has to be abandoned when it would have been beneficial to continue.</p> <p>Update: EMOpSS have now identified training dates to provide the East Midlands with TPAC training to advanced drivers. This will allow the increase of the number of officers trained in tactics. In relation to command of such incidents, there is a pursuit command course being held on 20th March-25th March. Supt Cartwright (the training lead for EMOpSS) has a meeting next week to discuss further courses and has required EMCHRS to conduct a training needs assessment in relation to the whole area of pursuits and roads policing needs.</p>	EMOpSS	Daily	Medium (2)	High (3)	Medium (6)	 <p>Decision to prioritise TAC advisor training is being pursued.</p> <p>Timing of shifts to ensure cover</p> <p>Regional training coordinated by EMOpSS and EMCHRS</p> <p>Removal of standard initial phase pursuit to be explored in meeting with DCC Gary Knighton</p>	Reasonable
NPF0006	Operational efficiency and effectiveness	<p>Closure of Bridewell custody following mechanical or electrical failure, resulting in significantly reduced custody provision</p> <p>Update: FMB have approved the option to build a new Bridewell. An interim business case went to FEB on 30th January. A project team will now be formalised and a full business case written to outline options for the new build.</p>	Head of EMCJS / Head of Custody (North)	Next 2 years	Medium (2)	High (3)	Medium (6)	 <p>Prepare business case to replace ageing equipment (Assets department)</p> <p>Custody business continuity plan to divert to other forces (EMCJS)</p>	Substantial

NPF0007	Life and safety	<p>Clogging of air ducting at the Bridewell impedes fire detection and containment measures, resulting in a fire safety incident which endangers the lives of officers, staff, detained persons and visitors.</p> <p>Update: FMB have approved the option to build a new Bridewell. An interim business case went to FEB on 30th January. A project team will now be formalised and a full business case written to outline options for the new build.</p>	Head of EMCJS / Head of Custody (North)	Next 2 years	Low (1)	Very high (4)	<div style="background-color: #92d050; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> Low (4) </div> 	Prepare business case for replacement fixtures or cleaning existing ducting (Assets dept)	Reasonable
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NPF0020	Finances	<p>Due to the significant £7.7m overspend the Force has less reserves to rely on. Contributory factors to the risk are –</p> <ul style="list-style-type: none"> - The Force didn't deliver £3.5m efficiencies. - The Force encountered £3.6m budgeting errors. - The Force had general overspend in specific areas such as overtime. <p>This may impact upon current and future activity.</p> <p><i>Update: Quarter 3 monitoring continues to give confidence that the Forces financial objectives will be achieved. Some significant in year spending pressures have been off-set by reductions in employee costs as the force remains in advance of the reductions required to achieve its 'Delivering the Future' project. Non-staff savings remain on target and overall a £0.95m underspend is expected at year end.</i></p>	Temporary Head of Finance	Daily	Low (1)	Very high (4)	<div style="background-color: #92d050; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> Low (4) </div> 	<p>Appointment of Temporary Head of Finance</p> <p>Improved budget monitoring</p> <p>Force Executive Board's agreement to Action Plan</p> <p>Completion of Medium Term Financial Plan</p>	Reasonable
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NPF0010	Environment	<p>Excessive fuel spillage at one of the Force's underground storage tank sites that does not have a fuel interceptor (Ollerton, Hucknall, Oxclose Lane & Sutton in Ashfield) results in pollution of the local watercourse</p> <p>Update: The business case is currently being revised, it is due to go to the Business Improvement Group in March 2017.</p>	Head of Assets / Building Surveyor	Next 12 months	High (3)	Very low (1)	Low (3)		<p>Review long term options for bunkered fuel sites (Assets dept)</p> <p>Spillage response measures in place - spill kits, notices (Assets dept)</p>	Reasonable
NPF0013	Life & safety	<p>The design of stainless steel WC pans in custody (70+ cells) enables a detained person to secure a ligature under the rim, resulting in an incident which endangers their life</p> <p>Update: FMB have approved the option to build a new Bridewell. An interim business case went to FEB on 30th January. A project team will now be formalised and a full business case written to outline options for the new build.</p>	Head of EMCJS / Head of Custody (North)	Daily	Very (1)	Very high(4)	Low (4)		<p>Review the facilities and recommend whether the risk should be accepted or avoided (Health & safety, Assets and Custody)</p>	Substantial

NPF0001	Operational efficiency and effectiveness	<p>Force telephony infrastructure is nearing the end of its operational life, increasing the probability of critical failure resulting in temporary loss of internal & external communications capability.</p> <p>Update: The control room telephony has now gone live and therefore that major part of the risk is reduced. The risk is now concerning the force wide telephony as much of this is using old DX exchanges. The support for these ends 30 Apr 17, however this only affects us as regards to bug fixes and patches, neither of these have been required over the past 8 years. The technology is old but stable and parts are available. We have purchased the telephones to replace old handsets and have plans to complete the desktop roll out by Sep 2017.</p>	Head of Information Services/ Infrastructure & Service Delivery Manager	2016/17	Low (1)	Medium (2)	Low (3)		<p>Replace Force-wide & control room telephony (IS dept)</p> <p>Control room telephony has been replaced and force wide partially replaced.</p> <p>Telephone handsets have been purchased for force wide. Technical staff have been trained and we are developing a deployment plan.</p>	Reasonable
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NPF0021	Operational efficiency and effectiveness	<p>Reduction in crime recording compliance impacting on crime levels, which may lead to a negative Impact on Force reputation and public confidence.</p> <p>Update: Short Term - Audit completed. Remedial action being disseminated to Divisional Staff for appropriate action, overseen by DCC Torr/ACC Prior, Det Chief Supt Gerard Milano.</p> <p>Long Term – A business case has been written and has been taken to Business Improvement Group and will subsequently be presented at FMB. The business case covers all the supporting work done in order to calculate which options are feasible and how many staff will be required. There are risks within our findings these are also contained in the BC. The only outstanding issue involves the new “initial” and “Updater” Webforms. These are currently only visible and being used by CRIM and there have been problems experienced. These problems are not issues with the Webforms themselves but how they are being used. If the proposed team is implemented as per the Business Case, the roll out of the initial and updater Webforms takes place at the same time and work is carried out to ensure sufficient comms and training are delivered as well as the possibility of a mini review of how the Webforms have been used so far.</p>	DCC Torr/Supt Corporate Development	Daily	Low (1)	Very high (4)	<div style="background-color: #90EE90; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> Low (4)  </div>	<p>Force level rescue plan –</p> <p>Short term – review all violent, sexual offences and rape incidents closed without a crime number from 1st April to 31st July this year. Take remedial action as appropriate</p> <p>Long term – Introduce an initial crime recording team (10 people) in line with the new crime input wizard. B Foster to prepare paper for FEB approval</p>	Reasonable
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Proposed new risks

URN	Category	Risk description	Risk Owner(s)	Proximity	Probability	Impact	Rating	Response plan	Risk rating confidence
NPF0023	Operational efficiency and effectiveness	<p>The Emergency Services network which uses cutting edge technology, is a replacement for the current system used by the emergency services. Public safety and reliable communications for our emergency service users is paramount and we will not take risks in deploying any service which is not ready. This must also include allowing the emergency services sufficient time to test and trial devices on the new network.</p> <p>Update – The project continues to be managed with recruitment to key roles. The team are also linked in directly with OcIP and the national programme to ensure the force is ready for the transition.</p> <p>There is a declared slippage from December 2017 to no earlier than June 2018.</p>	Project Lead Chief Supt Helen Chamberlain	2017 /18	High (3)	High (3)	High (9)	<p>Working with the regional coordination manager and national Home Office Liaison team in understanding what the slippages mean practically (Ch Supt Chamberlain)</p> <p>Ensuring that we lobby HO to ensure the correct coverage by EE (CI Neil Dorothy)</p> <p>That all control rooms are PSN compliant and Transition 'ready' (Stuart Kelly)</p> <p>Appropriate contracts are renewed within timescales (Airwave spocs and CO Neil Dorothy)</p>	Reasonable

Proposed new risks

URN	Category	Risk description	Risk Owner(s)	Proximity	Probability	Impact	Rating	Response plan	Risk rating confidence
NPF0024	Operational efficiency and effectiveness	Issues around the quality of data input into Force systems leads to incorrect assessment of crime and inherent threat/risk leads to members of the public becoming exposed to harm.	DCC Torr/Supt Corporate Development	2017 /18	High (4)	High (4)	High (16)	Senior Lead Officer to put together paper to Quality Board on way forward	Substantial

Closed risks

URN	Risk description	Reason for closure	Date closed	Closed by
NPF 0015	Financial forecasting indicates higher spending than income. The Force currently anticipates that £7.7m of reserves will have to be utilised to balance the budget for the year end 2015/16. Reduction in resources spending will impact upon current and future activities and service delivery.	£9.3m was taken from the reserves to balance the budget for the year end 2015/16. This will create a greater risk in relation to future spending for the force Closure recommended due to budget end	29.06.2016	DCC/ Temporary Head of Finance
NPF0018	There is currently a backlog of Annex D and CRIMS checks dating back from January 2016 and September 2015, respectively. Due to staff sickness, retirements and resignations the organisation is unable to comply with its statutory requirements in relation to information sharing through the MASH or to civil courts. The result is that the Force is not aware of the risks that present themselves to the most vulnerable sections of society, including children.	As of 2 nd September there are 14 Annex D's outstanding and 38 CRIMS checks. Det Supt Rob Griffin has agreed to the secondment of one member of his staff to continue to address the above. Going forward the backlog will be zero by the end of the week and the two permanent full-time staff will deal with the workload as and when it occurs.	06.09.2016	DCC/ Information Management Lead/ Head of Public Protection
NPF0016	DIEU has suffered equipment failure of its CCTV video identification recording facility. The provision of this equipment is a requirement of PACE/case-law. Equipment was supplied by an external contractor so it is unsupported by Information Services and contents are not managed in accordance with Force requirements. Lack of a robust equipment/IT solution may render prosecutions ineffective where conduct of an ID parade is a key evidential requirement.	The installation and health check were completed at the beginning of October. The equipment is now fully operational.	05.11.2016	DCC/ Head of Information Services/ Head of Crime Support

Closed risks

URN	Risk description	Reason for closure	Date closed	Closed by
NPF 0003	The Force's appeal against the employment tribunal ruling on use of Reg A19 fails, resulting in the award of compensation to c100 former officers.	The Forces appeal against the adverse finding was successful, but the officers appealed against the decision of the Employment Tribunal. The cases were heard by the Court of Appeal on 31 st January 2017. Confirmation received that the cases at the Court of Appeal were not successful. The Force acted lawfully in its use of Reg A19.	03.02.2017	DCC/ Head of East Midlands Police Legal Services



OPCC Strategic Risk Register

Business Area	OPCC
Responsible Officer	Chief Executive
Period	Quarter 4, 2016/17

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 001	Financial	<p>Force unable to achieve £12 million efficiency savings and balance budget, requiring further use of reserves and negative impact on recruitment of officers.</p> <p>Update – Ongoing work is underway to identify £4.6m savings required in 2017/18. The PCC will be setting the 2017/18 precept for policing in early February having consulted widely with local communities.</p>	Charlie Radford, CFO, OPCC	2016/17	Low (1)	Very High (4)	Low (4)	↔	<ul style="list-style-type: none"> • Letter to Chief Constable setting out budget requirements and parameters • Business cases to be actively reviewed by Force/OPCC • Monthly budget meetings with Force • Escalation process to weekly PCC/CC briefings • Base budget reviews to be completed in autumn • 2020 workforce plan aligned to MTFP 	Reasonable

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 002	Reputation	<p>Reduction in crime recording compliance impacting on crime levels, which may lead to a negative Impact on Force reputation and public confidence.</p> <p>Update – Extensive work to improve local NCRS compliance between September and December 2016 led to around 2,200 additional crimes being captured.</p> <p>While this has bolstered internal confidence in accuracy of recorded crime data and helped to ensure victims are correctly identified and offered the support they require, it has highlighted issues in determining accurate trends in recorded crime and drawing reliable comparisons with other police force areas.</p>	Phil Gilbert, Head of Assurance and Performance, OPCC	Immediate	Low (1)	Very High (4)	Low (4)	↔	<ul style="list-style-type: none"> • Quarterly dip sampling undertaken by Force Crime Registrar • Crime & Incident Data Quality Board meets quarterly to review and respond to NCRS audits and compliance. • NOPCC staff represented on above board. • Compliance with NCRS is a measure in the Commissioner’s Police and Crime Plan (Theme 7 measure 4) and reported in the Performance and Insight reports. 	Reasonable

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
		<p>Recognising these limitations, the PCC has committed to work with the force to review the Police and Crime Plan performance framework in 2017. This will consider wider use of more qualitative measures such as the HMIC PEEL assessments in addition to other outcome-based indicators of performance.</p> <p>NCRS has been highlighted as an ongoing area of focus for HMIC as part of their proposed inspection plan for 2017/18 and work will continue locally to monitor and scrutinise compliance, particularly among high risk crimes. Technological solutions (e.g. a newly created web form to allow specific teams to create crimes at the earliest opportunity) continue to help drive improvements in this area.</p>					Low (4)			

Identifier	Category	Risk Description	Owner/Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 003	Finance	<p>Increase budget pressure from A19 and other employment litigation.</p> <p>Update – Confirmation received cases at the Court of Appeal were not successful. The Force acted lawfully in its use of Reg A19.</p>	Charlie Radford, CFO, OPCC	Jan 2017	Med (2)	Very High (4)	Med (8)	↔	<ul style="list-style-type: none"> Contingent Liability in accounts 16/17 Review as part of reserve strategy 	Reasonable

Identifier	Category	Risk Description	Owner/Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 004	Reputation	<p>Instability and multiple retirements within the Chief Officer Team impacting on police leadership and delivery on performance and training.</p> <p>Update – New Chief Constable received unanimous support from Police and Crime Panel on 9th December 2016.</p> <p>New Chief Constable takes responsibility for policing in Nottinghamshire on 1st February 2017.</p> <p>Deputy Chief Constable has announced his retirement at the end of May.</p> <p>New Chief Officer team to be appointed as a priority over next few months.</p>	Kevin Dennis, Chief Executive, OPCC	Immediate	Low (1)	Very High (4)	Low (4)	↔	<ul style="list-style-type: none"> • Delay retirement of DCC • Temporary Chief Constable arrangement until March 2017 PCC to set clear objective. • College of policing to lead executive search programme to help attract pool of external candidates • Active involvement of Partners and Stakeholders in recruitment process 	Reasonable

Identifier	Category	Risk Description	Owner/Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 005	Compliance/Operational Efficiency and Effectiveness	<p>Inconsistent force referrals to victims support services which may lead to victims not getting the support they require and lack of compliance with Victim's Code.</p> <p>Update - The Head of PPU has investigated referrals to domestic and sexual violence services and providers are now reporting increased referrals. The pilot of "opt in" consent based referrals to Victim Support in the summer of 2016 went well. The new Nottinghamshire Victim CARE service, delivered by Catch 22, has now been mobilised and force referrals are being received. Victim CARE is now working to establish stakeholder and community links to build self referrals.</p>	Nicola Wade	Immediate	3 (Med)	2 (Med)	6 (Low)		<ul style="list-style-type: none"> • Head of PPU investigating referrals to domestic and sexual violence services. • Consent based referrals to Victim Support piloted during summer/autumn 2016. Force lead on Victims' Code implementing plans to address officer compliance on capturing consent and enhanced entitlements. • Nottinghamshire Victims' CARE service ITT will implement new model to substantially raise the profile and reach of victim support service within communities who may not report crime to the police. 	Reasonable

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
		<p>Training on the Victims' Code is being rolled out to all officers in the force, which should increase referrals.</p> <p>The level of police referrals to all victims services should be monitored over time to ensure that victims are receiving the support they need.</p>								

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 006	Reputation	<p>Reduction in Partnership support and joint working between Nottingham City Council and Nottinghamshire Police.</p> <p>Update - Partner representatives were involved in new Chief Constable Recruitment. There was unanimous support for Craig Guilford as the preferred candidate. New Chief Constable starts on 1st February. Active consideration will be given to the Forces current operating structure.</p>	Kevin Dennis, Chief Executive, OPCC	Immediate	Med (2)	Very High (4)	Med (8)	↔	<ul style="list-style-type: none"> • Ongoing dialogue PCC and Chief Constable, Deputy Chief Constable with Senior officer with political leaders • One to one meetings to maintain relationships and attempt to resolve concerns and perceptions of risk • Active involvement of partners in designing structures • Partner and stakeholder involvement in new Chief Constable recruitment process 	Limited

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 007	Crime and Community Safety / Compliance	<p>Work with Equinox Strategic Management Group to implement and monitor risk register relating to victims. Survivors support/ resources and information sharing data.</p> <p>Update - OPCC Chief Executive and the Head of Public Protection continue to attend Equinox SMG. PCC is funding counselling support for those survivors and carers requested following the City Listening event.</p> <p>Work has begun on developing a specification to employ an Engagement /Liaison Officer between police, sector partners and survivors to ensure needs are being met and providers are being responsive. Review of Adult SARC is underway and a plan to re-commission County Sexual Violence services in County area is being discussed.</p>	Kevin Dennis. Chief Executive, OPCC	Immediate	Low (1)	Very High (4)	Low (4)	↔	<ul style="list-style-type: none"> • Active attendance at SMG Strategic Management Meeting • Reviewing and monitoring risk register at each meeting • Mitigations/response plans to be actively implemented by lead agency. • Active engagement/listening to survivors events/research 	Reasonable

Identifier	Category	Risk Description	Owner/ Manager	Proximity	Probability	Impact	Rating	Trend	Response Plan	Risk Confidence Rating
OPCC 008	Financial	Funding Formula Review Update – Consultation on revised funding formula anticipated in the Spring for implementation in 2018-19.	Charlie Radford, CFO, OPCC	2018	High (3)	High (3)	High (9)	↔	PCC and other regional officers represented on the National Technical and Oversight boards. Will continuously monitor and provide evidence where possible.	Reasonable
OPC C009	Financial	Level of Reserves Update – Revised reserves strategy about to be issued requires reserves to be replenished over the medium to long term.	Charlie Radford, CFO, OPCC		Low/ Med (2)	High (3)	Med (6)	↔		Reasonable

Proposed new risks

URN	Category	Risk description	Risk Owner(s)	Proximity	Probability	Impact	Rating	Response plan	Risk rating confidence

For Information	
Public/Non Public	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9th March 2017
Report of:	Julie Mair, Head of Corporate Development
Report Author:	Amanda Froggatt, Risk and Business Continuity Officer Natalie Baker-Swift, Corporate Governance and Business Planning Manager
E-mail:	amanda.froggatt@nottinghamshire.pnn.police.uk
Other Contacts:	Natalie Baker-Swift, Corporate Governance and Business Planning Manager
Agenda Item:	08

Audit and Inspection Report, Quarter 4, 2016/17

1. Purpose of the Report

- 1.1 To provide the Audit and Scrutiny Panel with an update on progress against recommendations arising from audits and inspections which have taken place during Quarter 4, 2016/17
- 1.2 To inform the Panel of the schedule of planned audits and inspections.

2. Recommendations

- 2.1 That the Panel notes the progress made against audit and inspection recommendations and takes note of forthcoming audits and inspections.

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.

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 HMIC.
- 4.2 Appendix 1 'Audit and Inspection Actions Update Report Quarter 4, 2017/18' provides details of specific actions arising from audits and inspections that are either off target, at risk of being off target or closed.
- 4.3 There are currently no actions which have exceeded the proposed target date. There are 10 actions showing as 'at risk' of being off target i.e. they will exceed their target date in the next month.

4.4 Recent and Forthcoming Inspections

Recent Inspection Activity

Date of Inspection	Inspection Area	Date Report Received	Final Grading	Status
Oct 2016	PEEL: Effectiveness Inspection 2016	Feb 2017	TBC	Draft report received and checked for factual accuracy. Returned to HMIC 06.02.2016

Forthcoming Inspections

Date of Inspection	Inspection Area	Status
7th & 8th March 2017	PEEL: Legitimacy, File Review	Details confirmed with PSD.
15th – 19th May 2017	PEEL: Spring Inspection 2017 (Efficiency, Leadership and Legitimacy)	Document and data submission being prepared for submission on 10th March.

4.5 Recent and Forthcoming Audits

Recent Audit Activity

Date of Audit	Auditable Area	Date Report Received	Final Grading	Status
July 2016	Effectiveness of Audit and Scrutiny Panel	Feb 2017	None	Final report issued.
Nov 2016	Collaboration: EMSCU	Jan 2017	Substantial	Final report issued.
Nov 2016	Collaboration: EMPLS	Nov 2016	Limited	Final report issued.
Dec 2016	Collaboration: EMCHRS	NA	NA	Awaiting draft report.
Jan 2017	Collaboration: EMSOU	NA	NA	Awaiting draft report.
Jan 2017	HR Recruitment and Selection	Jan 2017	TBC	Draft report issued.

Forthcoming Audits

Date of Audit	Auditable Area	Status
Mar 2017	Data Quality	Scope confirmed.
Mar 2017	Risk Management	Scope confirmed.
TBC	Collaboration: EMOpSS	Audit to take place in Q4.

4 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.

5 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.

6 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.

7 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.

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

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

9 Changes in Legislation or other Legal Considerations

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

10 Details of outcome of consultation

- 10.1 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.

10.2 All planned actions are added to the action planning system, 4Action, for management and review until completion.

12. Appendices

12.1 Appendix 1: Audit and Inspection Actions Update Report Q4 2016/17

Appendix 1: Audit and Inspection Actions Update Report, Quarter 4, 2016/17

RAG Key

On target	On target to deliver within constraints, including target completion date, budget and resource allocated. It is also anticipated that any expected efficiency savings will be met. No further action required at this time.
At risk	At risk of going off target (within 1 month): It is anticipated that there will be some slippage from the original target completion date and / or other constraints such as budget, available resource or expected efficiency saving. To be highlighted to the Portfolio Board as an issue for monitoring.
Off target	Off target: Target date and / or other constraints such as budget or available resource have been exceeded, or it is anticipated that an expected efficiency saving will not be met. Issue to be highlighted to the Portfolio Board and corrective action sought to meet business objectives.

Overdue Actions
There are no overdue actions to report for this period.

Actions at risk of becoming overdue within 1 month							
Reference	Target Date	Action Owner	Recommendation	Action	Source Title	Status	Action Update
CC/94a4/15916	28/2/2017	Austin Fuller	Recommendation 6: OCG working strategies should always include a Community Engagement plan and a senior member of the relevant NPT should be assigned to work jointly with a LRO to design and deliver the OCG management plan	T/Det Supt Austin Fuller to brief all LRO's who have an OCG action plan. b - IT to build a drop down marker / field to include a reference to an OCG management plan.	Effectiveness 2015	At risk	Chief Inspector Phil Davies has written a generic community engagement draft as a result of the meeting on the 30th January 2017. This will now include a bespoke section of organised crime. The LRO will work with the neighbourhood Policing inspector to design a bespoke engagement plan which will then be managed through ORCA. When complete this will be put on ECINS.
CH/5484/1415	28/2/2017	Leigh Sanders	1. Immediately: (pg 9-11) We recommend that Nottinghamshire Police ensures that in domestic abuse incidents, officers see and speak to children (where possible and appropriate) and record their observations of a child's behaviour and demeanour so that better assessments of children's needs are made.	Provide an update regarding effectiveness (by further audit) in this area to ensure that the voice of the child is being heard as a matter of course (following the current audit, the planned audit, the training programme being delivered and the peer review.)	National Child Protection Inspection. Post Inspection Review 3-7th August 2015	At risk	Originally it had been intended that front line officers (from the DAIT) would undertake the audit. The Head of PP has decided that this is not an appropriate use of those staff. It has since been agreed that Richard Mace (from MI) will complete it. However, he has now been delayed because of his continued commitment to outstanding information sharing (Op Socius) from which he cannot be released until the new staff are properly trained to fulfil this role. It was confirmed Richard Mace cannot now undertake this audit and so Head of PP has re-assigned it to DS Steve Peaks. The audit is still scheduled to be done by the end of February 2017.

BT/24b9/11216	28/2/2017	Paul Winter	<p>Recommendation 2: (cross ref with Rec 5) By 28 February 2017, the force should ensure that there are credible and achievable plans in place for the new police operating model and provide clarity on the effect the new model will have on the service provided to the public.</p> <p>Recommendation 5: The plans should make clear how the reductions in workforce numbers are to be achieved and provide costed options for service provision and clarity on the impact on services of each option.</p>	<p>Action:</p> <p>a) Produce a plan for the Police Operating Model, supported by a report which provides clarity on the effect the model will have on the service provided to the public.</p> <p>b) The plans should make clear how the reductions in workforce numbers are to be achieved and provide costed options for service provision and clarity on the impact on services of each option.</p>	Efficiency Nov 2016	At risk	A paper was given to the Force Executive Board which had recommendations for Police Officers and affordability. The Board were also made aware of plans for Policing staff and local policing but it is just a matter of looking at Police finances. The complete update is on time for the 28th February 2017.
CH/e4ba/1415	28/2/2017	Mel Bowden	<p>6. Within three months: (pg12-14) We recommend that Nottinghamshire Police undertakes a review, together with children's social care services, of how it manages child protection referrals to ensure a timely response to initial concerns, that action is subsequently taken, concerns are followed up and cases are regularly reviewed.</p>	Action 6: Carry out a review with identified practitioners from both local authorities and the police to address a plan for the points raised within the recommendation and also highlight where action has already taken place with Theresa Godfrey (Social Care County) and John Matravers (Social Care City).	National Child Protection Inspection. Post Inspection Review 3-7th August 2015	At risk	<p>The Head of PP has commissioned a review by DCI Bowden (or delegate) to work JOINTLY with a rep from the City CSC and a rep from the County CSC to RANDOMLY select 15 City cases and 15 County cases and to review and test (and then make any recommendations for processes that need improvement):</p> <ul style="list-style-type: none"> • How was timely was the response to any concerns • How effectively was information shared • How effective/timely was any subsequent action taken • Were any later concerns identified and followed up • How often were reviews of the case conducted. <p>The deadline for a final response to this review is 28th February 2017.</p>
CC/44be/15916	28/2/2017	Austin Fuller	Recommendation 12: Produce an internal communications strategy that incorporates the wider partnerships. A dedicated OCG Intranet page containing relevant reference materials would increase awareness across all functions of the force.	Action 12: Produce an internal communications strategy that incorporates the wider partnerships. Introduce a dedicated OCG Intranet page containing relevant reference materials to increase awareness across all functions of the force.	Effectiveness 2015	At risk	Corporate Communications have agreed to allocate a Comms Officer to design a comms strategy, but the use of the Intranet is currently on hold as it is currently being redesigned. This action will be complete by the end of February 2017.
BT/84ba/211116	31/1/2017	Ronnie Adams	Recommendation: The Contract Procedure Rules and Standing Orders document and EMSCU Policies and Strategies should be reviewed and updated regularly to ensure the document reflects current practices	Action 4.1: Review and update the Contract Procedure Rules.	Procurement Follow up Nov 2016	At risk	The EMSCU standard documentation is currently being reviewed, this will be completed by the end of February.
VA/14ad/101115	28/2/2017	Andrew Goodall	4.9 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.	Action:- 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.	Victim Code of Practice	At risk	Action reviewed. The training has commenced. Nothing further to add at this time.

BT/a4b5/10615	1/7/2016	Shaun Ostle	Recommendation 4.3 PSV's should undertake a brief annual PDR where performance of the individual can be discussed. Where there are weaknesses in the individuals performance further training should be provided to ensure that the Force is receiving the maximum benefit of its PSV's. PDR documents should be maintained by HR to ensure the process is completed by all PSV's.	Action: Implement an annual PDR for PSV's after consultation with the Human Resources Department.	Volunteering	Closed	Action closed 7.11.2016. The CIPD have decided that it will not provide volunteers with formal PDR's however there will be informal catch ups where feedback will be given to volunteers.
BT/d489/4716	30/9/2016	Janet Carlin	Recommendation: All police forces and CPS areas should, as a matter of urgency, jointly review arrangements for the provision, transportation and storage of hard media to ensure it is available securely to all appropriate individuals	Action: Jointly review arrangements with CPS for the provision, transportation and storage of hard media to ensure it is available securely to all appropriate individuals	Delivering Justice in a Digital Age	Closed	Action closed 7.11.2016 Further work is under way to minimise the amount of material which is transported as a hard copy. One way in which Nottinghamshire is doing this is by using more digital sources. However all hard copy documentation is closely monitored and if there are any breaches they can be challenged and reported to information security.
BT/a4b0/22116	31/12/2016	Leah Johnson	Recommendation 3: Regular reports on custody, including the data above, should be provided routinely by forces for consideration by the police and crime commissioner and be published on PCC's websites, to demonstrate to the public that the police are delivering services to communities on a fair and transparent basis.	Action: Nottinghamshire Police to provide regular reports on custody, including agreed mandatory Annual Data Return, to the Police and Crime Commissioner, for publication on the PCC's website	Welfare of Vulnerable People in Custody	Closed	Action closed 27/01/2017 The Northants work is now complete and their model is to be adopted by the other OPCCs. The Q2 data is currently being processed by Northants.
AF/5483/28716	31/12/2016	Det Supt Rob Griffin	Recommendation - By September 2016, Chief Constables should ensure management processes are in place which focus on outcomes for children who go missing, and to provide better analysis to understand the effectiveness of the police and multi-agency responses. Information should include the diversity of the communities the force serves	Develop a consistent information management process which focuses on outcomes for children who go missing to include - a. better analysis to understand the effectiveness of the police and multi-agency responses b. include information references to the diversity on the communities the force serves c. to show priority according to risk and vulnerability Evaluate the success after 3 months of the information management process, using a-c as part the evaluation criteria	Missing Children. Who cares?	Closed	Action closed 25/11/2016 The Force has reviewed the approach to missing from home enquiries across the force area and implemented a revised approach to ensure improved quality and consistency of service to this vital area of business.
BT/54b2/25116	31/10/2016	Gerard Milano	Recommendation 3 By 30 June 2016, every police force in England and Wales should publish an action plan that sets out in detail what steps it will take to make maximum use of the ROCU capabilities, minimise duplication at force level, and ensure that the use of shared ROCU resources are prioritised between regional forces. This action plan should be developed: * in consultation with police and crime commissioners, ROCUs and the ROCU executive board; * with regard to both local force priorities (in particular, as specified in the relevant police and crime plan) and National Crime Agency (NCA) priorities; and * with regard to the other recommendations contained in this report.	Action: Assess areas of duplication by conducting a gap analysis in relation to locally held resources with assets that are also held at the ROCU. If required produce a force bespoke plan to reduce this duplication.	Regional Organised Crime Units. A review of capability and effectiveness.	Closed	Action closed 18/11/2016 Detective Chief Superintendent Milano met with the CC and provided a report titled 'Specialist Programme phase 1', completion has been supported by the DCC.
CC/2482/15916	15/9/2016	Det Supt Austin Fuller	Recommendation 5: The Intelligence Unit should continue to provide the research and analytical capability to support LROs, irrespective of whether the LRO is provided from the NPT or elsewhere in the force	Action 5: No further action required. Business case written to look at the research and analytical capability broken into Thematic Areas to include one for Organised Crime led by Senior Intelligence Analyst.	Effectiveness 2015	Closed	Action closed 25/11/2016 A Business case was written to look at the research and analytical capability which has been broken into Thematic Areas to include one for Organised Crime. This is going to be led by the Senior Intelligence Analyst.

CC/5493/14916	28/2/2017	Det Supt Austin Fuller	<p>Recommendation 3: The annual force SOC profile should include contributions from NPTs and local partnerships. The profile should be shared widely across NPTs in an appropriately redacted format. NPTs should attend any relevant SOC Board hosted by the force or wider partnership</p>	<p>Action: Add to the draft SOC profile Bassetlaw, Mansfield and Ashfield. Present to Det Ch Supt Milano for scrutiny and decision on completion. Share the completed SOC profile with Neighbourhood Leads.</p>	Effectiveness 2015	Closed	<p>Action closed 06/02/2017 The profile was completed in November 2016 and has been distributed accordingly to the SOC Board and the relevant internal stakeholders.</p>
BT/493/23516	28/2/2017	Det Supt Austin Fuller	<p>Recommendation: The force should improve the awareness of organised crime groups among neighbourhood teams to ensure that they can reliably identify these groups, collect intelligence and disrupt their activity.</p>	<p>Action: The OCG Scrutiny Board to emphasise the importance to Neighbourhood lead responsible officers (LROs) how to improve the awareness of organised crime groups among neighbourhood teams to ensure that they can reliably identify these groups, collect intelligence and disrupt their activity. Promote the SOC Local Profile at a 'Neighbourhood level'</p>	Effectiveness 2015	Closed	<p>Action closed 16/12/2016 The neighbourhood leads agreed that the allocation of OCG Lead Responsible Officers can, where appropriate, be a Chief Inspector from the SNT. Neighbourhood leads can now attend the OCGM and, where they are not LRO's, arrangements have been conducted for their briefings to be concluded during Local Ops meetings. The OCG members have now been given green flags on Niche and all tasks are completed through BATS. The management plans used by the Neighbourhood LROs have been tested and have been found to be fit for purpose.</p>
BT/04b4/22116	30/11/2016	Det Supt Rob Griffin	<p>Recommendation 3 To inform the action plan specified in Recommendation 2, chief constables should review how they, and their senior officers, give full effect to their forces' stated priority on domestic abuse. This should consider how action to tackle domestic abuse is prioritised and valued, and how staff are given the appropriate level of professional and conspicuous support and encouragement. This should be done through a clear and specific assessment of the following issues in respect of domestic abuse: a) the force's culture and values; b) the force's performance management framework; c) the reward and recognition policy in the force and the roles and behaviours that this rewards currently; d) the selection and promotion arrangements in the force; e) the messages and communications sent by the senior leadership team to the rest of the force about tackling domestic abuse; f) the development opportunities for officers and staff in the force; and g) force policy on how perpetrators and victims of domestic abuse in the force are managed.</p> <p>Where the review identifies shortcomings, the chief constable should ensure the implementation of prompt, adequate and effective remedial action. Those remedial steps should be incorporated into the action plan specified in Recommendation 2.</p> <p>HMIC should be provided with a copy of each review and the</p>	<p>Action: Review how chief constables, and their senior officers, give full effect to their forces' stated priority on domestic abuse. If there are any shortcomings they should be included in the action plan as in recommendation 2.</p>	Increasingly everyone's business: A progress report on the police response to domestic abuse	Closed	<p>Action closed 01/12/2016 A self assessment was completed and submitted to HMIC during the Autumn Effectiveness Vulnerability Inspection.</p>

BT/0496/22116	30/11/2016	Det Supt Rob Griffin	<p>Recommendation 2 By September 2016, every police force in England and Wales should establish and publish an action plan that specifies in detail what steps it will take to improve its approach to domestic abuse. This action plan should be developed:</p> <p>a) in consultation with police and crime commissioners, domestic abuse support organisations and victims' representatives; b) after close consideration of all the recommendations in this report; c) with reference to all relevant domestic homicide reviews and IPCC findings, whether in connection with the force in question or another force; and d) drawing on relevant knowledge acquired or available from other sources such as CPS scrutiny panels and MARAC self assessments</p> <p>The action plan should be established on the basis of best practice, based on revised relevant guidance from the College of Policing. To ensure consistency, the College and the national policing lead on domestic abuse have agreed to provide advice on the areas that each plan should cover by the end of April 2016.</p> <p>Chief officers in each police force should oversee and ensure full implementation of these action plans. This should be a personal responsibility in each case. Police and crime commissioners should hold forces to account in this respect. HMIC will inspect forces' progress on domestic abuse as part of its new annual all-force inspection programme. Police and crime commissioners and chief</p>	<p>Action: Review, update and publish the domestic abuse action plan. This action plan should be developed:</p> <p>a) in consultation with police and crime commissioners, domestic abuse support organisations and victims' representatives; b) after close consideration of all the recommendations in this report; c) with reference to all relevant domestic homicide reviews and IPCC findings, whether in connection with the force in question or another force; and d) drawing on relevant knowledge acquired or available from other sources such as CPS scrutiny panels and MARAC self assessments</p>	Increasingly everyone's business: A progress report on the police response to domestic abuse	Closed	<p>Action closed 16/12/2016 The domestic abuse action plan is now complete, it has been shared with a key stakeholders and is being implemented through the PP's monthly Action Plan.</p>
BT/a4b5/11816	31/12/2016	Rob Taylor	<p>Recommendation 2: The blue light services need to develop a programme for delivering future JESIP tri-service training. This should incorporate refresher training, initial training for newly promoted commanders and awareness for new recruits. It should also be extended to Local Resilience Forums and other category 1 and 2 responders.</p>	<p>Action: All operational Sergeants to attend JESIP Operational Commander Course (14th September, 18th October, 22nd November 2016). EMCHRS to undertake course administration and delivery of JESIP as part of normal business</p>	The tri-service review of the Joint Emergency Services Interoperability Principles (JESIP)	Closed	<p>Action closed 16/12/2016 The package for JESIP refresher training is being developed locally with blue light partners. This will be delivered in April 2017. The new recruits and newly promoted sergeants will receive a JESIP input too. Furthermore LRF partners are invited to JESIP events and inputs are also being given to partners such as Safety Advisory Groups for football and the cricket clubs.</p>
CH/f4b6/1415	31/3/2017	Det Supt Rob Griffin	<p>3: Immediately: (pg 18-19) We recommend that Nottinghamshire Police takes steps to ensure that all relevant information is properly and uniformly recorded, and is readily accessible in all cases where there are concerns about the welfare of children.</p>	<p>Original Action 3: Implement the Public Protection module as part of phase 2 of the regional NICHE project.</p> <p>New action 3 : Carry out a review in 6 months time to ensure that the use of CATS has come to an end, that the information that was formerly input onto CATS is replicated in Niche and that we have successfully moved to the use of the PPN. (Activity request - Transformation Board)</p>	National Child Protection Inspection. Post Inspection Review 3-7th August 2015	Closed	<p>Action closed 25/11/2016 Nottinghamshire has taken steps to ensure that all relevant information is properly and uniformly recorded on Niche and is readily accessible in all cases where there are concerns about the welfare of a child.</p>
BT/f485/11816	31/12/2016	Rob Taylor	<p>Recommendation 4: There needs to be a greater knowledge and understanding of the capabilities of Airwave and the use of the interoperable channels at incidents.</p>	<p>Action: All officers and staff who use airwave should receive a refresher training session to ensure that police and multi-agency interoperability functions are understood</p>	The tri-service review of the Joint Emergency Services Interoperability Principles (JESIP)	Closed	<p>Action closed 16/12/2016 The control room staff are training as Airwave Tactical Advisors and will be able to manage an incident over an interoperable talk-group. The blue light services regularly test Airwave and talks are given to officers to ensure that staff are aware of the airwave functions in major incidents.</p>

BT/e4b7/23516	31/12/2016	Katie Ethelstone	Recommendation: The force should ensure that its local teams have sufficient information available to them to improve their understanding of local communities.	Action a): Develop an Overarching Engagement Strategy which will link the work between the Police (Neighbourhood Engagement Strategy) and the OoPCC (Engagement and Consultation Strategy).	Legitimacy 2015	Closed	Action closed 16/12/2016 An Engagement Strategy is now in place, this will be monitored by the Force Executive Board on a quarterly basis. The success of the overarching strategy will be evaluated against its aims in July 2017.
BT/d487/11216	31/3/2017	Det Supt Rob Griffin	Recommendation 15: Theme Child Detention: Improve staff awareness of child vulnerability and assessing needs.	Action: Deliver two separate 1 day sessions to improve custody staff awareness of child vulnerability and assessing their needs. Day 1 covers the changes to APP pertaining to children in detention and day 2 covers vulnerabilities in more detail, human trafficking (linked to CSE) and mental health for example. The aim is to have all staff trained across the region by April 2017.	In harms way: The role of policing in keeping children safe.	Closed	Action closed 06/02/2017 The day one session has been delivered successfully. The day two session has been superseded by an immersive death in custody package.
BT/1498/23516	31/12/2016	Phillip Davies	Recommendation: The force should ensure that its local teams have sufficient information available to them to improve their understanding of local communities.	Action b): Develop in consultation with the OoPCC a Neighbourhood Policing Engagement Strategy. Link to the overarching strategy.	Legitimacy 2015	Closed	Action closed 16/12/2016 All of the Community Profiles have been finalised across Nottinghamshire. The Profiles enable staff to understand the needs and demands of their communities whilst assisting with means of contact and engagement. There will be an on-going scrutiny throughout 2017 to ensure each engagement plan is successful.
BT/a4a8/11216	2/12/2016	Rachael Urwin	Recommendation 5: (cross ref with Rec 2) By 28 February 2017, the force should ensure that there are credible and achievable plans in place for the new police operating model. The plans should make clear how the reductions in workforce numbers are to be achieved and provide costed options for service provision and clarity on the impact on services of each option.	No action required. Combined into recommendation 2	Efficiency Nov 2016	Closed	Action closed 01/12/2016 The new management team are working on a plan to make the Force affordable by 2019. There is a medium term strategy within the PCC and there is an aim of producing a workforce and assets plan in the near future.
CC/1499/1591	15/9/2016	Det Supt Austin Fuller	Recommendation 7: Improve flagging of OCG subjects, their vehicles and addresses on NICHE to increase awareness across the NPT and Response function.	Action 7: No action required. This recommendation is complete. All mapped nominals have a flag on NICHE. All OCG's are listed as 'business / organisation'	Effectiveness 2015	Closed	Action closed 25/11/2016 All of the mapped nominals have a flag on the Niche system. Furthermore all of the OCG's are listed as 'business/organisation'.
BT/e4b9/22116	31/1/2017	DCI Leigh Sanders	Recommendation: The force should improve its investigation of cases involving vulnerable victims by ensuring officers with appropriate skills and expertise carry out such investigations and it supervises their workloads to ensure they can do so effectively.	Action: DCI on Public Protection to monitor and provide assurance that investigations are effective and workloads are appropriate.	PEEL: Police effectiveness 2015 (vulnerability National & Local)	Closed	Action closed 15/11/2016 To improve the quality of the investigation surrounding vulnerability the Force has embarked on a Career Pathways programme which has resulted in an influx of qualified detectives into PP departments and the non PIP2 officers have been replaced. In addition to the Initial Crime Investigators Development Programme, PP officers are receiving specialist inputs in order to investigate vulnerability. This includes using systems such as Visor, RM2K, SCADIP, Safeguarding adults, Safeguarding children, Domestic Abuse specialist training, DASH training, Rapid Response training and multi-agency cross authority training to tackle CSE. To deal with high workloads, a new PP business case has been submitted to COT to identify workloads and match demand with allocated resources. All front line staff have been given a series of briefings surrounding vulnerability to ensure an effective front end response to vulnerability.

CC/2489/14916	30/11/2016	Det Ch Supt Gerard Milano	Recommendation: 2 Where an OCG has a strong local footprint consideration should be given to allocating a LRO from the relevant NPT at Inspector or Chief Inspector level	Action: Review the current OCG cohort to enable an informed decision on which ones will be allocated to Neighbourhood Leads.	Effectiveness 2015	Closed	Action closed 25/11/2016 The responsibility of appointing an LRO is allocated to the Chair of the OCG Scrutiny Group. This has already proved very effective with some of the 'gang' type OCG's. Other OCG's are slowly migrating across to Neighbourhoods.
CH/249d/1415	31/12/2016	Det Supt Rob Griffin	5. Within three months: (pg12-14) We recommend that Nottinghamshire Police undertakes a review of the level and quality of supervisory activity in cases involving children missing from home;	Action: Monitor the success of the process which has been put in place for Missing From Home coordinators to conduct a review of sample children cases on a 6 monthly basis, to include levels and quality of supervision.	National Child Protection Inspection. Post Inspection Review 3-7th August 2015	Closed	Action closed 25/11/2016 There is now an agreed force process for monitoring and constant review of the management of MFH's which includes a feature on the level and quality of supervision.
CC/a48d/15916	31/12/2016	Det Supt Austin Fuller	Recommendation 9: LROs should periodically provide briefings on current OCG related threats at the fortnightly CSP Local operations meetings	Action: T/Det Supt Austin Fuller to compile a list of LROs and send out to all Ch Insp leads to enable invites to Local Ops meetings.	Effectiveness 2015	Closed	Action closed 16/12/2016 The CSP representatives have been vetted and can be briefed on all OCG's. The Neighbourhood leads have been briefed and are going to invite LRO's to their Local Ops meetings to be updated on the status of any OCG's at their discretion.
BT/b48e/16316	30/11/2016	DCI Leigh Sanders	Recommendation 11: The force should review the process by which repeat standard risk cases are identified and put in place a means by which these are monitored to ensure risk assessments accurately reflect a series of low level incidents.	Action: Review the process by which repeat standard risk cases are identified and put in place a means by which these are monitored to ensure risk assessments accurately reflect a series of low level incidents.	Nottinghamshire Police's approach to tackling Domestic Abuse (local report)	Closed	Action closed 15/11/2016 A search has been developed with MI and it has identified repeat survivors. This is completed on a monthly basis and it looks to see if people have been subjected to other DV incidents within the preceding 12 months. Furthermore there is a review in place to help with this task. For example when a victim passes on details about the a crime the report is passed on to the IDVA who conduct risk assessments and provide safeguarding interventions. If a case is identified as high, this is referred to the MARAC.
BT/649f/11216	28/2/2017	Mark Kimberley	Recommendation 4: Immediately, the force should build on the medium-term financial strategy and develop and work with an effective medium-term plan that aligns revenue and capital spending (over the next three years, as a minimum) with force priorities, taking into account future change and savings plans alongside prudent assumptions about anticipated income.	Action: Develop the medium-term financial strategy and plan to align revenue and capital spending (over the next 4 years) to force priorities to include: a) future change b) savings plans c) anticipated income	Efficiency Nov 2016	Closed	Action closed 06/02/2017 Progress has been made in developing the Forces operational medium term financial plan as part of the budget build for 2017/18. In addition FEB has recently agreed a new asset strategy as well as developing its IT/IS programme as part of the tri-force transformation bid.
CC/448e/15916	30/11/2016	Det Supt Austin Fuller	Recommendation 8: Whilst retaining appropriate levels of security, ORCA should offer greater flexibility to allow appropriate levels of access to relevant OCGs by key personnel, including the OCGs, at the discretion of the LRO	Action: Allow greater access on ORCA to neighbourhood Ch Insp leads.	Effectiveness 2015	Closed	Action closed 25/11/2016 Specific OCG management plans can now be opened up to any Police Officer / Staff at the discretion of the LRO. However, LROs are being asked to consider this with care as some records within ORCA reference sensitive tactics. LROs are now being educated to remove sensitive information form ORCA and transfer this to a hand written Sensitive Issues Policy file so ORCA can be made available securely to a wider, but relevant, audience.

BT/d49d/16316	31/10/2016	DCI Leigh Sanders	Recommendation 8: With the CPS and courts, the force should reduce the double listings of domestic abuse cases to improve victim engagement and attendance.	Action: With the CPS and courts, the force should reduce the double listings of domestic abuse cases to improve victim engagement and attendance.	Nottinghamshire Police's approach to tackling Domestic Abuse (local report)	Closed	Action closed 15/11/2016 Nottinghamshire Police have worked closely with the CPS and the Courts on this issue and will continue to do so. The Chair of the Nottinghamshire Domestic and Sexual Violence Criminal Justice Group will focus on this issue too. Furthermore the number of double listings in both Magistrates Courts has reduced but there some cases that still exist. There is also a project called 'DEEP DIVE' which is being led by the Ministry of Justice and the CPS which will run for the next six months.
CC/44af/15916	30/11/2016	Det Supt Austin Fuller	Recommendation 10:. Each active OCG should have BATS briefing with clear SMART based tasking where necessary. These should be refreshed every 2 weeks.	Action 10: Write and present to FEB a business case taking into account the thematic approach and staffing levels.	Effectiveness 2015	Closed	Action closed 16/12/2016 The items on the BATS briefing have been reviewed and were found to be effective.
BT/14ac/22116	30/11/2016	DCI Leigh Sanders	Recommendation: The force should improve its initial response to vulnerable victims by ensuring frontline officers and staff are appropriately trained to investigate and to safeguard vulnerable victims.	Action: Develop with regional learning and development (Andy Hough) a suitable training input to deliver to all frontline officers and staff to ensure all are appropriately trained to investigate and safeguard vulnerable victims.	PEEL: Police effectiveness 2015 (vulnerability National & Local)	Closed	Action closed 07/11/2016 The force has delivered a comprehensive vulnerability training package to all front line officers from response and neighbourhoods which allows them to make an effective assessment of the vulnerability of victims and provide relevant safeguarding. In 2013 all front-line officers were required to undertake a full day's classroom based training event specifically around dealing with vulnerability. These training sessions acted as a refresher for officers in terms of the actual identification of vulnerability, however, they also served to introduce to many officers a series of tiers of risk, based on outcomes. In 2016 DASH training, Coercion and Control, HBA, FM and FGM have been delivered face to face (by DASH trained trainers) to all frontline response and neighbourhood officers. The PP SMT are currently involved in delivering a series of vulnerability briefings to response and beat managers to focus on some of the key messages and provide clarity over processes in a number of areas, including Domestic Abuse, The Voice Of the Child, Children and Adult Safeguarding referrals. The briefings to this report were completed on the 2nd of November 2016.
CC/14b9/1491	14/9/2016	Det Supt Austin Fuller	Recommendation: 1. Senior Neighbourhood representatives should routinely attend the force's monthly OCG Scrutiny meeting	Action: Senior Neighbourhood representatives should routinely attend the force's monthly OCG Scrutiny meeting	Effectiveness 2015	Closed	Action closed 25/11/2016 Superintendent Richard Fretwell is to attend the OCG Scrutiny meeting for the Northern Cluster and Superintendent Ted Antill is to attend the Southern Cluster.

BT/64a8/22116	31/10/2016	DCI Leigh Sanders	Recommendation: The force should improve the way it works with partners to share information and safeguard vulnerable people, specifically in relation to addressing the backlog in cases that require further assessment and referring to other organisations.	Action: DCI Sanders to work with the Head of Children's Services Clive Chambers to reorganise the structure of Safeguarding. Review and update as necessary Service Level Agreement. Publish any new agreements on the library and communicate this through a weekly order.	PEEL: Police effectiveness 2015 (vulnerability National & Local)	Closed	<p>Action closed 15/11/2016</p> <p>The sharing of information and the backlog has been satisfactorily resolved, as is described within this action. MI have now recruited and up skilled resources to ensure that demand, going forward, can be met, and so we will not see a recurrence of this particular issue.</p> <p>A new service level agreement has been produced for the sharing of information in this context.</p> <p>The wider elements of the action (sharing information during child protection referrals etc) are all being addressed under the above identified action, which is a review to assess our (police and partners) effectiveness and efficiency in relation to child protection matters (which includes information sharing.)</p>
CC/c4a7/15916	30/11/2016	Det Supt Austin Fuller	Recommendation 11: Briefing boards are still valued by operational staff and should be fully utilised to display relevant messages. A review of security arrangements is required to ensure the displays are up to date and visible only to appropriately vetted staff	Action: Carry out a review of all briefing environments to check on security arrangements to ensure the displays are up to date and visible only to appropriately vetted staff	Effectiveness 2015	Closed	<p>Action closed 25/11/2016</p> <p>There are security issues in that briefing venues across the Police estates are often shared with partners for meetings. However the Force's position remains that intelligence briefings should only be delivered in an electronic format.</p>
BT/e4b4/25516	30/4/2017	Ian Hebb	Recommendation: The workforce is not universally aware of the coaching and mentoring scheme, which is an area that the force could improve. This means the force may not fully identify the talent available in the organisation.	Action: Re-promote Force-wide (via Corporate Communications) coaching and mentoring development opportunities. This will assist line managers to help support their team's PDR conversations, understand what talent development processes exist and how individuals can potentially access a Force mentor or coach.	Leadership 2015	Closed	<p>Action closed 16/12/2016</p> <p>The Force is developing a comprehensive leadership skills analysis which is linked to the Force's training needs. This is going to be sent to all management and then placed back into 4 action for monitoring.</p>
BT/d4a3/81116	31/1/2017	Det Supt Rob Griffin	Recommendation 7 Within 3 months. We recommend that Nottinghamshire Police initiate discussions at a senior level with CPS to improve the timeliness of actions and decisions by both the Police and CPS	Action: Nottinghamshire Police to initiate discussions at a senior level with CPS to improve the timeliness of actions and decisions by both the Police and CPS	National Child Protection Inspection. Post Inspection Review 3-7th August 2015	Closed	<p>Action closed 06/02/2017</p> <p>Nottinghamshire Police is initiating discussions at a senior level with CPS to improve the timelines of actions and decisions by both the Police and CPS. Discussions with Senior Police Officers, Head of Public Protection and the senior representatives from the CPS are on-going.</p> <p>Discussions are also being held when particular issues arise. For example a regional meeting monitored and scrutinised decisions made by the CPS and Police during the pilot of the 'Early Investigative Advice' project. There are also meetings that are governing the 'Deep Dive' project which is designed to improve timeliness and decision making around Domestic Abuse cases in the Specialist Domestic Violence Court.</p> <p>From further investigation it is seen that an appropriate framework exists and where issues arise, these are addressed within both organisations.</p>

AF/c4b0/29716	4/11/2016	Mark Kimberley	No regular reporting to monitor expenditure of credit cards	Action: Produce a monthly expenditure report going to a monitored person in Finance. Share this with Mark Kimberley and Paul Dawkins by exception	Credit Card	Closed	Action closed 25/01/2017 Each month the Treasury Management Accountant reviews all expenditure and reports immediately anything of concern to the Senior Financial Accountant. This was detailed in the new credit card procedures which were agreed by FEB. Furthermore the Head of Finance are provided with a summary quarterly.
VA/84b0/101115	31/1/2016	Ch Insp Andrew Goodall	4.4 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 Victim Code of Practice working sheet within the CRMS.	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.	Victim Code of Practice	Closed	Action closed 25/11/2016 A new victim pack and weekly order were presented to Mazars as part of a follow up audit.
AF/1480/29716	30/11/2016	Mark Kimberley	Some payments on credit cards appear questionable such as payments of Amazon and John Lewis, and as no receipts are required with the credit card statement it is not possible to verify that expenses are for business use	Action: Communicate to all staff that all receipts could be requested for expenditure spot checks. Scan to Oracle system to ensure VAT can be correctly accounted. Ensure this process is included in the Corporate Card Procedure document	Credit Card	Closed	Action closed 25/01/2017 Communication was sent to all staff and procedure guidelines were sent to the media for further communication and publication.
BT/e4b0/18116	31/8/2016	Ronnie Adams	Recommendation: Consideration should be given to monitoring purchases below £25,000 across the shared service forces.	Action: Nottinghamshire Police Contract lead to ensure MFSS take on responsibility to ensure that all low value spend is aggregated (passing to EMSCU above 25k), and suppliers are contracted through joint arrangements. Action: EMSCU to monitor and report under £25,000 spend in Nottinghamshire. EMSCU to also identify where multiple contracts could be amalgamated to deliver greater economies of scale and further savings	Procurement January 2016	Closed	Action closed 16/12/2016 A follow up audit by Mazars was conducted. A draft publication is being circulated and the activity from this has been superseded.
BT/94b1/151216	31/1/2017	Mark Kimberley	Recommendation 4.6: The Force should introduce a threshold limit on expense claims that are required to be audited prior to approval that have been submitted under the self-approve module on Oracle. Further consideration should be given to introducing threshold limits for individual categories of expense claims. For example, a threshold limit for self approval on glasses claims in line with Force Policy. [Force]	Action: The use of threshold controls at individual expense type is considered too burdensome at this time. However all expense claims above £250 will be subject to an audit review by the retained finance function.	Core Financials Systems Assurance Dec 2016	Closed	Action closed 06/02/2017 This is now part of the monthly audit procedures undertaken by management accountants and the retained financial function.
BT/c481/41116	30/11/2016	Mark Kimberley	Recommendation: A timetable for the delivery of improvements highlighted by the Head of Finance should be implemented to ensure improvements are delivered in a timely manner.	Action: Produce an action plan which identifies areas for the improvement of efficiency savings and budgeting to include timescales and person responsible.	Savings Programme Follow up October 2016	Closed	Action closed 18/11/2016 The initial Force Operational MTFP was approved by FEB in October 2016. This included a list of improvements and a timetable for the officer responsible for each action.
BT/04a4/8916	30/9/2016	Mark Kimberley	Recommendation 4.1: Procedure notes should be developed for all key tasks completed with regards to the Force budgeting process, including production, approval and monitoring. The procedures should be: •Regularly reviewed using version control to evidence the review; •Tested for accuracy and appropriateness; and •Made available to all relevant officers on the intranet	Action: Develop an interim local procedure for all key tasks completed with regards to the Force budgeting process, including production, approval and monitoring. The procedures should be: •Reviewed annually by the Head of Finance using version control to evidence the review; •Tested for accuracy and appropriateness; and •Made available to all relevant officers on the intranet	HR Establishment Budgeting	Closed	Action closed 11/11/2016 Following the FEB approval, guidance notes have been issued to all those involved in the budget process.

CC/7484/261016	31/12/2016	Pat Stocker	Recommendation 4.1.1: The Strategies, Policies and Procedures that support Information Management at the Force should be reviewed and updated in line with the current processes that have been adopted. The documents to be addressed are: Removal of the Information Assurance Framework, as this was superseded by the Information Management Strategy.	Action: Review and update the Strategies, Policies and Procedures that support Information Management in line with current processes. The documents which should be addressed are: Remove the Information Assurance framework as this has been superseded by the Information Management Strategy.	Data Protection Act Compliance Oct 2016	Closed	Action closed 16/12/2016 There has been confirmation from Corporate Communications that the IA Framework document has been removed from the Corporate Library.
BT/4495/151216	28/2/2017	Mark Kimberley	Recommendation 4.7: The Accounts & Purchasing Team Leader should conduct a secondary check to confirm all individual payments within the BACs run with a value greater than £5,000 have been reviewed by the Supervisor prior to uploading to the Bottom Line system for submission. [MFSS]	Action: The force will ensure that MFSS will put in place the secondary check.	Core Financials Systems Assurance Dec 2016	Closed	Action closed 06/02/2017 The original recommendation was implemented with immediate effect and the next audit will review the new process.
BT/54b6/211116	30/12/2016	Mark Kimberley	Recommendation 4.4: A further communication should be issued to remind all staff who raise and approve requisitions that the supporting documentation should be clearly attached in the Oracle system. This should include appropriate quotes or details of related contracts. Consideration should be given to completing dip samples to ensure compliance with Contract Procedure Rules.	Action: Communicate to all staff the process to be followed for purchases under £25k and attaching quotes to the system or including contract details to demonstrate this. Set up a dip sampling process to monitor compliance.	Procurement Follow up Nov 2016	Closed	Action closed 16/12/2016 On the 7th December 2016 an email and Force communication was produced by Business Partners.
BT/44b6/251116	28/11/2016	Mark Kimberley	Recommendation 4.8: Review the process of journal checking and introduce a periodic independent check to negate invalid or inaccurate journals being processed. Refresh the appropriate policy or procedure and communicate to relevant staff.	Action: Review the process of journal checking and introduce a periodic independent check to negate invalid or inaccurate journals being processed.	Core Financials Follow up July 2016	Closed	Action closed 25/11/2016 It was confirmed that an independent spot check of journals was conducted by the Management Accounting Manager in March 2016. The procedure followed for this review was to conduct a spot check of 10% of all journals posted during the period. A report was generated from the system of all journals posted and every tenth journal was selected for review. There were a total of 283 journals posted and therefore 28 journals were checked. Backing documentation for each of the 28 journals was obtained by the Management Accounting Manager to confirm accuracy and validity. Discussion with the Management Accounting Manager noted that this method was agreed with the Force external auditors (KPMG). The independent spot check of journals will be conducted on a quarterly basis and therefore the next review will be completed at the end of June 2016. This recommendation has been fully implemented.
CC/04a6/261016	31/1/2017	Pat Stocker	Recommendation 4.1.2: The Strategies, Policies and Procedures that support Information Management at the Force should be reviewed and updated in line with the current processes that have been adopted. The documents to be addressed are: A review and update of the Information Management Strategy. Link this to recommendation 4.8	Action: Review and update the Strategies, Policies and Procedures that support Information Management in line with current processes. The documents which should be addressed are: Review and update the Information Management Strategy. Consideration to be given to the new structure in place and with the recommendations raised from this audit. Link this to recommendation 4.8	Data Protection Act Compliance Oct 2016	Closed	Action closed 06/02/2017 The Information Management Strategy and accompanying documents area now complete and have been published onto the library.
CC/34b6/261016	31/10/2016	Pat Stocker	Recommendation 4.1.3: The Strategies, Policies and Procedures that support Information Management at the Force should be reviewed and updated in line with the current processes that have been adopted. The documents to be addressed are: A review and update of the Terms of Reference for the FIAB including performance monitoring.	Action: Review and update the Strategies, Policies and Procedures that support Information Management in line with current processes. The documents which should be addressed are: Review and update FIAB Terms of Reference to include performance monitoring.	Data Protection Act Compliance Oct 2016	Closed	Action closed 25/11/2016 The FIAB terms of reference were reviewed and agreed at the FIAB meeting on the 14th September 2016.

BT/c496/251116	28/11/2016	Mark Kimberley	Recommendation: Review service requests to identify if there is an adequate checking process in place to ensure that all requests for unpaid leave are actioned in a timely manner. The review should also comment upon that service requests are timely allocated to Payroll to allow records to be updated and the Payroll closed.	Action: Review service requests to identify if there is an adequate checking process in place to ensure that all requests for unpaid leave are actioned in a timely manner. The review should also comment upon that service requests are timely allocated to Payroll to allow records to be updated and the Payroll closed.	Core Financials Follow up July 2016	Closed	Action closed 25/11/2016 A process has been put in place whereby an automatic notification to payroll is generated on the system to inform MFSS of the action required. This has reduced the likelihood of a delay occurring. Furthermore a monitoring mechanism of overpayments has been introduced to help notify MFSS of a member of staff leaving the organisation. This system will be reviewed on a monthly basis. Regular update meetings are held between the Force and MFSS to address any actions required and to check on poor performance. This includes ensuring leavers are actioned on the system in a timely manner to prevent any overpayments from occurring.
BT/b499/22116	31/3/2016	Maria Fox	Recommendation 4.1: Officers should be reminded of the need to record evidence bag reference numbers within crime reporting management systems.	Action: All officers to complete training on NICHE Module 4 which will include a reminder of the importance of recording sealed bag numbers The new Other than Found Property Acquisition Policy and Flowcharts highlight the importance of officers recording sealed bag numbers on CRMS.	Proceeds of Crime Act January 2016	Closed	Action closed 10/11/2016 Maria Fox has amended the Training Material instructions for the Mod 4. This is a set of instructions that are easy for trainers and officers to follow.
CC/c49a/26101	31/12/2016	Pat Stoker	Recommendation 4.4: The Information Management Team should hold a complete list of Information Asset Owners and delegates and this should be published so staff are aware of the right contacts should they need to raise an issue.	Action 4.4: Complete a list of Information Asset Owners and delegates. Publish on the Force intranet so that staff are aware of the key contacts for information assets.	Data Protection Act Compliance Oct 2016	Closed	Action closed 16/12/2016 An updated IAO and Delegated list dated November 2016 has been produced and is available from the IM team. It will also be uploaded into the Force IMS when resources are in place.
AF/449a/29716	30/11/2016	Mark Kimberley	No policy or process in place to address all credit card issues	Action: Develop and implement a credit card policy and process to cover: a. Independent scrutiny of expenditure of each credit card. b. Regular maintenance of credit card file information and credit card agreements. c. Regular review of credit card limit and signatory levels. d. What personal information if any, is to be on itemised credit card statements. e. Identification of the role of overall responsibility for monitoring the use of credit cards. f. Identification if receipts should be requested over a stated amount and instruction to scan onto Oracle to ensure the correct VAT on purchases is being accounted for correctly. g. Controls in place to detect inappropriate spend eg. a secondary check with an authorising officer confirming transactions are in line with current policy. Include a formal 6 month expenditure review to share with PSD and Paul Dawkins for information and scrutiny. Ensure current policy/process is outlined in procedure and communicated to all staff via Weekly Order	Credit Card	Closed	Action closed 25/01/2017 A new procedure has been written and is in place.
CC/e48a/26101	31/12/2016	Pat Stoker	Recommendation 4.3.2 : The IAO Handbook should be updated to reflect the current processes that are in place and provide clarity on the actions that IAO's need to take to produce and maintain the information asset register.	Action: Update the IAO handbook to reflect the current processes followed and provide clarity on the actions that IAO's need to take to produce and maintain the information asset register.	Data Protection Act Compliance Oct 2016	Closed	Action closed 16/12/2016 The IAO handbook has been updated and a copy of the November version is on 4 action.

BT/849d/251116	31/1/2017	Mark Kimberley	Recommendation: MFSS to send to Pam Taylor (Senior Financial Accountant) an Aged Debtors report monthly in excel format. Add additional columns to incorporate the latest debt chasing notes and to confirm Dunning Letters 1 & 2 have been sent. This would then enable decisions on how to progress. Cross ref with recommendation 4.10.	Action: MFSS to send to Pam Taylor (Senior Financial Accountant) an Aged Debtors report monthly in excel format. Add additional columns to incorporate the latest debt chasing notes and to confirm Dunning Letters 1 & 2 have been sent. This would then enable decisions on how to progress. Cross ref with recommendation 4.10.	Core Financials Follow up July 2016	Closed	Action closed 25/11/2016 On a monthly basis, an aged debt report is sent to Finance at the Force by MFSS which details outstanding invoices unpaid and includes details of the debt recovery action currently taken. The MFSS Service Delivery Manager noted that, going forward, this process is to be completed bi-weekly rather than monthly. It was therefore confirmed that this recommendation has been implemented.
BT/24ad/19116	31/8/2016	Ronnie Adams	Recommendation: Management should review the suppliers in the system and remove those which are no longer being used. Management should ensure that staff use existing suppliers before procuring from new suppliers, and use this as a basis for negotiating multiple purchase discounts where possible. This should be monitored in line with recommendation 4.5. (Local Responsibility)	Action: Nottinghamshire Police Contract lead to ensure MFSS to carry out an audit and data cleanse the suppliers from the system Communication to be sent out advising staff to use existing suppliers before procuring from new suppliers. Communication to be sent out advising staff to use existing suppliers before procuring from new suppliers	Procurement January 2016	Closed	Action closed 21/12/2016 All of the CSE actions on 4action have been reviewed by the Public Protection team and partners. A new action plan has been compiled and shared with partners. Once approved by the Head of Public Protection these new actions will then be entered back into 4action.
BT/949d/4716	31/12/2016	Insp Craig Nolan	Recommendation 4.3: A standard level of access should be agreed upon so that it can be consistently applied.	Action: Agree a standard level of access so that it can be consistently applied.	Implementation of DMS June 2016	Closed	Action closed 06/02/2017 The current level of access for staff is satisfactory. The Force supervisors are advised to identify any requirements to ensure tree access is given to staff members. However this does remain an easier process for Police officers, although if the police staff member is defined as a supervisor then access to the trees will be provided.
BT/d49d/8916	31/1/2017	Mark Kimberley	Recommendation 4.3: A reconciliation between the data held on the payroll system, HR system and budget model should be conducted on a regular basis.3	Action: Identify a regular reconciliation process with appropriate controls in place to check the data retained on the payroll system, the HR system and budget model to identify and rectify any discrepancies to assist in the development of the HR Establishment for setting future budgets.	HR Establishment Budgeting	Closed	Action closed 06/02/2017 HR have fully reconciled records to establishments and budgets. In the future all changes will be reported via the workforce planning meetings which will now include a Finance representative to ensure records are kept in sync.
BT/04af/21111	31/1/2017	Ronnie Adams	Recommendation 4.2: The Force and EMSCU should ensure that the correct versions of procedures are available on the Force intranet site to ensure staff follow the correct procedures.	Action: Provide the Force Communications Team with the correct information to allow the Intranet to be updated. Changes to the Intranet had removed links to procedures. Links have now been restored and will be updated again once policy review complete.	Procurement Follow up Nov 2016	Closed	Action closed 06/02/2017 The procurement intranet site has now been reviewed and updated to ensure the correct versions of procedures are now available.
BT/d4bf/151216	31/1/2017	Mark Kimberley	Recommendation 4.2: MFSS should detail the fraud checks that have been completed when setting up a new supplier or amending an existing supplier on the Oracle System. This narrative should include the date of the check and the initials of the officer completing the check. [MFSS]	Action: Narrative to be entered into the notes section of the Oracle System upon the creation of a new supplier to ensure a fraud or background check has been carried out. This narrative should include the date of the check and the initials of the officer completing the check.	Core Financials Systems Assurance Dec 2016	Closed	Action closed 06/02/2017 The recommendation has been implemented and the impact will be reviewed at an audit follow up in November or December 2017.
AF/d4bf/29716	30/11/2016	Mark Kimberley	Control of credit cards function has moved between functions so it is unclear who has overall responsibility for monitoring the use of credit cards	Action: Identify and clearly communicate to identified credit card users, who has overall responsibility for monitoring the use of credit cards	Credit Card	Closed	Action closed 25/11/2016 The control of credit cards has been handed over to Financial Accounting. Furthermore, online access for the ease of administration and control has been set up with a new policy and procedure being put in place to support these changes.

BT/048f/8916	31/12/2016	Mark Kimberley	Recommendation 4.4: The development of the monitoring spread sheets should be finalised and these should be used to produce formal budget reports that should be reported to the appropriate forums, including the Force Executive Board. The Force Executive Board should comment on the budget reports supplied to ensure that the reporting process meets the requirements of both the OPCC and Force.	Action: Develop budget monitoring spread sheets and where possible link to MTFP assumptions and projections. The Head of Finance to provide a peer challenge.	HR Establishment Budgeting	Closed	Action closed 16/12/2016 Monitoring spread sheets have been developed by Finance and used to populate the MTFP planning process. Maintenance of the spread sheet and reconciliation with HR will now take place via the Workforce Planning meetings.
CC/548f/26101	31/10/2016	Pat Stocker	Recommendation 4.3.3: A clear process should be in place so that a 'gatekeeper' is in place to monitor consistency of the register.	Action: Amend the Information Security Officer Job description to include the role of 'gatekeeper' to maintain the IAO register and ensure that returns do not include missing data. This process will be included within the updated IAO handbook.	Data Protection Act Compliance Oct 2016	Closed	Action closed 25/11/2016 The ISO job description has been amended to include the gatekeeper role for ensuring the continued maintenance of Information Asset Registers by Information Asset Owners.
BT/748f/25111	31/1/2017	Mark Kimberley	Recommendation: Review and update map and desk instructions. Introduce a regular updating process to include revisions to instructions to be communicated to all relevant staff.	Action: Review and update map and desk instructions. Introduce a regular updating process to include revisions to instructions to be communicated to all relevant staff.	Core Financials Follow up July 2016	Closed	Action closed 06/02/2017 The original implementation date was September 2016 and therefore this has been reviewed by Mazars as part of the latest core financial systems audit and there are no outstanding recommendations.
BT/a4ad/4111	30/11/2016	Mark Kimberley	Recommendation: A review of the Medium Term Financial Plan and Budgeting Guidance should take place to ensure the Force has clearly documented how its finances will be managed.	Action: Review and update if required the Medium Term Financial Plan and Budgeting Guidance to show the Force has clearly documented how its finances will be managed.	Savings Programme Follow up October 2016	Closed	Action closed 11/11/2016 The Force Operational MTFP was approved on the 24th October 2016. The Budget Guidance was issued on the 16th September 2016. Both of these documents address the actions required.
AF/1488/2971	30/11/2016	Mark Kimberley	Process for ensuring credit card spend is entered correctly on accounting system not known by Finance team. It is unclear whether VAT is being accounted for correctly	Action: Train/Communicate to Finance team, correct process for entering credit card spend, to include how VAT should be accounted	Credit Card	Closed	Action closed 25/01/2017 A new process has been communicated to all new staff and the new procedure and guidelines reflect this.
BT/3499/22216	30/11/2016	Mark Kimberley	Recommendation: New suppliers should only be set up upon receipt of an approved new supplier form and this should include key details that then can be verified by MFSS, for example identification of directors of the company so the reputation and current financial status of the company can be verified. Consideration should be given to reviewing a sample of new suppliers set up since the implementation of MFSS processes to ensure appropriate checks have been made.	Action: Shelley Foy MFSS Accounts and Purchasing Service Delivery Manager. Carry out a review after the move to the 'no purchase order no pay' process to introduce if necessary a robust secondary checking and verification process As part of the review create a report which shows amendment's to suppliers	Core Financials February 2016	Closed	Action closed 16/12/2016 The process review was placed at the procurement stage and this was audited without comment during the October 2016 Mazars financial systems review.
BT/14a8/251116	31/1/2017	Mark Kimberley	Recommendation: Review and update the expenses policy to ensure it is fit for purpose. Include clear guidance on all categories of expenses and to be claimed through the self-serve systems and ensure that authorised limits for categories of expenditure remain valid. The policy should be reissued via a weekly order to all officers and staff to ensure awareness and compliance. This should include consequences for staff who breach the policy.	Action: Review and update the expenses policy to ensure it is fit for purpose. Include clear guidance on all categories of expenses and to be claimed through the self-serve systems and ensure that authorised limits for categories of expenditure remain valid. The policy should be reissued via a weekly order to all officers and staff to ensure awareness and compliance. This should include consequences for staff who breach the policy.	Core Financials Follow up July 2016	Closed	Action closed 06/02/2017 The procedural guidance was updated, agreed at FEB and sent to Corporate Development to publish in September 2016. Despite resourcing issues in the Corporate Development team, the procedural guidance has been published on the intranet.

VA/f4b8/101115	31/1/2016	Ch Insp Andrew Goodall	Recommendation: Needs assessments should be carried out with all victims of crime and results recorded on the Victim's Code of Practice working sheet within the CRMS system. This should then be used as the basis of support provision for the victim going forward.	Action: Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order. Ensure victim figures are available and presented as part of the divisional OPR performance packs for monitoring and corrective action	Victim Code of Practice	Closed	Action closed 25/11/2016 The communications strategy was implemented on the 21st March 2017 with a news item on the intranet containing key messages. All of the divisional frontline sergeants have been signposted to the article and a request has been sent advising them to brief their staff in relation to the changes and requirements. The victim figures are presented to the Divisional OPR and during the VOLT meetings and the figures are also included in the performance packs.
BT/24b8/251116	28/11/2016	Mark Kimberley	Recommendation: Accounting and purchasing Service Delivery Manager MFSS to ensure that staff are updated on the process regarding proforma invoices, all invoices are approved by a budget holder prior to payment and that a force agreement is put in place in relation to 'no scanning in of proforma invoices'.	Action: Accounting and purchasing Service Delivery Manager MFSS to ensure that staff are updated on the process regarding proforma invoices, all invoices are approved by a budget holder prior to payment and that a force agreement is put in place in relation to 'no scanning in of proforma invoices'	Core Financials Follow up July 2016	Closed	Action closed 25/11/2016 The MFSS Service Delivery Manager sent an email to the Accounts Team to remind them that under no circumstances can a payment be made on a proforma invoice. All invoices must be approved by the Budget Holder on the Oracle system prior to payment being processed. It was therefore identified that staff have a reminder that payments should not be made on a proforma invoice and the MFSS team are aware of this.
BT/6487/251116	28/11/2016	Mark Kimberley	Recommendation: MFSS to review and clear invoices put on hold on a timely basis. MFSS to investigate the possibility of whether categories of expenditure (rather than the supplier as a whole) can be set with a default VAT code. MFSS to give consideration to assigning key categories of suppliers with a zero rated VAT percentage to ensure invoices placed on hold are kept to a minimum.	Action: MFSS to review and clear invoices put on hold on a timely basis. MFSS to investigate the possibility of whether categories of expenditure (rather than the supplier as a whole) can be set with a default VAT code. MFSS to give consideration to assigning key categories of suppliers with a zero rated VAT percentage to ensure invoices placed on hold are kept to a minimum.	Core Financials Follow up July 2016	Closed	Action closed 25/11/2016 It was confirmed with the MFSS Service Delivery Manager that the Oracle system was investigated to identify whether VAT could be coded to categories of expenditure rather than suppliers. However, it was identified as a result of this that the Oracle system does not have this functionality and therefore VAT must be coded by the supplier. However it was seen to be a difficult process to set up. Therefore, for those suppliers that charge varying levels of VAT, the system has been set at the default 20% VAT and any purchases from suppliers with a different VAT level will have to be manually adjusted. Furthermore, the audit confirmed that where suppliers will never charge VAT, their default VAT setting on Oracle would be set at a zero rating. The audit reviewed a report of invoices currently on hold and it was confirmed that the vast majority were on hold due to the purchaser not receipting the goods. Invoices on hold for reasons other than not being receipted were reviewed and it was noted that there were valid reasons for being on hold and a note had been left on Oracle to detail these reasons.

VA/34a6/101115	31/1/2016	Ch Insp Andrew Goodall	Recommendation: The offer/availability of a Victim Personal Statement (VPS) to the victim should be clearly communicated and acknowledged within the Victim Code of Practice working sheet.	Action: Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order.	Victim Code of Practice	Closed	Action closed 25/11/2016 The communications strategy was implemented on the 21st March 2017 with a news item on the intranet containing key messages. All of the divisional frontline sergeants have been signposted to the article and a request has been sent advising them to brief their staff in relation to the changes and requirements. The victim figures are presented to the Divisional OPR and during the VOLT meetings and the figures are also included in the performance packs.
BT/8485/4716	31/12/2016	Insp Craig Nolan	Recommendation: A review of the existing trees in the system against the HR structure should be completed to ensure that the trees in the system are correct and that individual users are correctly placed in their respective tree.	Action: a) Review the existing trees in the system against the HR structure to ensure that the trees in the system are correct and that individual users are correctly placed in their respective tree. b) Once reviewed write a procedure to inform all staff using DMS of their responsibilities particularly in relation to informing DMU that line management have ceased. This new procedure should be put on the library with a link to the RMU Intranet site. A communications to go out on weekly orders to support this new procedure publication. Link this action to recommendation 4.1. System Governance	Implementation of DMS June 2016	Closed	Action closed 06/02/2017 The review of existing trees is on-going. The Force is currently working towards building a new structure for Complex and Organised Crime which will be followed by a Response and Neighbourhood structure. Following these plans a further set of departments will be built within the Investigations and Intelligence teams. A published guidance notice has been submitted onto the RMU intranet site and this gives users and supervisors guidance on how to perform certain tasks.
AF/34b5/2971	30/11/2016	Mark Kimberley	Recommendation: No independent scrutiny of expenditure incurred on credit cards	Action: Introduce a process which requires regular, independent scrutiny of expenditure incurred on credit cards. This process to be included in the Corporate Card Procedure document	Credit Card	Closed	Action closed 25/01/2017 The new process has been incorporated into the procedure and guidelines documents.
BT/54a4/12816	31/3/2017	Nicola Wade	Recommendation: The Independent Review Report should be discussed with partner organisations to ensure that the recommendations that it raises have been fully understood and actions agreed to ensure that weaknesses are addressed and opportunities to improve processes are taken.	Action: The Independent Review Report should be discussed with partner organisations to ensure that the recommendations that it raises have been fully understood and actions agreed to ensure that weaknesses are addressed and opportunities to improve processes are taken.	Commissioning - Community Safety	Closed	Action closed 20/12/2016 Following an audit by Mazars in December 2016 this recommendation and action has not been implemented however this is being progressed by the OPCC Chief Executive.
BT/d4b0/4716	31/12/2016	Insp Craig Nolan	Recommendation: The Force should clarify the roles and responsibilities of the parties involved in the ownership, maintenance and usage of the DMS System. This should include the information asset owners and information security responsibilities.	Action: Clarify roles and responsibilities of parties involved in the ownership, maintenance and usage of the Duty Management System, to include: a) Identification of the information asset owner b) Who has information security responsibility? Link this action to recommendation 4.4. Supervision Trees. The clarification of roles and responsibilities once identified to be communicated on the RMU intranet site.	Implementation of DMS June 2016	Closed	Action closed 06/02/2017 The IAO has been identified and updated in 2016. The supervision of trees are correct and are continually updated as the Force restructures with staff levels and supervisor changes. The Force is running as business as usual and it is not anticipated that the organisation will ever remain in stasis.
BT/04b2/21111	31/1/2017	Tracey Morris	Recommendation 4.7: Management should confirm with MFSS if supplier details are regularly reviewed and removed if they have not been used for some time.	Action: Discuss with MFSS and provide a suitable solution to ensure there are regular reviews of supplier details and the removal of ones which have not been used for some time (time to be identified).	Procurement Follow up Nov 2016	Closed	Action closed 16/12/2016 The suppliers are reviewed as part of the MFSS housekeeping process. The Force deactivates suppliers if they have not been used for 18 months or if the Force receives a notification they have ceased trading.
AF/24b2/29716	30/11/2016	Mark Kimberley	Recommendation: File of signed credit card agreements not updated and Named individuals who hold credit cards have not signed credit card agreements	Action: Introduce a process which regularly updates (when there is a change of personnel), the credit card file, to ensure each card holder has a signed bank agreement in place Remove/Archive any old or void agreements. This process to be included in the Corporate Card Procedure document	Credit Card	Closed	Action closed 25/01/2017 The procedure has been sent for publication in the library with a link from the A-Z site map.

VA/c4b0/101115	31/1/2016	Ch Insp Andrew Goodall	Recommendation: 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 Victim's Code of Practice working sheet and evidence maintained that updates have been provided in line with this request.	Action: Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order. Ensure victim figures are available and presented as part of the divisional OPR performance packs for monitoring and corrective action	Victim Code of Practice	Closed	Action closed 25/11/2016 The communication strategy was implemented on the 21st March 2016 with a news item on the intranet containing key messages. All of the divisional frontline sergeants have been signposted to the article and a request has been sent advising them to brief their staff in relation to the changes and requirements. The victim figures are presented to the Divisional OPR and during the VOLT meetings and the figures are also included in the performance packs.
BT/8480/251116	31/1/2017	Mark Kimberley	Recommendation: Carry out a review after the move to the 'no purchase order no pay' process to introduce if necessary a robust secondary checking and verification process As part of the review create a report which shows amendment's to suppliers.	Action: Carry out a review after the move to the 'no purchase order no pay' process to introduce if necessary a robust secondary checking and verification process As part of the review create a report which shows amendment's to suppliers.	Core Financials Follow up July 2016	Closed	Action closed 06/02/2017 The 'no purchase order no pay' process has been implemented and has been reviewed by management and the internal auditors. There were no governance or control issues found and the recommendation was ratified.
VA/94b0/101115	31/1/2016	Ch Insp Andrew Goodall	Recommendation: Officers 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.	Action: Communication strategy to be written and cascaded to relevant staff. Significant changes to be outlined and communicated via Weekly Order	Victim Code of Practice	Closed	Action closed 25/11/2016 The communications strategy was implemented on the 21st March 2017 with a news item on the intranet containing key messages. All of the divisional frontline sergeants have been signposted to the article and a request has been sent advising them to brief their staff in relation to the changes and requirements. The victim figures are presented to the Divisional OPR and during the VOLT meetings and the figures are also included in the performance packs.
BT/a4b0/251116	31/1/2017	Mark Kimberley	Recommendation: Checklist to be introduced.	Action: A checklist for the MFSS payroll run for Nottinghamshire Police has been produced and is now operational. This is to be completed for each payroll run period. The checklist includes the following sections: •Daily and Monthly pre payroll processes; •Payroll running process; and, •Post payroll run processes. A check of each process must be completed and the checklist must be signed/dated to evidence this check. At the time of the follow up, a system interface was due to be implemented. However, this has not been completed and it is hoped that this will now be implemented in September 2016 following testing of the system.	Core Financials Follow up July 2016	Closed	Action closed 16/12/2016 This recommendation has been advised to be forwarded to the MFSS team however the action has become obsolete due to the functioning of the Oracle payroll service. This action was superseded.
BT/149a/201216	21/12/2016	Mark Tietjen-Miller	Recommendation 3: The Force Authorising Officer should introduce a means by which he is cognisant of new CHIS cases in a contemporaneous manner and prior to them being presented for authorisation.	No action required: 1/ Controllers briefed regarding the use of recruitment within SMS in order to provide more insight to the AO on potential CHIS. However, this needs to be balanced against requirement to authorise to prevent status drift. 2/ Weekly meetings between the AO and controllers to ensure that all recruitments discussed in detail.	Office Surveillance Commissioners	Closed	Action closed 20/12/2016 The meetings between the AO and controllers have been fully implemented to discuss all recruitments in detail.

BT/84b7/201216	21/12/2016	Mark Tietjen-Miller	<p>Recommendation 1: The Collaboration Agreement for the forces in this region should clearly provide for the relevant roles in CHIS management to be undertaken by different forces, or failing this, the handler and controller (cover officer and covert operations manager) roles should only be carried out by staff from the force benefitting from the activity of the CHIS.</p>	<p>No action required: 1/ A letter providing clarification was penned and sent in November 2016 from DCC Martyn BATES to Lord Judge. The letter outlines that provision still remains in place within the 18th Dec 2013 Regional Collaboration Agreement to specifically cover the sec 29(5) RIPA defined roles and allowance given for these roles to be undertaken by staff from differing forces from the force requesting such activity. The letter further provides explanation that the EMSOU December 2013 agreement has not been superseded or replaced by the May 2016 agreement.</p> <p>2/ A letter of reply dated 22/11/2016 has been sent from Lord Judge to DCC BATES outlining the need for further clarity in respect to collaboration agreements but, this recommendation is dealt with.</p>	Office Surveillance Commissioners	Closed	<p>Action closed 20/12/2016</p> <p>A letter was sent to the Lord Judge and it confirmed that provision still remained within the 18th Dec 2013 Regional Collaboration Agreement which covers the 29(5) RIPA defined roles. The letter also confirmed that the EMSOU December 2013 agreement had not been superseded or replaced by the May 2016 agreement.</p>
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For Information and Decision	
Public/Non Public*	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	Andrew Cardoza KPMG
Agenda Item:	9

EXTERNAL AUDIT PLAN 2016/17

1. Purpose of the Report

- 1.1 To provide members with the proposed External Audit Plan covering the audit of the Accounts for 2016-17.

2. Recommendations

- 2.1 Members are requested to consider and approve the External Audit Plan attached at Appendix A.

3. Reasons for Recommendations

- 3.1 This complies with good governance, financial regulations and audit regulations.

4. Summary of Key Points

- 4.1 The External Auditor has assessed the required time to complete the audit for the accounts for 2016-17.

5. Financial Implications and Budget Provision

- 5.1 None as a direct result of this report. The External Audit fees for the Force and OPCC accounts have been budgeted for within the OPCC budget.

6. Human Resources Implications

- 6.1 None

7. Equality Implications

- 7.1 None

8. Risk Management

- 8.1 Any change of the financial management system is always identified as a risk. To mitigate this and the fact that the closure of accounts process is being brought forward in 2017; a soft close of the accounts is planned.

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 Not applicable

12. Appendices

- A – External Audit Plan



External Audit Plan 2016/17

**Nottinghamshire Office for the Police & Crime
Commissioner and Nottinghamshire Chief
Constable**

February 2017



Financial Statement Audit



There are no significant changes to the Code of Practice on Local Authority Accounting in 2016/17, which provides stability in terms of the accounting standards the bodies need to comply with.

Materiality

Materiality for planning purposes has been based on last year's expenditure and set at £3.5 million for both the Police and Crime Commissioner and Chief Constable.

We are obliged to report uncorrected omissions or misstatements other than those which are 'clearly trivial' to those charged with governance and this has been set at £170k for both the Police and Crime Commissioner and Chief Constable.

Significant risks

Those risks requiring specific audit attention and procedures to address the likelihood of a material financial statement error have been identified as:

- Significant changes in the pension liability due to LGPS Triennial Valuation;
- The 2016 CIPFA Code on Local Authority Accounting changes to the formats and reporting requirements for the Comprehensive Income and Expenditure Statement and the Movement in Reserves Statement, and the new Expenditure and Funding Analysis;
- Ensuring the issues raised in the ISA260 last year in relation to the accounts production are addressed and the planned generation of the accounts for the first time using the CIPFA model; and.
- Changes to the payroll system in the final quarter of the financial year.

Other areas of audit focus

Those risks with less likelihood of giving rise to a material error but which are nevertheless worthy of audit understanding have been identified as:

- Assurance over regional collaboration accounts and transactions.

See pages 3 to 6 for more details.

Value for Money Arrangements work



Our risk assessment regarding your arrangements to secure value for money have identified the following VFM significant risks:

- Medium term financial planning; ensuring budget setting and planned savings are achieved particularly in light of the shortfall in planned savings last year, which resulted in the use of £9.4m of reserves to balance the budget and which resulted in the HMIC downgrading Nottinghamshire Polices PEEL efficiency score to 'requires improvement' in Nov 2016.

Our risk assessment is ongoing and we will report VFM significant risks during our audit.

See pages 7 to 10 for more details.

Logistics



Our team is:

- Andrew Cardoza – Director
- Anita Pipes – Assistant manager

More details are on **page 13**.

Our work will be completed in four phases from December to September and our key deliverables are this Audit Plan and a Report to those charged with Governance as outlined on **page 12**.

Our fee for the audit of the Police and Crime Commissioner is £35,220 (£ 35,220 2015/2016) and our fee for the audit of the Chief Constable is £15,000 (£15,000 2015/2016). At this stage, we anticipate needing to charge additional fee during the year in respect of the extra work on the LGPS triennial revaluation and the Code changes around the CIES presentation. See **page 11**.

Introduction

Background and Statutory responsibilities

This document supplements our Audit Fee Letter 2016/17 presented to you in April 2016, which also sets out details of our appointment by Public Sector Audit Appointments Ltd (PSAA).

Our statutory responsibilities and powers are set out in the Local Audit and Accountability Act 2014 and the National Audit Office's Code of Audit Practice.

Our audit has two key objectives, requiring us to audit/review and report on your:

- *Financial statements (including the Annual Governance Statement):* Providing an opinion on your accounts; and
- *Use of resources:* Concluding on the arrangements in place for securing economy, efficiency and effectiveness in your use of resources (the value for money conclusion).

The audit planning process and risk assessment is an on-going process and the assessment and fees in this plan will be kept under review and updated if necessary.

Acknowledgements

We would like to take this opportunity to thank officers and Members for their continuing help and co-operation throughout our audit work.

Financial Statements Audit

Our financial statements audit work follows a four stage audit process which is identified below. Appendix 1 provides more detail on the activities that this includes. This report concentrates on the Financial Statements Audit Planning stage of the Financial Statements Audit.



Value for Money Arrangements Work

Our Value for Money (VFM) Arrangements Work follows a five stage process which is identified below. Page 7 provides more detail on the activities that this includes. This report concentrates on explaining the VFM approach for the 2016/17 and the findings of our VFM risk assessment.





Financial Statements Audit Planning

Our planning work takes place during December 2016 to February 2017. This involves the following key aspects:

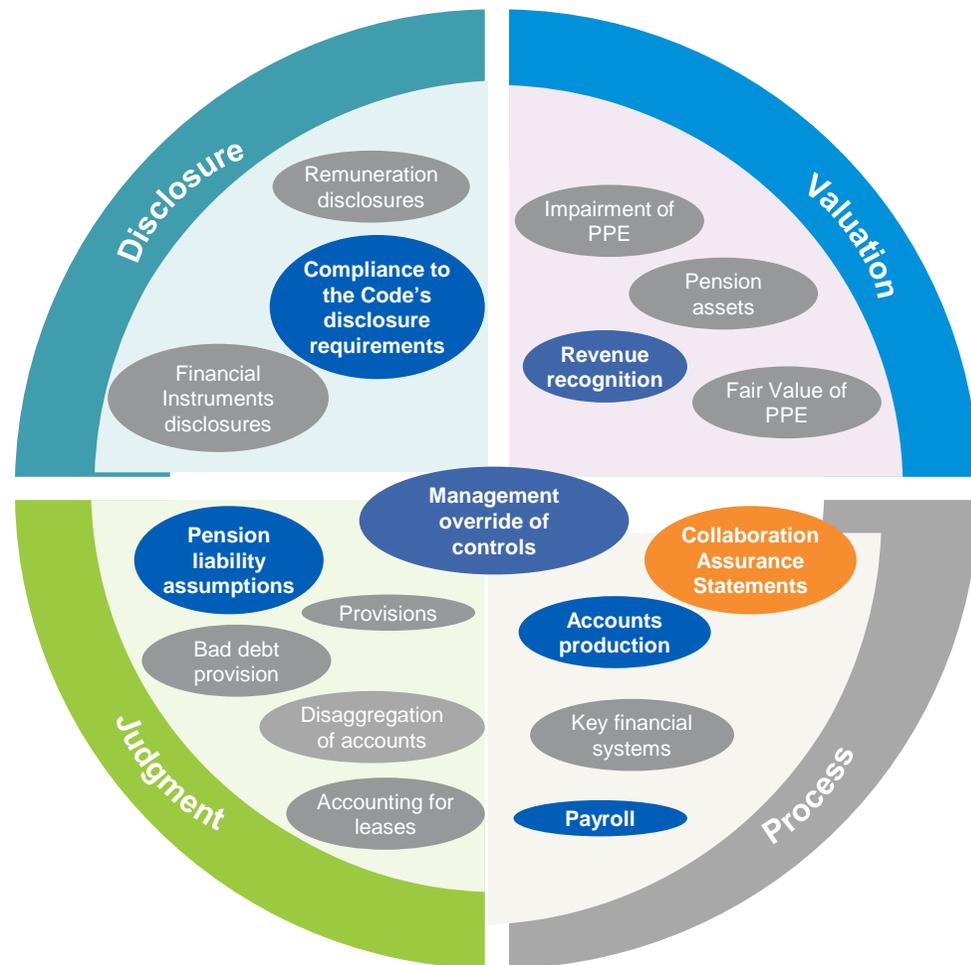
- Risk assessment;
- Determining our materiality level; and
- Issuing this audit plan to communicate our audit strategy.

Risk assessment

Professional standards require us to consider two standard risks for all organisations. We are not elaborating on these standard risks in this plan but consider them as a matter of course in our audit and will include any findings arising from our work in our ISA 260 Report.

- **Management override of controls** – Management is typically in a powerful position to perpetrate fraud owing to its ability to manipulate accounting records and prepare fraudulent financial statements by overriding controls that otherwise appear to be operating effectively. Our audit methodology incorporates the risk of management override as a default significant risk. In line with our methodology, we carry out appropriate controls testing and substantive procedures, including over journal entries, accounting estimates and significant transactions that are outside the normal course of business, or are otherwise unusual.
- **Fraudulent revenue recognition** – We do not consider this to be a significant risk for the Police and Crime Commissioner and Chief Constable as there are limited incentives and opportunities to manipulate the way income is recognised. We therefore rebut this risk and do not incorporate specific work into our audit plan in this area over and above our standard fraud procedures.

The diagram opposite identifies, significant risks and other areas of audit focus, which we expand on overleaf. The diagram also identifies a range of other areas considered by our audit approach.



Keys: ● Significant risk ● Other area of audit focus ● Example other areas considered by our approach



Significant Audit Risks

Those risks requiring specific audit attention and procedures to address the likelihood of a material financial statement error.

Risk : Significant changes in the pension liability due to LGPS Triennial Valuation

During the year, the Local Government Pension Scheme for Nottinghamshire Police and Crime Commissioner and Nottinghamshire Chief Constable (the Pension Fund) has undergone a triennial valuation with an effective date of 31 March 2016 in line with the Local Government Pension Scheme (Administration) Regulations 2013. The PCC and CC's share of pensions assets and liabilities is determined in detail, and a large volume of data is provided to the actuary in order to carry out this triennial valuation.

The pension liability numbers to be included in the financial statements for 2016/17 will be based on the output of the triennial valuation rolled forward to 31 March 2017. For 2017/18 and 2018/19 the actuary will then roll forward the valuation for accounting purposes based on more limited data.

There is a risk that the data provided to the actuary for the valuation exercise is inaccurate and that these inaccuracies affect the actuarial figures in the accounts. Most of the data is provided to the actuary by Nottinghamshire County Council, who administer the Pension Fund.

Approach : As part of our audit, we will agree any data provided by the Authority to the actuary, back to the relevant systems and reports from which it was derived, in addition to checking the accuracy of this data.

We will also liaise with the Nottinghamshire County Council Pension Fund Audit team who are the auditors of the Pension Fund, where this data was provided by the Pension Fund on the Authority's behalf to check the completeness and accuracy of such data.

Significant Audit Risks

Those risks requiring specific audit attention and procedures to address the likelihood of a material financial statement error.

Risk : 2016 CIPFA Code on Local Authority Accounting

The new Code includes a small number of important changes on the previous year's reporting requirements. The changes include new formats and reporting requirements for the Comprehensive Income and Expenditure Statement and the Movement in Reserves Statement, and the introduction of a new Expenditure and Funding Analysis as a result of CIPFA's 'Telling the Story' review of the presentation of local authority financial statements.

Approach : We will liaise with the Authority's finance team regarding the new requirements and agree the new disclosures, including the restatement of the prior year comparators.

Risk : Generation of the Accounts and the Introduction of the CIPFA Model

This year the PCC and CC are considering using the CIPFA model to produce their accounts for the first time. There is a risk of error as it is introduced for the first time. There may also be an impact on the format of the accounts and working papers produced. The quality of the working papers produced has proved challenging the last couple of years and this change may further impact on the working papers produced and their compatibility with our working paper request (PBC). This impact is not yet known.

Approach : We will closely review the format of the accounts, identify any material differences and establish the impact on the working papers based. We will review the S151 officers and senior officers quality review of the working papers to support the draft accounts submitted for audit and ensure working papers have been produced as requested in our PBC.



Financial statements audit planning (cont.)

Significant Audit Risks

Those risks requiring specific audit attention and procedures to address the likelihood of a material financial statement error.

Risk : Change to the Payroll System

A review of Internal Audit reports has identified that there is a planned change to the payroll system from January 2017. We will need to update our understanding of the system pre and post this change and update our risk assessment and testing accordingly.

Approach : We will review the payroll process both pre and post the change, complete any migration testing if required and ensure that controls are in operation post the change to enable us to place reliance on the data being produced by the system for the financial accounts.

Other areas of audit focus

Those risks with less likelihood of giving rise to a material error but which are nevertheless worthy of audit understanding.

.Issue : Assurance over regional collaboration accounts and transactions

The level of collaborative work with other forces across the East Midlands has increased significantly over the past few years, with the previous accounts including some £6m of expenditure in relation to these arrangements. This level of collaboration brings with it the need to ensure that appropriate governance arrangements are in place for each arrangement and that the necessary assurances are held over the completeness and accuracy of the financial information being provided to the PCC and CC for consolidation into its accounts.

Approach : We will review your governance arrangements over each aspect of regional collaboration and, more specifically, over the assurances you have sought in respect of the completeness and accuracy of the year end figures consolidated into your financial statements.

Financial statements audit planning (cont.)



Materiality

We are required to plan our audit to determine with reasonable confidence whether or not the financial statements are free from material misstatement. An omission or misstatement is regarded as material if it would reasonably influence the user of financial statements. This therefore involves an assessment of the qualitative and quantitative nature of omissions and misstatements.

Generally, we would not consider differences in opinion in respect of areas of judgement to represent 'misstatements' unless the application of that judgement results in a financial amount falling outside of a range which we consider to be acceptable.

Materiality for planning purposes has been set at £3.5 million for the Police and Crime Commissioner and the Chief Constable, which equates to 1.5 percent of the respective gross expenditure based on prior year gross expenditure.

We design our procedures to detect errors in specific accounts at a lower level of precision.

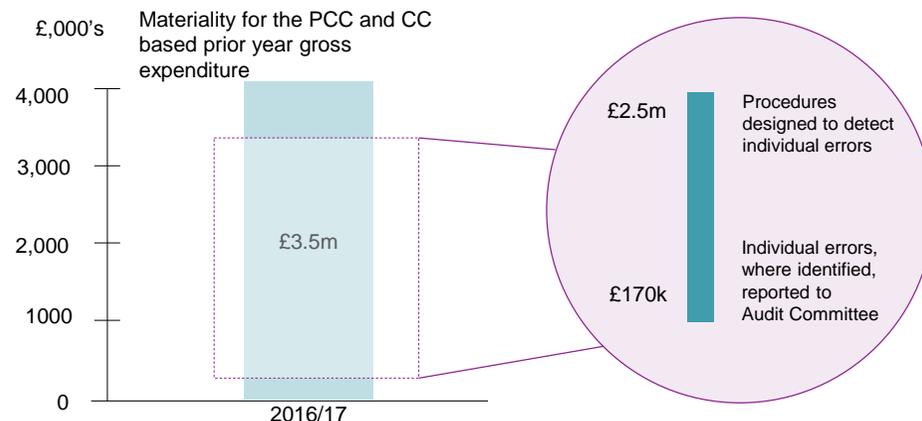
Reporting to the Audit Committee

Whilst our audit procedures are designed to identify misstatements which are material to our opinion on the financial statements as a whole, we nevertheless report to the Audit Committee any unadjusted misstatements of lesser amounts to the extent that these are identified by our audit work.

Under ISA 260(UK&I) 'Communication with those charged with governance', we are obliged to report uncorrected omissions or misstatements other than those which are 'clearly trivial' to those charged with governance. ISA 260 (UK&I) defines 'clearly trivial' as matters that are clearly inconsequential, whether taken individually or in aggregate and whether judged by any quantitative or qualitative criteria.

In the context of the Police and Crime Commissioner and the Chief Constable, we propose that an individual difference could normally be considered to be clearly trivial if it is less than £170k.

If management have corrected material misstatements identified during the course of the audit, we will consider whether those corrections should be communicated to the Audit Committee to assist it in fulfilling its governance responsibilities.





Background to approach to VFM work

The Local Audit and Accountability Act 2014 requires auditors of local government bodies to be satisfied that the authority 'has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources'.

This is supported by the Code of Audit Practice, published by the NAO in April 2015, which requires auditors to 'take into account their knowledge of the relevant local sector as a whole, and the audited body specifically, to identify any risks that, in the auditor's judgement, have the potential to cause the auditor to reach an inappropriate conclusion on the audited body's arrangements.'

The VFM approach is fundamentally unchanged from that adopted in 2015/2016 and the process is shown in the diagram below. The diagram overleaf shows the details of the criteria for our VFM work.





Overall criterion

In all significant respects, the audited body had proper arrangements to ensure it took properly informed decisions and deployed resources to achieve planned and sustainable outcomes for taxpayers and local people.

Informed decision making

Proper arrangements:

- Acting in the public interest, through demonstrating and applying the principles and values of sound governance.
- Understanding and using appropriate and reliable financial and performance information to support informed decision making and performance management.
- Reliable and timely financial reporting that supports the delivery of strategic priorities.
- Managing risks effectively and maintaining a sound system of internal control.

Sustainable resource deployment

Proper arrangements:

- Planning finances effectively to support the sustainable delivery of strategic priorities and maintain statutory functions.
- Managing and utilising assets to support the delivery of strategic priorities.
- Planning, organising and developing the workforce effectively to deliver strategic priorities.

Working with partners and third parties

Proper arrangements:

- Working with third parties effectively to deliver strategic priorities.
- Commissioning services effectively to support the delivery of strategic priorities.
- Procuring supplies and services effectively to support the delivery of strategic priorities.



Value for money arrangements work (cont.)

VFM audit stage	Audit approach
VFM audit risk assessment	<p>We consider the relevance and significance of the potential business risks faced by all local authorities, and other risks that apply specifically to the Police and Crime Commissioner and Chief Constable. These are the significant operational and financial risks in achieving statutory functions and objectives, which are relevant to auditors' responsibilities under the <i>Code of Audit Practice</i>.</p> <p>In doing so we consider:</p> <ul style="list-style-type: none">■ The Police and Crime Commissioner and Chief Constable's own assessment of the risks it faces, and its arrangements to manage and address its risks;■ Information from Her Majesty's Inspectorate of Constabulary (HMIC) VFM profile data;■ Evidence gained from previous audit work, including the response to that work; and■ The work of other inspectorates and review agencies.
Linkages with financial statements and other audit work	<p>There is a degree of overlap between the work we do as part of the VFM audit and our financial statements audit. For example, our financial statements audit includes an assessment and testing of the organisational control environment, including the financial management and governance arrangements, many aspects of which are relevant to our VFM audit responsibilities.</p> <p>We have always sought to avoid duplication of audit effort by integrating our financial statements and VFM work, and this will continue. We will therefore draw upon relevant aspects of our financial statements audit work to inform the VFM audit.</p>
Identification of significant risks	<p>The Code identifies a matter as significant '<i>if, in the auditor's professional view, it is reasonable to conclude that the matter would be of interest to the audited body or the wider public. Significance has both qualitative and quantitative aspects.</i>'</p> <p>If we identify significant VFM risks, then we will highlight the risk to the Police and Crime Commissioner and Chief Constable and consider the most appropriate audit response in each case, including:</p> <ul style="list-style-type: none">■ Considering the results of work by the Police and Crime Commissioner, Chief Constable, inspectorates and other review agencies; and■ Carrying out local risk-based work to form a view on the adequacy of the arrangements for securing economy, efficiency and effectiveness in its use of resources.



Value for money arrangements work (cont.)

VFM audit stage	Audit approach
Assessment of work by other review agencies and Delivery of local risk based work	<p>Depending on the nature of the significant VFM risk identified, we may be able to draw on the work of other inspectorates, review agencies and other relevant bodies to provide us with the necessary evidence to reach our conclusion on the risk.</p> <p>If such evidence is not available, we will instead need to consider what additional work we will be required to undertake to satisfy ourselves that we have reasonable evidence to support the conclusion that we will draw. Such work may include:</p> <ul style="list-style-type: none">■ Meeting with senior managers;■ Review of minutes and internal reports;■ Examination of financial models for reasonableness, using our own experience and benchmarking data from within and without the sector.
Concluding on VFM arrangements	<p>At the conclusion of the VFM audit we will consider the results of the work undertaken and assess the assurance obtained against each of the VFM themes regarding the adequacy of the Police and Crime Commissioner and Chief Constable's arrangements for securing economy, efficiency and effectiveness in the use of resources.</p> <p>If any issues are identified that may be significant to this assessment, and in particular if there are issues that indicate we may need to consider qualifying our VFM conclusion, we will discuss these with management as soon as possible. Such issues will also be considered more widely as part of KPMG's quality control processes, to help ensure the consistency of auditors' decisions.</p>
Reporting	<p>We have completed our initial VFM risk assessment and have identified the following significant VFM risk:</p> <ul style="list-style-type: none">■ Medium term financial planning – The PCC continues to face significant financial pressures and uncertainties in relation to its future funding levels with grant allocations for future years not yet confirmed. The PCC/CC needs to have effective arrangements in place for managing its annual budget, generating income and identifying and implementing any savings required to balance its medium term financial plan. This is imperative given the PCC/CC had to utilise £9.4m of reserves in 2015/16 to balance the budget due to overspends and failing to achieve all savings targets. This has depleted the level of reserves available to the PCC/CC and resulted in HMIC downgrading Nottinghamshire Police's PEEL efficiency score from good to requires improvement (Nov 2016). This is relevant to the sustainable resource deployment sub-criteria of the VFM conclusion. <p>We will report on the results of the VFM audit through our ISA 260 Report. This will summarise any specific matters arising, and the basis for our overall conclusion.</p> <p>The key output from the work will be the VFM conclusion (i.e. our opinion on the arrangements for securing VFM), which forms part of our audit report.</p>

Whole of government accounts (WGA)

We are required to review your WGA consolidation and undertake the work specified under the approach that is agreed with HM Treasury and the National Audit Office. Deadlines for production of the pack and the specified approach for 2016/17 have not yet been confirmed.

Electoral challenge

The Local Audit and Accountability Act 2014 gives electors certain rights. These are:

- The right to inspect the accounts;
- The right to ask the auditor questions about the accounts; and
- The right to object to the accounts.

As a result of these rights, in particular the right to object to the accounts, we may need to undertake additional work to form our decision on the elector's objection. The additional work could range from a small piece of work where we interview an officer and review evidence to form our decision, to a more detailed piece of work, where we have to interview a range of officers, review significant amounts of evidence and seek legal representations on the issues raised.

The costs incurred in responding to specific questions or objections raised by electors is not part of the fee. This work will be charged in accordance with the PSAA's fee scales.

Our audit team

Our audit team will continue to be led by Andrew Cardoza, with Anita Pipes providing continuity at a day to day level. Appendix 2 provides more details on specific roles and contact details of the team.

Reporting and communication

Reporting is a key part of the audit process, not only in communicating the audit findings for the year, but also in ensuring the audit team are accountable to you in addressing the issues identified as part of the audit strategy. Throughout the year we will communicate with you through meetings with the Head of Finance and the Joint Audit and Scrutiny Panel. Our communication outputs are included in Appendix 1.

Independence and Objectivity

Auditors are also required to be independent and objective. Appendix 3 provides more details of our confirmation of independence and objectivity.

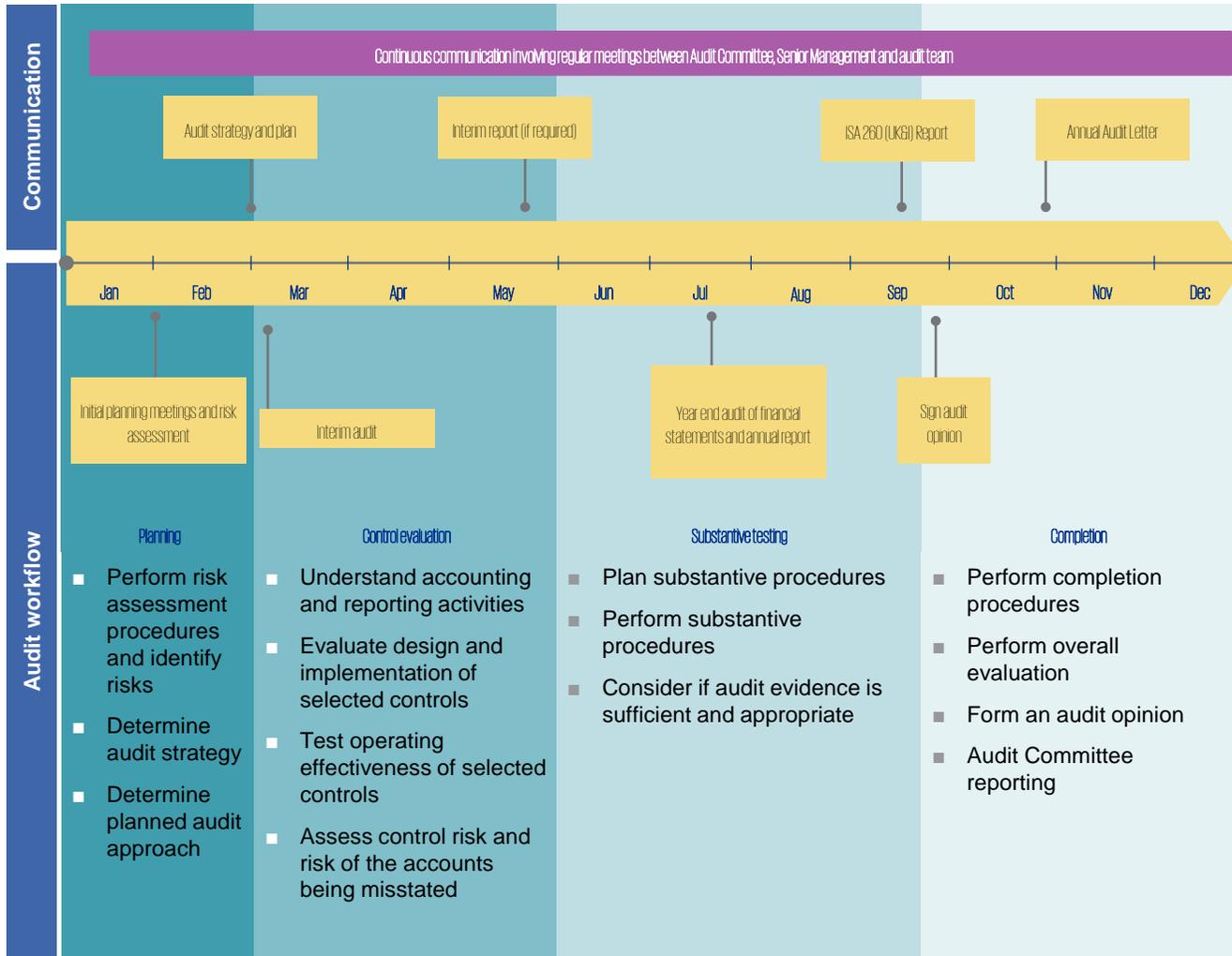
Audit fee

Our Audit Fee Letter 2016/2017 presented to you in April 2016 first set out our fees for the 2016/2017 audit. This letter also sets out our assumptions. We have not considered it necessary to make any changes to the agreed fees at this stage although, we anticipate that it may be necessary to charge an additional fee during the year in respect of the extra work on the LGPS triennial revaluation and the Code changes around the CIES presentation. We will ensure that any additional fees are agreed with the respective Chief Finance Officers.

Police and Crime Commissioner - The planned audit fee for 2016/17 is £35,220 which is the same as the fee charged in 2015/16.

Chief Constable - The planned audit fee for 2016/17 is £15,000 which is the same as the fee charged in 2015/16.

Appendix 1: Key elements of our financial statements audit approach



Driving more value from the audit through data and analytics

Technology is embedded throughout our audit approach to deliver a high quality audit opinion. Use of Data and Analytics (D&A) to analyse large populations of transactions in order to identify key areas for our audit focus is just one element. We strive to deliver new quality insight into your operations that enhances our and your preparedness and improves your collective 'business intelligence.' Data and Analytics allows us to:

- Obtain greater understanding of your processes, to automatically extract control configurations and to obtain higher levels assurance.
- Focus manual procedures on key areas of risk and on transactional exceptions.
- Identify data patterns and the root cause of issues to increase forward-looking insight.

We anticipate using data and analytics in our work around key areas such as journals. We also expect to provide insights from our analysis of these tranches of data in our reporting to add further value from our audit.

Appendix 2: Audit team



Your audit team has been drawn from our specialist public sector assurance department. Our audit team remains mostly the same as in 2015/16 ensuring a consistency in day to day staff involved in your audit.



Name	Andrew Cardoza
Position	Partner/Director
	'My role is to lead our team and ensure the delivery of a high quality, valued added external audit opinion. I will be the main point of contact for the JARAC and Chief Finance Officers.'

Andrew Cardoza

Director

0121 232 3869

andrew.cardoza@kpmg.co.uk



Name	Anita Pipes
Position	Assistant Manager
	'I provide quality assurance for the audit work and specifically any technical accounting and risk areas. I will be responsible for the on-site delivery of our work and will supervise the work of our audit assistants.'

Anita Pipes

Assistant Manager

0115 945 4481

anita.pipes@kpmg.co.uk

Appendix 3: Independence and objectivity requirements

Independence and objectivity

Professional standards require auditors to communicate to those charged with governance, at least annually, all relationships that may bear on the firm's independence and the objectivity of the audit engagement partner and audit staff. The standards also place requirements on auditors in relation to integrity, objectivity and independence.

The standards define 'those charged with governance' as 'those persons entrusted with the supervision, control and direction of an entity'. In your case this is the Police and Crime Commissioner and Chief Constable.

KPMG LLP is committed to being and being seen to be independent. APB Ethical Standards require us to communicate to you in writing all significant facts and matters, including those related to the provision of non-audit services and the safeguards put in place, in our professional judgement, may reasonably be thought to bear on KPMG LLP's independence and the objectivity of the Engagement Lead and the audit team.

Further to this auditors are required by the National Audit Office's Code of Audit Practice to:

- Carry out their work with integrity, independence and objectivity;
- Be transparent and report publicly as required;
- Be professional and proportional in conducting work;
- Be mindful of the activities of inspectorates to prevent duplication;
- Take a constructive and positive approach to their work;
- Comply with data statutory and other relevant requirements relating to the security, transfer, holding, disclosure and disposal of information.

PSAA's Terms of Appointment includes several references to arrangements designed to support and reinforce the requirements relating to independence, which auditors must comply with. These are as follows:

- Auditors and senior members of their staff who are directly involved in the management, supervision or delivery of PSAA audit work should not take part in political activity.

- No member or employee of the firm should accept or hold an appointment as a member of an audited body whose auditor is, or is proposed to be, from the same firm. In addition, no member or employee of the firm should accept or hold such appointments at related bodies, such as those linked to the audited body through a strategic partnership.
- Auditors and their staff should not be employed in any capacity (whether paid or unpaid) by an audited body or other organisation providing services to an audited body whilst being employed by the firm.
- Auditors appointed by the PSAA should not accept engagements which involve commenting on the performance of other PSAA auditors on PSAA work without first consulting PSAA.
- Auditors are expected to comply with the Terms of Appointment policy for the Engagement Lead to be changed on a periodic basis.
- Audit suppliers are required to obtain the PSAA's written approval prior to changing any Engagement Lead in respect of each audited body.
- Certain other staff changes or appointments require positive action to be taken by Firms as set out in the Terms of Appointment.

Confirmation statement

We confirm that as of February 2017 in our professional judgement, KPMG LLP is independent within the meaning of regulatory and professional requirements and the objectivity of the Engagement Lead and audit team is not impaired.



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This report is addressed to the Authority and has been prepared for the sole use of the Authority. We take no responsibility to any member of staff acting in their individual capacities, or to third parties. We draw your attention to the Statement of Responsibilities of auditors and audited bodies, which is available on Public Sector Audit Appointment’s website (www.psa.co.uk).

External auditors do not act as a substitute for the audited body’s own responsibility for putting in place proper arrangements to ensure that public business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively.

We are committed to providing you with a high quality service. If you have any concerns or are dissatisfied with any part of KPMG’s work, in the first instance you should contact Andy Cardoza, the engagement lead to the PCC and CC, who will try to resolve your complaint. If you are dissatisfied with your response please contact the national lead partner for all of KPMG’s work under our contract with Public Sector Audit Appointments Limited, Andrew Sayers, by email to Andrew.Sayers@kpmg.co.uk. After this, if you are still dissatisfied with how your complaint has been handled you can access PSAA’s complaints procedure by emailing generalenquiries@psaa.co.uk by telephoning 020 7072 7445 or by writing to Public Sector Audit Appointments Limited, 3rd Floor, Local Government House, Smith Square, London, SW1P 3HZ.

For Decision	
Public/Non Public*	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	Natalie Baker-Swift, Brian Welch
Agenda Item:	10

INTERNAL AUDIT ANNUAL PLAN 2017-18

1. Purpose of the Report

- 1.1 To inform members of the proposed plan of work for 2017-18 in respect of the accounts relating to 2016-17.

2. Recommendations

- 2.1 Members are requested to consider and approve the audit plan for 2017-18 attached at **Appendix A**.

3. Reasons for Recommendations

- 3.1 This complies with good governance and financial regulations

4. Summary of Key Points

- 4.1 The internal auditors have met with the OPCC and force to agree the plan proposed at **Appendix A**. This plan for 2017-18 has been established based upon meeting statutory requirements for auditing key financial systems, the need to audit systems where there has been a significant change in year and other audit requests based upon risks within the strategic risk register and advisory audits required to ensure the smooth running of both legal entities.

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 The risk register has been used in the production of this internal audit plan.

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

9.1 The work of internal audit supports all of the Police & Crime Plan priorities.

10. Changes in Legislation or other Legal Considerations

10.1 The internal changes to systems and processes have been considered as part of this plan – specifically the move to a new payroll system in January.

11. Details of outcome of consultation

11.1 The OPCC and Force were part of the process for producing this plan.

12. Appendices

12.1 **Appendix A** – Internal Audit Plan 2017-18



Office of the Police & Crime Commissioner for Nottinghamshire and
Nottinghamshire Police

Internal Audit Progress Report 2016/17

February 2017

Presented to the Joint Audit & Scrutiny Panel meeting of: 9th March 2017

Contents

- 01 Introduction
- 02 Summary and conclusions from Internal Audit work to date
- 03 Performance

Appendices

- A1 Summary of Reports 2016/17
- A2 Internal Audit Plan 2016/17
- A3 Definition of Assurances and Priorities
- A4 Contact Details
- A5 Statement of Responsibility

01 Introduction

- 1.1 The purpose of this report is to update the Joint Audit & Scrutiny Panel (JASP) as to the progress in respect of the 2016/17 Internal Audit Plan that considered and approved by the JASP at its meeting on 11th February 2016.
- 1.2 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.
- 1.3 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.
- 1.4 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.
- 1.5 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.
- 1.6 Our work is delivered in accordance with the Public Sector Internal Audit Standards (PSIAS).

02 Summary of internal audit work to date

- 2.1 We have issued two final reports in respect of the 2016/17 plan since the last progress report to the JASP, these being in respect of the Core Financial Systems and Effective Audit & Scrutiny. Additionally, we have issued a draft report in respect of HR – Recruitment & Selection where we await management’s responses. Further details are provided in Appendix 1.

Nottinghamshire 2016/17 Audits	Report Status	Assurance Opinion		Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
Implementation of DMS	Final	Limited		3	3	2	8
Data Protection Act Compliance	Final	Limited		1	5	3	9
Estates Strategy	Final	N/A		-	-	-	-
HR Establishment Budgeting	Final	Satisfactory		-	3	1	4
Commissioning Framework	Final	N/A		-	-	-	-
Overtime Payments	Final	N/A		-	-	-	-
Procurement Follow-up	Final	EMSCU - Limited	Local - Satisfactory	1	4	2	7
Savings Programme Follow-up	Final	Satisfactory		-	2	1	3
Core Financial Systems	Final	Satisfactory		1	5	3	9
Effective Audit & Scrutiny	Final	N/A ¹		-	6	3	9

Nottinghamshire 2016/17 Audits	Report Status	Assurance Opinion	Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
HR – Recruitment & Selection	Draft					
Total			6	28	15	49

¹Effective Audit & Scrutiny – this audit aimed to assess the Audit & Scrutiny Panel against best practice, such as the principles set out in the National Audit Offices (NAO's) good practice guide 'The Audit Committee Self-Assessment Checklist, 2012'. The objective of the audit was therefore to provide an action plan of areas to consider for driving best practice and not to provide an opinion on the adequacy and effectiveness of controls.

2.2 We are also scheduled to undertake audits of Risk Management and Data Quality in March. Further details are provided within Appendix A2.

2.3 As reported in our previous progress report, five specific areas have been identified in terms of the collaborative audits for 2016/17. These reviews looked at the business plan and S22 agreement in terms of whether it is being delivered and is fit for purpose going forward; the scope also included value for money considerations and arrangements for managing risk. To date, we have finalised three reports (Share HR Service Centre, Legal Services and EMSCU). Work in respect of EMSOU has recently been completed and is being reviewed, whilst work in respect of EMOpSS is in progress.

Collaboration Audits 2016/17	Status	Assurance Opinion	Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
EM Shared HR Service Centre	Final	Satisfactory		1	3	4
EM Legal Services	Final	Limited	1	3	2	6
EMOpSS	Work in progress					
EMS Commercial Unit	Final	Satisfactory		3		3
EMSOU	Fieldwork complete; being reviewed.					
Total			1	7	5	13

03 Performance

3.1 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. This list will be developed over time, with some indicators either only applicable at year end or have yet to be evidenced.

No	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.	92% (12/13)
5	Issue of final report	Within 5 working days of agreement of responses.	100% (7/7)
6	Follow-up of priority one recommendations	90% within four months. 100% within six months.	N/A
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% (10/10)
9	Customer satisfaction (measured by survey)	85% average satisfactory or above	100% (2/2)

Appendix A1 – Summary of Reports 2016/17

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:

Core Financial Systems

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

Individual Area Assurance Opiniojns	
General Ledger	Significant
Cash, Bank & Treasury Management	Significant
Payments & Creditors	Satisfactory
Income & Debtors	Satisfactory
Payroll	Limited

Recommendation Priorities	
Priority 1 (Fundamental)	1
Priority 2 (Significant)	5
Priority 3 (Housekeeping)	3

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

- Clearly defined policies and/or procedures are not in place resulting in ineffective and inefficient working practices.
- Systems and data entry restrictions are not in place which could lead to inappropriate access to the systems and data.
- There are errors in accounting transactions posted on the General Ledger resulting in inaccurate financial information.
- Inaccurate cash flow information regarding investments and borrowings is produced which could result in inappropriate levels of cash held within the Force.
- The purchasing process is not complied with by staff which could lead to fraudulent transactions that may go undetected.
- An ineffective debt management process is in place which could lead to irrecoverable income and inappropriate write off of debt.
- Payments to staff are inaccurate resulting in financial losses for the Force, administrative burdens and where the employee loses out, loss of reputation.

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

- General Ledger
- Cash, Bank and Treasury Management
- Payments and Creditors
- Income and Debtors
- Payroll

We raised one priority 1 recommendation of a fundamental nature that require addressing. This is set out below:

Recommendation 1	<p>Upon full operation of the payroll module on the Oracle system, a daily check of changes to payroll data, including employee data, should be completed to confirm accuracy and appropriateness and to identify instances where a service request has not been raised for the Payroll Team to conduct a secondary check.</p> <p>The appropriateness of assigning the HR Employment Services Team access to make amendments to live payroll data on Oracle without approval of the changes by the Payroll Team should be assessed and a formal decision made as to whether this is deemed acceptable practice by the Force. [MFSS and Force]</p>
Finding	<p>To ensure that only appropriate and accurate changes are made to payroll data, and to confirm agreed working practices are followed, a daily audit report of changes to payroll data should be extracted from Oracle and the changes should be checked by the Payroll Team. In order for staff only to have appropriate access rights on the Oracle Payroll module, a review of the HR team access should be completed.</p> <p>The move from the ePayfact system to the Payroll Module on the Oracle system was discussed with both the Payroll Team Leader (MFSS) and the HR Employment Services Team Leader (MFSS). It was confirmed that the process for variations/adjustments to payroll data will be for HR to make the changes on the Payroll Module as a result of a raised service request. The service request will include a task for the Payroll Team to check the changes made.</p> <p>However, as the HR Employment Services Team at MFSS will have access to make changes to live payroll data, this could occur without a service request being raised. If the change does not result in a variation on pay of more than 20% on the previous month, payroll would not be aware of this change as it would not be picked up within the variations report produced each month.</p>
Response	<p>Agreed. This is an issue that is likely to be common to all users of the Oracle Payroll system and therefore this ideally requires a joint approach to agreeing a revised process.</p> <p>This will be raised at the next available Optimisation Group meeting and at the current Payroll Implementation group.</p> <p>The outcomes of these meetings will help the Force determine its risk appetite in respect of this control.</p>
Timescale	January 17 / Claire Salter, Retained HR

We raised five priority 2 recommendations where we believe there is scope for improvement within the control environment. These are set out below:

- MFSS should detail the fraud checks that have been completed when setting up a new supplier or amending an existing supplier on the Oracle System. This narrative should include the date of the check and the initials of the officer completing the check. [MFSS]
- An up to date policy for debt recovery should be produced by the Force and communicated to all relevant staff within the Force and at MFSS. [MFSS & Force]
- MFSS should ensure that clear and concise notes are retained on Oracle when issuing a credit note on account. These notes should include the invoice number which is being credited, the reason for the credit, and the subsequent action being taken (e.g. to be re-invoiced) with the new invoice number.
The Force should introduce authorisation limits for providing approval for the raising of and authorisation of credit notes. [MFSS and Force]
- The Force should communicate to Officers and Staff that there should be sufficient narrative description of the reasoning for all expense claims. This should highlight the legitimacy and appropriateness of the expense claim being submitted in line with the Force Expense Policy.
Where the expense narrative does not provide sufficient information to confirm compliance with policy, the payroll officer should complete a narrative of what check has been completed to confirm the claim is appropriate and in line with policy.
There should be at least one entry of sufficient detail for the expense claim as audit trail to confirm expenses are appropriately and correctly submitted. [MFSS and Force]
- The Force should introduce a threshold limit on expense claims that are required to be audited prior to approval that have been submitted under the self-approve module on Oracle.
Further consideration should be given to introducing threshold limits for individual categories of expense claims. For example, a threshold limit for self-approval on glasses claims in line with Force Policy. [Force]

We also raised three housekeeping issues with regards secondary checks on BACS payments, desktop instructions on payroll checks and the bonus payments policy.

Management confirmed that all actions have either been implemented or will be actioned by April 2017.

Effective Audit & Scrutiny

Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	6
Priority 3 (Housekeeping)	3

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

The audit looked to provide assurance that there is an effective audit and scrutiny function in place to provide independent assurance on the adequacy of the risk management framework, the internal control environment and the integrity of financial reporting and annual governance process, as set out in best practice guidance such as that published by CIPFA and the National Audit Office (NAO).

Using the five good practice principles set out in the NAO's good practice guide 'The Audit Committee Self-Assessment Checklist, 2012', and applying them to the Joint Audit & Scrutiny Panel, the audit objectives are to provide assurance over:

- *Principle 1: The Role of the Audit Committee* – Does the Audit Committee effectively support the Board and the Accounting Officer by reviewing the completeness of assurances to satisfy their needs, and by reviewing the reliability and integrity of these assurances?
- *Principle 2: Membership, Independence, Objectivity and Understanding* – Is the Audit Committee suitably independent and objective, and does each member have a good understanding of the objectives, priorities and risks of the organisation, and of their role on the Audit Committee?
- *Principle 3: Skills* – Does the Audit Committee contain or have at its disposal an appropriate mix of skills to perform its functions well?
- *Principle 4: Scope of Work* – Is the scope of the Audit Committee suitably defined, and does it encompass all the assurance needs of the Board and Accounting Officer?
- *Principle 5: Communication* – Does the Committee engage effectively with Financial and Performance Reporting issues, and with the work of internal and external audit? And does the Audit Committee communicate effectively with the Accounting Officer, the Board, and other stakeholders?

We raised six priority 2 recommendation where we believe there is scope for improvement within the control environment. These related to the following:

- Actions identified as a consequence of JASP meetings should be recorded within the minutes and a separate action plan should be produced and followed up at subsequent meetings.
- Whilst it may be too late to revisit the KPMG action plan, the report and action plan coming out of this current review should be presented to the JASP and delivery of the actions monitored at subsequent meetings.
- The Terms of Reference for the JASP should be reviewed, updated, agreed and uploaded to the website. The review should consider issues raised as a consequence of this review; these include:
 - Reference to the 'joint' nature of the panel within the 'Statement of Purpose'.
 - Rules relating to the Panel being quorate.
 - The requirement to hold periodic meetings with the internal and external auditors where management are excluded from the meeting.
 - The requirement to secure assurance on the collaborative arrangements in the region.
 - Whether the Panel has any role in respect of monitoring the process for Grievance Appeals (as is currently set out in the ToR).
- Consideration should be given by the Panel to the production of an annual report which sets out the Panel's activities for the preceding year, triangulates the various sources of assurance it receives into the one document and demonstrates how it is has fulfilled its responsibilities.
- The Panel's work plan should be updated to include an annual review of areas of scrutiny for the coming year.
- A review should be carried out of the format and content of the Audit & Inspection Report that is provided to the Panel. The Panel should be asked to comment on whether it currently provides them with the appropriate level of assurance and, if not, how it could be improved.

We also raised three priority 3 recommendations of a more housekeeping nature. These were in respect of meeting with the auditors, Panel training requirements and the Audit Committee Chairs Forum.

Management confirmed that the agreed recommendations would be implemented by the end of July 2017.

Shared Human Resource Service Centre

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

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

- A Section 22 agreement is in place that clearly sets out the decision making and governance framework that is in place;
- A clearly defined Business Plan is in place that sets out the statutory duties, objectives and the key performance indicators for the services to be provided;
- The Business Plan is set in line with the Section 22 agreement and it is regularly reviewed to ensure it remains 'fit for purpose';
- There are effective reporting processes in place to provide assurances to the Forces on the performance of the unit;
- Value for money considerations are regularly reviewed and reported to the Forces; and
- The unit has procedures in place to ensure that risks are identified, assessed recorded and managed appropriately.

We raised one priority 2 recommendation where we believe there is scope for improvement within the control environment. This related to the following:

- The current SLA KPI's should continue to be reviewed to ensure SHRSC are able to clearly report on each one. These should be presented and approved at the next Management Board

Moreover, a quarterly performance report that includes all SLA KPI's should be created and communicated to both Forces to allow effective scrutiny of SHRSC performance.

We also raised three priority 3 recommendations of a more housekeeping nature. These were in respect of approval of the business plan, risk management and reporting of value for money.

Management confirmed that the recommendations would be implemented by the end of March 2017.

East Midlands Strategic Commercial Unit

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

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

- A Section 22 agreement is in place that clearly sets out the decision making and governance framework that is in place;
- A clearly defined Business Plan is in place that sets out the statutory duties, objectives and the key performance indicators for the services to be provided;
- The Business Plan is set in line with the Section 22 agreement and it is regularly reviewed to ensure it remains 'fit for purpose';
- There are effective reporting processes in place to provide assurances to the Forces on the performance of the unit;
- Value for money considerations are regularly reviewed and reported to the Forces; and
- The unit has procedures in place to ensure that risks are identified, assessed recorded and managed appropriately.

We raised three priority 2 recommendations where we believe there is scope for improvement within the control environment. These related to the following:

- The Forces' and EMSCU should ensure that the Management Board meetings are held on a regular / quarterly basis in order that performance is appropriately reviewed and actions put in place to address areas of weakness where necessary.
The SLT meeting timetable and agenda should be updated to reflect the move from monthly meetings to quarterly and ensure all standing agenda items listed are addressed at each meeting.
- The Business Plan should be reviewed and approved by the EMSCU Management Board to ensure the Forces have assurance that it meets the requirements of each Force.
- EMSCU should review the current KPI's that are in place and should prepare updated KPI's that can be presented to the Management Board for scrutiny, approval and subsequent regular reporting.

Management confirmed that the recommendations would be implemented by the end of March 2017.

Appendix A2 Internal Audit Plan 2016/17

Auditable Area	Planned Fieldwork Date	Draft Report Date	Final Report Date	Target JASP	Comments
Core Assurance					
Risk Management	July 2016			June 2017	Deferred to March 2017 on client request. Planned to start 13 th March.
Procurement	Nov 2016	Nov 2016	Nov 2016	Dec 2017	Final report issued.
Core Financials					
Payroll	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Cash, Bank & Treasury	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
General Ledger	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Income & Debtors	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Payment & Creditors	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Strategic & Operational Risk					
Implementation of DMS	April 2016	May 2016	June 2016	June 2016	Final report issued.
Savings Programme Follow-up	Sept 2016	Oct 2016	Oct 2016	Dec 2016	Final report issued.
Human Resources	Jan 2017	Jan 2017		Mar 2017	Draft report issued.
Data Protection Act Compliance	Aug 2016	Sept 2016	Oct 2016	Dec 2016	Final report issued.

Auditable Area	Planned Fieldwork Date	Draft Report Date	Final Report Date	Target JASP	Comments
Data Quality	Feb 2017			June 2017	Deferred to March 2017 on client request. Planned to start 6 th March.
Effective Audit & Scrutiny	July 2016	Oct 2016	Feb 2017	March 2017	Final report issued.
Collaboration					
EMCHRS Transactional Services	Dec 2016	Dec 2016	Jan 2017	Mar 2017	Final report issued.
EM Legal Services	Nov 2016	Nov 2016	Nov 2016	Dec 2016	Final report issued.
EMOpSS	Feb / Mar 2017			Mar 2017	Work in progress.
EMS Commercial Unit	Nov 2016	Dec 2016	Jan 2017	Mar 2017	Final report issued.
EMSOU	Jan / Feb 2017			Mar 2017	Fieldwork completed; being reviewed.
Other					
Estates Strategy	-	May 2016	May 2016	June 2016	Final memo issued.
HR Establishment Budgeting	-	May 2016	Sept 2016	Sept 2016	Final report issued.
Commissioning Framework	-	July 2016	July 2016	Sept 2016	Final memo issued.
Core Financial Follow-up	-	July 2016	July 2016	Sept 2016	Final report issued.
Overtime Payments	-	July 2016	July 2016	Sept 2016	Final memo issued.

Appendix A3 – Definition of Assurances and Priorities

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 to significant error or abuse.	Significant non-compliance with basic control processes leaves the 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.

Appendix A4 - Contact Details

Contact Details

David Hoose

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David.Hoose@Mazars.co.uk

Brian Welch

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Brian.Welch@Mazars.co.uk

A5 Statement of Responsibility

Status of our reports

The responsibility for maintaining internal control rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy of the internal control arrangements implemented by management and perform testing on those controls to ensure that they are operating for the period under review. We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone are not a guarantee that fraud, where existing, will be discovered.

The contents of this report are confidential and not for distribution to anyone other than the Office of the Police and Crime Commissioner for Nottinghamshire and Nottinghamshire Police. Disclosure to third parties cannot be made without the prior written consent of Mazars LLP.

Mazars LLP is the UK firm of Mazars, an international advisory and accountancy group. Mazars LLP is registered by the Institute of Chartered Accountants in England and Wales to carry out company audit work.

For Information / Consideration	
Public/Non Public*	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	Brian Welch
Agenda Item:	11

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 2016-17 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 2016-17



Office of the Police & Crime Commissioner for Nottinghamshire and
Nottinghamshire Police

Internal Audit Progress Report 2016/17

February 2017

Presented to the Joint Audit & Scrutiny Panel meeting of: 9th March 2017

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01 Introduction

- 1.1 The purpose of this report is to update the Joint Audit & Scrutiny Panel (JASP) as to the progress in respect of the 2016/17 Internal Audit Plan that considered and approved by the JASP at its meeting on 11th February 2016.
- 1.2 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.
- 1.3 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.
- 1.4 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.
- 1.5 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.
- 1.6 Our work is delivered in accordance with the Public Sector Internal Audit Standards (PSIAS).

02 Summary of internal audit work to date

- 2.1 We have issued two final reports in respect of the 2016/17 plan since the last progress report to the JASP, these being in respect of the Core Financial Systems and Effective Audit & Scrutiny. Additionally, we have issued a draft report in respect of HR – Recruitment & Selection where we await management's responses. Further details are provided in Appendix 1.

Nottinghamshire 2016/17 Audits	Report Status	Assurance Opinion		Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
Implementation of DMS	Final	Limited		3	3	2	8
Data Protection Act Compliance	Final	Limited		1	5	3	9
Estates Strategy	Final	N/A		-	-	-	-
HR Establishment Budgeting	Final	Satisfactory		-	3	1	4
Commissioning Framework	Final	N/A		-	-	-	-
Overtime Payments	Final	N/A		-	-	-	-
Procurement Follow-up	Final	EMSCU - Limited	Local - Satisfactory	1	4	2	7
Savings Programme Follow-up	Final	Satisfactory		-	2	1	3
Core Financial Systems	Final	Satisfactory		1	5	3	9
Effective Audit & Scrutiny	Final	N/A ¹		-	6	3	9

Nottinghamshire 2016/17 Audits	Report Status	Assurance Opinion	Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
HR – Recruitment & Selection	Draft					
Total			6	28	15	49

¹Effective Audit & Scrutiny – this audit aimed to assess the Audit & Scrutiny Panel against best practice, such as the principles set out in the National Audit Offices (NAO's) good practice guide 'The Audit Committee Self-Assessment Checklist, 2012'. The objective of the audit was therefore to provide an action plan of areas to consider for driving best practice and not to provide an opinion on the adequacy and effectiveness of controls.

2.2 We are also scheduled to undertake audits of Risk Management and Data Quality in March. Further details are provided within Appendix A2.

2.3 As reported in our previous progress report, five specific areas have been identified in terms of the collaborative audits for 2016/17. These reviews looked at the business plan and S22 agreement in terms of whether it is being delivered and is fit for purpose going forward; the scope also included value for money considerations and arrangements for managing risk. To date, we have finalised three reports (Share HR Service Centre, Legal Services and EMSCU). Work in respect of EMSOU has recently been completed and is being reviewed, whilst work in respect of EMOpSS is in progress.

Collaboration Audits 2016/17	Status	Assurance Opinion	Priority 1 (Fundamental)	Priority 2 (Significant)	Priority 3 (Housekeeping)	Total
EM Shared HR Service Centre	Final	Satisfactory		1	3	4
EM Legal Services	Final	Limited	1	3	2	6
EMOpSS	Work in progress					
EMS Commercial Unit	Final	Satisfactory		3		3
EMSOU	Fieldwork complete; being reviewed.					
Total			1	7	5	13

03 Performance

3.1 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. This list will be developed over time, with some indicators either only applicable at year end or have yet to be evidenced.

No	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.	92% (12/13)
5	Issue of final report	Within 5 working days of agreement of responses.	100% (7/7)
6	Follow-up of priority one recommendations	90% within four months. 100% within six months.	N/A
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% (10/10)
9	Customer satisfaction (measured by survey)	85% average satisfactory or above	100% (2/2)

Appendix A1 – Summary of Reports 2016/17

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:

Core Financial Systems

Overall Assurance Opinion	Satisfactory
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Individual Area Assurance Opiniojns	
General Ledger	Significant
Cash, Bank & Treasury Management	Significant
Payments & Creditors	Satisfactory
Income & Debtors	Satisfactory
Payroll	Limited

Recommendation Priorities	
Priority 1 (Fundamental)	1
Priority 2 (Significant)	5
Priority 3 (Housekeeping)	3

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

- Clearly defined policies and/or procedures are not in place resulting in ineffective and inefficient working practices.
- Systems and data entry restrictions are not in place which could lead to inappropriate access to the systems and data.
- There are errors in accounting transactions posted on the General Ledger resulting in inaccurate financial information.
- Inaccurate cash flow information regarding investments and borrowings is produced which could result in inappropriate levels of cash held within the Force.
- The purchasing process is not complied with by staff which could lead to fraudulent transactions that may go undetected.
- An ineffective debt management process is in place which could lead to irrecoverable income and inappropriate write off of debt.
- Payments to staff are inaccurate resulting in financial losses for the Force, administrative burdens and where the employee loses out, loss of reputation.

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

- General Ledger
- Cash, Bank and Treasury Management
- Payments and Creditors
- Income and Debtors
- Payroll

We raised one priority 1 recommendation of a fundamental nature that require addressing. This is set out below:

Recommendation 1	<p>Upon full operation of the payroll module on the Oracle system, a daily check of changes to payroll data, including employee data, should be completed to confirm accuracy and appropriateness and to identify instances where a service request has not been raised for the Payroll Team to conduct a secondary check.</p> <p>The appropriateness of assigning the HR Employment Services Team access to make amendments to live payroll data on Oracle without approval of the changes by the Payroll Team should be assessed and a formal decision made as to whether this is deemed acceptable practice by the Force. [MFSS and Force]</p>
Finding	<p>To ensure that only appropriate and accurate changes are made to payroll data, and to confirm agreed working practices are followed, a daily audit report of changes to payroll data should be extracted from Oracle and the changes should be checked by the Payroll Team. In order for staff only to have appropriate access rights on the Oracle Payroll module, a review of the HR team access should be completed.</p> <p>The move from the ePayfact system to the Payroll Module on the Oracle system was discussed with both the Payroll Team Leader (MFSS) and the HR Employment Services Team Leader (MFSS). It was confirmed that the process for variations/adjustments to payroll data will be for HR to make the changes on the Payroll Module as a result of a raised service request. The service request will include a task for the Payroll Team to check the changes made.</p> <p>However, as the HR Employment Services Team at MFSS will have access to make changes to live payroll data, this could occur without a service request being raised. If the change does not result in a variation on pay of more than 20% on the previous month, payroll would not be aware of this change as it would not be picked up within the variations report produced each month.</p>
Response	<p>Agreed. This is an issue that is likely to be common to all users of the Oracle Payroll system and therefore this ideally requires a joint approach to agreeing a revised process.</p> <p>This will be raised at the next available Optimisation Group meeting and at the current Payroll Implementation group.</p> <p>The outcomes of these meetings will help the Force determine its risk appetite in respect of this control.</p>
Timescale	January 17 / Claire Salter, Retained HR

We raised five priority 2 recommendations where we believe there is scope for improvement within the control environment. These are set out below:

- MFSS should detail the fraud checks that have been completed when setting up a new supplier or amending an existing supplier on the Oracle System. This narrative should include the date of the check and the initials of the officer completing the check. [MFSS]
- An up to date policy for debt recovery should be produced by the Force and communicated to all relevant staff within the Force and at MFSS. [MFSS & Force]
- MFSS should ensure that clear and concise notes are retained on Oracle when issuing a credit note on account. These notes should include the invoice number which is being credited, the reason for the credit, and the subsequent action being taken (e.g. to be re-invoiced) with the new invoice number.
The Force should introduce authorisation limits for providing approval for the raising of and authorisation of credit notes. [MFSS and Force]
- The Force should communicate to Officers and Staff that there should be sufficient narrative description of the reasoning for all expense claims. This should highlight the legitimacy and appropriateness of the expense claim being submitted in line with the Force Expense Policy.
Where the expense narrative does not provide sufficient information to confirm compliance with policy, the payroll officer should complete a narrative of what check has been completed to confirm the claim is appropriate and in line with policy.
There should be at least one entry of sufficient detail for the expense claim as audit trail to confirm expenses are appropriately and correctly submitted. [MFSS and Force]
- The Force should introduce a threshold limit on expense claims that are required to be audited prior to approval that have been submitted under the self-approve module on Oracle.
Further consideration should be given to introducing threshold limits for individual categories of expense claims. For example, a threshold limit for self-approval on glasses claims in line with Force Policy. [Force]

We also raised three housekeeping issues with regards secondary checks on BACS payments, desktop instructions on payroll checks and the bonus payments policy.

Management confirmed that all actions have either been implemented or will be actioned by April 2017.

Effective Audit & Scrutiny

Recommendation Priorities	
Priority 1 (Fundamental)	-
Priority 2 (Significant)	6
Priority 3 (Housekeeping)	3

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

The audit looked to provide assurance that there is an effective audit and scrutiny function in place to provide independent assurance on the adequacy of the risk management framework, the internal control environment and the integrity of financial reporting and annual governance process, as set out in best practice guidance such as that published by CIPFA and the National Audit Office (NAO).

Using the five good practice principles set out in the NAO's good practice guide 'The Audit Committee Self-Assessment Checklist, 2012', and applying them to the Joint Audit & Scrutiny Panel, the audit objectives are to provide assurance over:

- *Principle 1: The Role of the Audit Committee* – Does the Audit Committee effectively support the Board and the Accounting Officer by reviewing the completeness of assurances to satisfy their needs, and by reviewing the reliability and integrity of these assurances?
- *Principle 2: Membership, Independence, Objectivity and Understanding* – Is the Audit Committee suitably independent and objective, and does each member have a good understanding of the objectives, priorities and risks of the organisation, and of their role on the Audit Committee?
- *Principle 3: Skills* – Does the Audit Committee contain or have at its disposal an appropriate mix of skills to perform its functions well?
- *Principle 4: Scope of Work* – Is the scope of the Audit Committee suitably defined, and does it encompass all the assurance needs of the Board and Accounting Officer?
- *Principle 5: Communication* – Does the Committee engage effectively with Financial and Performance Reporting issues, and with the work of internal and external audit? And does the Audit Committee communicate effectively with the Accounting Officer, the Board, and other stakeholders?

We raised six priority 2 recommendation where we believe there is scope for improvement within the control environment. These related to the following:

- Actions identified as a consequence of JASP meetings should be recorded within the minutes and a separate action plan should be produced and followed up at subsequent meetings.
- Whilst it may be too late to revisit the KPMG action plan, the report and action plan coming out of this current review should be presented to the JASP and delivery of the actions monitored at subsequent meetings.
- The Terms of Reference for the JASP should be reviewed, updated, agreed and uploaded to the website. The review should consider issues raised as a consequence of this review; these include:
 - Reference to the 'joint' nature of the panel within the 'Statement of Purpose'.
 - Rules relating to the Panel being quorate.
 - The requirement to hold periodic meetings with the internal and external auditors where management are excluded from the meeting.
 - The requirement to secure assurance on the collaborative arrangements in the region.
 - Whether the Panel has any role in respect of monitoring the process for Grievance Appeals (as is currently set out in the ToR).
- Consideration should be given by the Panel to the production of an annual report which sets out the Panel's activities for the preceding year, triangulates the various sources of assurance it receives into the one document and demonstrates how it is has fulfilled its responsibilities.
- The Panel's work plan should be updated to include an annual review of areas of scrutiny for the coming year.
- A review should be carried out of the format and content of the Audit & Inspection Report that is provided to the Panel. The Panel should be asked to comment on whether it currently provides them with the appropriate level of assurance and, if not, how it could be improved.

We also raised three priority 3 recommendations of a more housekeeping nature. These were in respect of meeting with the auditors, Panel training requirements and the Audit Committee Chairs Forum.

Management confirmed that the agreed recommendations would be implemented by the end of July 2017.

Shared Human Resource Service Centre

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

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

- A Section 22 agreement is in place that clearly sets out the decision making and governance framework that is in place;
- A clearly defined Business Plan is in place that sets out the statutory duties, objectives and the key performance indicators for the services to be provided;
- The Business Plan is set in line with the Section 22 agreement and it is regularly reviewed to ensure it remains 'fit for purpose';
- There are effective reporting processes in place to provide assurances to the Forces on the performance of the unit;
- Value for money considerations are regularly reviewed and reported to the Forces; and
- The unit has procedures in place to ensure that risks are identified, assessed recorded and managed appropriately.

We raised one priority 2 recommendation where we believe there is scope for improvement within the control environment. This related to the following:

- The current SLA KPI's should continue to be reviewed to ensure SHRSC are able to clearly report on each one. These should be presented and approved at the next Management Board

Moreover, a quarterly performance report that includes all SLA KPI's should be created and communicated to both Forces to allow effective scrutiny of SHRSC performance.

We also raised three priority 3 recommendations of a more housekeeping nature. These were in respect of approval of the business plan, risk management and reporting of value for money.

Management confirmed that the recommendations would be implemented by the end of March 2017.

East Midlands Strategic Commercial Unit

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

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

- A Section 22 agreement is in place that clearly sets out the decision making and governance framework that is in place;
- A clearly defined Business Plan is in place that sets out the statutory duties, objectives and the key performance indicators for the services to be provided;
- The Business Plan is set in line with the Section 22 agreement and it is regularly reviewed to ensure it remains 'fit for purpose';
- There are effective reporting processes in place to provide assurances to the Forces on the performance of the unit;
- Value for money considerations are regularly reviewed and reported to the Forces; and
- The unit has procedures in place to ensure that risks are identified, assessed recorded and managed appropriately.

We raised three priority 2 recommendations where we believe there is scope for improvement within the control environment. These related to the following:

- The Forces' and EMSCU should ensure that the Management Board meetings are held on a regular / quarterly basis in order that performance is appropriately reviewed and actions put in place to address areas of weakness where necessary.
The SLT meeting timetable and agenda should be updated to reflect the move from monthly meetings to quarterly and ensure all standing agenda items listed are addressed at each meeting.
- The Business Plan should be reviewed and approved by the EMSCU Management Board to ensure the Forces have assurance that it meets the requirements of each Force.
- EMSCU should review the current KPI's that are in place and should prepare updated KPI's that can be presented to the Management Board for scrutiny, approval and subsequent regular reporting.

Management confirmed that the recommendations would be implemented by the end of March 2017.

Appendix A2 Internal Audit Plan 2016/17

Auditable Area	Planned Fieldwork Date	Draft Report Date	Final Report Date	Target JASP	Comments
Core Assurance					
Risk Management	July 2016			June 2017	Deferred to March 2017 on client request. Planned to start 13 th March.
Procurement	Nov 2016	Nov 2016	Nov 2016	Dec 2017	Final report issued.
Core Financials					
Payroll	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Cash, Bank & Treasury	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
General Ledger	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Income & Debtors	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Payment & Creditors	Oct 2016	Nov 2016	Dec 2016	Dec 2016	Final report issued.
Strategic & Operational Risk					
Implementation of DMS	April 2016	May 2016	June 2016	June 2016	Final report issued.
Savings Programme Follow-up	Sept 2016	Oct 2016	Oct 2016	Dec 2016	Final report issued.
Human Resources	Jan 2017	Jan 2017		Mar 2017	Draft report issued.
Data Protection Act Compliance	Aug 2016	Sept 2016	Oct 2016	Dec 2016	Final report issued.

Auditable Area	Planned Fieldwork Date	Draft Report Date	Final Report Date	Target JASP	Comments
Data Quality	Feb 2017			June 2017	Deferred to March 2017 on client request. Planned to start 6 th March.
Effective Audit & Scrutiny	July 2016	Oct 2016	Feb 2017	March 2017	Final report issued.
Collaboration					
EMCHRS Transactional Services	Dec 2016	Dec 2016	Jan 2017	Mar 2017	Final report issued.
EM Legal Services	Nov 2016	Nov 2016	Nov 2016	Dec 2016	Final report issued.
EMOpSS	Feb / Mar 2017			Mar 2017	Work in progress.
EMS Commercial Unit	Nov 2016	Dec 2016	Jan 2017	Mar 2017	Final report issued.
EMSOU	Jan / Feb 2017			Mar 2017	Fieldwork completed; being reviewed.
Other					
Estates Strategy	-	May 2016	May 2016	June 2016	Final memo issued.
HR Establishment Budgeting	-	May 2016	Sept 2016	Sept 2016	Final report issued.
Commissioning Framework	-	July 2016	July 2016	Sept 2016	Final memo issued.
Core Financial Follow-up	-	July 2016	July 2016	Sept 2016	Final report issued.
Overtime Payments	-	July 2016	July 2016	Sept 2016	Final memo issued.

Appendix A3 – Definition of Assurances and Priorities

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 to significant error or abuse.	Significant non-compliance with basic control processes leaves the 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.

Appendix A4 - Contact Details

Contact Details

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A5 Statement of Responsibility

Status of our reports

The responsibility for maintaining internal control rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy of the internal control arrangements implemented by management and perform testing on those controls to ensure that they are operating for the period under review. We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone are not a guarantee that fraud, where existing, will be discovered.

The contents of this report are confidential and not for distribution to anyone other than the Office of the Police and Crime Commissioner for Nottinghamshire and Nottinghamshire Police. Disclosure to third parties cannot be made without the prior written consent of Mazars LLP.

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Audit and Scrutiny Panel

For Information / Consideration	
Public/Non Public*	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	
Agenda Item:	12

THE BIG RED BUTTON

1. Purpose of the Report

- 1.1 To update members on the progress with the Big Red Button and the benefits that this will deliver.
- 1.2 This report is for information and assurance.

2. Recommendations

- 2.1 Members are requested to note the report and the assurance that the work being done will ensure we meet the new statutory reporting deadlines from 2018.

3. Reasons for Recommendations

- 3.1 This report is for assurance and complies with the principles of good governance.

4. Summary of Key Points

- 4.1 The professional body for Local Government Accounting – CIPFA (Chartered Institute of Public Finance and Accountancy) have developed a web based software system that should facilitate the earlier closedown of the financial accounts required by 2018.
- 4.2 The system will map data from the financial ledger into tables for the statements and transfers this into a word based document.
- 4.3 They have been piloting this with several Local Authorities and with Northamptonshire Police. This system has not been used to produce a fully audited statement of accounts. This year will be the first and Nottinghamshire are one of eight authorities that will be the first to do this.

- 4.4 We have closely monitored the progress that Northamptonshire has made and been able to benefit from the mapping that they have done from Oracle to the Big Red Button. This mapping partly automates some of the process.
- 4.5 There are several benefits to be gained from using this software and these include:
- Ensures compliance with CIPFA financial regulations
 - Will provide easily auditable working papers and support information
 - Provides a clear audit trail from the financial system to the tables provided in the statement of accounts
 - The system provides workflow and checking mechanisms
 - Journal changes affecting the trial balance result in automated changes to all relevant tables
 - Any updates to the financial code are made to existing table formats
 - Adaptions for our specific need are being made at no extra cost whilst this is still under development
 - The system highlights anomalies and inconsistencies
- 4.6 We were already planning to make a stepped change to the closedown timetable for the 2016-17 statements and this will facilitate that objective.
- 4.7 Currently, the system is mapped for the 2015-16 statements to provide the balances brought forward and previous year comparable figures. This will comply with the 2016-17 code.
- 4.8 User training is schedule for the 13th March and a live template will be available by the end of March with the narrative populated and ready for 2016-17 figures.
- 4.9 There are potential future benefits from this system. CIPFA itself is looking to be able to automate a significant element of the generation of the Whole of Government Accounts (WGA) return through the software and this could potentially be replicated for all other statutory returns or CIPFA financial returns.
- 4.10 Other developments include automated transfer of notes from the Asset Management System.
- 4.11 Some authorities are helping develop the hard coding structure within the financial software package that they are operating. We will look to see what can be done within Oracle once we have completed this years accounts process.

5. Financial Implications and Budget Provision

- 5.1 The system has been purchased for £10,000 per annum.

6. Human Resources Implications

- 6.1 None as a result of this report.

7. Equality Implications

7.1 None as a result of this report

8. Risk Management

8.1 None as a result of this report.

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

9.1 This supports the priority of Spending Your Money Wisely.

10. Details of outcome of consultation

10.1 Not applicable

11. Appendices

None

Audit and Scrutiny Panel

For Information / Consideration	
Public/Non Public*	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	Chief Finance Officer
Report Author:	Charlotte Radford
Other Contacts:	
Agenda Item:	13

POLICE & CRIME ACT 2017

1. Purpose of the Report

- 1.1 This bill became enacted on 31st January 2017. Whilst this Act covers many changes to policing there are two elements that have a significant governance impact. Firstly, the provision for collaboration between emergency services and secondly, the provision relating to complaints relating to police.
- 1.2 Attached at **Appendix A** is a report detailing the national issues and some of the local issues in relation to the provision for emergency services to collaborate.
- 1.3 A further report will be provided to the Panel in relation to the complaints procedure in the near future.
- 1.4 This report is intended for information and assurance.

2. Recommendations

- 2.1 Members are requested to note this report.

3. Reasons for Recommendations

- 3.1 This report provides information and assurance in relation to significant governance changes.

4. Summary of Key Points

- 4.1 This report focuses on one significant area of the new Police & Crime Act 2017.
- 4.2 The Act makes a provision for emergency services to collaborate. This includes Police, Fire and Ambulance.
- 4.3 The Act also makes provision for the Police & Crime Commissioner to be the Fire and Rescue Authority for the area.

5. Financial Implications and Budget Provision

- 5.1 None as a result of this report.

6. Human Resources Implications

- 6.1 None as a result of this report.

7. Equality Implications

7.1 None as a result of this report

8. Risk Management

8.1 None as a result of this report. However, once a way forward is decided there will be risks that will need to be managed.

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

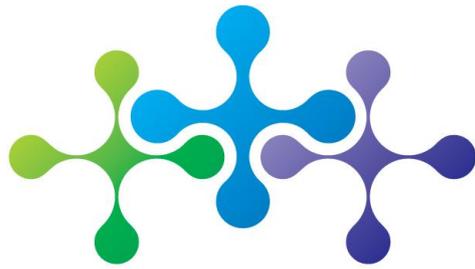
9.1 There are no implications to the current Police & Crime Plan priorities.

10. Details of outcome of consultation

10.1 The Government undertook consultation in the production of the act. Depending on future decisions further consultation will be required.

11. Appendices

A Police & Crime Act 2017 – Emergency Services



Nottinghamshire

POLICE & CRIME COMMISSIONER

Police & Crime Act 2017

Emergency Services

February 2017

Introduction

- 1.1 The Police & Crime bill was enacted on 31st January 2017.
- 1.2 This Act brings two significant changes to Governance. This report details the issues relating to the emergency services element of the Act.
- 1.3 First is the duty for the three Emergency Services to collaborate in the interests of efficiency and effectiveness of the services. There are specific restrictions laid out in the Act relating to this.
- 1.4 Secondly, there is a provision for the Police & Crime Commissioner (PCC) to become the Fire & Rescue Authority (FRA) for the area. There are currently three suggested governance models in relation to this.
- 1.5 Currently, the Commissioner is very much in favour of developing further collaboration with the Emergency Services and discussions are taking place locally about whether the PCC should sit on the FRA.

Duty to Collaborate

- 2.1 The Act specifically requires the Emergency Services to collaborate in the interests of efficiency and effectiveness.
- 2.2 It should be noted that the Fire and Police Services in Nottinghamshire have been collaborating for some time particularly in relation to sharing operational premises.
- 2.3 It is in some ways easier for the Fire and Police Services to collaborate as they are co-terminus to the County boundary. However, this does not exclude collaboration with the Ambulance services. Indeed the Police are relocating the neighbourhood team to the Ambulance Station in Carlton and are finalising plans to do something similar in Hucknall. We have made reciprocal offers in other police stations to EMAS. The Fire has for some time provided first responder service on behalf of the Ambulance Service, with Fire Officers being specifically trained.
- 2.4 All three Emergency Services meet monthly to discuss further opportunities in relation to the Estates.
- 2.5 This element of the Act will be the easiest to develop further.

Provision for the PCC to become the FRA

3.1 As mentioned above there are currently three proposed Governance Models:

- PCC is appointed to the FRA.
- PCC becomes the FRA and direct employer for the service.
- PCC becomes the FRA and a single employer model under the Chief Constable is created.

Annex A shows how these compare diagrammatically.

PCC appointed to FRA

3.2 Where the PCC is appointed to the FRA this is not the PCC becoming the FRA. The PCC would become a voting member of the existing FRA.

3.3 Under this scenario the existing FRA would consider a request from the PCC to become a member. The FRA would have to give reasons for their decision to agree or refuse this request and publish these reasons.

3.5 Political balance is not a reason to refuse.

3.4 This model is considered the least controversial, but is also considered to only be a stepping stone to the alternatives where the PCC becomes the FRA.

PCC becomes the FRA

3.5 As stated above there are two models where the PCC becomes the FRA. However, the route to becoming the FRA is the same.

3.6 Under the Act the Fire & Rescue Authority becomes a corporation sole and the PCC becomes the FRA. (Schedule 1, Part 1, **4A**). However, to make this happen the PCC must submit a business case to the Home Secretary.

3.7 Ideally, this business case will be supported by the existing upper tier authorities and would be a joint proposal. However, where there is not agreement the PCC can still submit the business case and there will be an independent assessment.

3.8 The business case must demonstrate either:

- Efficiency, effectiveness and economy, or
- Public Safety interest

3.9 It is believed that the Public Safety case will only be used where there is a failing authority.

- 3.10 The critical element to the business case will be the local consultation with the upper tier authorities, local people and employees. The duration of the consultation is determined by the PCC. The first adopter is undertaking 12 weeks consultation. The consultation results must be published.
- 3.11 Whilst there is at least one County (Essex) pushing ahead to be an early adopter it is envisaged that the time taken to write the business case and for the Home Office to assess will take 9 months.
- 3.12 The new FRA is currently being referred to as “PCC style FRA”.
- 3.13 There is no requirement for a PCC to equalise the precept for Fire and Police within the area as there will be a separate set of accounts for the PCC style FRA.
- 3.14 As with when the PCC was created CIPFA consider the use of Merger Accounting rules as the most suitable for transition accounting. This also assists those wishing to transition part way through a financial year.

Where employment remains with PCC

- 3.15 This model is currently considered the most favoured option. It keeps the independence of the Fire Service and still allows for collaboration where there is efficiency and effectiveness demonstrated.
- 3.16 Unlike Chief Constables, Chief Fire Officers have not been made corporation soles in their own right and therefore employment would ultimately be the responsibility of the PCC with delegation to the Chief Fire Officer.

Where employment transfers to Single employment under the Chief Constable

- 3.17 This model would possibly deliver greater integration, although not necessarily.
- 3.18 It does transfer all employment responsibilities away from the PCC.
- 3.19 This would require increased consultation and greater agreement from the relevant unions and therefore take longer to implement.

Other considerations

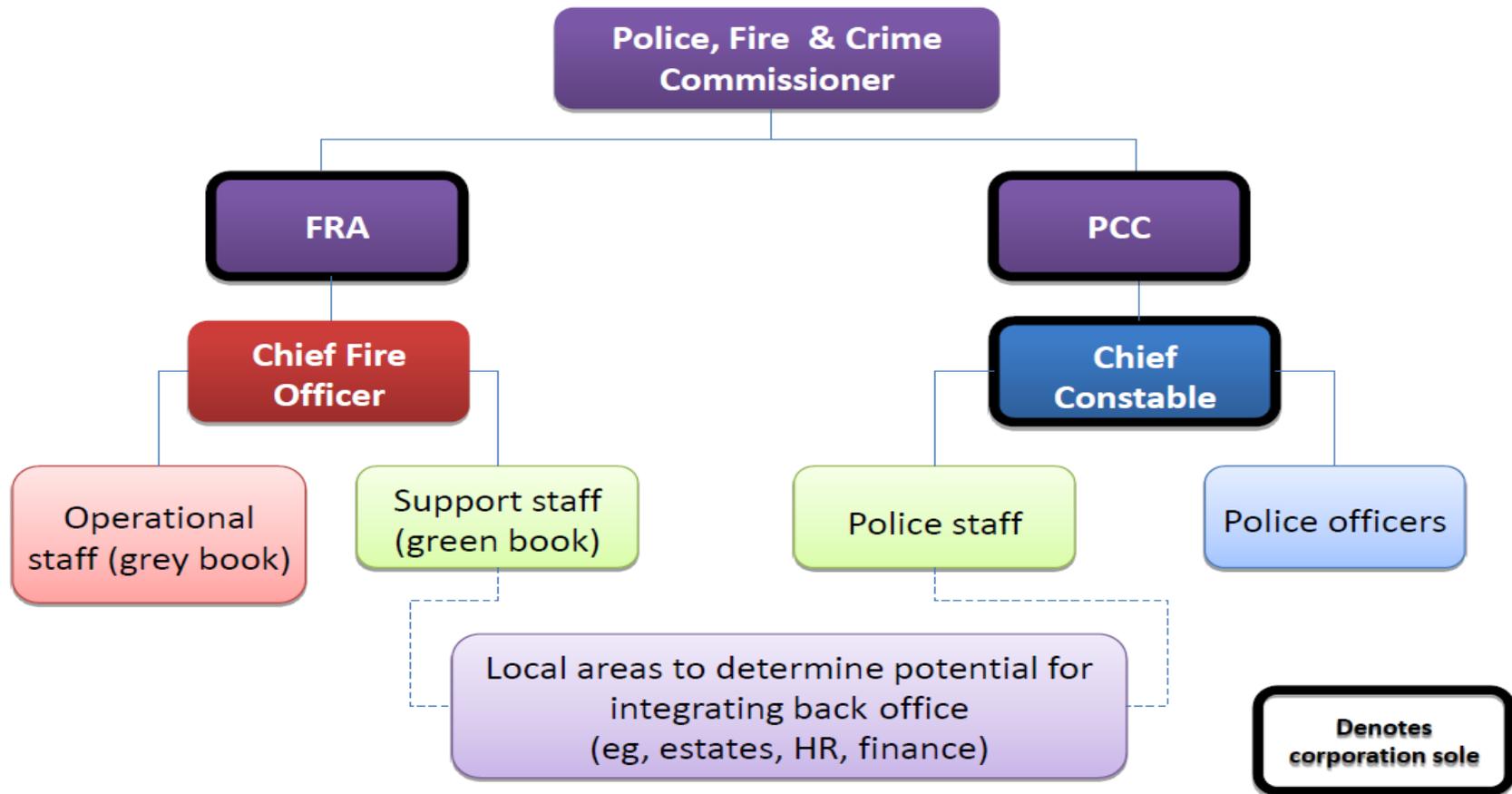
- 4.1 As mentioned previously the creation of the business case would ideally have the support of the upper tier authorities. However, this is not assumed nor guaranteed.
- 4.2 The political landscape also needs to be considered. There are local elections in May 2017, which may or may not affect support for a business case.
- 4.3 Legal practicalities also include the laying of secondary legislation and this needs factoring into any timetable.
- 4.4 Once a business case is approved there are other practicalities that will need considering, such as the appointment of external auditors to the PCC style FRA. And this links with the current process of re-tendering external auditors.
- 4.5 The strategic risk register will need to include the implications of any changes.
- 4.6 There is going to be a new inspectorate role for Fire.
- 4.7 There is going to be a new funding formula for police and from 1st April 2019 Fire (as a local authority within the business rates pool) will be funded from 100% business rates retention.
- 4.8 The Emergency Services Network will be a significant change and project to deliver. The East Midlands is one of the first areas to implement this.

Local considerations

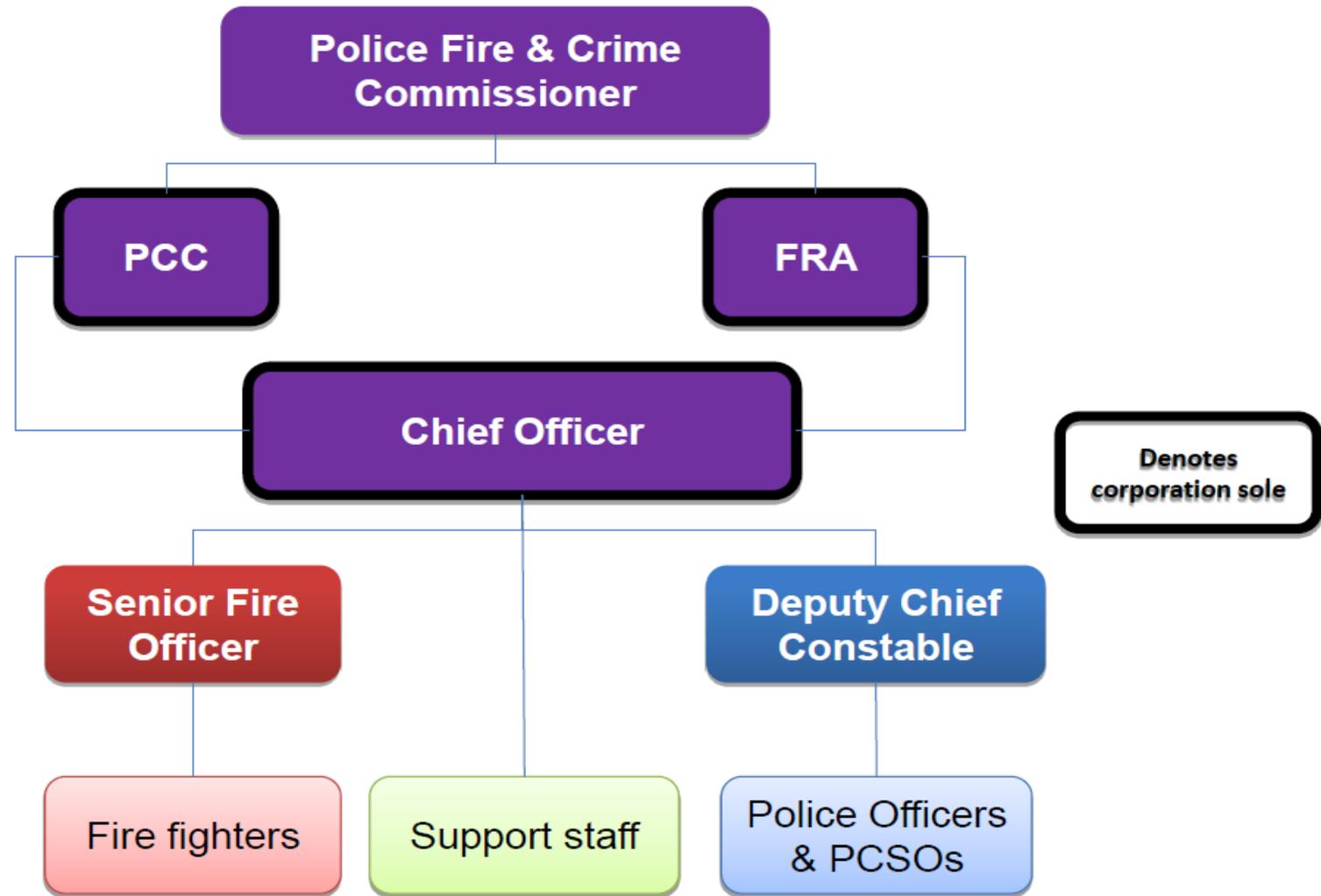
- 5.1 Despite all of the considerations to be made at a national level there are possibly things that could be done locally without affecting current arrangements. For example:
 - Early discussions to ensure that Fire and Police appoint the same external audit firm. Consider whether this will require prior year re-statement should the PCC become the FRA.
 - Review accounting policies together and harmonise.
 - Review internal audit provision.
 - Review financial regulations.
 - Consider all financial implications that may arise – eg pension fund, asset valuations.
 - Treasury Management Strategy – combine or not?
 - Insurance – current arrangements.
 - Methodology for cost sharing where collaboration is proposed.
 - Producing a future proof governance model.
 - Updating business continuity plans.

- 5.2 There are other considerations that should be made in the future and these include the impact of a change in materiality that could affect the statement of accounts. Also, whether there should be a move to just one financial system in the future and what benefits or dis-benefits might arise from this.
- 5.3 Finally, the Role of the CFO should be reviewed. It would make sense to have a joint CFO role to the PCC and PCC style FRA advising the PCC on the precept and accounting policies. There would still need to be a senior financial post providing accountancy services to the Chief Fire & Rescue Officer, unless this is provided by a joint collaboration between Fire and Police.

3.a Governance Model



3.b Single Employer Model



Consideration	
Public/Non Public	Public
Report to:	Audit and Scrutiny Panel
Date of Meeting:	9 March 2017
Report of:	The Chief Executive
Report Author:	Alison Fawley
E-mail:	alison.fawley@nottsc.gov.uk
Other Contacts:	
Agenda Item:	14

PANEL WORK PLAN AND MEETING SCHEDULE

1. Purpose of the Report

1.1 To provide the Panel with a programme of work and timetable of meetings

2. Recommendations

2.1 To consider and make recommendations on items in the work plan and to note the timetable of meetings

3. Reasons for Recommendations

3.1 To enable the Panel to manage its programme of work.

4. Summary of Key Points

4.1 The Panel has a number of responsibilities within its terms of reference. Having a work plan for the Panel ensures that it carries out its duties whilst managing the level of work at each meeting.

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

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

- 9.1 This report meets the requirements of the Terms of Reference of the Panel and therefore supports the work that ensures that the Police and Crime Plan is delivered.

10. Changes in Legislation or other Legal Considerations

- 10.1 None as a direct result of this report

11. Details of outcome of consultation

- 11.1 None as a direct result of this report

12. Appendices

- 12.1 Work Plan and schedule of meetings

JOINT AUDIT AND SCRUTINY PANEL WORK PLAN

29 June 2017

1	Force report on complaints and misconduct, investigations, new cases, open cases, together with monitoring, dip-sampling recommendations and implementation of actions and lessons learned	6 monthly	
2	Force report on IPCC investigations, recommendations and actions taken together with implementation of lessons learned	6 monthly	
3	Force report on the Whistle Blowing policy and review of compliance (process of grievances and appeals) Force report on Anti-Fraud and Corruption policy review of compliance updates	6 monthly	
4	OPCC Produce a summary set of accounts for publication	Annually	
5	Annual Internal Audit Assurance Report	Annually	
6	Force Governance monitoring, assurance and improvement outcomes for decision making report	6 monthly	
7	OPCC Final Statutory Accounts	Annually	
8	External Audit Governance report ISA260	Annually	Charlie Radford & Simon Lacey/Andrew Cardoza
9	Annual Governance Statements	Annually	Charlie Radford & Force
	Every meeting		
	Internal Audit Progress Reports		
	Internal Audit, Review and Inspection Monitoring, assurance and improvements outcomes		
	For Information only		
	OPCC reports and information to support updates for monitoring the Police and Crime Plan		