POLICE & CRIME COMMISSIONER FOR LEICESTERSHIRE
JOINT AUDIT, RISK & ASSURANCE PANEL

Subject	**INTERNAL – MAZARS AUDIT RECOMMENDATIONS AND TRACKING**
Date	**OCTOBER 2022**
Author:	**INSPECTORATE – ROY MOLLETT**

Brief Background

1. Mazars Auditors undertake an OPCC/Force commissioned annual programme of internal audits; for 2021-22 the following areas are subject of external scrutiny:

Core Financial Systems	Leadership & Management Development
Governance	Recruitment
Payroll	Workforce Wellbeing and Absence Management
Strategic & Operational	Health and Safety
Fleet Management	Medium Term Financial Plan
Vetting	

Purpose of Report

2. The following report provides the panel with update progress responses from business owners in relation to recommendations made so far by external auditors Mazars.

3. Mazars assess and grade the recommendations in terms of **Fundamental**, **Significant** and **Housekeeping** risk and report specifically in terms of Risk Management; Value or Money and Sector Comparison.

4. The following table illustrates the number of outstanding/progressing and completed proposed closed - Fundamental, Significant and Housekeeping recommendations for the Mazar's audits for this reporting period:

Risk/Priority of Recommendation	Remaining			Completed and proposed closed		Total
	RED	**AMBER**	**GREEN**	Proposed Closed	Not Adopted proposed closed	
Fundamental	-	-	-	-	-	**0**
Significant	-	21	-	2	-	**21**
Housekeeping	-	-	4	1	-	**4**
Total	**0**	**21**	**4**	**3**	**-**	**25**

5. **Audit Recommendations Proposed Closed:** The following three audit report recommendations are proposed closed for this reporting period.
They range from Housekeeping to Significant in terms of the priority score assigned. The table also depicts each report title, the section/recommendation reference and the page reference within this report.

Audit Title	Priority Score	Section/Recommendation Reference	Proposed Closed	Page
VICTIMS CODE	Significant	4.2 Niche Victim Information Pack	YES	17-18
GOVERNANCE	Significant	4.2 Policies and procedures	YES	27-29
"	Housekeeping	4.3 Recorded signatories to decisions	YES	29

6. There is currently one report in draft awaiting accuracy checking, management responses, identified responsible leads and target delivery dates for each recommendation, as follows:

> **Counter Fraud** - Limited Assurance;

The report will be reported upon at the future JARAP panel and ORB board meetings when it has been agreed by the force and finalised.

Recommendation

7. For the board to note the attached summary action updates on progress from business owners against each respective audit recommendation thus far at **Appendix A** below and other associated appendices listed below.

8. For the board to consider and where sufficiently evidenced agree those recommendations proposed closed.

Implications

Financial :   None

Legal :   None

Equality Impact Assessment :   None

Risks and Impact :   Risk to efficiency and effectiveness of business functions where agreed recommendations are not implemented in a timely manner.

Link to Police and Crime Plan :   Transparency and accountability for business functions.

List of Embedded Appendices

Appendix A Internal Audit Tracker - This provides the business owner updates and is part of this document

Appendix B – Recruitment Deck - Leicestershire

Appendix C – Recruitment Deck – EMSOU

Appendix D – Wellbeing Data

Appendix E – Succession Planning Workbook

Appendix F – CJ Disclosure Highlight Report Jul-Sept – VCOP

Appendix G – VCOP audit report Quarter 3 + 4 2021
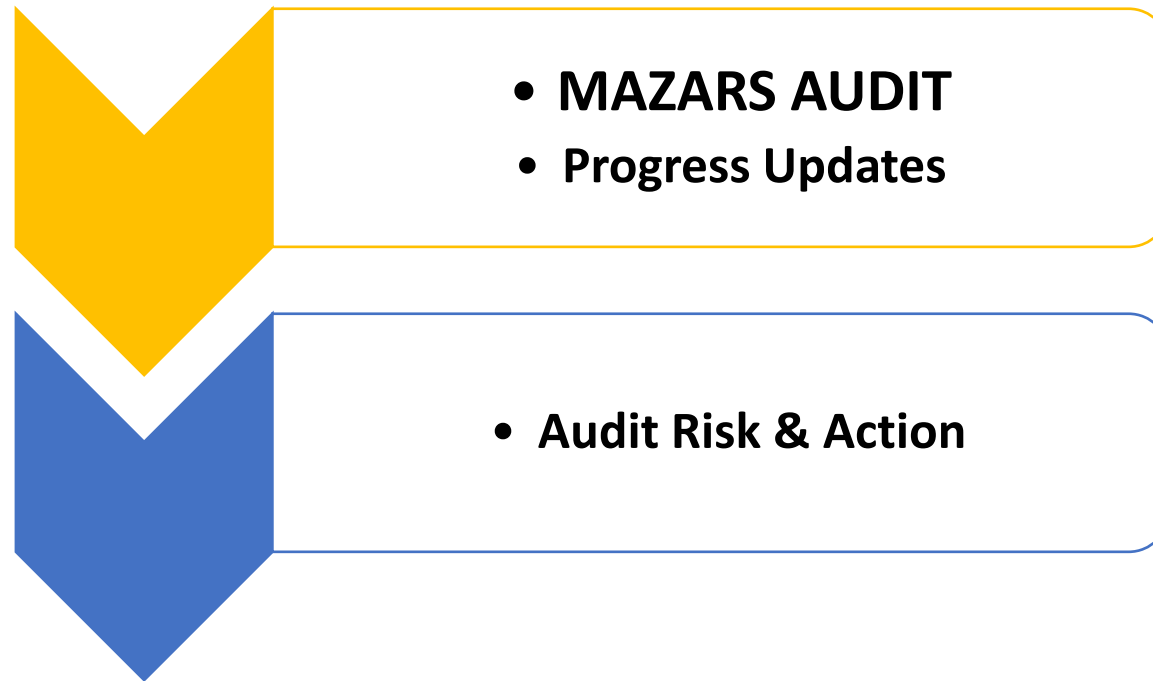
Background Papers

N/A

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- **MAZARS AUDIT**
  - **Progress Updates**

- **Audit Risk & Action**

RISK LEVEL	FUNDAMENTAL		SIGNIFICANT		LOW Housekeeping	

Audit Title	Risk	Threat to Delivering	Recommendation Reference	Business Owner - Action Plan Updates
FLEET MANAGEMENT **SATISFACTORY ASSURANCE** **September 2018**		Improved Management Decision Making	<u>4.2 Sample Check of Service Details</u>	**Significant Recommendation:** Regular sample checks should be undertaken on the services carried out and the details recorded on TRANMAN. The data should be checked to ensure: • All details (including mileage) is recorded for the service; and • The annual servicing timeframe, or the 12,000 miles timeframe, have been met. **Historical Progress September 2018 – December 2021:** The Force IT department successfully rebuilt the computer system server housing the Tranman program software which is a crucial component in facilitating the future fleet system upgrade. The fleet senior management team have met with the Civica development team to project plan the significant pieces of necessary work identifying those critical milestones that have to be met sequentially for successful implementation. The server upgrade for the Tranman system was carried out on the 22nd February 2021. This has secured the safe operation of the system for many years. **Progress Update – Achievements to date:** The milestones for delivery of the programme of IT improvement have been updated and remain under continued review by ACO Paul Dawkins and Chief Inspector Andy Parkes Interim Head of Fleet. All cars are now fitted with Astra boxes and remedial actions is being taken on those few cars which are not tracking (<10) at last time of checking although this is multi-factorial and can change daily. The principal hardware, software and infrastructure is however now in place. On 9th July we moved to Tranman 9 and have been using real-time since then, snagging with Civica. Tranman Release 9 has a much improved interface, this will provide improvement to data recording, storage and searchability. Efficiency and effectiveness will be improved through improved service centre management information. Major milestones have been met with iR3 in terms of the - **wider force architecture implementation**, **reassurance**, **resilience** and **integrity and testing**. **What is left to complete?**

				1. Understand and snag test the new Tranman 9 and iR3 interface. **COMPLETED.** 2. Determine the service scheduling solution, test, snag and implement WIP. 3. Complete the architecture and data flow schematics for T9 / iR3 / Storm / Airwave WIP. **4.** Develop the test plan for live test of new IR3 with Storm (there is no Storm test environment) **COMPLETED.** 5. Test the new iR3 with Storm - Ir3 live test due on 11/10/22. 6. Snag test and rectify Oct/Nov 2022. 7. Write Service Level Agreements SLAs and Contingency Plans based on the outcomes of the aforementioned tests Oct/Nov 2022. 8. Switch to new iR3 and decommission old IR3 Dec 2022. 9. Cleanse / improve Tranman data quality – Initial work completed, new codes added WIP. 10. Understand and exploit new functionality (including tablets) – Oct/Nov 2022. 11. Install new solution for Ir3 to report to Tranman (circa 5k – LBA). 12. Within Tranman create service schedules WIP Dec 2022 / early 2023 **Milestones - Timeline for completion:** **1.** Understand and snag test the new Tranman 9 and iR3 interface. **COMPLETED.** 2. Determine the service scheduling solution, test, snag and implement – WIP. 3. Complete the architecture and data flow schematics for T9 / iR3 / Storm / Airwave – WIP. 4. Develop the test plan for live test of new IR3 with Storm (there is no Storm test environment) **COMPLETED.** 5. Test the new iR3 with Storm Ir3 live test due 11/10/22. 6. Snag test and rectify (Oct / Nov). 7. Write SLAs and contingency plans based on the outcomes of the tests (Oct / Nov). 8. Switch to new iR3 and decommission old IR3 (December). 9. Cleanse / improve Tranman data quality – Initial work completed, new codes added. 10. Understand and exploit new functionality (including tablets – Oct/Nov 2022). 11. Awaiting completion date. 12. Work in progress – likely to be Dec 2022 / early 2023. **Barriers to completion, and how these may be resolved where possible?** 1. Workload demands on key personnel (no dedicated resource to IR3 / Tranman). ➤ Demand from other areas e.g. vehicle commissioning, staffing issues. ➤ Additional personnel (PS) into TU to assist / take some workload. 2. Unforeseen IT commitments and their daily other demands (service failures etc).

				3. Unknown re level of snagging required.
				4. Changes in long-established working practices in TU required.
				  ➢ 2 x SPOCs identified.
				  ➢ PS in support re process mapping.
				  ➢ Civica engaged regards training.
				5. Absence of key personnel (Workshop controller).
				6. Reliance on external suppliers and support.
				7. Additional costs of supplier work – circa £15k – discussed already with Paul Dawkins and agreed as necessary.
				
				Risk - The following mitigation is in place to ensure force vehicle service schedule points are met:
				1. Cars with **Astra box** can be mileage tracked on new iR3 and called in for service.
				2. **Service stickers** are applied to the cars interior after each service identifying the next mileage point the car is due in – these **MUST** be checked as part of daily vehicle check and adhered to.
				3. Mileage data from **fuel cards** utilised to identify service mileage points. Correct mileage **MUST** be supplied to the cashier for accurate mileage data.
				4. HUF Boxes on old iR3 still reporting will appear on the service alert system on old iR3.
				
				Using the above four data sources, the TU are able to identify the service points for fleet vehicles.
				
				Messages have been published on the force intranet and through management teams instructing personnel to follow the above instructions to enable correct vehicle servicing to take place.

"		Improved Management Decision Making	4.4 Performance Indicators	**Significant Recommendation:** Performance Indicators for the Fleet Management Team should be developed. These should help to assess performance against the Fleet Management Strategy (Rec 4.1). Performance should be reported to the appropriate Force and OPCC forums on a regular basis to provide assurance that the Strategy is being achieved. **Progress Update relates to 4.2 above:** Recommendations 4.2 and 4.4 are directly linked. Delivery of 4.4 is dependent on developments being completed within 4.2 above. Ongoing work by the Head of Vehicle Fleet and the team to deliver improved service scheduling, job card processes and performance reporting via the Tranman system. Civica, the supplier of the Tranman system is working closely with the force to resolve what has turned out to be a more complex challenging programme of improvement. This area of work relies on completion of 4.2 the previous recommendation in relation to the scheduling work. **Target 'Go Live' date October 2022** – Ray Adkins Head of Fleet

				Progress Update – Achievements to date: 1. Move to Tranman Version 9. 2. Plans developed around data capture for KPIs and improved processes. 3. Key data is now accurate within Tranman. 4. Processes are massively improved in the TU to ensure data is kept up to date and accurate. **What is left to complete?** 1. Understand and exploit the capabilities of T9 and determine how to link (if possible to PowerBi). 2. Formally introduce new processes and recording (MS Forms already in design). **Timeline for completion – Dec 2022 / Jan 2023** **Barriers to completion, and how these may be resolved where possible?** 1. Other demands on personnel (e.g. commissioning of vehicles). 2. Unknown IT compatibility (Analytical team are investigating as are Civica – Excel solution is a contingency if automation is not possible). 3. Absence of key personnel (workshop controller). 4. Resignation of administrative support officer.
RECRUITMENT 2019 **SATISFACTORY ASSURANCE** **September 2019**		Improved Management Decision Making	4.3 Reporting of all agreed KPIs	**Significant Recommendation:** The Force should engage with Shared Human Resources Service Centre SHRSC to ensure that all agreed KPIs are reported to the Management Board on a monthly basis. **Historical Progress September 2019 – December 2021:** The challenges around the working environment surrounding the COVID-19 pandemic meant that many of the Human Resources Service Centre HRSC projects were delayed or put on hold in order for the department to concentrate on other priorities related to the impact of COVID-19. The Head of HRSC reported to the Management Board on 26th March 2021 where a business case was proposed for the board to consider in relation to funding some additional work around reporting which the department has been unable to complete over the last 12 months due to the pandemic. A copy of the report has been provided to JARAP previously. The additional funding proposed was not agreed by the board, however, the Head of HR Derbyshire and HR Director for Leicestershire have agreed to meet to discuss the matter further. **Remaining Development Required and Project Milestones:**

				A broad review is underway of HR Service Centre processes at the request of the Management Board. The head of department is looking to bring additional 'Transactional' work into the HRSC over the next 6 months.
				There are still pockets of transactional work which was not initially in scope which now need to transition into the HRSC.
				In addition, the work around reporting is continuing and head of HRSC has been tasked to prioritise reporting over the coming months.
				The head of HRSC has confirmed that the department is continuing to provide recruitment services to both Derbyshire and Leicestershire forces in line with their current recruitment plans.
				<u>Force</u>: The force has requested a position statement in relation to those projects both on hold and progressing. The statement should outline in detail the objectives, anticipated impact and desired outcomes for Leicestershire Police.
				Currently Key Performance Indicators KPI's are reported twice annually via the Derbyshire & Leicestershire Support Services Board (Formerly HRSC Management Board). The recommendation from the audit report was for the HRSC to provide agreed KPI's on a 'regular basis'. The Human Resources Service Centre has been working to find a solution, however efforts have been hampered over the last 2 years by the additional work the team has been required to undertake during the pandemic and Operation Uplift which has been a priority for both forces. The additional work, coupled with losing two key members of the team has resulted in some pieces of work being delayed.
				The Head of the Human Resources Service Centre completely agrees with the audit report recommendation to provide regular KPI data, however the amount of time it currently takes to compile the data would mean a fulltime role is required for this purpose and that does not under current circumstances appear to provide value for money for either organisation.
				The underlying reason for this complexity in extracting data is the way in which the system stores data and the format of the extracted data, as it requires considerable manipulation to reflect the KPI's in the Service Level Agreement SLA. This is compounded by the fact that in some cases extraction of some of the basic data required is not possible.
				The Head of the Human Resources Service Centre is liaising with the system supplier again to press for a resolution which will allow the department to report on the KPI's without having to spend an inordinate amount of time and effort trying to understand the data. Disappointingly, the head of department has not had much success in this regard previously; though efforts to address continue.
				Progress Update - Achievements to date: Please see **Appendix B and Appendix C Recruitment Deck reports for Leicestershire and EMSOU**.

				The embedded reports below are the 2nd iteration in the development of the reports and they have recently been submitted to the Client Liaison for review and feedback in terms of any further requirements. The feedback for the current reports has been positive with some fine-tuning around having more detailed commentary and a breakdown of the number of days a vacancy is at any particular stage. There are challenges in delivering this however, and the team are seeking to provide this function where possible. The ambition of the team is to continually look at improving the value of the reports on an ongoing basis. Indeed, the ultimate aspiration of the team is to create interactive dashboard style of reporting rather than merely a fixed style of reporting. This will expand functionality in allowing both forces to drill down into the data in accordance with their own requirements. The team are also looking to create a 'live feed' between the e-Recruitment system and the dashboard reporting tool. This will mean that the data reporting is more up to date and provide 'real time' accurate reporting. Recruitment Decks are embedded here: 📄 PDF Appendix B Recruitment Deck - EN 📄 PDF Appendix C Recruitment Deck - Le **What is left to complete?** • Both 2nd iteration Recruitment Decks are to be submitted to the Client Liaison in November for sign-off. • Once signed off they will be provided to forces on a quarterly basis. • Ongoing development will be provided where required and feasible. **Milestones - Timeline for completion:** • Requires Client Liaison Sign-off, which could potentially be completed within the next 6-8 weeks – end of November. **Barriers to completion, and how these may be resolved where possible?** No barriers identified at this stage.
VETTING **SATISFACTORY ASSURANCE** **February 2021**		Performance monitoring	4.3 Performance reporting	**Significant Recommendation:** The Force should ensure that performance information is produced for Vetting, with consideration made to enhancing the data that is included within the performance indicators. The vetting performance information that is produced should be presented at the Professional Standards Department (PSD) Senior Management Team (SMT) meetings. Examples of further indicators that will enhance the reporting are: - The number of cases received in the month - The number of cases processed in the month - The % of renewals processed prior to the expiry date - Exception reporting on significant outliers in cycle / touch time

- The proportion of each type of vetting case received within the month
- The turnaround time on vetting appeals that are processed.

Management Response: Currently, MI reporting responsibility sits outside of the Vetting unit and therefore is not within the direct control of the Security Vetting Manager.
1) Outstanding PSD performance reports for March 2020 – January 2021 have been obtained since the draft audit report was received. **COMPLETED -** Outstanding PSD Performance pack was obtained on the 8th February 2021 - Supt Rich Ward

2) In line with the audit recommendations, the reporting categories and KPI's are to be reviewed by the Security Vetting Manager who will act as Subject Matter Expert to the SSD Performance Analyst lead, for the development of a Strategic and Operational Vetting dashboard.
Target Date: May 2022 - Mandy Bogle-Reilly (Security Vetting Manager)

Progress Update - Achievements to date:
New Corevet Version 5 vetting software was successfully on-boarded 05/07/2022.

The vetting team have reviewed the standard Management Information MI reporting capabilities afforded by Corvet before moving into phase two which entails the development of an interface between Corevet, HR Gateway and Establishment records into a new front end Vetting dashboard / Application App.

Progress is currently delayed due to a shortage of analytical resource within the Force PowerBi Analyst Team. The Vetting Unit cannot as yet progress to the final stage of the project to create the Vetting Dashboard/App, therefore at the moment there is no change to the status.

In the interim, the Vetting Manager and a team member are continuing with the creation of a set of in-house Corevet extract reports to support the current manual audit and performance reporting, until such time as SSD analytical resource becomes available.
The position has been escalated to the Analyst Team Manager and the Head of SSD.

The Analyst team manager and Senior Performance Analyst are meeting on Wednesday 12th October to commence scoping of the Power BI development work.
It is understood from early scoping conducted last year, it is likely to be a challenging complicated product with a need to cross-reference data from Derbyshire (recruitment), Leicestershire's HR and establishment systems.

What is left to complete?
- Secure the necessary PowerBi analytical resources to support develoment.
- Scope the system interfaces and the reporting dashboard.

Milestones - Timeline for completion:

				• Yet to be discussed and agreed – meeting due 12th October 2022. • The timeline for completion is entirely dependent upon the availability of resource from the force Power BI team. Timeline for individual workstreams TBC. **Barriers to completion, and how these may be resolved where possible?** • Failure to provide adequate resource from Power BI or specialist support will prevent any progress with development of the dashboard. • Complexities related to system interfaces and the reporting requirements for the dashboard. It is understood that it is unlikely that the system will be able to address the issue around notifying vetting of changes to personal circumstances that would require additional vetting. This may however be possible from the data fields in HR and Corevet; however until the team start the process this remains an unknown. • The size of the performance analyst team and their current commitments, means there are challenges around capacity to provide analytical support and development of the PowerBi App without the removal of support to another area of business elsewhere in force.
WELLBEING **SATISFACTORY ASSURANCE** **February 2021**		Improved understanding and Compliance	4.1 Review of Policies and Procedures	**Housekeeping Recommendation:** The HR procedures which have been identified as out of date through our review; the tracking of previous recommendation; and, the SORB [now the Organisational Risk Board ORB] monitoring activity should be reviewed and updated. The Force should ensure that policies and procedures are reviewed regularly; and, that this is noted in the document control sections even if no updates are made. **Initial Management response:** The recommendation is accepted and the progression of the full range of policies, procedures and guidance is a huge task due to the sheer number of these. They will be moved forwards and the document which confirms what stage they are at will be updated as suggested regularly even if the updates are still being worked on. None of the procedures are out of kilter with current legislative compliance to provide some reassurance. **Target Date: August 2022** / Senior HR Business Partner **Background context 2021:** Due to the number of Policies and Procedures held on directorate/departmental websites as well as the force document library the process of reconciliation of all the Policies and Procedures has over time become overly complex and lengthy. Following support at Executive Group level work is commencing to move Policies and Procedures into one document, containing the Policy with Procedural appendices where necessary. Templates for this new document have now been created and departments have now started amalgamating policy and procedure. This will make the whole process more efficient and effective, whilst also ensuring that there is no confusion amongst personnel as was the case previously with singular policies and procedures. Significant progress has been made in the review and update in relation to overall force policies and procedures in general over the last twelve to eighteen months.

However, the force recognises that there are a number of Human Resources related policies and procedures that have during 2020-21 become overdue.

Progress is actively being tracked through the quarterly Organisational Risk Board ORB meetings where progress is a standing agenda item.

Type	Title of Policy, Procedure, Form	Date of next review	Update	Type
Procedure	HR - Redeployment as a Reasonable Adjustment; Police Staff	Nov, 20	Very Overdue	**Ongoing in terms of consultation and developing the detail. Remains under review – nearing completion.**
Procedure	Sick Pay including Extension Framework; Police Officers	Nov, 20	Very Overdue	**No longer including/excluding Extension Framework. Only have Sick Pay Procedure for Staff and one for Officers. Both published Nov 21.**
Procedure	Sick Pay including Extension Framework; Police Officers	Nov, 20	Very Overdue	**No longer including/excluding Extension Framework. Only have Sick Pay Procedure for Staff and one for Officers. Both published Nov 21.**
Procedure	Honoraria; Police Staff	Sep, 20	Very Overdue	**Ongoing in terms of consultation and developing the detail. Remains under review.**
Procedure	Unsatisfactory Attendance; Police Officers	Sep, 20	Very Overdue	**Published 23/12/21**
Procedure	Unsatisfactory Performance; Police Officers	Sep, 20	Very Overdue	**Published 23/12/21**
Procedure	Work Experience	Dec, 19	Very Overdue	**Published 04/01/22**
Procedure	Ill Health Retirement; Police Staff	Mar, 20	Very Overdue	**Consultation has concluded with UNISON - being submitted for publication shortly w/c 10th October.**
Procedure	Acting Up and Temporary Promotion (Police Staff)	Jun, 20	Very Overdue	**Ongoing. Review of local condition has now been agreed with UNISON therefore draft procedure nearing completion.**

				Policy	Pay, Pensions and Benefits	Jun, 20	Very Overdue	**Published 08/07/21**
				Policy	Performance and Development	Jun, 20	Very Overdue	**Published 08/07/21**
				Policy	Recruitment, Development and Planning	Jun, 20	Very Overdue	**Published 08/07/21**
				Policy	Health and Wellbeing	Jun, 20	Very Overdue	**Published 08/07/21**
				Procedure	Career Break; Police Officers	Jul, 20	Very Overdue	**Published August 2022**
				Policy	Leave	Aug, 20	Very Overdue	**Published 08/07/21**

Progress Update - Achievements to date: Clearly, there is a great deal of development and review work undertaken in relation to the processes and practices related to force policies and procedures. The force recognises that this is a suitable moment to apply some of the design development and improvement work to make the process more efficient and effective in supporting personnel across the force.

All the Policies are now published as shown in the table above. Five Procedures have been successfully reviewed and republished with the four remaining procedures undergoing the consultative review process to ensure that they appropriately support personnel across the force in delivering a high quality of service to the people of Leicester, Leicestershire and Rutland LLR.

The Procedures have taken longer to review as they outline more complex matters concerning the expectations of the force and other stakeholders such as union and staff associations.- **Target Date: December 2022**

"		Monitoring and governance	4.2 Review of Thematic Data and Data Analysis	**Significant Recommendation:** The Force should ensure that data, outlined on each working group's Plan on a Page, is being reviewed regularly and that any data analysis requested is being carried out effectively and shared with all relevant governance bodies.

Significant Recommendation: The Force should ensure that data, outlined on each working group's Plan on a Page, is being reviewed regularly and that any data analysis requested is being carried out effectively and shared with all relevant governance bodies.
Progress Update - Achievements to date: The 5 Wellbeing Boards are developing data analysis against their plans and to also incorporate the benefits assessment of initiatives and working practices alongside a more developed wellbeing assessment of the Force.

There are data packs for the Wellbeing Board for Mental Health and Physical Health Data. These are currently produced by HR until such time as the Power Bi work has moved forwards which is looking to develop the overall workforce strategic wellbeing assessment.

				The wellbeing KPIs were taken to the Chief Officer - Executive Group and it was agreed that further work was required. The force is currently refining the workforce wellbeing enabling strategy and the associated KPIs; when these are agreed by departmental/directorate heads and the chief officer team the KPIs will be part of the Power BI build and GAIN modelling tool. The wellbeing KPIs remain in development but in the meantime, a Wellbeing Data Pack is submitted to the quarterly Wellbeing Leadership Board to provide an overview of all wellbeing activity under the 4 strands of wellbeing and against the national framework. The wellbeing boards continue to provide information and data regarding wellbeing initiatives undertaken. Wellbeing data: Appendix D - Wellbeing Data V2b.p A new Head of Occupational Health and Wellbeing is due to commence in January 2023 at which time strategic responsibility for wellbeing with transfer to this role and the KPIs will be further developed Kat Eaton – HR Operations **Target date: March 2023**
WORKFORCE PLANNING **SATISFACTORY ASSURANCE** **May 2021**		Resource Mapping	4.1 Key roles mapping	**Significant Recommendation:** The Force should complete a mapping exercise and produce a centralised log of all key staff roles across the organisation, including non-leadership roles which are critical or specialised. Alongside this exercise, individuals who are able to assume these positions in a short / medium / long term capacity should be highlighted. **Initial Management response:** Accepted. It is noted the observation is in relation to 'staff roles'. The Force has a relatively flat hierarchy for staff roles typified by significant distance between roles at a senior level. The Force will create a framework for succession planning that will identify the scope of senior and other critical roles. The framework will identify for each role individuals capable to step in on a short term/emergency cover basis, and those who are anticipated to be ready in medium and longer timeframe. This will allow for targeted development and plans to manage where succession gaps are evident – ACO HR Alastair Kelly **Background May 2021 – May 2022:** A Working Group has been established to scope, develop and implement a Succession Planning Framework focused specifically on senior and critical police staff roles within the Force. This stage has been completed and piloted in areas of the business including within Specialist Support Services and the force Change Team. The force certainly recognises the business benefits of the Succession Planning Framework for police staff in that it will:

| | | | | 1. Enable management to identify areas of staffing risk and how the force might best mitigate that risk;
2. Provide a mechanism for line managers to identify which police staff roles within their area of business would be considered as 'key', critical posts;
3. identify possible successors and when these successors might be ready to progress into roles; plus, any development requirements required to achieve this;
4. Where successors are not apparent in the short and/or longer term, it also enables managers to start considering other means of planning e.g. through more proactive recruitment, development of regional networks that might help mitigate any risk through key personnel leaving the organisation;
5. Identify individuals that may be able to develop into a particular role in the short, medium and long term;
6. Identify where other outside resources may be required in the event of unforeseen loss of key personnel if a role cannot reasonably be undertaken by those in the existing staffing model.

A presentation that outlined the initial draft Succession Planning Framework has previously been shared with the JARAP panel.

The framework has been presented to and is supported by the Assistant Chief Officer ACO for Human Resources HR.

The Succession Planning Framework pilot enabled SMTs to identify critical roles and plan to avoid future anticipated staffing gaps. This has also empowered those departments to configure Business Continuity Plans BCP in terms of:

1. Predicting short, medium and longer term abstraction;
2. Building stronger regional networks for mutual aid and support;
3. improving long term planning through a more proactive approach to staff recruitment thereby reducing the gap between staff leaving and a new starter joining.

The force is committed in going forward in introducing the framework across all police staff departments/roles and embed it into an annual programme that considers and reviews key roles in order to identify risk and inform appropriate plans for development, recruitment and business continuity.

Progress Update - Achievements to date: Limited progress since August 2022 due to long term sickness.
D/Supt Matt Ditcher will be seconded to TLA with effect the 10th October to support with the Leadership and Careers workstreams, including Succession Planning. |

<table>
<tr><td></td><td></td><td></td><td></td><td>Succession Planning workbook refined and submitted to ACO Human Resources on the 19th August for sign off, copy agreed and signed off. Copy of Succession Planning Managers Toolkit embedded here:

Appendix E Sucession Planning Workbook.d

This has links to the templates within the workbook.
List of areas undertaken – Change, Estates, Finance and Procurement; Packs created; Managers briefed and undertaken work.

What is left to complete?
• TLA – pack sent, Head of TLA briefed. Due to discuss SMT 14 October, delayed 3 weeks due to changes within SMT – aim to complete by 30th October 2022
• IT – on hold to restructure
• Fleet – on hold until perm Head of Fleet appointed
• Need to review/agree timescales for IT & Fleet and 6 month PDR review process.
Milestones - Timeline for completion:
• Signed off by ACO HR August 2022 **COMPLETED**
• Briefings – 3 areas remaining as detailed
• Ongoing support provided by HR and L&MD
• Templates to be returned to Leadership & Management Development with further review - i.e. Succession plans go to HR and Individuals Development plans go to Team Leicestershire Academy **On target** – still need to Convert existing information from areas into consistent standardised templates – HR due to complete by 30th October 2022
Barriers to completion, and how these may be resolved where possible?
• Line Manager Commitment – No update/progress
• Resistance – recommend mandate Step 2 & 5, each HoD to evidence use at PDR . There are 6 steps within the workbook – Step 2 and Step 5 are the min required for completion and to meet the areas for improvement identified from the audit. Other steps provide useful info about potential and development and will support the creation of a succession plan linked to business priorities . At this stage remaining in the workbook – awaiting feedback from TLA on this.

Also linked in with SSD have developed a policy on Career progress within SSD – to share learning and ideas.</td></tr>
<tr><td>**VICTIMS CODE**

SATISFACTORY ASSURANCE
June 2021</td><td></td><td>Service Delivery</td><td>4.2 Niche Victim Information Pack</td><td>**Significant Recommendation:** The Force should consider how to address the gap in data collection.
This can include the creation of a free text field to say why the victim was not provided with the victim information pack.</td></tr>
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Alternatively, a further question could be included on the Niche form to ask whether the victim has been offered this information.

Initial Management response: The Niche question set is part of the national Niche build and is consistent for all 27 forces which use Niche. The operational and strategic leads are working with Minerva (the police working group for Niche development) to revise the current module, including the specified issue, to reflect the revised Code of Practice.

However, we are informed that this is unlikely to be delivered by Niche within 12 months due to competing priorities.

An interim measure will be to circulate guidance to officers to complete the remarks section to clarify the booklet has been offered.

In addition, automated provision of the link is in progress with some crime type exceptions.

Progress Update - Achievements to date:

Embedded here is the latest report on performance in relation to Investigations for the Criminal Justice CJ and Disclosure Board chaired by Mr Sandall. **Please see Appendix E**

Appendix F CJ Disclosure Highlight F

Appendix G VCOP audit report Quarter 3

What is left to complete? The additional update in terms of outstanding work and timescales:

The Force Audit Manager's deeper dive - **COMPLETED** The caveat is that this is Q3 and Q4 of 2021, therefore the data is quite old and performance has moved on significantly since then.

The other key outstanding work is the automated notification to victims of their Niche occurrence number as soon as a crime is recorded (with exceptions for sensitive investigations such as DA, sexual and child abuse offences). **COMPLETED**

Our working using PowerBI has really paid dividends in driving VCOP compliance and performance and is reflected in the compliance data drawn from Niche.

The other area of development not captured in the audit report [it was addressed in the actions section of the board] is that we are looking to build compliance with the Victim's Code into all of our scrutiny panels: Out of Court Disposals; Rape and Serious Sexual Offences; Domestic Abuse; Child Abuse and Child exploitation, with a standard set of questions to examine the service to victims with regards to needs assessment, timely updates and their involvement and consultation in decision-making for case disposal.

				I wish to stress that there has been a real cultural shift towards the Victims' Code of Practice driven through force performance governance - Detective Superintendent Chris Baker – Crime and Intelligence Directorate CAID **PROPOSED CLOSED**
RECRUITMENT **SATISFACTORY ASSURANCE** September 2021		Performance against Service Level Agreements	4.2 SLA Reporting	**Significant recommendation:** The Force should establish a routine reporting mechanism against recruitment SLAs. **Initial Management Response:** Supported. 1.The SLA should accurately reflect the KPIs that are in fact being monitored to assess performance. 2. Aspirational KPIs that are not currently monitored for whatever reason should either not appear on the SLA, or be clearly marked as such. KPIs are provided to the twice yearly HRSC Board meeting. However, this is recognized as too infrequent to allow early resolution and is not the intention. Monitoring of KPIs to occur at regular client liaison meetings on a monthly basis. It is recognized that some KPIs may be updated more frequently than others. Maz Ahmad, Kat Eaton to effect from **end July 2022** **Progress Update: Please see pages 7 – 9 above as this is a duplicate - Mazars have revisited this recommendation and reiterated the need for regular reporting of KPIs.** **What is left to complete?** • Both 2nd iteration Recruitment Decks are to be submitted to the Client Liaison in November for sign-off. • Once signed off they will be provided to forces on a quarterly basis. • Ongoing development will be provided where required and feasible. **Milestones - Timeline for completion:** • Requires Client Liaison Sign-off, which could potentially be completed within the next 6-8 weeks – end of November. **Barriers to completion, and how these may be resolved where possible?** No barriers identified at this stage.
FLEET MANAGEMENT **SATISFACTORY ASSURANCE** November 2021		Performance against Business Plan	4.1 Performance Information	**Significant recommendation:** Performance Indicators for the Fleet Management department should be developed. These should be used to assess performance against delivery of the Transport Unit Business Plan 2021/2022. Performance should be reported to the appropriate Force and OPCC forums on a regular basis. **Initial Management Response:** The Transport Unit will commit to creating KPI's that are meaningful, provide valuable management information and that can add value. Workshop KPI's are an important part of this. Some of the proposed KPI's will be dependent on a fully working and

effective iR3 system, which has yet to be resolved, along with any process refinements. Any proposed KPI's will be taken through and ratified by TUB (Transport Utilisation Board).

Progress Update: Interim Head of Fleet Chief Inspector Andy Parkes: **Target Date End December 2022**

Achievements to date:
1. Discussions with key personnel around CI opportunities.
2. Input given to key TU staff regards use of Ir3.
3. Creation of TU Teams channel .
4. Improved communications and processes within the TU.
5. Staff performance addressed.
6. Ability now for Tranman to accurately report the current status of all vehicles on the fleet e.g. in commissioning, in the workshop for investigation, awaiting disposal, on order and matched against invoice number etc.
7. Vastly improved processes between the TU and Finance.
8. Vastly improved processes in the TU to ensure parts and equipment are allocated against specific fleet numbers to ensure forward planning and accountability and auditability.

What is left to complete?
1. Continue to develop enhanced processes and where possible automate.
2. Baseline current performance.
3. Set KPIs – now using accurate data to develop KPIs based on the capacity and capability of the workshop.
4. Establish available KPIs.
5. Set KPIs.

Timeline for completion - End December 2022

Barriers to completion, and how these may be resolved where possible?
1. Other demands on key personnel; this should however be addressed by the presence of a police sergeant to assist and support progress.
2. Ability of external suppliers to attend and / or complete work on the system.
3. Training of staff.

| | | Monitoring of Servicing | 4.2 Sample check of service detail | **Significant recommendation:** It should be ensured that:
➢ Where a vehicle has a missing or non-functional black box, this is resolved promptly. |

				➤ A process is put in place to allow for the mileage of covert vehicles to be made available promptly upon request. ➤ A vehicle servicing policy or procedure document should be created, this should include the mileage guidelines for servicing, information around exceptions such as the allowed leeway in mileage, and how covert vehicles are dealt with. **Initial Management Response:** Update Oct 2022 A fully functioning tracking system along with the replication of the vehicle service schedule within iR3 will overcome potential issues with service intervals being missed. Vehicles that do not have tracking systems fitted, covert/surveillance vehicles, have tended to adhere to the appropriate service regime but it is recognised that a clearer defined process for reporting mileage will help avoid missing any service intervals. An appropriate servicing guideline document will be created for submission and ratification by TUB. **Progress Update:** Interim Head of Fleet Chief Inspector Andy Parkes: **Target Date End December 2022** All relevant vehicles now have an Astra box fitted. Data cleansing and new codes in Tranman along with vastly improved processes now allow us to easily identify faulty boxes. Figures obviously vary but we are in single figure failures from a fleet of 550+. **Achievements to date:** 1. There is already a servicing schedule (manufacturers recommended + midway (mileage or age) police safety check in place. 2. All current fleet have Astra boxes fitted. 3. Work has been commissioned with LBA (iR3) to create a regular mileage feed into Tranman – (circa every 15 mins). **What is left to complete?** 1. Check situation with ALL covert vehicles. 2. Confirm policy is recorded. 3. Utilise Tranman for service scheduling (not Ir3). **Timeline for completion - End of December 2022** **Barriers to completion, and how these may be resolved where possible?** 1. Absence of workshop controller and more recently office manager – now returned (Oct 11th). 2. Other daily demands; this should however be addressed by the presence of a police sergeant to assist and support progress.

				3. Additional costs – (already agreed by CFO). 4. Additional work by external suppliers. 5. Any training required.
"		Planning, Strategy and reporting eco-efficiency	4.4 Alignment of Strategies and Delivery Plans	**Significant recommendation:** The Force should ensure annual business plans are aligned to the overall Transport Strategy. The Force should review how it will report on delivery of the 'eco-efficient transport solutions'. **Initial Management Response:** The annual Transport Unit business plan is largely aligned to the Transport Strategy. The strategy of an Eco-efficient transport strategy has to be balanced against the needs of the police force and its operational requirements, appropriate vehicles in the marketplace, infrastructure and budget considerations. As part of the vehicle procurement strategy adopted thorough discussions with force fleet leads and Transport User Board, the decision was made to move away from diesel vehicles for general response vehicles. The need for inclusion of this target in the Transport Unit business plan is noted and will form part of future plans. Reporting around the environmental impact of the fleet was withdrawn as accurate data on vehicle use was not available. This will be reinstated when the tracking system roll out has been completed and accurate data can be referenced. Reducing the carbon emissions associated with the force's fleet is included within the draft environment and sustainability enabling strategy. **Progress Update:** Interim Head of Fleet Chief Inspector Andy Parkes: **Target Date End of financial year 2022-23** **Achievements to date:** 1. All new General Response Vehicles GRVs and high performance vehicles are petrol or MHT. 2. New interim Head of Fleet appointed who has attended national meetings and conferences relating to the move to EV. 3. CC's new car is petrol-electric hybrid and a charging point has been installed at FHQ 4. Demos and tests are being arranged for EV / PHEV etc 5. Head of TU and estates have had several discussions around future infrastructure requirement, Keyham Lane car park is future-ready for EV charging points. **What is left to complete?** 1. Refresh of the Fleet Strategy – **DRAFT COMPLETED – yet to be signed off by COT** 2. Create a Business Plan for the move towards fleet electrification – WIP. **Timeline for completion – End of financial year 2022-23**

				Barriers to completion, and how these may be resolved where possible? 1.Lack of available data – Ir3 and Tranman should supply the necessary data required. 2.Complexity of the issue and maturity of understanding nationwide. 3.Lack of EVs on national framework.
"		Tranman Standardised Roles	4.5 Tranman User Access	**Housekeeping recommendation:** A review of user roles within Tranman should take place, and a new standardised set of user roles should be implemented. **Initial Management Response:** As part of the new TU Transport office managers role, reviewing systems and processes has been assigned as an objective. A review of Tranman was already underway at the time of the audit. This should be implemented within the next few months when Civica, the supplier, can accommodate the change request. **Progress Update:** Interim Head of Fleet Chief Inspector Andy Parkes: **Target Date End December 2022** **Achievements to date:** 1.Move to Tranman Version 9 **What is left to complete?** 1.Understand and exploit the capabilities of Tranman to maximise efficiency and effectiveness **Timeline for completion - End of December 2022** **Barriers to completion, and how these may be resolved where possible?** 1.As previously outlined above - workload and staffing.
SEIZED PROPERTY **SATISFACTORY ASSURANCE** **January 2022**		Oversight and Governance	Audit Regime – Main Store	**Significant recommendation:** Leicestershire should develop a formal audit plan in order to ensure that all main store items are audited in line with the Property Management Policy Leicestershire should also review the current approach to property audits at the EPAC, to ensure policy can be adhered to. **Initial Management Response:** The force recognises that it is some time since the new force EPAC facility was completed and that policies and working practices are due for review and refresh where necessary. This will ensure the safe keeping, and accountability of property stored; whilst minimising risk for the force. The Force is actively pursuing the following actions in relation to audits generally within the force and particularly within the Force Evidential Property Archive Centre:

				1. <u>Review the Force Audit requirement and Strategy</u> as a whole force function. A draft proposed corporate audit schedule has recently been presented to ACC Smith for consideration prior to submission to the chief officer Exec Group.
				
				The following further work has been requested:
				➢ Further consultation across the areas of the business before finalisation of the proposal
				➢ Completion of the revised policies and procedures for the EPAC
				➢ Consult and outline the internal compliance regime that will operate within EPAC prior to endorsement of any Corporate Audit EPAC Audits. The internal compliance regime is to be the first line of defence; with this being fed into the Corporate Audit regime as this will enable the force as a whole to prioritise areas for audit.
				
				2. <u>Review the Property Policy and Procedure</u> – considered outdated and now due for review and refresh, based on the aforementioned points - Target Date for completion **30th November 2022**
				
				3. <u>Review and report with recommendations to the Executive Group</u>: **COMPLETED**
				    ➢ <u>Demand</u> for auditing within the EPAC.
				    ➢ <u>Capacity and Capability</u> for the Force Corporate / EPAC auditing functions.
				
				4. <u>Measures taken to address the backlog of accumulated property</u> within the EPAC due to the COVID-19 pandemic – Force Executive have approved a small team of 6 who will be responsible for the disposal of all evidence that is in append-disposal state. Once that is complete they will move on to a full physical audit of the EPAC, including an audit of the property management system. Estimated time or target date for completion - **31st December 2023 - IN PROGRESS**
				
				5. <u>Development of an EPAC 'Formal Audit Plan'</u> The plan is currently being formed in conjunction with the 'Force Corporate Audit Team'. **COMPLETED**
				
				6. The Evidential Property Review recommended that a backlog team be secured to clear the pend-disposals and then complete a full audit of the main store. Recruitment of 3 FTC Property Staff is in progress. Once these staff are trained it will allow for the weekly audit to be included within the staff rota - Amie Peplow EPAT Manager.
				Target date – 31ˢᵗ December 2023 EPAT Manager and the SSD SLT
				
				Update October 2022
				Backlog Team – Op Halo The agency have now identified four suitable candidates for the OP Halo 3 temporary backlog team.
				1.5 FTE are already in post and have commenced work on tackling the disposal backlog, and are also auditing at the same time.
				The remaining 1.5 FTE are going through the vetting process with a confirmed start date awaited.
				
				We have had 1 FTE resign since the last update. Interviews are taking place this week to fill 1.41 permanent vacancies.

Audit standardisation - It has been recognised that Evidential Property Officers are carrying out audits in different ways. Therefore, training will be rolled out to the team, with the expectation that audits will be carried out in a standardised way.

Audit Programme - A meeting was held with the Force Audit Inspection Manager in September. Unfortunately, they have not been able to secure the uplift in staff that they had hoped for, and therefore haven't been able to offer any auditing support and implement the audit plan which had previously been agreed at the Exec Group.
However, the EPAC management team have received some guidance around what an internal compliance regime should look like for EPAC. As a result of this, the following Formal Audit Plan has been developed for implementation.

The EPAC Policy / Procedure document is now currently under review and it is anticipated that the review will be completed by the 30th November 2022.

	Audit Title	Frequency per annum	Auditor quantity
EPAC Audits	Drying Room	3	2
	Drugs Store	3	2
	Cannabis Plant Store	3	2
	Strong Room	3	2
	Firearms Store	3	2
	Temp Stores (x 15)	12	1 (with staff rotation)
	Ammunition Store	3	1 (with staff rotation)
	Freezer	2	1 (with staff rotation)
	Main Store	2	1 (with staff rotation)

		High Priority
		Medium Priority
		Low Priority

"		Process Efficiency	4.3 Officer Training	**Significant recommendation:** EPAT should communicate with The Academy to develop an appropriate and proportionate approach to training for all Officers. This could include but not be limited to: • A set period for refresher training. **Initial Management Response:** 1. EPAT has communicated with the Academy. A review of the course content for the new recruits and operational staff has commenced and it will be upgraded to include a specific scene management section and training around RRD of evidence. The system management and accuracy of this will also be taught at the stage by the IT Trainers. Short videos will be made to bridge the gaps in the skills training for the serving officer's and operational staff. Evidence Management is not mandatory training governed by the College of Policing or linked to an accreditation. Skills training is managed by the LPD and CAID directorates. Any changes in legislation or guidance will be included in the directorates skills training sessions. This will be open-ended and orchestrated by the EPAT Manager. Mandated NCALT type training will be designed and developed to ensure that the recent changes in packaging and retention will be covered. A record of who has completed this training will be held. EPAT Manager Amie Peplow - assisted by the Force Academy - Collette Porter **Update - Achievements to date:** The EPAT supervisors give a 2 hour input to the new COHORTs. The Academy has vastly improved the training that is provided to the new recruits, involving scene management scenario days, which cover seizure, packaging, temporary store management and RRD. NPO Training days now include an EPAT section where the most common errors are covered. The Evidential Property Officers have received an input around evidence packaging. This has upskilled and empowered the EPAT staff to feel confident in tackling poor packing and offer good quality advice to the seizing officers. **The Evidential property Review** - recommended that a Sergeant leads a six-month operation to include: • A full analysis of current training and knowledge gaps in processes and procedures, including • To work with the Academy and regional CSI trainer in shaping the future training offer to new recruits based around a cycle of continuous improvement and lessons learned.

- To build and deliver a training package that upskills officers in areas identified through analysis.
- To build a process through knowledge checks that ensures we can maintain a level of confidence in our knowledge and practices moving forward.
- Directly tackle bad habits and provide feedback where required.
- An aim to change the culture of property by ensuring officers and supervisors see it as a priority and therefore dedicate the appropriate time and resources.
- A conscious avoidance of latest news articles and posters / literature.

A Sergeant has now been allocated on attachment to the EPAC. He will be leading a six-month operation to tackle non-compliance and the training development outlined above.

Training for student officers - has really progressed with the Academy developing their course content to include scene scenario days. Training for operational staff and officers is still in the strategy stage and is being led by the Academy.
EPAT Supervisors are still providing an input and tour of the EPAC to new recruits, and we are still working closely with the Academy, to ensure the training offered to student officers remains fresh and relevant.

Communications and Engagement - The force has launched a series of videos, which can be accessed day or night, to give officers all the information they need to ensure our investigative standards remain high, this includes important aspects related to property.
The online tutorials are designed as 'how to' guides but will help all officers keep up to date with the latest investigative developments.
(evidence provided at last JARAP – Intranet publication - short videos improving Investigation - including property)

Oversight and Governance - We are looking to get a place on the STEPS meeting chaired by C/Supt Starbuck, where we will present data from Power-Bi and evidence through our own findings, in order to address areas of concern.

Evidence Champions - Consideration is being given to having 'Evidence Champions' out on area. It is hoped that these officers would attend a bespoke training day, and then become a SPOC for their shift/team, for example by disseminating any changes in Evidential Property procedures to their colleagues, and ensuring local packaging stocks are maintained.

IT to support officers - Work is on-going to create QR codes, which will direct officers to relevant training videos/specific parts of the procedure document. We are also looking at if a property element could be added to the 'At The Scene' App. This would allow officers to access the right information, at the right time.

Target date – 31ˢᵗ November 2022 Sophie Law EPAT Temporary Evidential Property & Archives Manager

GOVERNANCE **SATISFACTORY ASSURANCE** **May 2022**		Documentation compliance	4.1 Review of Corporate Governance Framework	**Significant Recommendation:** Leicestershire should ensure that the Corporate Governance Framework is reviewed and updated in a timely manner. **Initial Management Response:** Agreed Timescale and Responsibility: Immediately – Paul Dawkins Assistant Chief Officer ACO (Finance & Resources) Kira Hughes Interim Chief Finance Officer CFO (OPCC) **Progress Update:** The review of the Corporate Governance Framework has commenced – **Target date for completion is the 30th of November 2022** – Kira Hughes Interim Chief finance Officer OPCC.
"		"	4.2 Policies and procedures	**Significant Recommendation:** The policies and procedures identified should be reviewed and updated in line with agreed review dates. **Initial Management Response:** Agreed Timescale and Responsibility: Immediately – Paul Dawkins Assistant Chief Officer ACO (Finance & Resources) Kira Hughes Interim Chief Finance Officer CFO (OPCC)

TITLE	Review Date at Audit	Current Status
PCC Document - Independent Custody Volunteer Policy	May 2020	**UPDATE COMPLETED** Next review date on OPCC website **010824**
PCC Document - Risk Management Policy	September 2021	**UPDATE COMPLETED** Next review date on OPCC website **010524**
Leicestershire Police Force Management Statement	Requires formal review date	**Inappropriate placement Removed** The Annual Force Management Statement FMS is neither a policy nor a Procedure it is a strategic document which is an annual business assessment published annually.

Police Staff Standards of Professional Behaviour	Still in draft	**Inappropriate placement Removed.** Force has moved to the Police Officer and Police Staff - 10 Standards of Professional Behaviour. Campaign currently running on Force Intranet.
Diversity Inclusion and Fairness Strategy 2021-25	Still in draft	**Strategy - Inappropriate placement Removed**
Making and publication of decisions of significant public interest protocol and procedures	March 2021	**OPCC Removed** – pending review and re-publication in 1-2 months
Additional documents on OPCC website checked by Force		
Leicestershire Police Document - Health and Safety Policy	Date of next review May 2024	**New CHECKED**
PCC Document - Privacy Policy [Notice]	**Last Reviewed/Date on document is September 2020** *"Changes to this notice We keep this privacy notice under regular review and we will place any updates on the website"*	**Checked with OPCC** – Currently under review in conjunction with Information Management – target date for publication end of October 2022
PCC Document – Risk Management Policy and Framework 2021-23	Date of next review 1st May 2024	**New CHECKED**

Risk: Policies published by the OPCC are no longer in line with practice undertaken.

Progress Update: The majority of both OPCC and Force documents published on the OPCC website have been reviewed and updated accordingly where necessary. Only two documents are awaiting review and republication; these have been entered into a bring forward item to check by the Force Inspection/Audit function.

				PROPOSED CLOSED
"		Recording of Decisions	4.3 Recorded signatories to decisions	**Housekeeping recommendation:** Decision Records should not redact the names of decision maker. **Initial Management Response:** Agreed Timescale and Responsibility: Immediately – Paul Dawkins Assistant Chief Officer ACO (Finance & Resources) Kira Hughes Interim Chief Finance Officer CFO (OPCC) **Progress Update:** Recommendation implemented and the names of signatories are no longer redacted on decision records. **Propose completed and closed -** Kira Hughes Interim Chief finance Officer OPCC. **PROPOSED CLOSED**
IT RISK MANAGEMENT **SIGNIFICANT ASSURANCE** August 2022		Risk Management Process Review	4.1 Ongoing Risk Management review	**Significant Recommendation:** We support the ongoing work to review the risk management process, which should ensure greater consistency in completion of risk assessments and we recommend that a timetable for completion is established. **Initial Management Response:** Since publication of this draft audit report, the Information Management team have met with Health and Safety and developed the review of Information Security risks. These are being graded and will be delivered at the next ORB. A regular meeting will also be set up to ensure that IM risks are reviewed and identified regularly with appropriate management plans in place. **Target Date: December 2022** – all risks will not only be graded but improved management of these risks at a local departmental level will have been embedded also. **Progress Update - Achievements to date:** The Organisational Risk Board agenda has been reviewed and risks are being broken down to align with the Force enabling strategies. Information security risks fall under our force digital and data workstream and are reviewed and reported quarterly at this board. We are currently on track to achieve compliance by December 2022 – Steve Morris Information Management

| HEALTH AND SAFETY

SATISFACTORY ASSURANCE
September 2022 | | Process improvement | 4.1 Completion of manager violent incident follow up | **Significant Recommendation:** The responsibilities of managers should be updated to reflect the new form and a process implemented to chase missing forms. The Force should ensure that Managers complete follow up forms.

Initial Management Response: This will be written into the revised health and safety procedure when reviewed.
Target Date: February 2023. Health and Safety Unit.

Recently finalised report, therefore update to be provided for the next JARAP panel meeting |
|---|---|---|---|---|
| " | | Recording of legislative compliance | 4.2 Display Screen Equipment (DSE) assessments | **Significant Recommendation:** The Force should investigate why the DSE platform is not working and ensure that DSE assessments and training are be provided to all staff members and officers who require it in line with legislation. A record of completed DSE assessments should be maintained to evidence compliance.

Initial Management Response: The new system is being developed internally and shouldn't have the issues that have affected externally procured systems. The new system will also be easier to use than the contingency system that has had to be used.
Target Date: March 2023. Principal Health and Safety Advisor.

Recently finalised report, therefore update to be provided for the next JARAP panel meeting |
| " | | Process improvement | 4.3 RIDDOR reviews | **Significant Recommendation:** The Force should ensure that both trackers are appropriately reviewed in a timely manner.

Initial Management Response: Accepted. Assistant Health and Safety Advisors will ensure that this is completed.
Target Date: Health and safety unit. December 2022.

Recently finalised report, therefore update to be provided for the next JARAP panel meeting |
| " | | Process improvement and quality control | 4.4 H&S risk assessments | **Housekeeping recommendation:** Managers should ensure that risk assessments are resubmitted and amendments made in a timely manner to ensure they pass quality control. |

				Initial Management Response: The unit will be designing a new risk assessment form which will allow more of the risk assessment to be undertaken by individuals who aren't trained risk assessors. The support provided by the unit through bow tie meetings which will be expanded to include h&s risk assessment to further facilitate progress.
				The unit does not ratify risk assessments as identified in the report, they have a quality assurance role. The unit will supply specific updates to the committees based on the progress of the bow tie exercises. They will also provide feedback from risk communication and accident/near miss investigation regarding where risk assessments need to be created, reviewed or ratified. This will allow directorate/departmental heads to take appropriate action where gaps have been identified.
				Target Date: H&S Unit/Change Team March 2023 Directorate and departmental Heads March 2023.
				Recently finalised report, therefore update to be provided for the next JARAP panel meeting
COMPLAINTS MANAGEMENT **SATISFACTORY ASSURANCE** **September 2022**		Process improvement	4.1 Timely Updates of Progress to Complainants.	**Significant Recommendation:** PSD should introduce a clear escalation process for getting updates from Officers, including escalation to Senior Officers, to ensure compliance with the 28-day requirements. The Force may consider including monitoring of complaints where investigators are struggling to obtain information from officers to the statistics discussed at weekly PSD meetings. Moreover, this data could be used for focused training or to improve the culture in the Force where needed.
				Initial Management Response: We have a process in place for the allocation, monitoring and closure of public complaints that are sent out of PSD for managers across the force to deal with. This is overseen by a dedicated Police Sergeant within PSD. When the complaint is allocated, the manager is provided with clear direction on how the complaint should be handled including the need for the complaint to be resolved within 28 days and if not the requirement for the complainant to be updated. On this occasion despite repeated requests the manager did not respond and failed to meet the 28-day requirement. We consider this to be very much the exception and are confident that our current process overseen by a Police Sergeant is robust and effective. In addition, the PSD Police Sergeant will attend the LPD performance meeting where he specifically addresses and escalates outstanding public complaints. Our review is that the identification of this one complaint does not constitute a significant risk and we have processes in place to effectively manage 28-day updates. It is also of note that there are currently only 14 public complaints being dealt with outside PSD, which again significantly reduces the risk of 28- day updates being missed. Any outstanding 28-day updates will be monitored on a weekly basis by the Complaints manager and his team, and the necessary action taken where appropriate to escalate matters.
				Target Date: Target date and responsible person not stated in report.
				Recently finalised report, therefore update to be provided for the next JARAP panel meeting

"		Reporting to the OPCC	4.2 Summary Reports for the OPCC	**Significant Recommendation:** PSD should produce an annual summary report, including but not limited to: • Total complaints finalised • Complaint finalisation outcomes • Timeliness of finalised complaints • Complaint categories and themes The report should be presented to and scrutinised by the OPCC at a suitable forum. **Initial Management Response:** The IOPC produce comprehensive performance data for Leicestershire Police each quarter for the reporting period (1 Apr – 31 Mar each year). This includes a final report at the end of the fourth quarter which shows in detail the force performance for public complaints in relation to both MSF and national benchmarks. This information is of course available to the OPCC and the general public and includes all of the data referred to in the recommendation. As a department we continually review this data and use it proactively to inform several strands of preventative and educational work including GIRFT (Getting it Right First Time), L & D collaboration, direct inputs to student officers, custody officers and newly promoted sergeants, PSD Lessons Learnt, adverse incidents and the effective use of RPRP. The OPCC can request additional reports if they deem necessary, as they can determine when and how this report is produced. **Target Date:** Target date and responsible person not stated in report. **Recently finalised report, therefore update to be provided for the next JARAP panel meeting**
				END