BAKER TILLY AUDIT RECOMMENDATIONS 2013-15
and MAZARS 2015-16

Baker Tilly Audit Recommendations for 2013-15

Status	Internal Audit Report		Audit Report Date
AMBER	**SEIZED AND FOUND PROPERTY (3.14/15)**		**11 September 2014**
	HIGH: 0	**MEDIUM: 1**	**LOW: 0**

Medium Recommendation 1.1:

As planned the Property Management Policy and Procedures should be reviewed and revised, taking into account any issues identified within this review. Given the issues identified in this review we would recommend that once the Policy and Procedures have been finalised and approved a training session is held with Property staff to ensure that they are fully conversant with requirements, especially any changes that have been made from original documents.

Implementation Target Date: ~~March 2015~~ – revised Target Date ~~October 2016~~ **Revised to September 2017**

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Comment:

The review of property is now well underway and the team involved are identifying opportunities to streamline processes and increase efficiency which will be relevant to the policy and procedures. Initial work on the refresh and re-write of the policy and procedures is expected to commence in November 2014 when resources within DJD Support have the capacity.

Update August – Baker Tilly Follow Up Audit 2015:

The policy re-write is still ongoing. Very limited availability of staff trained to write policy and competing demands of Property managers continue.

Sgt 4320 Simpson (CAID Support) and Julie Treen (Property Team Leader) are tasked to finalise the re-write with a timescale for completion prior to 8th June.

Update 27th August:

The policy re-write is now complete and is presented in Authorised Professional Practice format, together with an up-to-date Legislative Compliance pack. The document is going through a final checking process before being sent to COT for authorisation, published / updated on internal web-site. This will be completed imminently. Any changes in practice have been subject to internal communication both within the property department and where necessary to a wider relevant audience.

Update December 2015:

The final checking process on the rewritten policy and procedure documents has been completed. The documents were sent to D/Supt. Castle on 2nd September for his approval and submission to COT for authorisation. A progress check will be made with D/Supt Castle on his return from annual leave on the 17th November and an update provided for the next meeting.

Update January 2016:

The rewritten policy and procedure documents have been completed, authorised and published. Work continues to maintain the relevance of the new document and keep pace with Strategic Alliance and Blueprint 2020 developments but this is outside of the scope of this recommendation. For these reasons I believe the recommendation can be considered closed.

Update March 2016:

At the JARAP meeting held on 8 March 2016 it was agreed the Deputy Chief Constable would check that the appropriate staff training had taken place after which the proposal to close would be agreed.

Update April 2016:

There were no significant changes to the property processes which required formal training sessions, however, the policy and procedure was reinforced with the property staff. There remains a heavy scrutiny on property processes by the Crime and Intel SMT.

Update June 2016:

At the last JARAP Meeting (May 2016) it was agreed this item to remain open. In addition Mazars were asked to review this recommendation in light of their draft Seized and Found Property report and see if they can be replaced by the most current report. A new implementation target date of October 2016 is projected, however this may require revision dependent upon the current property project.

Update September 2016:

Brian Welch Senior Audit Manager Mazars has spoken with Det/Insp Johnny Monks to obtain an update on progress. The policies and procedures have been updated and a new property working group has been created [Brian attended the first meeting]. This group is meeting every 2 weeks and its purpose is to review the property function as a whole included the processes that are followed. Following on from this review, if further training is required then this will be delivered to staff as necessary – Brian Welch Mazars Senior Audit Manager.

Note: The September JARAP meeting directed that this remained open and an update be provided for future meetings.

Update December 2016: Jez Leavesley – Force Property Project Consultant

Significant work is on-going to update the property policy and procedures. A full re-write is underway. A new review and retention policy was launched as part of the new procedures early November. A new lost/found property procedure is to be launched end November. A full NCALT training package has been prepared as well as staff briefings. Further procedural work on disposal and property other than found is work in progress. Procedure is just one part of an extensive property review project. This includes KIM PMS review and update, transfer from KIM to NICHE PMS target date summer 2016, full review of temporary stores and main stores (location and functionality) with full business case being prepared.

Update February 2017: Jez Leavesley Force Property Project Consultant

Force Property procedures remain work in progress. The Review and Retention policy launched in November 2016 has had a very positive effect and been welcomed by staff as it provides clear unequivocal guidance to the Force for the first time. As a result overall property entries reduced from 84,500 entries to 66,300 (22/02/17 Operation Halo). Property entries unaccounted for have been reduced from 8,400 to 2,550 (22/02/17).

The new Lost and Found procedure was launched at the end of November 2016. A full NCALT training package was introduced force wide including specific briefings for property staff/ LSTO's etc.. Feedback so far has been positive.

A new handling, storage and movement of cash procedure has been written and approved @ 15/2/17. This procedure will go live a soon as the staff training requirements /publicity have been put in place.

A ceasing retention procedure (complementing the retention & review procedure) is nearing completion. This is currently out for consultation prior to submission for approval.

A vehicle recovery procedure is nearing completion. Again, this is out for consultation.

A Property Department audit procedure has now been completed and is in final draft stage prior to consultation.

MAZARS AUDITS 2015-17 Please note Mazars priority grade their recommendations into the following:

1. (Fundamental)
2. (Significant)
3. (Housekeeping)

Status	Internal Audit Report	Audit Report Date
	PARTNERSHIPS	January 2016
	FUNDAMENTAL: 0 **SIGNIFICANT: 1**	**HOUSEKEEPING: 0**

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<u>Significant Recommendation 4.3</u> **Performance Management Framework**

Development of the performance management framework should be progressed for the Strategic

Partnership Board. The performance framework should include:

- **Objectives for the partnership**
- **Key performance indicators against the objectives**
- **Trend analysis**
- **Reporting arrangements**

Implementation Target Date: ~~March 2016~~ **– Revised Target Date November 2016**

Person Responsible: ~~Mike Swanwick~~ **OPCC Performance and Evaluation Co-ordinator**

Initial Management Response 29th January 2016:

The Performance Framework is under development for the Strategic Partnership Board and each of the subgroups. A self-assessment has been sent to the chair of each group to complete to begin development. Each group will consider its own information and provide an overview of progress

and report by exception to the Strategic Partnership Board and Executive Group, through the Highlight Report and/or a separate performance report if deemed necessary.

Update April 2016:

A new projected completion date has been agreed by the SPB – November 2016. Initial work has started with the Victims and Witness group and the Reducing Re-offending Board and Mental Health Partnership Group will be next, with the Regional Criminal Justice Board already having developed its own performance framework which will be adopted locally.

Update June 2016:

The completion date remains November 2016, although work has been progressing slowly since April 2016. The only group to have been through any part of the process is the Victims and Witness Group. If there is no further take up it is unlikely that the November 2016 completion date will be met.

Update September 2016:

There has been no further uptake or response from any of the SPB subgroups in line with the recommended approach developing performance framework. The November 2016 deadline will not be met, and this work will need to be refreshed and restarted once responsibility for this recommendation is re-assigned. Performance and Evaluation Co-ordinator post now vacant and under review.

Update December 2016: Helen King OPCC

SPB have reviewed their structures and groups will be reviewing their workplans and any performance arrangements in line with the new Police and Crime Plan (draft Plan elsewhere on the agenda) due for issue in April 2017. Any agreed performance arrangements from that Plan will be built in following that date. However, the draft Plan adopts a more holistic approach to performance rather than targets so this will need updating following the issue of the Plan.

Update February 2017: Helen King OPCC

The Police and Crime Plan considered by the February 2017 Police and Crime Panel and currently in final amendment stage will not include Performance Targets or a Performance Framework in keeping with many other PCC's. The Strategic Partnership Board is responsible for supporting the Police and Crime Plan delivery and as the Plan does not include targets, the SPB will not be progressing a Performance Management Framework. Similarly, that does mean that Performance outcomes and targets will not flow from the Plan or the Strategic Partnership Board to Partnership Groups to set their own Framework to support the delivery of the Police and Crime Plan 2017-2021. This recommendation is no longer valid in the context of the approach of the new PCC and the new Police and Crime Plan and it is proposed to close this recommendation. Reviewing terms of reference regularly (and the purpose of each meeting) for each forum will still be day to day business of these Partnership meetings.

PROPOSE RECOMMENDATION CLOSED

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Housekeeping Recommendation 4.1 Payroll Manual

A Payroll Manual should be put in place that accurately reflects the new processes in operation following the introduction of the new payroll system.

Implementation Target Date: ~~September~~ 2016 revised to end October 2016

Person Responsible: Alice Davis, Payroll Manager

Initial Management Response 29 February 2016:

It is agreed that the Payroll Manual needs updating and once the new system is embedded the opportunity to review all the processes undertaken by the payroll team will be taken.

Update April 2016:

The update to the Payroll Manual is being incorporated into the Payroll Team's PDR Objectives for 2016/17.

Update June 2016:

Sections of the Payroll Manual are being prepared as staff capacity allows to meet the target implementation date of September 2016.

Update September 2016:

Some sections have now been completed - Payroll Administration Tasks which is 60% completed and the remaining procedures are being updated. Revised target date of end of October.

Update December 2016:

The procedures that can be updated have been updated; some areas are on hold until Kier are able to correct the software to allow for automated calculations. For example: maternities, paternities, shared parental leave and Attachment of Earnings Orders (AEO) which all require manual intervention to ensure correct payments/deductions are made.

Update February 2017:

The work that can be completed on updating the Payroll Procedures Manual has now been finished. However, there continues to be issues with the functionality of the software and these sections of the manual (see December 2016 update) cannot be completed until these are resolved.

- The manual intervention relates to the calculation of maternity / paternity payments. These are calculated outside of the system and independently checked each month for accuracy.

PROPOSE RECOMMENDATION CLOSED

CHANGE PROGRAMME			April 2016
FUNDAMENTAL: 0	**SIGNIFICANT: 0**	**HOUSEKEEPING: 1**	

<div style="color: orange">AMBER</div>

Housekeeping Recommendation 4.1 Aligning Strategies, Policies and Procedures within the Strategic Alliance

Should the Strategic Alliance secure approval, local strategies, policies and procedures should be considered against those at a SA level. Should SA strategies be approved, this may necessitate the need to reflect such changes in the local strategies/policies/procedures.

Implementation Target Date: Timescale TBC, but is likely to be an early piece of SA work.

Person Responsible:– Alison Naylor - Strategic Lead for People Workstream

Initial Management Response 20 April 2016:

It is acknowledged that different terms and conditions, processes and procedures already exist across the three SA forces. Issues relating to these factors are already apparent from existing collaboration across the East Midlands.

A workstream within the SA programme is focusing on people and is already examining opportunities for aligning terms and conditions and policies and procedures.

Update June 2016:

Plans are on track to present a three-force Strategic Alliance (SA) full business case at a meeting in June. While the induction of two new PCCs in Leicestershire and Northamptonshire is under way, the SA programme team is continuing to collate detailed information from each force, setting out the journey so far, the vision and rationale for change, the operational, financial and political perspective, the transitioning and migration model and identifying risks. Part of this work is also to examine opportunities for aligning terms and conditions for policies and procedures. The outcomes of the meeting at the end of June will determine the future direction of this work. Ongoing recommendation.

Update September 2016:

We are currently reviewing the implications of a change from Strategic Alliance to Tri-force collaboration. The intention remains to align policy and procedure wherever possible and practical. Papers covering a Tri-force HR plan, Chief Officers Terms and Conditions, Apprenticeship Levy, New Recruits starting Salaries and Public sector exit payments are in the process of being signed off by all 3 forces. A new Chief Officer meeting is scheduled to take place each month and this will significantly speed up the process of agreeing and aligning policy – Alison Naylor Regional Director of Human Resources.

Update December 2016

Tri-force Executive meeting now set up and HR policies are being progressed through that forum. Policies are being prioritised and are being aligned. A Tri-Force HR strategy (3 years) is being developed to sit above the annual HR plan and will be circulated in draft form in Q1 2017. There is now an agreement around reallocated Bank Holidays and Tri –Force standardised approaches are being developed for talent development, Leadership development and implementation of the initiatives coming from the College of Policing. ARC, PEQF, Apprenticeships, CPD etc…

Update February 2017:

Work continues as per the December update. The March the 6th Tri-Force meeting is a key decision point. Once the scale and shape of future collaboration is agreed, the Tri-Force strategy can be completed.

ICT AUDIT			April 2016
FUNDAMENTAL: 0	**SIGNIFICANT: 0**		**HOUSEKEEPING: 6**

AMBER

Housekeeping Recommendation 4.1 IT/ICT Strategy

The potential introduction of the Strategic Alliance IS Strategy, should it be agreed, will need to be considered against the local ICT Strategy document. If approved, this may necessitate changes in the local ICT strategy that should subsequently be reflected in an updated document.

Implementation Target Date: March 2017

Person Responsible:– Philip Eaton Strategic Alliance IT Assistant Chief Officer

Initial Management Response 21 April 2016:

The strategies will be aligned as the Strategic Alliance is developed.

Update June 2016:

ACO role appointment has been made and we await outcome of Strategic Alliance meeting at the end of June 2016.

Update September 2016:

Since the appointment of the Interim ACO IT in June he has started the process of developing a Tri-Force ICT Enterprise Strategy, the current draft covers the Tactical / Strategic and Aspirational objectives of the three forces.

The ICT Enterprise Strategy will use as it's point of reference the following information:

- **Individual Forces Business Strategy's;**
- **Individual PCC's Crime & Policing Plans;**
- **Strategic Threat Assessments;**
- **National Vision of Policing 2020;**
- **National ICT Strategy / Initiatives / Police ICT Co.**

There is still currently further analysis, high level definition and socialising of the ICT Strategy with Key Tri-Force stakeholders to be performed, however the intention is to deliver an interim Business Case to the December PCC Meeting identifying likely funding requirements to 2020, benefits realisation and high level work streams and timings.

Update December 2016:

Specialist resources have been engaged to assist in the development of the Enterprise Architecture design, which will be defined by the requirements described in the September Update.

Additional elements have been agreed by the tri-Force Executive Board, these include the establishment of a Portfolio Management Office to manage the bigger picture of Tri Force change over the next 4 years. The tri-Force Executive Board reviewed the first draft of the Tri-Force Portfolio of change. Business leads and technical leads to be identified in the November Design Authority Board.

Update February 2017:

Mazars ICT Follow Up Review published February 2017 Ongoing - Now Tri Force planning which has replaced the Strategic Alliance and is led by ACO Eaton.

GREEN

<u>Housekeeping Recommendation 4.2</u> Disaster Recovery Documentation

A more robust process for monitoring the disaster recovery documentation review and update process to ensure that it happens annually should be considered.

Implementation Target Date: 31 March 2017

Person Responsible:– David Craig Head of IT / Jas Minhas / Andy Rodwell – IT Department

Initial Management Response 21 April 2016:

The processes of monitoring and testing BC plans are embedded into the departmental business plan, account management structures, and individual performance development plans and resulted in stability of plans and a high success rate in system recovery by 2014. As such, in business year 2015/16 the Head of IT chose to prioritise resources towards the successful implementation of Edison and Niche. Reviewing plans will receive greater priority during 2016/17.

Update June 2016:

Due to business priorities some documentation was not revised in 2015 however this was risk assessed. Reviewing the documentation will receive greater priority during 2016/17 and the tracking matrix described in 4.3 below will include disaster recovery documentation review dates as a method of further strengthening the existing process, allowing both tests and documentation to be reviewed at regular review meetings, account reviews and business process, leading to a more robust and transparent service.

Further Update for JARAP June 2016 :

At the JARAP meeting on 5 July 2016 the Committee requested the June 2016 update be further updated with additional details. Disaster recovery testing and the updating of documentation is underway. To provide context to the scale of the task, there are nearly 150 IT systems that have to date been logged. Managers are currently being contacted to determine the frequency of testing that is required in the future for each of the systems. Once responses are received from managers the next test dates will be agreed with them. Following this they will meet with their Information Systems Analyst to review Business Continuity plans and discuss the next test schedule in their monthly meetings. Updates will be provided to JARAP each quarter highlighting progress to date.

Update September 2016:

The new matrix had been updated with the latest information on the BC plan review dates and next test dates. The Senior ISA will be using this document within their monthly meetings to establish with the account managers the next test dates for the services they are responsible for. This is an on-going process and the matrix will continually be updated.

Update December 2016:

Matrix has been further reviewed and improved as a result of all BC and DR plans being reviewed. Now agreeing next test dates with business and testing resources using the matrix. We anticipate closure of 4.2 being confirmed by Auditor this year.

Update February 2017:

Mazars ICT Follow Up Review published February 2017 "Complete Improved through use of spreadsheet to monitor responsible person and date of review. Much stronger process and monitoring than previously" .

PROPOSE RECOMMENDATION CLOSED

GREEN

<u>Housekeeping Recommendation 4.3</u> Disaster Recovery Testing

The organisation should establish a forward plan of disaster recovery testing based upon when a system was last tested and establish a clear plan of when it will be tested in the future.

Implementation Target Date: 31 March 2017

Person Responsible:– Kem Mistry - Information Systems Analyst Force IT Dept

Initial Management Response 21 April 2016:

Monthly meetings are held with the Force Risk and Business Continuity Advisor, Head of IT and Information Systems Analysts responsible for co-ordinating testing. Future tests are standing items at this meeting and the minutes document our future test plans and record discussions of both Airwave and HOLMES.

The last full test of HOLMES was conducted in 2013 when it was implemented. The test was successful and there have been no significant changes to the system since. HOLMES will be replaced in April 2016.

Airwave is a nationally provided system and local ICT responsibility extends only to the interfaces between Airwave and our information and communications systems. These were last tested in December 2015.

We used to maintain a spreadsheet which recorded the date each system was last tested but on balance felt that the utility of the information did not outweigh the effort of maintenance. Nevertheless, we have decided to bring this spreadsheet up-to-date with data from our test log.

Update June 2016:

A new Tracking Matrix spreadsheet has been created to record the date each system is tested. The frequency of the testing of each service is being considered. Work on this recommendation is ongoing. Linked to 4.2 review dates for all of the Business Continuity Plans will be included together with test dates, Line managers will have this information to utilise in their monthly meetings with their ISA's to review BC plans and discuss next test schedule.

Further Update for JARAP June 2016 :

At the JARAP meeting on 5 July 2016 the Committee requested the June 2016 update be further updated with additional details. Disaster recovery testing and the updating of documentation is underway. To provide context to the scale of the task, there are nearly 150 IT systems that have to date been logged. Managers are currently being contacted to determine the frequency of testing that is required in the future for each of the systems. Once responses are received from managers the next test dates will be agreed with them. Following this they will meet with their Information Systems Analyst to review Business Continuity plans and discuss the next test schedule in their monthly meetings. Updates will be provided to JARAP each quarter highlighting progress to date.

Update September 2016:

The new matrix had been updated with the latest information on the BC plan review dates and next test dates. The Senior ISA will be using this document within their monthly meetings to establish with the account managers the next test dates for the services they are responsible for. This is an on-going process and the matrix will continually be updated.

Update December 2016:

Matrix has been further reviewed and improved as a result of all BC and DR plans being reviewed. Now agreeing next test dates with business and testing resources using the matrix. We anticipate closure of 4.3 being confirmed by Auditor this year.

Update February 2017:

Mazars ICT Follow Up Review published February 2017 "Complete - Comms Sys Admin and Support has been tested. Further IT systems were due to be tested when a flooding incident occurred which provided a real life test of recovery in some areas.
A forward plan of change now in place which includes the date of last test and proposed future tests".

PROPOSE RECOMMENDATION CLOSED

Housekeeping Recommendation 4.4 Information Asset Owners

The organisation's project to establish more robust information asset management and appropriate governance is acknowledged and we recommend that potentially this could also look at the information management structure and resources available.

Implementation Target Date: ~~December 2016~~ **Revised Target Date July 2017**

Person Responsible:– Paul Hooseman – Information Manager

Initial Management Response 21 April 2016:

The purpose of the Protective Security Strategy work is to re-examine the provision of information assurance to the organisation. A key part of that strategy is the development of Information Asset Owners and Champions to better identify risk and alert the SIRO.

The outcome of informed Information Asset Owners will allow the current information assurance resources to re-position into strategic and tactical advisers.

The Information Management Section is undergoing Outcome Based Budgeting during April and May 2016 and an opportunity to re-examine work activity will be available.

Update June 2016:

The project support officer was re-assigned to support the HMIC inspection PEEL work. OBB - Delays have been experienced primarily due to annual leave; sickness; operational commitments by the delivery lead in PSD; and reduced support from Corporate Services Projects. Governance has been put in place to address any risks. Highlight Reports are included within the Blueprint 2020 reports which are submitted to the Change Board. The revised implementation target date is end August 2016.

Update September 2016:

The Project Lead for this work has now tendered her resignation. The Information Manager will have to pick up this work. Work around capacity in the Information Management business area is being focussed within Leicestershire via the OBB process (now November), and sub-regionally via a Tri-Force Collaboration work-stream (next Gateway meeting in October).

A pilot is being designed to mentor identified Information Asset Owners prior to a wider roll-out.

Update December 2016:

IAOs have been identified, an introductory letter has been agreed by the DCC, and all IAOs will be appointed by December 2016.

Following appointment a briefing (being devised) will be held with each IAO or nominated deputy and an initial status position will be established for the main information assets.

This information will be referred to and collated via an organisational Information Asset Register which has been drafted.

Resource capacity within Information management continues to pose a challenge – the OBB process has been postponed further until December, and Tri-Force Collaboration work is pending an appointed lead.

Update February 2017:

IAOS have been identified and written to by the SIRO. Next stage is for IAOs to be briefed on expectations by members of the Information Management team. Target is Easter 2017 to brief IAOs and assemble a draft organisational Information Asset Register (IAR).

Further need for a project resource has been agreed by the OBB Panel.

Paul Hooseman – Force Information Manager is the contact person for further updates.

Mazars ICT Follow Up Review published February 2017 "Ongoing - Progress has been made with IAO been identified and informed of their responsibilities through an IAO Handbook. One of the responsible officers has left the organisation which has meant progress is slower than expected but we were provided with evidence of progress.

AMBER

GREY

Housekeeping Recommendation 4.5 Information Management Resources

The organisation should consider if there are sufficient resources within the Information Security area to deal with the level of work.

The organisation should also consider establishing a group to oversee legislative/regulatory processes such as RMADS and Cyber Essentials including key stakeholders to ensure engagement with the appropriate people and consistent progress and information sharing between the two or in the future more processes. This should ideally be driven from an Information Security perspective not from the IT side as it is not purely IT which is impacted.

OBB:

Implementation Target Date: ~~May 2016~~ **end August 2016**

Person Responsible:– D/Supt Simon Hurst - Head of Professional Standards Department / Paul Hooseman Information Manager / Annabelle Edkins Information Security Officer

The organisation should consider if there are sufficient resources within the Information Security area to deal with the level of work.

Update June 2016:

Delays have been experienced primarily due to annual leave; sickness; operational commitments by the delivery lead in PSD; and reduced support from Corporate Services Projects. Governance has been put in place to address any risks. Highlight Reports are included within the Blueprint 2020 reports which are submitted to the Change Board.

Update September 2016:

The Lead for this work has now tendered her resignation. A support resource will temporarily act up into this role. Work around capacity in the Information Management business area is being focussed within Leicestershire via the OBB process (now November), and sub-regionally via a Tri-Force Collaboration work-stream (next Gateway meeting in October).

Update December 2016:

Resource capacity within Information Management continues to pose a challenge – the OBB process has been postponed further until December, and Tri-Force Collaboration work is pending an appointed lead. The ISO role continues to be temporarily covered under future direction can be agreed.

Update February 2017:
Superceded by Recommendation 4.3 in February 2017 published Follow Up Audit report.
New ISO has now been appointed.

RMADS Provision:

Implementation Target Date: Quarterly Ongoing

Person Responsible:– D/Supt Simon Hurst - Head of Professional Standards Department / DI Ross Dimmock / Paul Hooseman / Annabelle Edkins

A strategic risk has been registered on Orchid (STR1519) in relation to RMADS provision, and is open to SORB scrutiny.

Update June 2016:

The strategic risk remains on Orchid. The risk relates to the workload of the Department and the limited resources available to undertake the work. There is a link to the OBB exercise.

Update September 2016:

The strategic risk remains on Orchid. The ISO role that has undertaken this work has now tendered her resignation. The Information Manager will have to pick up this work. Work around capacity in the Information Management business area is being focussed within Leicestershire via the OBB process (now November), and sub-regionally via a Tri-Force Collaboration work-stream (next Gateway meeting in October).

Update December 2016:

Resource capacity within Information Management continues to pose a challenge – the OBB process has been postponed further until December, and Tri-Force Collaboration work is pending an appointed lead. The ISO role continues to be temporarily covered under future direction can be agreed.

Update February 2017:
Superceded by Recommendation 4.3 in February 2017 published Follow Up Audit report.
New ISO has now been appointed.

Cyber Essentials:

Implementation Target Date: Ongoing

Person Responsible:– DS Pete Flynn (Accreditation)/Paul Hooseman (Stakeholder engagement)

Initial Management Response 21 April 2016:

The information Management Section is undergoing Outcome Based Budgeting during April and May 2016 and an opportunity to re-examine work activity will be available.

A Cyber Essentials Lead for the Force has been identified and is co-ordinating activity, including IT and Information Security.

Update June 2016:

Cyber Essentials certification was obtained in February 2016 and the Cyber Essentials Plus aspect is being negotiated for a visit in the next 6 weeks through DS Pete Flynn. There are interdependencies with the PSD OBB exercise and above RMADS Provision strategic risk.

Further Update June 2016: The new strategy is due to be published in late July. The new strategy will be reviewed and an update to the current strategy will be carried out in conjunction with the region.

Update September 2016:

Cyber Essential award has been attained. Considerations being made within the business whether to work towards the next level of award – Cyber Essentials Plus. Recommend that this action be closed.

Update December 2016:

Organisational decision has been made to work towards the next level of award – Cyber Essentials Plus. For information.

Update February 2017

Mazars ICT Follow Up Review published February 2017 "Cyber Essentials has been achieved and there is further intent to achieve Cyber Essentials Plus Accreditation in the new year".

SUPERCEDED – PROPOSE CLOSED

<ins>Housekeeping Recommendation 4.6</ins> Domain Security Policy

The organisation should implement password complexity rules in line with best practice. Also the lockout duration and reset counter should be increased/enhanced to a lockout duration of 0 (zero) and reset counter of 1440 minutes (e.g. 24 hours). This means that if a user is locked, they cannot retry for at least 24 hours and they have to wait for an Administrator to reset the password. Owing to the practicality of the Force's operation this may not always be feasible. Therefore, the risk of not implementing this configuration should be considered and approval sought from the Force's senior management.

Implementation Target Date: ~~November 2016~~ **Revised target date July 2017**

Person Responsible: Saqib Shabbir - Information Systems Analyst IT.

Initial Management Response 21 April 2016:

The current levels of complexity and lockout duration are documented in the PSN accreditation document set and as such have been agreed by the SIRO. They represent the current optimal balance between ensuring availability of systems to operational staff on a 24/7 basis when resource constraints mean that administrative teams to reset passwords and unlock accounts are only available during office hours.

Developments in our voice form technology may allow self-service password reset and economy of scale from Strategic Alliance may allow extension of service hours in the future. Password complexity and lockout frequencies can be reviewed again if these services can be deployed to mitigate the consequences of operational officers being locked out of the systems they need.

Update June 2016:

Development of a self-service password reset process has commenced. Testing and pilot roll-out will commence August 2016.

Update September 2016:

Development has been completed and we are in the process of testing and refining the solution. We should be in a position to open up the testing to select users by the end of September.

Update December 2016: – Self-service password reset is in beta testing with 200 selected users. Corp Comms have been engaged on publicity campaign to encourage registration with the service before it's needed. Anticipation is that the system will be live in December – David Craig Acting Head IT.

Update February 2017:

Password self-service is now live and in active use. Discussed this requirement at last audit, December 2016. This requirement was based on accepted best practice at the time of the audit but practice is now being revised but was not available. Domain security policy is reviewed with annual PSN IT Health Checks and was not identified as an issue in last check, April 2016. I recommend that no further action is taken and that item is brought forward for review at next audit - David Craig Head of IT.

AMBER

Summary Update

Summary Update:

In June 2016 the Property team was been moved under the management of Corporate Services. A Property Project and working group has since been established, led by Consultant – Jez Leavesley and Support Manager - Anita Panchal who are working closely with the Property Officers and a small team of restricted duty police officers. Prioritising the issues highlighted by the force's auditor, the team are reviewing current policy and procedures and assessing good practice within the police service and across the private sector.

Engaging with key stakeholders, a project plan has been produced to coordinate activity and ensure a timely and cost effective implementation. Current service provision is being managed centrally by Corporate Services.

The initial aims and objectives set by the project Senior Responsible Officer (SRO) are as below:

- **Prevent deterioration of the current structure and processes.**
- **Keep staff engaged.**
- **Cost and finalise proposal by the autumn of 2016.**
- **Reduce items stored.**
- **Merge policies and procedures – being cognisant of a regional approach where practicable**
- **Implementation by the summer of 2017.**

The Project Plan aims to:

1) **Prevent deterioration of the current property structure and processes currently in place.**
2) **Identify and implement any 'quick wins'**
3) **Keep the current force property staff engaged in the daily management of property and in the rationalisation processes outlined.**
4) **Cost and finalise proposals outlined within the rationalisation processes of this plan.**
5) **Reduce the number of items stored in the KIM property system to an acceptable and manageable level.**
6) **Merge current force policies/procedures including improvement of supervision.**
7) **Implement the project plan including transfer of KIM to NICHE**

It is envisaged that in future the force will have single site where all forms of property is kept. This may be expanded to include storage of officer pocket notebooks, exhibits and other retained items.

GREEN

<u>Fundamental Recommendation 4.1</u> Safe Key Storage

Access to the keys to the safes that are holding cash and valuables should be appropriately restricted and keys to the safes should be securely stored at all times.

Implementation Target Date: Completed

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

This recommendation is accepted. This action was dealt with immediately following the audit. Two Safes were purchased at a cost £13,500 in the last financial year (to end of March 2016) from Traka (part of ASSA asset management group). Since the audit the Traka cabinets have been ordered and are awaiting delivery and installation. Since the audit the Property Manager has had discussions and meetings with personnel within Traka. Traka are a reputable company supplying safes to the military, Ministry of Justice (mainly UK prisons) and the police service. The two safes purchased are the latest technology. All property keys at the two sites will be stored in these safes. They are fully audited by use of the warrant card. Access to keys will be limited to user and movement of keys will be monitored and recorded. This purchase provides assurance and confidence that the safe keys, cash and valuables in safes are fully protected into the future.

Implementation Target Date: September 2016

Person Responsible: Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

In addition it is envisaged as part of the Force Property Project to create an integrated department with clear lines of management accountability and effective, secure and auditable business processes for all aspects of property reception, handling and disposal. Formal project commencing June 2016.

Update December 2016: Jez Leavesley

Both trakka cabinets have now been installed and are in use at both property main stores. Consideration is being given to extending the use of trakka cabinets for the temporary property stores force wide which are currently accessed using the standard fob access process. This forms part of the wider project work which also includes a review of temp store safes, access, processes and security.

February 2017: Jez Leavesley

The new Trakka key cabinets at the two main stores are working well, the issue has highlighted to the Property project the issue of the temporary overnight stores. Security for these stores needs significantly improving. A full review of the stores has been completed, highlighting the need for CCTV and key cabinets for each store. A review of how many stores the force has and how many it needs is underway. Once this is complete the project will make proposals for finance to make the appropriate improvements.

Note: This was previously PROPOSED CLOSED – however at the September 2016 JARAP meeting decision to retain for next meeting in December

GREEN

Fundamental Recommendation 4.2 Safes Audit Regime

A segregation of duties should occur in the completion of the monthly safe audits at the various property locations so that more than one Officer is included in the safe audit process.

Implementation Target Date: September 2016

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

This recommendation is accepted. An appendix has been created to the existing draft Safe Procedure. In addition to the recommendation made by audit, further safeguards have been added to include quarterly reconciliation between finalised Property records relating to cash items and the Force bank account. This will provide assurance around the appropriate disposal of each item; it will also provide a secondary layer of independent scrutiny as the reconciliation will be completed by the Finance department.

The draft procedure will be resubmitted to the project SRO. Once the draft document is ratified it will be disseminated accordingly.

Update September 2016:

Safes Audit Regime – The procedural audit regime is currently being reviewed by the Property Project Team.

Update December 2016: Jez Leavesley

An additional property officer has been identified to complete the safe audit process. This is in addition to the property admin officer who conducts the audits at present. A full property audit procedure remains work in progress. A review of temp store safes has just been completed (mid Nov) and its recommendations need to be analysed. The new audit procedure will include the safe procedure audit regime (above) as well as audit procedures in the main and temporary stores. This specific work is awaiting project officer allocation.

Update February 2017: Jez Leavesley

A Property Department audit procedure has now been completed and is in final draft stage prior to consultation. This includes the auditing of safes. Once the consultation process has been completed, the procedure will be submitted for approval and introduction.

PROPOSE RECOMMENDATION CLOSED

Significant Recommendation 4.3 Procedure Amendments

The procedure documents for property management should be updated to include sufficient detail for the following areas:

- Packaging and Storage;
- Disposal; and
- Transportation.

The new procedure documents should be communicated to all relevant staff. The review dates for the property management documents should be brought in line with each other and these should be reviewed on at least an annual basis.

Implementation Target Date: ~~September 2016~~ **Revised to September 2017**

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

This recommendation is accepted.

The Cash & Valuables flowchart and accompanying Standard Operating Procedure drafts provide detailed guidance on seizure and packaging of cash exhibits. Once these documents are approved by senior officers, they can be hyper-linked to the existing Property Procedure document to provide the necessary guidance.

The draft cash & valuables flowchart has already been amended to include the requirement to endorse the cash value of the exhibit bag.

An additional section will be added to the Force Property Procedure highlighting the limitations / requirements of the Force insurance policy in respect of cash transportation.

The disposal section of the Force Property Procedure has been amended to provide clarity with respect to authorities. This amendment will be highlighted for approval to senior officers along with the other draft documents.

The review dates for the three relevant procedures will be aligned to provide consistency of approach.

Once the draft document is approved by senior officers it will be disseminated accordingly.

The property project will also include a specific element focused on organisational culture relating to officer and staff attitudes to property handling.

Update September 2016:

Procedure Amendments – Packaging and Storage, Disposal and Transportation is currently being reviewed by the Property Project Team.

Update December 2016: Jez Leavesley

A new review and retention procedure was added to the force property procedure early November. Work on the disposal procedure is on-going. Packaging and storage is part of a full review of the force property procedure and is work on-going. A new lost/found property procedure is due for launch end of November. Significant changes are being made to the property procedures. The draft cash & valuables flowchart and the SOP's for cash will be incorporated into the new procedures. Work on-going.

Update February 2017: Jez Leavesley

A review of Packaging and guidance has commenced. Work in Progress WIP.

Disposal – A ceasing retention procedure (complementing the retention & review procedure) is nearing completion. This is currently out for consultation prior to submission for approval.

Transportation – Not reviewed at this stage. Remaining as a work package for allocation when a member of staff has been identified. Remains Area for Improvement AFI.

AMBER

GREEN

Significant Recommendation 4.4 Insurance for Transportation of Cash

The insurance policy for the Force regarding the transportation of cash and valuables should be reviewed and updated as necessary. Cash and valuables should be transported in line with the relevant insurance policy.

Implementation Target Date: Completed

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant / Ruth Gilbert - Head of Finance

Initial Management Response 20 June 2016:

This recommendation is accepted.

The Head of Finance has liaised with the insurers and has reviewed and amended the Force policy to meet the criteria/recommendation. This is completed.

The procedural issues observed are also accepted and will be included in the fundamental review of this area of service provision included in the Force Property Project. This is now being led by the Head of Corporate Services Directorate.

Update December 2016: Jez Leavesley

This is work in progress and forms part of the procedural updates referred to above. The proposal below forms part of the new procedure.

Movement of cash

In the event there is a requirement to move physical cash the following resources MUST be employed to do so:

- **£0 to £10,000 – 1 or more ECU/Other Leicestershire Police staff member**

- **£10,001 to £100,000 - 2 x ECU/Leicestershire Police staff members one of which MUST be a police officer**

- **£100,000+ - 2 x ECU/Leicestershire Police staff members and a double crewed marked police car escort.**

February 2017: Jez Leavesley

A new handling, storage and movement of cash procedure has been written and approved @ 15/2/17. This procedure will go live force wide as soon as the broader staff training requirements /publicity have been put in place.

The new procedure has specific requirements for Property officers, Finance department and Economic Crime Unit, and these Departments are already familiar and practiced in the daily handling & movement of cash. This process will go live with these specialists by mid-March 2017.

PROPOSE RECOMMENDATION CLOSED

GREEN

Significant Recommendation 4.5 Courier Collection

The couriers should produce a report from the property system detailing the cash items retained in the safes/stores prior to collection. Any discrepancies between the property system report and the cash items collected should be identified and investigated as appropriate.

Implementation Target Date: October 2016

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

This recommendation is accepted.

It is agreed this additional control would be beneficial and will ensure practice is in line with the insurance policy requirements.

The procedural amendment proposed under recommendation 4.3 will address this issue. Once the draft document is approved by senior officers it will be disseminated accordingly.

This will form part of the review of business processes and wider reform included in the Force Property Project. This is now being led by the Head of Corporate Services Directorate.

Update September 2016:

Courier Collection – Insurance is in place and yearly cash audit review in Force safes is currently being completed to be presented to Finance.

Update December 2016: Jez Leavesley

Process now amended and introduced. The couriers print a cash print pick list from KIM PMS prior to collection and note any discrepancies on the picklist. Any discrepancies are scanned and forwarded to the Force Property manager for action. The manager has the responsibility to investigate appropriately.

Update February 2017: Jez Leavesley

Update as above. The amended procedure is already in place but has now been incorporated into the new Movement, Handling and Storage of Cash procedure.

PROPOSE RECOMMENDATION CLOSED

GREEN

<u>Significant Recommendation 4.6</u> Safe Specifications Insurance

The insurance policy should be reviewed to include adequate detail of the specifications of each safe required for the contents of the safe to be appropriately covered by the policy. The Force should ensure that the individual safe specifications are appropriate for the insurance policy in place.

Implementation Target Date: October 2016

Person Responsible: Ruth Gilbert - Head of Finance/ Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

The Head of Finance has confirmed the detail currently noted in the safe schedule is satisfactory for the insurers. However with the introduction of the Insurance Act in August this year which requires the insured to provide enough information to Insurers to enable them to ask further questions (we believe that the safe schedule currently does this) we feel it would be a good opportunity to carry out further research and update the safe schedule with as much detail as possible in relation to the make and model at least. If for example POCA money happens to be placed in a safe where force money is kept and the safe limit is exceeded, this is accepted as the POCA limit will apply in addition to the safe limit.

This work will take place in line with the insurance policy renewal which is October 2016.

Update September 2016:

Safe Specifications Insurance - Insurance is in place and yearly safe specification audit review is currently being completed by the property project team within Corporate Services, this will be presented to Finance.

Update December 2016: Jez Leavesley

A full safe audit was completed by Corporate Services in September 2016 and a database updated and maintained. The Force Property manager now has responsibility for all force safes and maintenance of the database. The database including photographs was provided to the insurers as part of provision of the safe specification.

Update February 2017: Jez Leavesley

No further update. Updates at September and December provide the completed recommendation. Insurance policy renewal/review completed in October 2016.

PROPOSE RECOMMENDATION CLOSED

AMBER

<u>Housekeeping Recommendation 4.7</u> Assessment of Safes/Retention Policy

An assessment of the safes required by the Force should be conducted to ensure that sufficient safes are available for the storage of seized and found property. The Force should consider the introduction of a policy for the timeliness of banking cash that is not required to be stored in the safes.

Implementation Target Date: ~~October 2016~~ **Revised to September 2017**

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

This recommendation is partly accepted.

The cash & valuables flowchart has been amended to reflect that all seized cash exhibits will be banked after 28 days unless retention is specifically authorised by an officer of at least Inspector rank as an investigative necessity.

Once the draft document is approved by the Project SRO and ratified it will be disseminated accordingly.

The recommendation to increase safe capacity has been considered and it is the management view that an unnecessary increase in storage capacity may inadvertently decrease the instances of banked cash. Adherence to the 28 day banking policy will seek to reduce retained cash, increasing available capacity where it is justifiably necessary.

This process will be formalised as a part of the new organisational structure arising from the Force Property Project.

Update September 2016:

Assessment of Safes/Retention Policy – currently being reviewed by the Property Project Team.

Update December 2016: Jez Leavesley

Property Other Than Found POTF and found cash on a weekly basis is removed from the safes. Two property officers then count and verify the cash and complete a transit sheet. The Force Property manager then takes the transit sheet & cash to FHQ central finance. This is signed for and handed over for central finance to bank. A new found cash procedure for cash found under £50 has been introduced. This will reduce the amount of cash handed to police to recover.

Update February 2017: Jez Leavesley

Update as above concerning timeliness. This has been incorporated into the new Movement, Handling and Storage of Cash procedure. Force temporary store safes have now been reviewed as part of the Temporary overnight store review and a number of recommendations have been made concerning safes. A decision will not be taken concerning replacing/purchasing new safes until the work to identify how many temporary stores the force needs, has been concluded. Security of the temp stores has also been reviewed, per my previous comments in this paper.

Housekeeping Recommendation 4.8 Recording Movements and Location

Movements and location of cash and valuables should be accurately recorded on the property management system and log books in a timely manner.

Implementation Target Date: October 2016

Person Responsible: Corporate Services Directorate Jez Leavesley – Force Property Project Consultant

Initial Management Response 20 June 2016:

Recommendation partly accepted.

Leicestershire have a fully automated Property management system that records the location and movement of all seized property.

Property removed from a temporary store to a main store location is recorded on a transit sheet to provide further auditable record of Property movement.

As information is logged on the KIM property system it is no longer necessary to keep a cash safe log-book for the Beaumont Leys property store and this practice will be discontinued

A current wider review of the property portfolio will address the recommendation regarding the movement and location of cash and valuables. This will include the broader issue of 'high risk' property types – including cash, weapons and drugs.

Update September 2016:

Recording Movements and Location – This is currently being reviewed by the Property Project Team within Corporate Services.

Update December 2016: Jez Leavesley

This is work on-going. The specific property vehicle specification is being reviewed. This will include a review of the layout, storage and receptacles of the vehicle for high risk items. A reviewed risk assessment was completed on the current property vehicle. This has highlighted a number of potential areas for improvement, including the size of the vehicle itself to carry these high risk items.

Update February 2017: Jez Leavesley

The new handling, storage and movement of cash procedure has been written and approved @ 15/2/17. The procedure incorporates the recording issues outlined above.

This procedure will go live a soon as the staff training requirements /publicity have been put in place. The new procedure has specific requirements for Property officers, Finance department and Economic Crime Unit, and these Departments are already familiar and practiced in the daily handling & movement of cash. This process will go live with these specialists by mid-March 2017.

PROPOSE RECOMMENDATION CLOSED

GREEN

COMPLAINTS MANAGEMENT		August 2016
FUNDAMENTAL: 0	**SIGNIFICANT: 2**	**HOUSEKEEPING: 0**

AMBER

Significant Recommendation 4.2 28 Day Updates to Complainants

The Force should ensure that complainants are kept informed and up to date with the status of their complaint.

Implementation Target Date: ~~December 2016~~ **Revised date September 2017**

Person Responsible: Mick Gamble - Complaints and Discipline Manager

Initial Management Response:

A reminder has been placed on the force latest news that complaints and officers subject of the complaint are to be updated every 28 days. Completed – 2/8/16

PSD officers have access to Centurion. Work is currently being undertaken with the service provider to maximise the system's functionality to enable IOs to accurately record their updates. Training will then be delivered to the staff. To be completed - December 2016.

Update December 2016: A force briefing has been issued to remind Investigating Officers of the 28 day update responsibility. Terri Hipwell will be carrying out dip sampling to test compliance.

Update February 2017:

Remedial action has taken place in that Staff in PSD have received appropriate and complete training. A further briefing has been published on the force intranet reminding personnel of the need to ensure that complainants are kept informed and up to date them with the status of their complaint.

AMBER

Significant Recommendation 4.3 Introduction of Key Performance Indicators

Management should introduce Key Performance Indicators or Targets in relation to the management of complaints. An example may be for Leicestershire to be below the MSF Average, or 10% of Appeals to be upheld by the IPCC.

Implementation Target Date: December 2016

Person Responsible: D/Supt Simon Hurst

Initial Management Response:

Performance package under development by Head of PSD

Monthly managers meeting started 28/07/16 to review all outstanding work and to identify risks and priorities. Chaired by the Head of PSD – monthly meetings have now started 24/08/16.

Update December 2016: Performance Data has been developed and introduced and amendments are to be made in line with the Mazars Audit – Hazel Lawrenson, Performance Analyst of the Threat Assessment Unit is to accommodate.

Update February 2017: Hazel Lawrenson, Performance Analyst of the Threat Assessment Unit continues to produce monthly performance reports for the Professional Standards Department which covers complaints and discipline, conduct, information management and vetting. This document is to be further refined to include counter corruption performance data. Further performance data (public complaints) is provided by the IPCC on a quarterly basis which examines Leicestershire performance alongside the remainder of the UK.

	VETTING	September 2016
	FUNDAMENTAL: 0	**SIGNIFICANT: 2**	**HOUSEKEEPING: 0**

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<td rowspan="1">AMBER</td>
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Significant - Security & Vetting Team: Internal Appeals 4.6

The process for dealing with an internal appeal following a vetting fail should be formally documented to ensure a consistent and fair process is followed.

Implementation Target Date: ~~November 2016~~ **Revised target date July 2017**

Person Responsible: Amanda Bogle-Reilly - Vetting & Disclosure Manager & Supt Simon Hurst - Head of Vetting

Initial Management Response:

Agreed. Management are aware that this process needs to be formally documented. They have brainstormed the process and know what it is but it is yet to be formally documented due to other priorities in the department. The Vetting Manager and Head of Vetting will work together to formally documented the process.

Update December 2016: Amanda Bogle-Reilly

Currently work in progress. To be documented and confirmed.

Update February 2017: The generic Appeal process for internal vetting clearance failures is documented within the ACPO / ACPOS Vetting Policy for the Police Community, which will be revised by the forthcoming Vetting Code of Practice. The Senior Vetting Manager will be documenting this appeal process with reference to the Vetting Code / Unsatisfactory Performance Process and in conjunction with the Human Resources Department.

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Significant - Performance Monitoring 4.7

A robust performance monitoring process should be put in place to allow for the effective evaluation of the departments performance. This should include, but not be limited to, the following:

- appropriate key performance indicators that are based on sound logic, such as resources available, benchmarking data and other key factors that affect performance levels;
- a review of performance against previous months/periods;
- a review of levels of vetting outstanding to ensure back logs are quickly addressed.

Implementation Target Date: ~~November 2016~~ **Revised target date July 2017**

Person Responsible: Supt Simon Hurst - Head of Vetting

Initial Management Response:

Agreed. The project lead for the new performance framework within PSD has been off which has slowed the implementation of the new framework, which vetting will be part of. The current version is being proof tested and is due for review by department heads. Once in place, it should allow statistical analysis of performance to review trends and one off issues which allow a more effective evaluation of departmental performance.

Update December 2016:

An Initial performance monitoring framework is in place and is reported to the Senior Management Team SMT on a monthly basis. The development of the framework is ongoing and includes baseline data obtained by Tracey Wragg Corporate Services as part of Output Based Budgeting OBB.

Update February 2017: Hazel Lawrenson, Performance Analyst of the Threat Assessment Unit continues to produce monthly performance reports for the Professional Standards Department which covers complaints and discipline, conduct, information management and vetting. This document is to be further refined to include counter corruption performance data. Further performance data (public complaints) is provided by the IPCC on a quarterly basis which examines Leicestershire performance alongside the remainder of the UK.

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PAYROLL			November 2016
FUNDAMENTAL: 0	SIGNIFICANT: 1		HOUSEKEEPING: 1

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Significant – Selima User Access 4.2

The Force should request periodic, accurate, reports of live user access to the Selima system and their access capabilities. This should be used to confirm that live access and restrictions are appropriate and valid.

Consideration should also be taken to introducing user profiles with pre-defined access rights when requesting a new user to the Selima System.

Implementation Target Date: January 2017

Person Responsible: Alice Davis – Payroll Services Manager

Initial Management Response: November 2016

The request for Selima users took just under 3 months to be delivered from Kier. I shall take this forward at the next performance meeting.

From the initial scoping document the user's access was defined with user profiles. I shall take this forward with Kier at the next performance meeting.

Update February 2017:

Kier provided a full list of users and their access restrictions for Leicestershire & Derbyshire users. The report also included the users at Kier & Selima who have access to our databases.

A further list will be requested at 31st March 2017 and going forwards on a quarterly basis.

PROPOSE RECOMMENDATION CLOSED

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Housekeeping – Wage Types 4.3

The Force should consider introducing an exception report which details Pensioners with the wage type 0033 in their salary packet and ensure that this is amended prior to payroll being complete.

Consideration should also be taken to increase this exception report wider than only Pensioners to ensure that the correct wage type is being used for Officers, Staff and OPCC.

Implementation Target Date: November 2016

Person Responsible: Natasha Thornton – Assistant Payroll Services Manager

Initial Management Response: November 2016

This has been added to our monthly checklist. The Payroll system does not have the facility to have restrictive parameters; so any wage type can be used against any pay record / payroll for either Force.

Update February 2017:

Our procedures have been amended to include this check on our monthly checklist which is completed prior to the sign-off of the pensioners' payroll.

PROPOSE RECOMMENDATION CLOSED

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	PENSION PROVIDER		November 2016
	FUNDAMENTAL: 0	SIGNIFICANT: 1	HOUSEKEEPING: 1

GREEN

Significant – Staff Police Vetting 4.1

Kier and the Force should review levels of vetting requirements to ensure all staff are police vetted prior to access been given.

Implementation Target Date: January 2017

Person Responsible: Head of Finance at Leicestershire Police & Kier Pensions Service Delivery Manager

Initial Management Response: November 2016

The Force will liaise with their Information Security Team to assist in this matter and work out possible solutions. The outcomes will be fed back to Kier.

Update February 2017:

The vetting clearance for Kier employees is now being received in a timely manner (vetting is undertaken by another Force) and access to the IT system is not given until this is received.

PROPOSE RECOMMENDATION CLOSED

GREEN

Housekeeping – PIM Requests 4.4

Kier should liaise with the system provider to ensure relevant reports can be run to assist in management of users in the system.

Implementation Target Date: March 2017

Person Responsible: Systems Coordinator Kier Pensions Services

Initial Management Response: November 2016

The issue has already been logged with the system provider and is part of a list of system upgrades that has been requested. It will be monitored.

Update February 2017:

The issue has been logged with the system provider however, all users of the system have to vote on the developments taken forward and it is unlikely that this will be a priority.

PROPOSE RECOMMENDATION CLOSED

CORE FINANCIALS		December 2016
FUNDAMENTAL: 0	SIGNIFICANT: 1	HOUSEKEEPING: 4

AMBER

<u>Significant – Supplier Set Up and Amendments Procedure 4.1</u>

A formally documented procedure for the setting up of new suppliers and the processing of amendments to supplier standing data should be produced and communicated to staff. This procedure should include, but not be limited to, the following information:

- Roles and responsibilities of departments;
- Process to follow in handling requests;
- Documentation to be completed and retained; and
- Fraud checks to be completed and recorded.

Implementation Target Date: ~~February 2017~~ **Revised target date July 2017**

Person Responsible: Ruth Gilbert **-** Head of Finance & Head of Procurement and Support Services
Initial Management Response: December 2016
The purchase ledger is used to facilitate the following payments:

- Trade Suppliers
- Specials
- Doctors
- Payroll – Statutory and voluntary deductions
- Legal payments - damages

The procedures for a setting up a 'payee' is therefore different depending upon the category. Purchasing are only involved in the process for Trade Suppliers and Doctors.

Payee's in respect of legal payments (damages, 3rd party Solicitor payments, legal fees) are set up from the East Midlands Legal Payment Request forms, which contain all of the relevant information and are completed by the Legal Team managing the case.

Following the introduction of Agresso the 'New Supplier Request Form' was made part of the system and controlled through workflow.

For new Trade Suppliers where the value of the order / contract is over £5k the Procurement Team will have been involved in the procurement process and engaged with the Supplier through either a national contract, regional contract, competitive tender or a single source dispensation, prior to the Supplier being set up on the system.

Whilst the fraud checks could not be evidenced the Team are aware of the importance of completing these particularly in relation to 'change of bank details'.

Prior to the weekly BACS run being processed a member of the Accountancy and Budgeting Team also check that all the bank accounts have been correctly entered on the system to the supporting documentation. This is another opportunity which would potentially identify any unusual transactions.

The new supplier / payee set up notes will be expanded to cover the steps to be followed for each category of payee including the fraud checks to be undertaken.

Update February 2017:

Discussions have been held with the Procurement Department and revised procedures agreed and implemented. The procedures manual is in the process of being updated to reflect the changes.

GREEN	**Housekeeping – Sales Invoice Supporting Documentation 4.2** Staff should be reminded that when raising sales invoices the appropriate supporting documentation should be attached to the Agresso system. The procedure document for raising sales invoices should be amended to highlight that this process is a mandatory requirement. **Implementation Target Date: January 2017** **Person Responsible:** Samantha Lamb – Finance Manager **Initial Management Response: December 2016** Staff will be reminded that supporting documentation should be attached to Sales Invoices on the system and additional training provided where required. **Update February 2017:** An e-mail has been forwarded to all relevant staff reminding them of the importance of attaching supporting documentation to Sales Invoices. This has been communicated to all the relevant staff and the procedures updated as a mandatory requirement. **PROPOSE RECOMMENDATION CLOSED**
AMBER	**Housekeeping – Leaver's System Access Removal 4.3** The Force should continue to reconcile Agresso users against HR and Payroll reports to identify leavers to be removed. Upon gaining access to implement the system functionality to remove batches of leavers from the Agresso system, the leavers currently identified should be removed. This functionality should be used on a regular basis to remove leavers from the Agresso system. The removal of leavers from the system was raised in the previous internal audit report. **Implementation Target Date:** Timescale will be dependent on when Derby's IT Dept can schedule the work **Person Responsible:** Samantha Lamb – Finance Manager **Initial Management Response: December 2016** The Agresso finance system includes the inventory module. This module is used to issue uniform to officers, staff and specials. For uniform to be issued the officers, staff and specials have to be set up as 'users' on the Agresso system. The individuals are not aware that they have been set up as 'users' and for them to be able to access the system the Web Client link would have to be deployed. A service call will be logged with the Derbyshire IT help desk (the Agresso servers are based in Derbyshire) to progress the issue so that leavers can be removed on block. The Accountancy and Budgeting Team will continue to reconcile the Agresso Users with the payroll and HR reports on a regular basis. **Update February 2017:** The Agresso consultant has produced a report to remove users on block. This is in the process of being tested and will then be implemented in the 'live' system.

GREEN	**Housekeeping – Review of Non PO Purchases 4.4** The Force should consider conducting a review of non-purchase order invoices processed to identify instances where it would be beneficial to raise a purchase order. The results of this exercise should be communicated to all staff. **Implementation Target Date: February 2017** **Person Responsible:** Samantha Lamb – Finance Manager **Initial Management Response: December 2016** The Accountancy & Budgeting Team will explore whether a report can be produced from Agresso of the non PO invoices for review by the Finance and Procurement Teams to identify invoices where the raising of a Purchase Order would be appropriate. As reflected in the observation / risk this is a cultural change for users as the previous finance system did not manage purchase orders particularly well. **Update February 2017:** A report has now been written that identifies invoices paid without a purchase order. This will be shared with the Procurement Team on a regular basis going forward to identify spend where it would have been appropriate for purchase orders to be raised. **PROPOSE RECOMMENDATION CLOSED**
GREEN	**Housekeeping – Credit Note Supporting Documentation 4.5** Supporting documentation for the raising of credit notes, outlining the reason for the credit note and the value of the credit note, should be attached to the Agresso system for review by the relevant authoriser. The subsequent action upon authorisation of the credit note should also be recorded for continuity i.e. the number of any subsequent invoice being raised. **Implementation Target Date: February 2017** **Person Responsible:** Samantha Lamb – Finance Manager **Initial Management Response: December 2016** All credit notes have to be approved by a senior member of the Finance Team on Agresso before they are issued. This mitigates the risk of credit notes being raised inappropriately. The Accountancy and Budgeting Team will discuss with Systems Consultant the feasibility of attaching the supporting documentation to credit notes on Agresso system in the future. **Update February 2017:** The Agresso system has been amended to allow supporting documentation to be attached to Credit Notes. This has been communicated to all the relevant staff and the procedures updated. **PROPOSE RECOMMENDATION CLOSED**

VICTIMS CODE OF PRACTICE		January 2017
FUNDAMENTAL: 0	**SIGNIFICANT: 4**	**HOUSEKEEPING: 4**

AMBER	**Housekeeping – Victims Code Compliance Action Plan 4.1** The action plan should be updated to clearly show the issue found and the action put in place to mitigate. Monitoring of each action should be completed at each meeting until the underlying issue has been addressed, with target dates set to ensure completion in a timely manner. **Implementation Target Date: 28th February 2017 Revised target date 1st May 2017** **Person Responsible:** Jim Holyoak – Service Improvement Manager **Initial Management Response: January 2017** Whilst the action plan is designed to be simple, it is agreed that the suggested improvements would assist the action plan in place become more effective at addressing specific issues. It will be discussed at the next action group meeting. **Update February 2017:** At the February meeting of the VCOP improvement group this recommendation was adopted and the action plan amended accordingly.

AMBER	**Significant – Victims Code Compliance Audits 4.2** The current audits that are undertaken should be reviewed to ensure they provide effective feedback on compliance with the Victims Code of Practice. The samples selected should ensure an effective outcome can be provided. This should include: • An appropriate sample size for each area of VCOP; • Document if needs assessments have been completed; • Document if communication with the victim has met the VCOP entitlements. **Implementation Target Date:** 28th February 2017 **Revised target date 1st May 2017** **Person Responsible:** Jim Holyoak – Service Improvement Manager **Initial Management Response: January 2017** Agreed. It has been some time since the audits were set up and it would be best practice to review the format to ensure it is providing the action group with effective feedback. **Update February 2017:** At the February meeting of the VCOP improvement group this recommendation was adopted and the audit format will be amended accordingly.
AMBER	**Significant – Communication with Victims 4.3** The Force should implement an appropriate process to ensure that each victim receives a written acknowledgement of the crime they have reported. This should include the basic details of the offence and confirmation of the communication with the victim should be recorded on the Niche system. **Implementation Target Date:** 30th April 2017 **Revised target date 1st June 2017** **Person Responsible:** Jim Holyoak – Service Improvement Manager **Initial Management Response: January 2017** The Force is in the process of signing up to the Track My Crime system, an online service provided by the Ministry of Justice for victims of crime and an innovative new way for the police to communicate with the public, which will make improvements in this area. **Update February 2017:** Due to Niche testing delaying implementation, this recommendation will be adopted but the implementation has been put back to allow a more realistic timeframe.
AMBER	**Significant – Providing Information to Victims 4.4** In line with the Communication with Victims recommendation above, the Force should ensure that it provides victims of crime with information on what to expect from the criminal justice system in line with the VCOP. Consideration would be referral to online information through the email and text communications it sends to Victims. **Implementation Target Date: 30th April 2017** **Person Responsible:** Jim Holyoak – Service Improvement Manager **Initial Management Response: January 2017** As per comments above, the Track My Crime system is designed to signpost victims to more information. The initial communication that is sent to victims should include direction to the Force website where the information is stored. Once the implication of Track my Crime are known this will be reviewed. **Update February 2017:** At the February meeting of the VCOP improvement group this recommendation was adopted and on-going work with the behavioural change team has commenced to roll out additional material at the implementation of Online recording and Track My Crime.
AMBER	**Housekeeping – Needs Assessment 4.5** The action group should look to implement a consistent procedure for recording the needs assessment of victims in Niche. They should consider a process map that shows how needs assessment should be recorded dependent on the situation. **Implementation Target Date: 30th April 2017** **Person Responsible:** Jim Holyoak – Service Improvement Manager **Initial Management Response: January 2017** A process map that documents the process of VCOP compliance for needs assessment would be a useful tool and will be considered by the Action Group. **Update February 2017:** At the February meeting of the VCOP improvement group this recommendation was adopted and on-going work with the behavioural change team has commenced to roll out additional material at the implementation of Online recording and Track My Crime.

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<u>Housekeeping – Complaints Procedure 4.6</u>

The Force should ensure that the Force website is updated to direct victims of crime to the complaints form and the action group should engage with PSD to ensure they are passed relevant complaints so lessons can be learned where necessary.
Implementation Target Date: ~~28ᵗʰ February 2017~~ Revised target date 30ᵗʰ April 2017
Person Responsible: Jim Holyoak – Service Improvement Manager
Initial Management Response: January 2017
Agreed. The website should be updated to direct individuals to the complaints form that is on another area of the Force website. An audit of the complaints management at the Force was recently undertaken and areas for improvement within this area are ongoing to improve reporting of complaints to other departments.

Update February 2017:

At the February meeting of the VCOP improvement group this recommendation was adopted and on-going work with the behavioural change team has commenced to roll out additional material at the implementation of Online recording and Track My Crime. The implementation date has been amended accordingly.

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<u>Housekeeping – Performance Monitoring 4.7</u>

The action group should consider if other Niche reporting capabilities are available such as:
- How many victims were recorded in the period?
- How many referrals requested further victim support?
- Performance in relation to recording of information on the VCOP module information i.e. preferred contact methods recorded, Victim Personal Statements offered and accepted etc.
Implementation Target Date: ~~28ᵗʰ February 2017~~ Revised target date 30ᵗʰ June 2017
Person Responsible: Jim Holyoak – Service Improvement Manager
Initial Management Response: January 2017
The action group need to consider what performance information would be useful and then work with IT to see if it can be easily produced.

Update February 2017:

At the February meeting of the VCOP improvement group this recommendation was adopted and on-going work with the threat assessment team and Niche implementation team is on-going to scope how some of this data outside of the current audit work can be captured and published, ideally on the Management Information Gateway. The target implementation date has been amended accordingly.

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<u>Significant – Service User Feedback 4.8</u>

The Victims Survey reports should be reviewed at the VCOP compliance action group, alongside the results of the compliance audits, with a view to ensuring that underlying issues are highlighted and actions to address these are put in place.
Implementation Target Date: ~~28ᵗʰ February 2017~~ Revised target date 30ᵗʰ June 2017
Person Responsible: Jim Holyoak – Service Improvement Manager
Initial Management Response: January 2017
The feedback surveys provide a lot of qualitative data but at present the Force does not have an analyst to work on the data that is received. A business case is being worked on for additional resources in this area. It is agreed that specific elements of feedback would be a useful tool for the action group to consider in setting actions to improve compliance with the VCOP.

Update February 2017:

At the February meeting of the VCOP improvement group this recommendation was adopted and rearrangement of Corporate Services posts and budgets will allow for a dedicated analyst for these areas of business. However, this will require recruitment hence the implementation date has been amended accordingly.

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	ICT Review	February 2017
	FUNDAMENTAL: 0 **SIGNIFICANT: 2**	**HOUSEKEEPING: 2**

AMBER	**Significant – Service Desk Call Handling 4.1** The proposed review of service desk call handling procedures and as part of the Tri-Force arrangements is supported and we recommend that the Force continue with this review. The establishment of a centralised helpdesk as part of the IT Service desk system review and design work stream activity highlighted in the Tri-Force work plan is supported and recommend that the Force continue with this establishment. **Implementation Target Date: August 2017** **Person Responsible:** Deviya Singh – Information Technology Department **Initial Management Response: March 2017** Work on the IT TFC Service Management work stream to deliver common procedures is progressing. The initial stage of process definition, requirements definition and procurement planning will complete in May 2017. Procurement, implementation and rollout planning will complete during June and July 2017. Existing local documentation and processes will be reviewed by end March 2017.
AMBER	**Housekeeping – User Management 4.2** User management processes should be applied in all cases and a review may be required to identify further accounts not removed/disabled in a timely manner. **Implementation Target Date: May 2017** **Person Responsible:** Matthew Carey – Information Technology Department **Initial Management Response: March 2017** IdAM is an IT TFC work stream that will establish a common user management process. A high-level design will be complete July 2017 allowing detailed implementation and procurement planning to commence. Existing local documentation and processes will be reviewed by end-April 2017.
AMBER	**Housekeeping – Information Security Resources 4.3** The force should ensure it has sufficient resources to deal with its Information Security needs. Due to the departure of the Information Security Officer, further progress on RMADS has slowed and the force may need to consider its next steps on RMADS alongside the recruitment of a new Information Security Officer. **Implementation Target Date:** On-going upskilling based around training budget approval and demand. **Person Responsible:** Annabelle Edkins – Information Security Officer **Initial Management Response: March 2017** Full-time ISO now recruited and a period of upskilling required. This is being addressed via application to the External training Budget for 2017/18. Future TFC Wide Area Network approach will enable sharing of an RMADS workload with other Force peers. Information Security Support Officer position to be advertised to increase resilience.
AMBER	**Significant – PSN Accreditation 4.4** We recommend that the Force continue with its work to achieve its PSN accreditation and whilst the Force is liaising with the accrediting body, it should note that the changes in the process may result in further work before accreditation is given. **Implementation Target Date:** Submitted to GDS February 2017 – awaiting feedback/results **Person Responsible:** Annabelle Edkins – Information Security Officer **Initial Management Response: March 2017** GDS submission signed by the DCC as SIRO on 19/1/17 for submission to the Cabinet Office. Further liaison to take place. NB: Worth noting that currently only 2 Home Office Forces have achieved PSN accreditation. This is a national issue, being taken up with the NPCC, Home Office and Cabinet Office.